

'POSHAN MAAH CELEBRATION'

Over the years, India has shown exemplary performance in terms of economic growth, there has been a significant increase in GDP, we are making our way to the moon, but we are still a country where 194.4 million people are undernourished. This is 14.5 per cent of the total population, states the Food and Agriculture Organization's (FAO) 'The State of Food Security and Nutrition in the World, 2019' report. The Global Hunger Index 2018 ranks India at 103 out of 119 countries.

According to the 2017 Global Burden of Disease Study by the University of Washington also, Malnutrition was the top cause of death and disability in India in 2017, followed by dietary risks including poor diet choices.

Prime Minister Narendra Modi has pledged to make India malnutrition-free by 2022 and in a bid to do so September is being observed as Rashtriya Poshan Maah – National Nutrition Month – to raise awareness about nutrition. The objective is to reduce the number of instances of newborn babies with low birth weight, children with stunted growth, under-nutrition and the prevalence of anemia over the next three years. Health Issues India evaluates the state of nutrition in the country and the solutions in sight.

As part of the ongoing National Nutrition Month that began September 1, MMIT & BM (Hotel Management) organized a special health and nutrition class, which tried to educate the children of Government High School, Mullana on the benefits of cleanliness and proper nutrition.

The class was organized by the faculty of Nutrition and Dietetics Department and involved the students of Master of Science in Nutrition and Dietetics along with Bachelor of Science in Nutrition and Dietetics. The lectures were supervised by Mrs. Suman Rajput (Associate Professor, MMDU, Mullana) and Dr. Reenu Rana (Assistant Professor, MMDU, Mullana).

The children in the school were introduced with the basic concepts of Balanced Diet, Fortification of Food Products, Personal Hygiene and Sanitation, Anemia, Different food groups and common food deficiencies & their prevention. The lecture was facilitated with the help of self-explanatory Charts and Posters which were displayed during that course of time. Slogans related to 'Nutrition and Hygiene' were told in both Hindi and English language, so as to make the learning easier and more interesting.

The event was arranged with the coordination of Mr. Gulab Singh (Headmaster, Govt. High School, Mullana). All the participating students got motivated to work for the national issue further in everyday life. The interest in the children of the school was elevated after understanding the prodigious importance of the issues taught. The strategy aims to launch the National Nutrition Mission to enable the integration of nutrition-related interventions. This decentralized approach will be promoted with greater flexibility by the institute in future too.


Principal
MMICT & BM (Hotel Management)
Maharishi Markandeshwar
(Deemed to be University)
Mullana, Ambala-133207

Department of Law
Maharishi Markandeshwar
(Deemed to be University)

Mullana- Ambala, Haryana (India)
(Deemed University established under Section 3 of the UGC Act., 1956)
(NAAC Accredited Grade 'A' University)

MM (DU)/LAW/18/ 207-1

Dated: 11.09.18


Legal Awareness Programme

Department of Law, Maharishi Markandeshwar (Deemed University), Mullana organized a Legal Awareness Programme in *MM College of Dental Science & Research, MMDU Mullana* on 11th September'2018 in which the faculty members, Intern students BDS, Student Volunteers of Legal Aid Committee of Department of Law participated in good number.

The programme was started with introduction by Dr. Reetika Bansal, Convener, Legal Aid Clinic, about the Legal Aid. She introduced the purpose of establishing such clinics in Universities. After that Student Volunteers of Legal Aid Committee namely, Vinay, Samidhi, Yashika, Surbhi, Raghav and Vasu Ranjandelivered very knowledgeable lecture on various topics which includes Medical Negligence, Cyber Crimes, Defences available to doctors under IPC, PCPNDT Act and the Challenges faced by the Doctors during practice etc.

Dr.G.M. Sogi, Professor and HOD, department of Public health Dentistry, *MM College of Dental Science & Research*, extended Vote of Thanks to the Principal, Convener and Students Volunteers of Legal Aid Committee, Department of Law. He also recognized the efforts of Principal, Convener and Students Volunteers for organizing this programme on very short notice.

About 30 Interns of BDS and 10 faculty members attended the programme. All of them took keen interest in the internship session. The programme was very successful.


Convener 11/9/18


Head of Department

Head
Department of Law
Maharishi Markandeshwar
(Deemed to be University)
Mullana (Ambala)-133207

From:

Head of Department,
Department of Public Health Dentistry,
M.M College of Dental Sciences & Research,
Mullana, Ambala

To

The Principal,
Department of Law
M.M (Deemed to be University)
Mullana, Ambala

Subject: Founder's Day Celebration, Regarding.

Ref. no; MM(DU)/F.66/18/1295 Dated 10/09/2018.

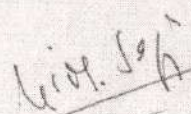
With immense joy and pleasure, I would like to apprise you that Department of Public Health Dentistry is celebrating Founder's Day to honor our Hon'ble Chancellor Shri Tarsem Kumar Garg. On this occasion we would like to organize a talk exploring the area of 'Medical Negligence'. The patient-doctor relationship has evolved over the years, health professionals are increasingly viewed as providers of service so it is important for them to be aware of scope of coverage of the medical profession under law. The target audiences of this event would be interns who are about to start their professional journey.

I, on behalf of department would like to extend an invite to deliver a talk on above mentioned subject. Your expertise and cooperation in this direction will be enlightening to the participants. Kindly communicate your response as soon as possible.

Details of the Event.	
Topic - Medical Negligence.	Date: 11/09/2018 Time: 2:20 pm to 3:20 pm Venue: Seminar Hall Department of Public Health Dentistry. (Room No. 9 First Floor) MMCDS&R.

Date: 11/09/2018

Place: Mullana


Dr. G.M. Sogi

H.O.D.
Dept. of Public Health Dentistry
M.M. College of Dental Science
& Research
Mullana (Ambala)-133007

Department of Law
Maharishi Markandeshwar
(Deemed to be University)

Mullana- Ambala, Haryana (India)

(Deemed University established under Section 3 of the UGC Act., 1956)

(NAAC Accredited Grade 'A' University)

MM (DU)/LAW/18/210-1

Dated: 25.09.18

Legal Literacy Camp

Department of Law, Maharishi Markandeshwar (Deemed to be University), Mullana organized a Legal Literacy Camp on the occasion of "Girl Child Day-2018" on 24th September'2018 in which the faculty members and students of Department of Law participated in good number.

The programme was started with introduction by Dr. Reetika Bansal, Convener, Legal Aid Clinic, about the Legal Aid. She introduced the purpose of establishing such clinics in Universities. After that she welcomed Sh. Amandeep Singh Chahal, Panel Advocate & Sh. Vijay Pal Singh, Para Legal Volunteer. They delivered very knowledgeable lecture on various topics which mainly includes Rights of Girl Child, Right to Education of children under 14 years of age etc.

Dr. Bindu Jindal, Professor and HOD, appreciated the noble effort of District Legal Services Authority, Ambala for organizing such camps in various schools and colleges.

In last, Dr. Reetika Bansal, Convener, Legal Aid Clinic extended Vote of Thanks to the worthy guests of the day and the Participants of Department of Law.

About 30 students, 5 faculty members attended the programme. The programme was very successful.

Bansal
Convener 25/9/18

Bindu 25/9/18
Head of Department

Head
Department of Law
Maharishi Markandeshwar
(Deemed to be University)
Mullana (Ambala)-133207

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MM (DU)/LAW/19/61-1

Dated: 11.03.2019

Legal Aid Camp

Department of Law, Maharishi Markandeshwar (Deemed University), Mullana organized a Legal Aid Camp in collaboration with District Legal Services Authority Ambala in different villages i.e. Malki, Bikampur, Milkdhankota of Distt. Ambala on 11th March 2019. In which the faculty members, students and villagers participated in good number. This camp included the door to door survey and to enquire about the Legal problems and other Social issues in these villages.

The programme was started by dividing the students into three groups. Each group was consisted of 10 students. One faculty member accompanied each group. They assembled in the 'Anganwadi Kendra' of these villages where some of the villagers were present. Then the campaign started. It was a door-to-door campaign. A questionnaire prepared by the department was distributed among the villagers and the students of Legal Aid Camp helped some of the illiterate villagers and helped them to fill that Performa. The following questions were asked in the Questionnaire given in the Legal Aid Camp-

The analyses of the questioner of all the three villages i.e. Milkdhankotan, Manki, Bikampur as follows:-

प्रश्न न.	प्रश्न	हाँ %	नहीं %
	<u>Sanitation and Environmental Issues</u>		
प्रश्न 1	क्या आपके गली मुहल्ले के लिए सफाई कर्मचारी उपलब्ध हैं ?	91.96	8.04
प्रश्न 2	क्या आपके गांव में स्वच्छता के लिए मच्छरों की रोकथाम के लिए दवाई छिड़काव, गंदे पानी के लिए उचित जल निकासी का प्रबंध है ?	61.61	38.39
प्रश्न 3	क्या आपके जानते हैं कि पराली जलाना एक कानूनी अपराध है और यह वातावरण को दूषित करता है ?	91.52	8.48

प्रश्न 15	क्या आप जानते हैं कि सरकार द्वारा बेरोजगारी भत्ता मासिक उपलब्ध होता है ।	70.54	29.46
	Unorganised Labour		
प्रश्न 16	क्या आप जानते हैं कि यदि खेतीबाड़ी करते हुए किसी मजदूर की मृत्यु हो जाती है तो उसके परिवार वाले मुआवजा लेने के हकदार है	79.02	20.98
प्रश्न 17	क्या स्त्री-पुरुष के साथ कोई श्रम (मजदूरी) वेतन के आधार पर भेदभाव तो नहीं होता है?	45.98	54.02
प्रश्न 18	क्या आपको अपनी मजदूरी के अधिक समय के पैसे मिलते हैं ?	76.79	23.21
	Health and Hygeine		
प्रश्न 19	क्या आपके गांव में बच्चों की आंगनबाड़ी और प्राथमिक स्कूल में साफ सुथरा भोजन प्राप्त होता है । यह सरकार द्वारा उपलब्ध कराया जाता है।	91.07	8.93
प्रश्न 20	क्या आपके गांव में नियमित रूप से मैडिकल कैम्प लगाए जाते हैं ?	75.00	25.00
प्रश्न 21	क्या आप जानते हैं सरकार द्वारा औरतो और बच्चों के लिए आंगनबाड़ी और प्राथमिक स्वास्थ्य केंद्र से स्वास्थ्य सम्बन्धी सेवाएं प्रदान की जाती है क्या आपके गांव में यह उपलब्ध है ।	91.96	8.04
	Gender Equality		
प्रश्न 22	क्या आप के गांव में लड़कियों को लड़कों की तरह ही पौष्टिक आहार उपलब्ध होता है। ऐसा न करना एक कानूनी जुर्म है ।	88.39	11.61
प्रश्न 23	क्या आप के गांव में औरतो को नौकरी / काम करने की इजाजत है ।	91.52	8.48
प्रश्न 24	क्या आप के घरों में औरतो को पुरुषों के साथ विचार विमर्श में पूर्ण भागीदारी की स्वतंत्रता है?	91.96	8.04
प्रश्न 25	क्या आप जानते हैं जाति, लिंग, रंग, धर्म के आधार पर भेदभाव एक कानूनी जुर्म है ।	87.95	12.05
	Drug abuse and Related issues		
प्रश्न 26	क्या आपके परिवार को नशीले पदार्थों के सेवन सम्बंधित समस्याओं का सामना करना पड़ रहा है ?	31.70	68.30

प्रश्न 39	क्या आप जानते हैं कि इंसानों की खरीद फरोक़ख़्त क़ानूनी जुर्म है ? और इसकी 7 साल की सज़ा है।	88.39	11.61
प्रश्न 40	क्या आप जानते हैं कि मानव तस्करी, भीख मंगवाने के लिए, वेश्यावृत्ति और अंगों की तस्करी का व्यापार करता पाया जाता है तो उसे 7 साल तथा आजीवन कारावास हो सकता है ?	92.41	7.59

The following additional issues were raised by the respective villages during the survey.

1. Milk Dhankotan

- a) Easy availability of Free Legal Aid
- b) Supply of sufficient and clean water
- c) Constructions of Roads
- d) Loan for construction of houses
- e) Lack of employment
- f) Basic Amenities like Post Office, Bank, Market
- g) Proper exit of water during rains
- h) Employment for women
- i) Drug de-addiction Camps/Center

2. Manki-

- a) Equal opportunity to work for women
- b) Loan for construction of houses
- c) Veterinary Doctor
- d) Sewerage system
- e) Dispensary

3. Bikmpur

- a) Primary Health Center
- b) Drugs De-addition Center
- c) Library
- d) Up-gradation of Primary School upto Higher Secondary
- e) Panchayati Dharmshala
- f) Loan for construction of houses
- g) Play ground for children

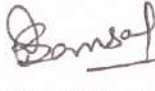
It was analyzed from the answer given that the most of villagers are aware of the rights. The problem analyzed from this visit is that all the three villages are facing the menace relating to drug abuse. Youth of these villages were indulging in drug abuse. The cause for this menace is unemployment. Even some of the basic facilities were missing from the village Milk Dhankotan like Post Office, Bank, Market etc. The women of these villages are willing to work for gain in a dignified manner. So they are asking for "Silai Kendra" etc. for their livelihood. It was a wonderful experience to interact with the villagers and understand their problems at grass root level.

प्रश्न 27	क्या आपके गांव में मुखिया द्वारा नशीले पदार्थों के सेवन की रोकथाम के लिए कदम उठाये गए हैं।	56.70	43.30
प्रश्न 28	क्या आपके गांव के पास के आस पास नशा मुक्ति केंद्र उपलब्ध है ?	20.98	79.02
प्रश्न 29	क्या आपके गांव में नौजवान पीढ़ी में नशीले पदार्थों का सेवन अधिक है।	35.27	64.73
	<u>Child Abuse</u>		
प्रश्न 30	क्या आप जानते हैं कि 14 साल से कम उम्र के बच्चों से काम करवाना एक कानूनी जुर्म है और इसकी सजा 6 महीने है।	87.50	12.50
प्रश्न 31	आपके परिवार में कोई ऐसे बच्चे हैं जो कि पढ़ाई नहीं कर पाए और रोजगार में लगे हुए हैं ?	32.59	67.41
प्रश्न 32	क्या आप जानते हैं कि लड़के कि शादी कि उम्र 21 साल और लड़की कि उम्र 18 वर्ष है। यदि निर्धारित उम्र से कम ऐसी गतिविधि करता हुए कोई पाया जाता है तो उसे 2 साल कि सजा और 1 लाख जुर्माना या दोनों भी हो सकते हैं।	94.64	5.36
प्रश्न 33	आपके घर में कोई बच्चा जो 14 साल से कम उम्र का हो किसी फैक्ट्री या कोई जोखिम उठाने वाले कार्य में तो शामिल नहीं है। यह एक कानूनी अपराध है।	40.18	59.82
	<u>Domestic Violence</u>		
प्रश्न 34	क्या आप जानते हैं कि पहली पत्नी के जीवित होने पर बिना किसी कारण के दूसरा विवाह करना कानूनी जुर्म है और इसकी 7 साल की सजा है।	94.64	5.36
प्रश्न 35	क्या आप जानते हैं कि गर्भ में बच्चे का पता लगाना कि वह लड़का है या लड़की और उसके बाद गर्भपात करवाना एक कानूनी जुर्म है ऐसा करने पर 3 साल कि सजा है।	94.64	5.36
प्रश्न 36	क्या आप जानते हैं कि घर कि औरत को दहेज के लिए प्रताड़ित करना कानूनी जुर्म है।	94.20	5.80
प्रश्न 37	क्या आप जानते हैं कि यदि पत्नी द्वारा पति को प्रताड़ित किया जाता है किसी झूठे दहेज के केस में तो इसके लिए सरकार द्वारा प्रावधान है।	89.29	10.71
	<u>Human Trafficking</u>		
प्रश्न 38	क्या आप जानते हैं कि बंधुआ मजदूर एक कानूनी जुर्म है।	89.73	10.27


	<u>Education</u>		
प्रश्न 4	क्या आपके गांव में प्रौढ़ शिक्षा प्रदान की जाती है। उसके कितने केंद्र आप के गांव में हैं। और कितने लोग इसको प्राप्त कर रहे हैं।	57.59	42.41
प्रश्न 5	क्या आप जानते हैं कि 14 साल की उम्र तक के बच्चे को प्राथमिक शिक्षा मुफ्त प्रदान की जाती है। यह सरकार के द्वारा उपलब्ध है।	83.48	16.52
प्रश्न 6	क्या आपके गांव में लड़के लड़कियों दोनों को पढ़ने की इजाजत है।	93.75	6.25
प्रश्न 7	क्या आपके गांव की लड़कियों को 12वीं कक्षा के बाद कॉलेज में जाने की अनुमति है।	94.20	5.80
	<u>Casteism</u>		
प्रश्न 8	शिक्षा के क्षेत्र में क्या कभी आप के साथ कोई जाति, धर्म के आधार पर कोई भेदभाव हुआ है। यह कानूनी जुर्म है। ऐसा करने पर 2 साल से अधिक सजा और जुर्माना दोनों हो सकते हैं।	33.93	66.07
प्रश्न 9	क्या आपके गांव में जाति के आधार पर लोगों में भेदभाव किया जाता है।	24.11	75.89
प्रश्न 10	आपके गांव में सभी जातियों के लोगों को सरपंच, पंच आदि में भागीदारी प्राप्त है, यह एक कानूनी अधिकार है।	82.14	17.86
	<u>Excessive use of Pesticides</u>		
प्रश्न 11	क्या आप जानते हैं कि फसलों पर कीटनाशक के अत्यधिक प्रयोग से सेहत पर निम्नलिखित हानिकारक प्रभाव पड़ता है। जैसे अस्थमा रोग, त्वचा रोग और फेफड़ों की समस्या।	86.16	13.84
प्रश्न 12	क्या आप जानते हैं कि फसलों पर कीटनाशक के अत्यधिक प्रयोग से मिट्टी की उर्वरकता कम होती है।	73.21	26.79
प्रश्न 13	क्या आप जानते हैं कि अत्यधिक कीटनाशक के प्रयोग से लैंड डेग्रेशन की समस्या आती है जिससे की भूमि जल्दी बंजर हो जाती है।	88.84	11.16
प्रश्न 14	क्या आप जानते हैं कि अत्यधिक कीटनाशक के प्रयोग से पीने का पानी भी स्वच्छ नहीं रहता तो क्या आपके गांव में पानी को स्वच्छ रखने के लिए दवाई का प्रयोग होता है।	91.52	8.48

Sh. Danish Gupta, CJM-cum-Secretary, DLSA Ambala visited all these three villages and he interacted with the villagers. He asked them to awaken for their rights.

Dr. Reetika Bansal, Incharge of Legal aid Clinic, **Mr. Jagdeep** and **Ms. Kunjana Mittal** coordinated the visit and thanked the Sarpanch, Secretary Sh. Inderjeet Singh for their cooperation. **Ms. Mandeep Kaur**, prepared the questionnaire. **Dr. Bindu Jindal, Head & Dean**, thanked DLSA for conducting such kind of activity in the rural area which can be very useful for the future implementation of welfare polices by the government.


11/3/19

Dr. Reetika Bansal
Incharge Legal Aid Clinic


11/03/19.

Head of Department
Head
Department of Law
Maharishi Markandeshwar
(Deemed to be University)
Mullana (Ambala)-133207

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MM (DU)/LAW/19/139-1

Dated: 13.06.2019

Report

Summer Internship Programme Organized by DLSA

A Summer Internship Program was organized by District Legal Services Authority, Ambala for the students of Department of Law MMDU, Mullana from 01.06.2019 to 12.06.2019.

On the first day on 01.06.2019, Sh. Vikram Aggarwal, Ld. District & Session Judge cum Chairman, DLSA, Ambala inaugurated the programme and Sh. Danish Gupta, CJM-cum-Secretary interacted with students and discussed the 12 days internship program.

On the same day the students visited the office of DLSA, Ambala. They observed the processing of the application of Legal Aid and ADR procedure like mediation, conciliations etc.

On the second day they visited village Legal Care and Support Centre at village Panjokhra along with Adv Sh. Ripinjeet Singh on 03.06.2019 they visited different courts including the court of District and Session Judge and Family Court. They also visited Mother Teresa Home and interacted with the Sister Incharge regarding the issues of female inmates there. On 04.06.2019 they observed the proceeding of Labour, MACT and special courts. On 05.06.2019 they visited Police-Station, Civil Hospital accompanied by the advocates.

On 06.06.2019 they were at courts of Sub-Division Naraingarh to observe the proceeding Sub-Divisional Courts.

On 07.06.2019 they were at Central Jail Ambala and Legal Aid Clinic for providing Legal Aid to prisoners.

In order to have belongingness and attachment they visited the Old Age Home on 08.06.2019. The inmates of Old Age Home were quite happy in the company of young children. The students also attended a Legal Literacy Camp at village Bhilpura and addressed various issues of villagers like sanitation and RTE on 09.06.2019.

The next day on 10.06.2019 the students visited observation homes, protection centre and visited also protection office at Ambala..

The 11.06.2019 was a day for students to visit the courts of Learned Judicial Magistrates at Session Courts Ambala along with advocates to watch the trial proceedings.

The last day on 12.06.2019, it was the day for the presentation and submission of reports of internship programme. After submission of reports the learned CJM - CUM-Secretary DLSA Sh. Danish Gupta distributed the certificates to the students. Total 40 students were benefitted by the internship. Mr. Suresh Pal Saini, Ms. Randeep Kaur, Ms Rimpay Bhardwaj and Ms. Kunjana Mittal, faculty members from the department accompanied the students.


Prof. (Dr.) Bindu Jindal, Head of the Department, Co-ordinator of this internship expressed her thanks to the DLSA, Ambala & congratulated the participants for their exposure to the functioning of country's Legal System.


Bindu Jindal
13/06/19
Head of department
Department of Law
Mafsarishi
(Datta Krishna Mahavidyalaya)
Mullana (Ambala)-133207


2018-19

Free Medical Health Check-up Camp Report

On 31st January 2019, MM College of Pharmacy, MM (Deemed to be University) in association with MM super speciality hospital, Mullana-Ambala, Haryana, organised a "Free Medical Health Check-up Camp" related to non communicable diseases including Hypertension, Diabetes, Anemia and CVD, at Ugala, Ambala. Students of PharmD (44), B. Pharm (6), B. Optm. (3), two physicians, two ophthalmologists, one pharmacist and one ECG technician actively participated in this camp. Three faculty members namely Dr Md Shamshir Alam, Dr Jaspreet Kaur and Dr Akash Pethekar of MM College of Pharmacy supervised the camp. More than 150 patients visited the camp. Free consultation, free diagnostic tests like Blood pressure, Random blood sugar, Haemoglobin and ECG and free medicines were provided to the patients. Our students of PharmD and B Pharm imparted health education and counselling related services to the patients. This type of Free Medical Health Check-up Camp programme will definitely be helpful for the people in the society in timely screening, prevention and control of these types of disease.

Reported by  31/01/2019
Dr Md Shamshir Alam
Associate Professor
Department of Pharmacy Practice
MM College of Pharmacy
MM (Deemed to be University), Mullana


31/01/19

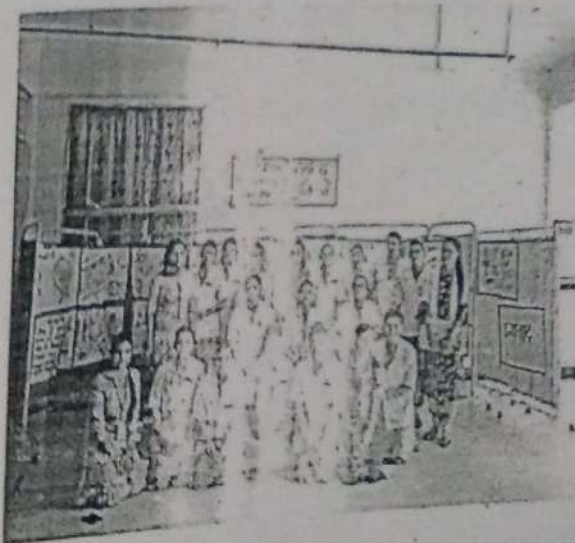

10/7/2020
Principal
M.M. College of Pharmacy
Gurukulshahi Markandeya
Deemed to be University
Mullana-133207 (Ambala), HR

M.M. INSTITUTE OF NURSING, MULLANA, AMBALA.
REPORT OF GROUP PROJECT

(Awareness regarding the breast cancer)

The students of B.Sc. Nursing 4th year organized a group project on Awareness regarding the breast cancer under the supervision of Ms. Nitika bhatt (Clinical Instructor) and Ms. Gurleen Kaur (Clinical Instructor).

The program was started with the Welcome and Introduction session by the narrator. The group project includes a role play and explanation of charts. The objective of this project was to impart knowledge and create awareness among people regarding breast cancer i.e. its causes, social effects and treatment. Apart from this, the role of various health personnel especially of a nurse was also emphasized. The duration of role play was about 15 minutes. After the completion of role play, students explained the charts in an effective manner which were displayed in corridor of medicine ward. The program was ended with the Vote of thanks by Ms. Nitika bhatt and feedback from patients relatives.



Venue-Medicine ward of MMIMSR

Date-11/10/2018

Group-B.Sc. (N) 4th year (roll no -201501-2015040)

Gurleen Kaur
Co-ordinator

[Signature]
Principal
M.M. Institute of Nursing
Mullana (Ambala)

MASS AWARENESS PROGRAMME ON NEWBORN CARE.

Date:- 19, november, 2018

Place:- Anganwadi, duliyani

A group of ten students roll no 2017022 – 2017042 posted in a village named Duliyani for community posting from 29th October 2018 to 26th .nov 2018. Students conducted mass awareness programme on newborn care. Students prepared the programme under the guidance of Mrs. Priyanka (assistant professor), Nitika Bhatt, Meenakshi and Gurleen kaur (clinical instructor).

Group involved in this programme includes eligible couples, antenatal mothers and lactating mothers.



AIMS AND OBJECTIVES:-

- To assess the knowledge of the group regarding newborn care.
- To enhance knowledge regarding newborn care.
- To encourage the group to consult doctor when newborn fall sick.
- To encourage the group to come out of all the misconceptions and myths related to newborn care.

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Maharishi Markandeshwar University,
Mullana (Ambala)

EXPLANATION ABOUT TOPIC:-

Desired group should be educated and informed about the newborn care. During the stay in hospital or birthing center, clinicians and nurses help with basic baby care. Newborn basic care includes:

- Handling a newborn ,including supporting the baby neck
- Changing diapers
- Bathing
- Dressing
- Feeding and burping
- Cleaning the umbilical cord
- Eye care



ACTIVITIES PERFORMED DURING PROGRAMME:-

Assessment:- Students assessed the height, weight; vital signs and BMI of the group.

Role play:- Students performed the role play regarding newborn care. They educate group about newborn care by performing role play.

Health education:- At last they gave health education regarding newborn care like eye care ,umbilical care,kangaroo mother care,prevention from hypothermia ,breast feeding etc..

Feedback:-Students got positive feedback from the group , they got knowledge from role play and health education and happily attended the programme.

Evaluation:-The evaluation has been done by the student by asking the questions from the group, it has been evaluated that the villagers got some knowledge about the newborn care.

M.M INSTITUTE OF NURSING, MULLANA (AMBALA)

Report of school health project

B.Sc (N) 4th year (2017-2018)

GROUP PROJECT on "FAMILY PLANNING"

This group activity was organized by the students of B.Sc nursing 4th year students (2014001-2014045). Students organized the school health project on family planning.

A committee was formed and duties were divided to all students. Students prepared the content under the guidance of Ms. Priyanka, Assitant professor (CHN), Ms. Manisha, Assitant professor (CHN)

The school health project was started at 11:00 am with the welcome and introductory session. The school health project was ended with the vote of thanks.



THEME: CHOTA PARIVAR SUKHI ADHAR

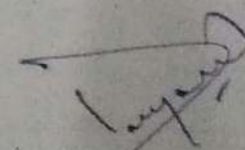
DATE: 21-11-18

TIME: 11:00 AM

VENUE: Duliyani Village

AUDIENCE: Community people

SUBJECT INCHARGE


✓ PRINCIPAL

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Maharishi Markandeshwar
(Deemed to be University)
Mullana (Ambala)

M.M INSTITUTE OF NURSING,MULLANA(AMBALA)

Report of school health project

B.Sc (N) 4th year (2017-2018)

School health project on "CHILD ABUSE"

This group activity was organized by the students of B.Sc nursing 4th year students (2014001-2014045) .Students organized the school health project on child abuse.

A committee was formed and duties were divided to all students.Students prepared the content under the guidance of Ms.Priyanka ,Assitant Professor(CHN),Ms.Manisha mam,Assistant Professor(CHN).

The school health project was started at 11:00 am with the welcome and introductory session.The school health project was ended with the vote of thanks.



THEME: SRUKHSIT BACCHA JAKRUK SMAJ

DATE:26-11-18

TIME:11.00 am

VENUE:Govt. Boys Primary School (Duliyani)

AUDIENCE: Boys and Girls(36

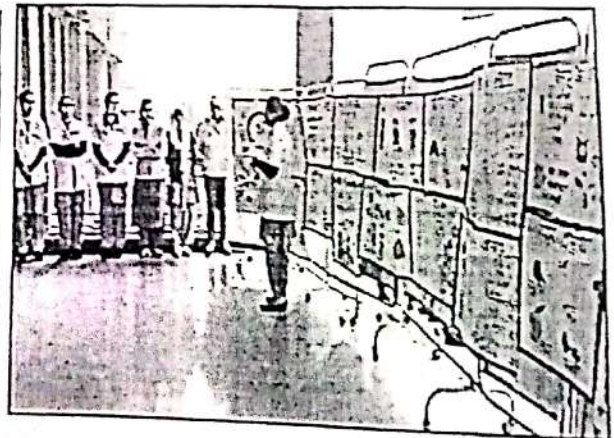
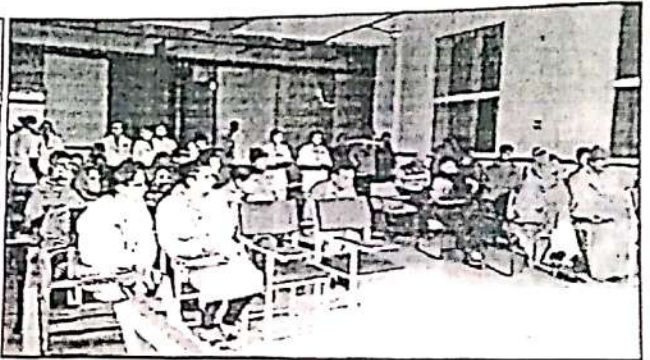
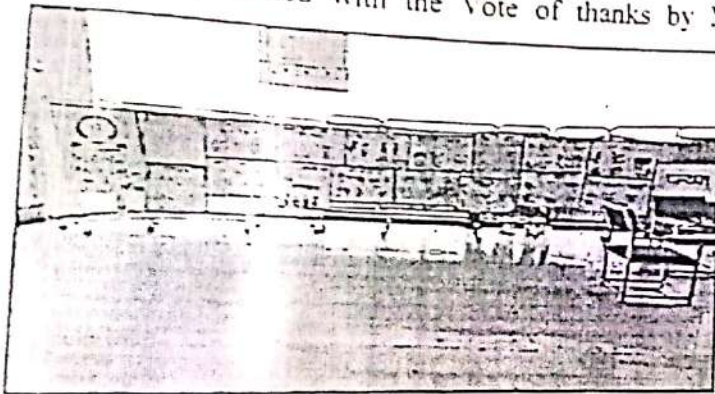
SUBJECT INCHARGE

PRINCIPAL
M. M. Institute of Nursing
Maharishi Markandeshwar
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Mullana (Ambala)

MM INSTITUTE OF NURSING, MULLANA, AMBALA
REPORT OF "WORLD CANCER DAY CELEBRATION"

World Cancer day was celebrated by students of B.Sc. (N) 3rd year, MSN (Posting) group under the supervision of Ms. Simarpreet Kaur (Nursing tutor) and Ms. Sakshi Sharma (Clinical instructor). The theme of the day was I AM AND I WILL.

The program was started with the Welcome and Introduction session by the narrator. The group project includes a role play and explanation of charts. The objective of this project was to impart knowledge and create awareness among people regarding cancer i.e. its current incidence, causes, social effects and treatment. Apart from this, In role play two cases of cancer (Lung cancer and Breast cancer) were shown along with the role of various health personnel especially of a nurse was also emphasized. The duration of role play was about 15 minutes. After the completion of role play, students explained the charts in an effective manner which were displayed in corridor of medicine ward. Refreshment was also given to the audience in the form of fruits (orange and bananas). The program was ended with the Vote of thanks by Ms. Tabassum and feedback from patients' relatives.



Venue: Medicine Ward (MMIMSR)

Date: 4th February, 2019

Time: 11:30 am onwards

Group: B.Sc. (N) 3rd year (Roll no. 2016025-2016048)

A quiz competition was also organized for students of B. Sc. (N) 3rd year. In this competition, all the students of 3rd year participated in it. Participants were divided in four teams and each team comprise 5 students. The teams were named on the names of four professional bodies of nursing (INC, ICN, TNAI and SNA). There were three rounds of quiz i.e. Non-passing round, passing round and picture identification round. At the last there were questions for audience too. Team INC won first prize and team ICN second. The prizes were given to the members of both the teams by Ms. Simarpreet Kaur (Nursing tutor) and Ms. Varinder Kaur (Nursing tutor). The competition ended with the vote of thanks by one of member of organizing group. Really this day celebration was very fruitful for patients; attendants and students as well. Through this students got the opportunities to show their talent (Acting and drawing, to improve their leadership qualities and learn how to organize an event).



Subject Incharge
21/19

Principal
Principal
M. M. Institute of Nursing
Maharaja Park, Ludhiana
Mulliana (Ambala)

M. M. INSTITUTE OF NURSING
MULLANA, (AMBALA)

GROUP PROJECT

ON

FEMALE FOETICIDE

SUBJECT: MIDWIFERY AND OBSTETRICAL NURSING



SUBMITTED TO:

MS. MANPREET KAUR

(ASSISTANT PROFESSOR)

(MIDWIFERY AND

OBSTETRICAL NURSING)

SUBMITTED BY:

B.Sc. NURSING 4th year

GROUP 1st

ROLLNO: 2015001 to 2015020

Date: 16/2/2019

Principal

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Maharishi Markandeshwar
(Deemed to be University)
Mullana (Ambala)

REPORT ON FEMALE FOETICIDE

INTRODUCTION

B.Sc. Nursing 4th year student conducted the group project at civil hospital Ambala city on female foeticide, its causes and actson female foeticide.

- > Female feticide is defined as aborting a female foetus after sex determination test.
- > Ultrasound and foetbscopy helps to determine abnormalities in the foetus. But it is misused to find out the sex of fetus and abortion is done if it is a girl.

STATISTICS

- The child sex ratio has dropped from 945 females per 1000 males in 1991 to 927 females per 1000 males in 2001, the child sex ratio has dropped from 943 females per 1000 males in 2011.
- Estimated that 50 million girls and women are missing from india's population because of termination of the female foetus.
- Female foeticide in India increased by 49.2%.

OBJECTIVES OF GROUP PROJECT

- 1) To introduce about female foeticide.
- 2) To explain about the causes and acts regarding female foeticide.
- 3) To provide knowledge to the people regarding female foeticide

THEME

“MAA CHAHIYE, PATNI CHAHIYE, BEHAN CHAHIYE, LEKIN BETI KYU NI CHAHIYE”.

Date: 16/2/2019

VENUE: Civil Hospital, Ambala City.

LANGUAGE: Hindi

INVITATION CARD



OBSTETRIC AND MIDWIFERY SUPERVISOR:

- Ms. Manpreet kaur (Assistant Professor)
- Ms. Meenakshi Thakur (Clinical Instructor)
- Ms. Riya (Clinical Instructor)

CONDUCTED BY: B.Sc. Nursing 4th year students total 20 students (2015001 to 2015020)

B.Sc. Nursing 4th year students total 20 students (2015001 to 2015020)

INCHARGE OF GROUP PROJECT:

Group Leader: Barkha and Anita

Invitation incharge: Diksha Puri and Deepanshu

A.V Aids incharge and Chart making: Komalsingh, Anamika and Komal Sharma

Chart explanation: Simpi and Manpreet

Narrator : Mandeep

Content making: Arpna and Mandeep

Refreshment: Dikshapuri and Dikshayadav

Budget : Mandeep and Kavita

Role Play: Amrita, Anita, Arpana, Barkha, Divya, Kajal Sharma, Kajol, Kavita, Simpi, Lakshita, Maninder

Report: Manpreet, Kajal Sharma

PARTICIPANT GROUP:

There was approximate gathering of 40 to 50 people in civil hospital for watching role play.

GLIMPSE OF ROLE PLAY AND SCRIPT

Character of role play

- ❖ Simpi (Daughter Mother)
- ❖ Amrita (bahu)
- ❖ Kajal Sharma and Maninder (sisters)
- ❖ Divya malik (husband)
- ❖ Anita singh (saas)
- ❖ Arpana and kajol (padosaan)
- ❖ Kavita yadav (doctor)
- ❖ Barkha and lakshita (padosaan)

"MAA CHAHIYE, PATNI CHAHIYE, BEHAN CHAHIYE, LEKIN BETI KYU NI CHAHIYE".

PROBLEM FACED:

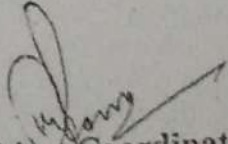
The problem which was encountered was to gather the people for role play, unnecessary noise coming from the surrounding due to overcrowding and arrangement of charts.

REMARKS:

- At the end of group project our teachers and people praised the students and given nice and positive comments on group project.
- At the end of the group project the concerned Obstetrics field supervisors also gave positive comments and given advices about how to overcome their mistakes.
- At the end of the group project the students got a huge round of applause from the audiences. This was a great credit to all the participants of this program.

SUMMARY AND CONCLUSION:

- Because of this group project the people get enough knowledge regarding the FEMALE FOETICIDE. It was a knowledge and enriching experience as students got confidence in organizing the group project at hospital level.
- Refreshment was also given to the audience in the form of Biscuits. The program was ended with the Vote of thanks by Ms. Mandeep and feedback from audience.


Subject Coordinator

M.M(DEEMED TO BE UNIVERSITY) MULLANA,
AMBALA

REPORT ON 7 DAY AND NIGHT NATIONAL
SERVICE SCHEME CAMP



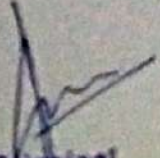
DATE- 13th MARCH, 2019 -19th MARCH, 2019

PROGRAMME CO-ORDINATOR

Mr. Karan Aggarwal

PROGRAMME OFFICER

Mr Atul Raj
Mr. Dinesh Kumar
Dr. Adesh tripathi
Mrs. Simarjeet Kaur
Ms. Simarpreet Kaur


Principal
M. M. Institute of Nursing
Maharishi Markandeshwar
(Deemed to be University)
Mullana (Ambala)

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INTRODUCTION

The National Service Scheme sponsored public service program conducted by the Department of Youth Welfare and Sports of the Government of India.

- It is popularly known as NSS.
- This scheme was launched in 24th September 1969.
- The motto of National Service Scheme is NOT ME BUT YOU.
- Their aim is developing the student's personality through community service.
- NSS is the voluntary association, young people in Colleges, Universities and at +2 level working for a campus community linkage.

LAUNCH OF NSS

In May 1968, a conference of student representatives convened by the Ministry of Education and the University Grants Commission agreed that a National Service Scheme could be the instrument for the NATIONAL INTEGRATION.

NSS LOGO

The symbol of NSS has been based on the GIANT RATH WHEEL of the world famous KONARK SUN TEMPLE situated in Orissa, India.

- This wheel signifies the cycle of creation, preservation and release.
- It signifies the movement of life across time and space thus stands for the continuity as well as change and implies for social change.
- The eight bars in the wheel represent 24 hours in a day. The red colour indicates that the volunteer is full of the young blood that is lively, active, energetic and full of high spirit.

NSS Day

- NSS was formally launched on 24th September, 1969, the birth centenary year of the father of the Nation. Therefore 24 September is celebrated every year as NSS Day with appropriate programmes and activities.

OBJECTIVES

1. Understand the community in which they work
2. Understand themselves in relation to their community
3. Identify the needs and problems of the community and involve them in problem-solving

4. Develop among themselves a sense of social and civic responsibility
5. Utilise their knowledge in finding practical solutions to individual and community problems.
6. Develop competence required for group-living and sharing of responsibilities
7. Gain skills in mobilising community participation.
8. Acquire leadership qualities and democratic attitudes.
9. Develop capacity to meet emergencies and natural disasters and.
10. Practise national integration and social harmony

INTRODUCTION ABOUT THE CAMP

Maharishi Markendeshwar deemed to be University started a NSS 7 day and night camp in Sarakpur and Simbla Village from 13th March, 2019 to 19th March, 2019. The camp was organised under the supervision of Mr. AdeshTripathi, Mr. Karan Aggarwal , Ms. Sakshi Sharma.

SCHEDULE OF THE NSS CAMP

- DAY 1- Inauguration of the Camp and basic information about camp.
- DAY 2- Yoga and parade and survey in Sarakpur and Simbla village.
- DAY 3- Yoga and parade, medical camp and dance programme at evening.
- DAY 4- Yoga and parade, dental and skit, mime, and mimicry at evening.
- DAY 5- Yoga and parade, practice of nukkad natak and group discussion at evening.
- DAY 6- Yoga and parade, nukkad natak and rally at Sarakpur village and night camp.
- Day 7- Yoga and parade and valedictory ceremony.

Day 1



DAY-1- 13th March,2019 First day of NSS 7 Days and Night starts with inaugural ceremony in which Prof. Victor Gambhir , Dr. Ashok Arora Dr. JK Sharma , Dr. NK Batra came as chief guest. Prof. Victor Gambhir gave their best wishes to volunteers for their 7 days and night camp. In evening volunteers are divided into teams total 10 teams were made.

Names of the team=

- 1st team-miraz 2000
- 2nd team-f -16
- 3rd team-mig 21
- 4th team-mig 56
- 5th team-sukoi su 30
- 6th team-tejas
- 7th team-rafale
- 8th team-jaguar
- 9th team-mig 27
- 10th team-mig 29



In the seminar VedBahura was taught regarding-

- What is NSS?
- How it works?
- What its significance?
- What are the benefits of this camp to the students and community people?
- What are the various schemes run by the Government for the welfare of the society?
- How NSS Camp helps the students for improvement of communication facilities and personality development?
- How to live healthy?

demands and home decor tastes of the Indian market.



MMU (CAMP)

NSS units of Maharishi Markandeshwar Deemed to be University, Mullana organized seven days and night special camp at Sarkapur and Seembla village. In this camp, NSS units 1, 2 and 3 organized camp in Sarkapur and NSS units 4 & 5 organized camp in Seembla village. This camp was done under the instruction of Chancellor Sh. Tarsem Kumar Gera, Secretary Dr. Sanjay Gera and Treasurer Dr. Mohit Gera.

The Indian EXPRESS Fri. 15 March
ePaper editions epaper.india 

DAY 2



DAY-2- 14th March,2019 Second day of NSS 7 Days and Night starts with yoga and after that volunteers do prayer and parade also. After that 5 teams went to village sarakpur and 5 teams went to village seembla for survey in which volunteers collect the data about the villagers. In evening cultural activities were held in which volunteers were participated and do their best.

CLICKS OF THE EVENT:

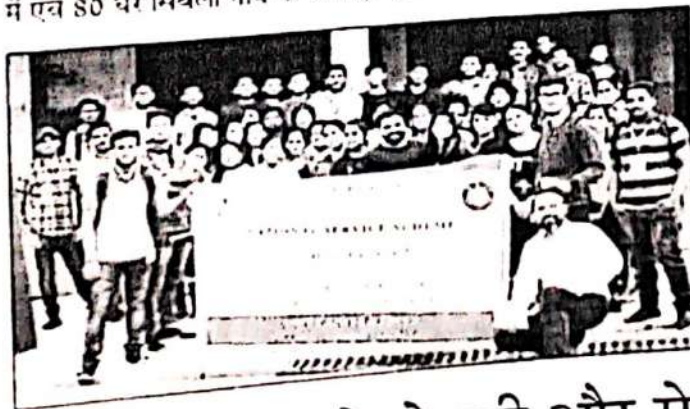






योग से की एनएसएस शिविर के दूसरे दिन की शुरुआत

मुलाना। महर्षि मार्कंडेयवर डीम्ड यूनिवर्सिटी में मात दिवसीय एनएसएस शिविर के दूसरे दिन की शुरुआत स्वयंसेवकों ने योग के माध्यम की, जिसके बाद आराधना और एनएसएस गीत का गान हुआ। यह शिविर यूनिवर्सिटी के कुलधिपति तरसेम कुमार गर्ग, सचिव डॉ. मजोब गर्ग व कोषाध्यक्ष डॉ. विशाल गर्ग के निदेशानुसार चल रहा है। शिविर का कार्यभार एनएसएस प्रोग्राम कोऑर्डिनेटर इंजीनियर करण अग्रवाल ने संभाला। पहले दिन के उद्घाटन समारोह के उपरांत स्वयंसेवकों ने अलग-अलग समूह में बांटकर मरकपुर और मिम्बला गांव में किये गए निरीक्षण का विस्तार किया, जिसमें स्वयंसेवकों ने 140 घर मरकपुर में एवं 80 घर मिम्बला गांव के आंकड़े एकत्रित किये।



में का सम्मान 'उजे ते री और तेर'

7 दिवसीय रात्रि शिविर के दूसरे दिन की शुरुआत योगा के साथ

बराडा, 14 मार्च (उपेश) : महर्षि मार्कंडेश्वर डीम्ड यूनिवर्सिटी में एनएसएस सात दिवसीय रात्रि शिविर के दूसरे दिन की शुरुआत स्वयंसेवकों द्वारा योगा के साथ की गयी जिसके बाद आराधना और एन एस एस गीत का गान हुआ। यह शिविर यूनिवर्सिटी के कुर्तागणपति तरसेम कुमार गर्ग, सचिव डा. सजीव गर्ग व कोषाध्यक्ष डॉ. विशाल गर्ग के निदेशानुसार चल रहा है। इस शिविर का सम्पूर्ण कार्यक्रम एन एस एस प्रोग्राम कोऑर्डिनेटर इंजीनियर करण अग्रवाल ने सभाला। पहले दिन के उद्घाटन समारोह के उरात स्वयंसेवकों ने अलग अलग समुह में बांटकर सरकपुर और सिम्बला गाँव में एक किये गए निरिक्षण का विश्लेषण किया गया जिसमें स्वयंसेवकों ने 140 घर सरकपुर में



सात दिवसीय शिविर में भाग लेते स्वयंसेवक।

एवं 80 घर सिम्बला गाँव के आंकड़े एकत्रित किये गए जिसमें पोया कि लगभग सभी गाँव वालों के पास अपना आधार कार्ड है व सभी के पास अपना बैंक खाता है व यह भी निरिक्षण किया गया कि एक घर में कितने सदस्य है और उनमें से कितने शिक्षित है। इसके

साथ-साथ गाँव के चौपाल की भी सफाई की गयी। उसके बाद स्लोगन लेखन व पोस्टर बनाने की प्रतियोगिता का आयोजन किया गया जिसमें स्वयंसेवकों ने बढ-चढ कर भाग लिया। इसके उपरांत सांस्कृतिक संघा का आयोजन किया गया जिसमें सभी

प्रतिभागियों ने अपनी कला का प्रदर्शन आज के विषय के अनुसार किया। सभी स्वयंसेवकों ने जोरो शोरों में इस शिविर में भाग लिया जिसमें अक्षय, अभय, अतुल, सौरव, रोहन, अनंनव व शुभम ने मुख्य भूमिका निभाई।

दैनिक सवेर Fri, 15 March 2019
dainiksaveratimes.epapr.in/c/37613395



Day-3

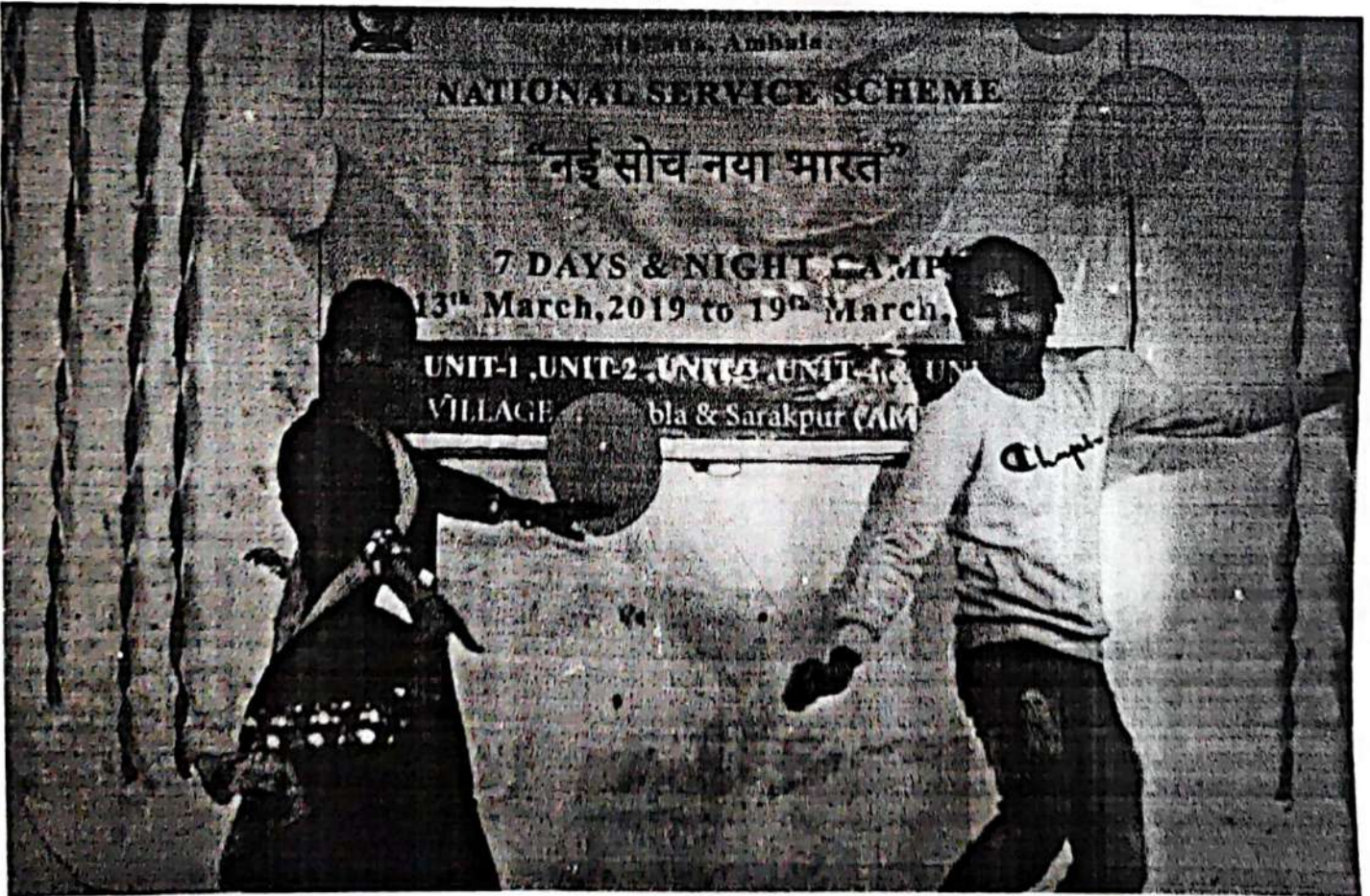


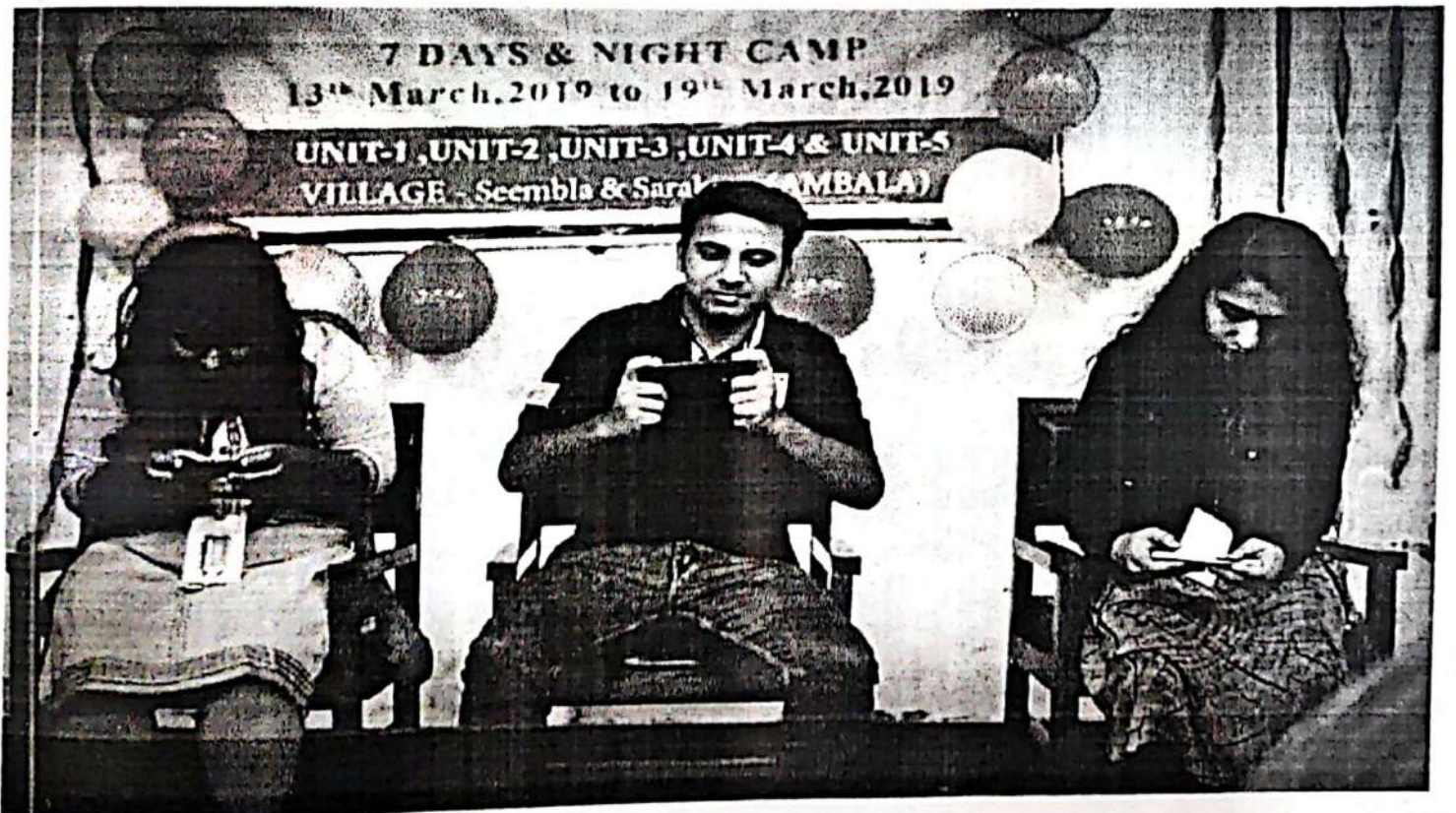
Day-3=Medical camp

15th March, 2019 Third day of NSS 7 Days and Night starts with yoga and after that volunteers do prayer and parade also. After that 5 teams went to village Sarakpur and in Sarakpur volunteers organize a medical camp. 5 teams went to village Seembla and in seembla volunteers organize a dental camp. In evening cultural activities were held in which volunteers were participated and do their best.

CLICKS OF THE EVENT:

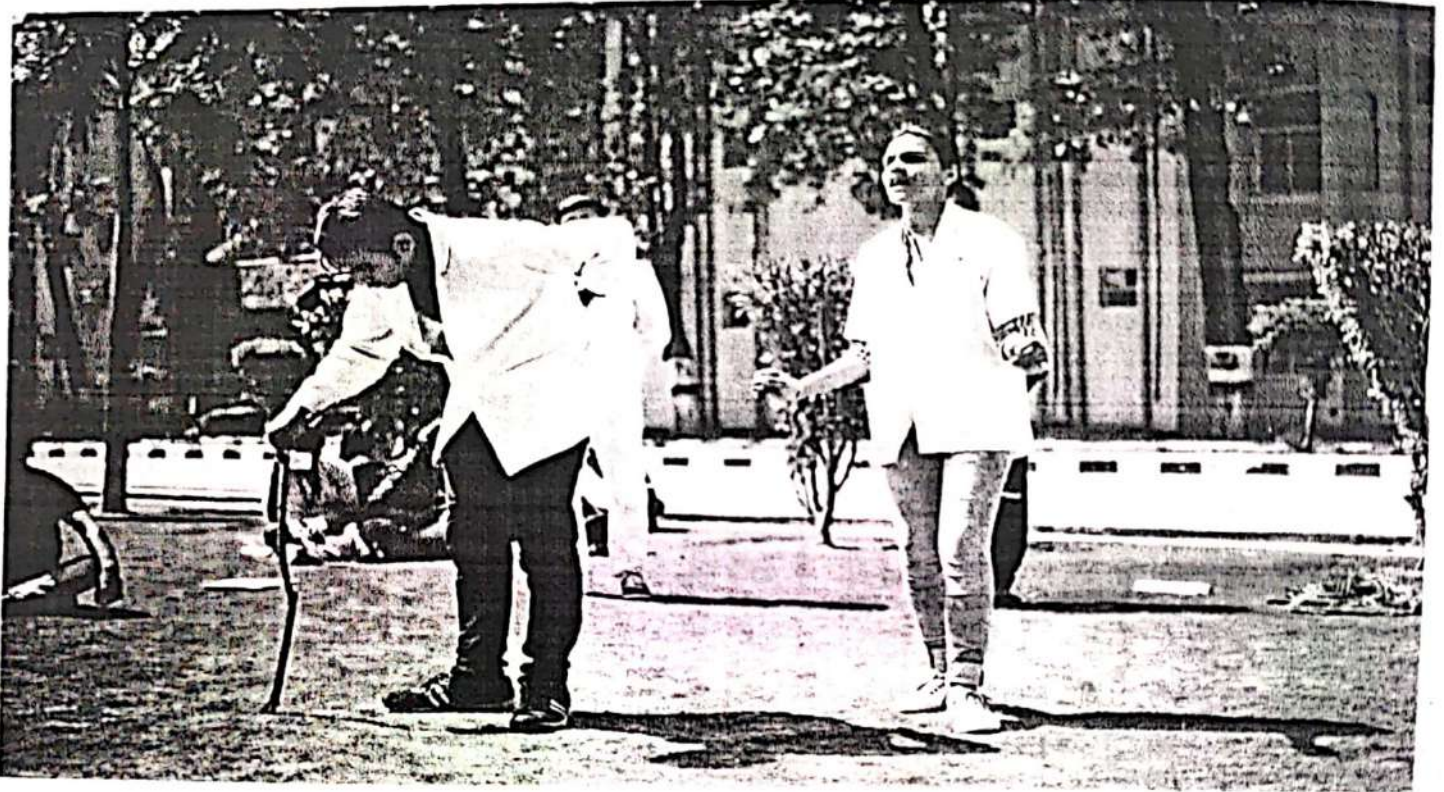






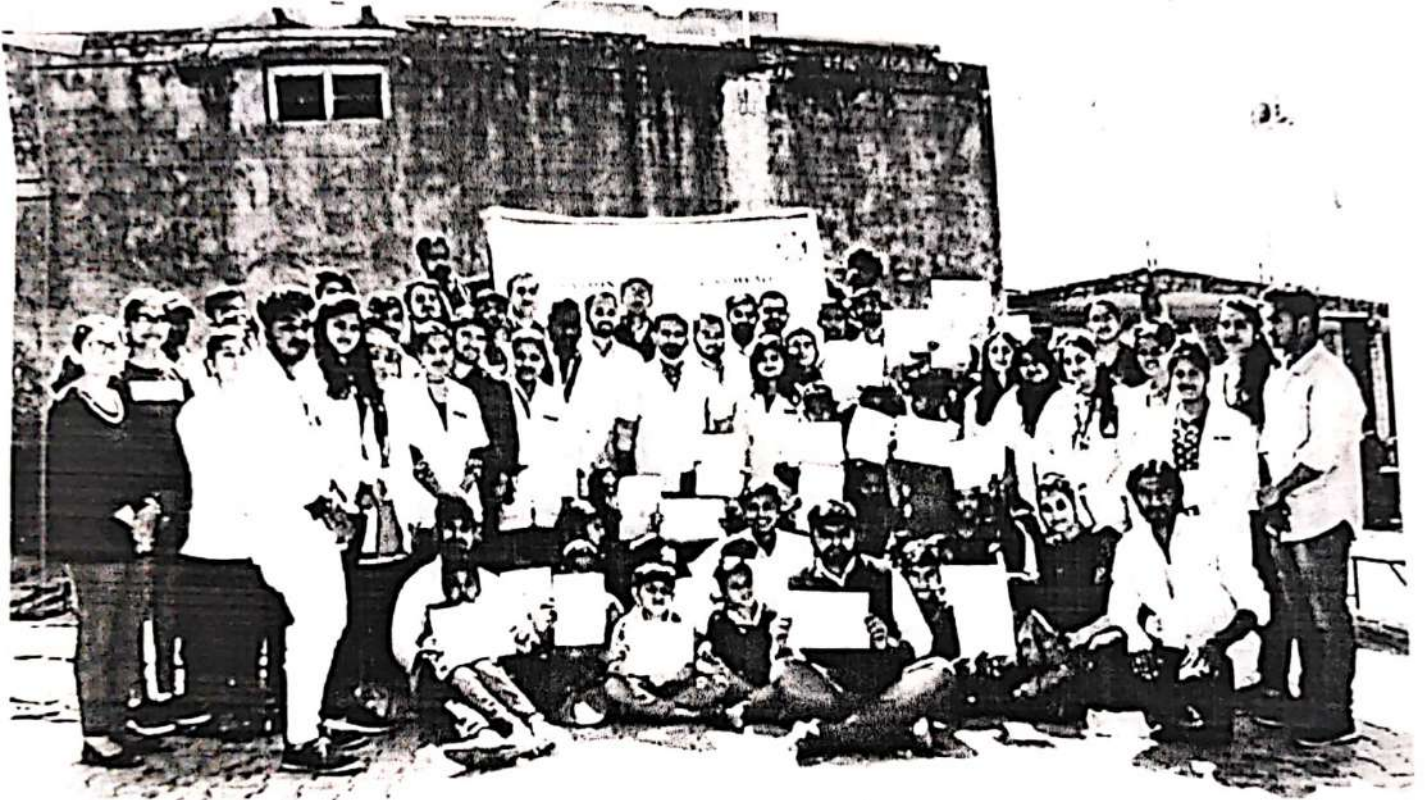
DAY 5 –

On day 17th march 2019 fifth day of NSS, it started with the yoga and parade in the early morning and then there was practice for nukkad natak by all the students whole day on the topic peer pressure, old age, reservation and dowry system. After that in the evening there was group discussion on health diet to guide the villagers to take proper diet. A presentation on "healthy living" given by Shweta Kundu.



DAY 6 –Nukkad natak and rally

On 18th march the day started with the yoga and parade in the morning and then everyone visited Sarakpur village for nukkad natak on old age, peer pressure, reservation and dowry system topic. All the village people gathered for it and the message regarding personal hygiene showed to them through role play. After that there was night camp.



M.M. INSTITUTE OF NURSING, MULLANA, AMBALA.

LIST OF NSS STUDENTS IN SEVEN DAY AND NIGHT CAMP HELD ON 13TH MARCH 2019 -19TH 2019

Sr.No.	NAME OF STUDENTS
1.	Amrita
2.	Anamika
3.	Barkha
4.	Diksha
5.	Divya
6.	jyoti
7.	Kajol
8.	Rakhi
9.	Rashi
10	Sonika
11	Bindiya
12	Kavita
13	Kulpreet
14	Mandeep
15	Surbhi

REPORT ON POSTNATAL AND NEWBORN CARE

INTRODUCTION

B.Sc. Nursing 4th year student conducted the group project at civil hospital Ambala city on postnatal and newborn care, its causes and acts on Postnatal and Newborn care under the supervision of Ms. Manpreet kaur (Assistant Professor), Ms. Vipasha (Clinical Instructor), Ms. Shalini (Clinical Instructor)

OBJECTIVES OF GROUP PROJECT

- 1) To introduce about Postnatal And Newborn Care.
- 2) To explain the benefits of postnatal care.
- 3) To explain the benefits the newborn care.
- 4) To explain the benefits of Breastfeeding for mother and baby.

THEME

“SHISHHU KI ZINDGI SE JODDI HAL...MAA KI KHUSHIYAAN”.



Date: 23/03/2019

VENUE: Civil Hospital, Ambala City.

LANGUAGE: Hindi

INCHARGE OF GROUP PROJECT:

- Invitation incharge: Prena Dua and Prabhjot Kaur
- A.V Aids incharge and Chart making: Priyanka Joon, Rakhi Duhan, Rashi, Riya Negi, Soniya Thakur, Simran Bhatt, Nikita Kanyan
- Chart explanation: Simran Bhatt and Prabhjot Kaur
- Narrator : Priyanka
- Content making : Twinkle and Techhi Sonika
- Refreshment: Ruchi Sharma and Shreya Sharma
- Budget : Nikita Kanyan and Rashi

- RolePlay: Monika Jethuri, Navdeep Kaur, Neetu Sharma, Neha Rani, Rakhi Duban, Techi Sonika, Twinkle, Priyanka, Priyanka Teliyan
- Report: Priyanka and Rajdeep Kaur



There was approximate gathering of 40 to 50 people in civil hospital for watching role play.

PROBLEM FACED:

The problem which was encountered was to gather the people for role play, unnecessary noise coming from the surrounding due to overcrowding and arrangement of charts.

REMARKS:

- At the end of group project our teachers and people praised the students and given nice and positive comments on group project.
- At the end of the group project the concerned Obstetrics field supervisors also gave positive comments and given advices about how to overcome their mistakes.
- At the end of the group project the students got a huge round of applause from the audiences. This was a great credit to all the participants of this program.

REFRESHMENT:

Refreshment was given in the form of biscuits.

SUMMARY AND CONCLUSION:

- Because of this group project the people get enough knowledge regarding the POSTNATAL AND NEWBORN CARE It was a knowledge and enriching experience as students got confidence in organizing the group project at hospital level.

Principal
M. M. Institute of Nursing
Maharishi Markandeya
(Deemed to be University)
Kullana (Ambala)

GROUP PROJECT REPORT

CHILD HEALTH NURSING

THEME "IMPORTANCE OF IMMUNIZATION"

Students of B.Sc. Nursing 3rd Year has celebrate immunization week (24th April to 30th April) under theme of "Importance of Immunization" on 27th April 2019 in Pediatric OPD of MMIMSR Hospital Mullana, Ambala under the supervision of Mrs. Jyoti Phougat Assistant Professor.

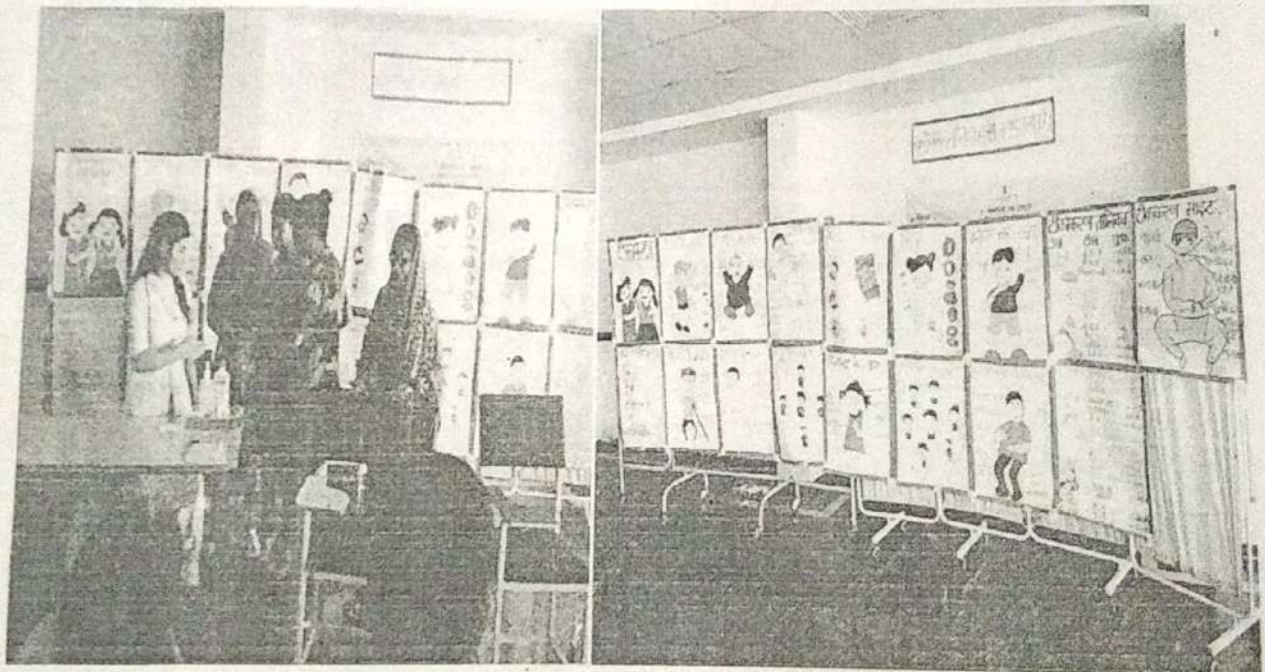
A role play and short educational chart explanation was done in front of patients and their relatives. Total 40 students were participated, 13 students were participated in role play, 8 students prepare A.V aids, 2 students in invitation, 3 students in collection, 2 students in chart explanation, 4 students in refreshment, 3 students in discipline, students in management, 1 student in picture taking, 4 students in report making

16 charts were prepared including definitions, six killer diseases, immunization schedule for children, there adverse reactions and management.

Around 30 Parents and their children had attended the group project

Feedback: according to audience, the programme was motivating and inspiring they learnt about the immunization importance for maintaining normal growth and development of their children

All the people gave positive feedback for the programme



Principal
 M. N. Institute of Nursing
 Meharishi Mathkandeshwar
 (Deemed to be University)
 Mullana (Ambala)

NO.	COLLEGE ROLL NO.	NAME OF STUDENTS	ATTENDANCE
1.	2016001	AANCHAL CHAUHAN	P
2.	2016002	ANKITA	P
3.	2016003	ANNU DEVI	P
4.	2016004	ARJU	P
5.	2016005	AYESHA SINGH	P
6.	2016006	BINDIYA	P
7.	2016007	CHIKKY DEVI	P
8.	2016008	EKNOOR	P
9.	2016009	HARIJOT KAUR	P
10.	2016010	HARMANDEEP KAUR	P
11.	2016011	JAYA SHARMA	P
12.	2016012	KAVITA SAINI	P
13.	2016013	KM NIDHI SHARMA	P
14.	2016014	KOMAL	P
15.	2016015	KULPREET KAUR	P
16.	2016016	MANDEEP SAINI	P
17.	2016017	MONIKA	P
18.	2016018	MONIKA KUMARI	P
19.	2016019	MUSKAN	P
20.	2016020	NAVITA GAUTAM	P
21.	2016021	NAVNEET KAUR	P
22.	2016022	NAVNEET KAUR	P
23.	2016023	NEERU	P
24.	2016024	NEETU RANI	P
25.	2016025	NEHA RANI	P

2016-17

	2016026	NIHARIKA ARORA	P
	2016027	NIKITA	P
28.	2016028	PINKI	P
29.	2016029	POOJA SAINI	P
30.	2016030	POONAM SANGWAN	P
31.	2016031	PRIYA GONDI	P
32.	2016032	PRIYANKA BHARTI	P
33.	2016033	RAKHI SAINI	P
34.	2016034	RASHI	P
35.	2016035	RAVINA	P
36.	2016036	SHAGUN SAINI	A
37.	2016037	SHIVANI	P
38.	2016038	SHIVANI	P
39.	2016039	SHIVANI BHARTI	P
40.	2016040	SIMRAN	P

TEACHER SIGN:

Strikus

Strikus

Principal
M. S. Institute of Nursing
Maharaja Mahendra Pratap
(Deemed to be University)
Mullana, Meerut

MMIN

DEPTT: MEDICAL SURGICAL NURSING

GROUP PROJECT

ON

UNIVERSAL HEALTH COVERAGE: -
EVERYONE, EVERYWHERE

DATE-08 APRIL, 2019

SUBMITTED TO
MS ANUJA SHARMA
(NURSING TUTOR)

SUBMITTED BY
BSc Nursing 2nd year

SUBMITTED ON

10 MAY, 2019

"UNIVERSAL HEALTH COVERAGE:-
EVERYONE, EVERYWHERE"

INTRODUCTION

We the students of BSc. Nursing 2nd year organized a group project of 'Medical Surgical Nursing' on the topic of 'UNIVERSAL HEALTH COVERAGE:- EVERYONE, EVERYWHERE' on 8 April, 2019 on the day of 'World Health Day'. We have organized our group project under the supervision of Mrs. Anuja(Nursing tutor), Mrs. Nitika sharma(clinical instructor), Ms. Jasmeet(clinical instructor) in Medical Surgical Department.

We the students of B.Sc. Nursing 2nd year were divided into 3 groups and were given specific responsibilities:-

- 1) GROUP PROJECT
- 2) SEMINAR
- 3) QUIZ COMPETITION

GROUP PROJECT

VENUE – MMIMS&R Hospital Mullana

GROUP – ROLL NO. 1 -14

TOPIC – HEALTH TALK ON ENVIRONMENT AND ENVIROMENTAL HAZARDS

SEMINAR

GROUP – ROLL NO. 15-28

TOPIC – ENVIRONMENTAL AND ITS ZONES

VENUE – MMIN LECTURE THEATER 2

COMMITTEES

INATION COMMITTEE:

- Ms. Lata
- Ms. Manpreet kaur

DGET:

- Ms. Lovepreet kaur
- Ms. Navpreet kaur

REFRESHMENT:

- Ms. Amanjot
- Ms. Manpreet

QUIZ:

- Ms. Balwinder
- Ms. Archana
- Ms. Simran Kaur
- Ms. Renu
- Ms. Simran Boperai
- Ms. Ritu

CHARTS:

- Ms. Anjali
- Ms. Anju
- Ms. Himanshi
- Ms. Jasmine
- Ms. Kazal
- Ms. Parvinder
- Ms. Payal

CONTENT:

- Ms. Lovepreet
- Ms. Kusum
- Ms. Poshikaa

POWER POINT PRESENTATION:

- Ms. Manpreet
- Ms. Navneet

MODEL:

- Ms. Navpreet
- Ms. Purnima

Explanation:

- Ms. Anshul
- Ms. Diksha
- Ms. Amandeep
- Ms. Anjali

REPORT:

- Ms. Sunaina

MANAGEMENT:

- Ms. Samriti
- Ms. Prerna
- Ms. Yashika

GUEST INVITED :

- Nursing superintendent
- Faculty of MMIN
- Patients

COMMENTS:

- Very good & keep it up
- Excellent
- Good way of presentation
- Very good
- Excellent charts

<u>SR. NO</u>	<u>ROLL NO</u>	<u>NAME OF STUDENTS</u>	<u>ATTENDANCE</u>
1.	2017001	Arandeep Kaur	P
2.	2017002	Amanpreet kaur	P
3.	2017003	Amanjot kaur	P
4.	2017004	Anjali	P
5.	2017005	Anjali Sharma	P
6.	2017006	Anju	P
7.	2017007	Anshul Saini	P
8.	2017008	chahat	P
9.	2017009	Diksha	P
10.	2017010	Gunjan Sharma	P
11.	2017011	Himanshi	P
12.	2017012	Jasmine	P
13.	2017013	Jeevanjot Kaur	P
14.	2017014	Jyoti verma	P
15.	2017015	kajal	P
16.	2017016	Kiranpreet	P
17.	2017017	Kusum Devi	P
18.	2017018	Lata	P
19.	2017019	Lovepreet	P
20.	2017020	Manpreet kaur	P
21.	2017021	Manpreet kaur	P
22.	2017022	Manita Rauniyar	P
23.	2017023	Navneet kaur	P
24.	2017024	Naypreet Kaur	P
25.	2017025	Parvinder kaur	P
26.	2017026	Payal Dhiman	P
27.	2017027	Poornima Barman	P

28.	2017028	Poshika	P
29.	2017029	Prema	P
30.	2017030	Radhika rani	P
31.	2017031	Ramneet kaur	P
32.	2017032	Renu	P
33.	2017033	Ritu chahal	P
34.	2017034	Samriti	P
35.	2017035	Shivani	P
36.	2017036	Simran Boperai	P
37.	2017037	Simran kaur	P
38.	2017038	Simran saini	P
39.	2017039	Sonali	P
40.	2017040	sunaina	P

TEACHER SIGN:
Anuja

Principal
M. M. Institute of Nursing
Maharishi Markandeshwar
(Deemed to be University)
Mullana (Ambala)

INTRODUCTION

- We the students of Bsc nursing 3rd year ^(34 in number) organised a group project at MMIMSR on 2-11-18 on "LUNG CANCER AWEARENESS DAY". The theme of the play was "WE TOGETHER CAN OVERCOME". The supervisor of the play was Ms Bindu [nursing tutor]. The invitation was given to the respected principal mam and all the faculty members of the M.M. College of nursing and the Nursing superintendent of MMIMSR. *Target population was patients and their relatives. 45-50 in number.*

OBJECTIVES

- To create awareness among the people regarding the disease.
- Teach the patients and their family members about the prevention and management of lung cancer.
- To aware patients and family members about causes, sign and symptoms of lung cancer.

FACULTY

Ms. Vinay[Head of department]

Ms. Kanika

Ms. Bindu

Ms. Shikha

Ms. Kirti

MS. Harmeet Kaur

Ms. Priya

Ms. Kritika

Ms. Mehak

Ms. Manisha

Ms. Bobby

Mr. Gautum

INCHARGES OF THE GROUP PROJECT

TEACHER INCHARGE: Ms. Shikha and Ms. Harmeet Kaur

GROUP LEADER: MS Simran and Mr Sandeep

LESSON PLAN: Ms Thinley and Ms Stanzin

INVITATION CARDS: Ms Simran , Ms Anjali

AV AIDS; Mr Susheel, Ms Shalu, Ms Anjali, Ms Samantha, Ms Shubangi, Ms Sushri, Ms Swati, Ms Simran, Mr Rohan, Mr Yam, Mr Suraj.

✓ SCRIPT WRITTING: Mr Rohit and Ms Tamana

✓ NARRATOR: Mr Tarun

✓ ROLE PLAY: Mr Rajat, Mr Rohan, Mr Rohit, Ms Ruby, Mr Tarun, Ms Ruchika, Ms Tamana, Ms Simran

✓ CHART EXPLANATION: Mr Rohit, Ms Ruchika, Mr Tarun

✓ REPORT WRITING: Mr Kamran, Mr Gazanfar

✓ REFRESHMENT: Mr Vishal, Ms Satwant, Mr Sukhpreet

✓ ARTICLES: Mr Oyeas , Mr Sahil

ROLE PLAY

DATE: 02-11-18

VENUE: MMIMSR

LANGUAGE: HINDI

THEME: TOGETHER WE CAN OVERCOME

A display of story is based on a family in which a person is suffering from lung cancer and is showing sign and symptoms slowly but he was unable to understand the problem and later when the symptoms become severe then he decided to consult the doctor and took them to a camp organised by M.M.College of Nursing and educate them about the disease, its cause and management.

CHARACTERS

- NARRATOR: Tarun
- PATIENT: Rohan
- FIRST PERSON: Rajat
- SECOND PERSON: Ruby
- PATIENT'S DAUGHTER: Simran
- PATIENT'S WIFE: Urvashi
- PATIENT'S FRIEND: Rohit
- DOCTOR: Tamana
- NURSE: Ruchika

SCENE I

Simran: papa papa uthona uthona..... Mummy
deykho na papa ko kya hogya Papa papa



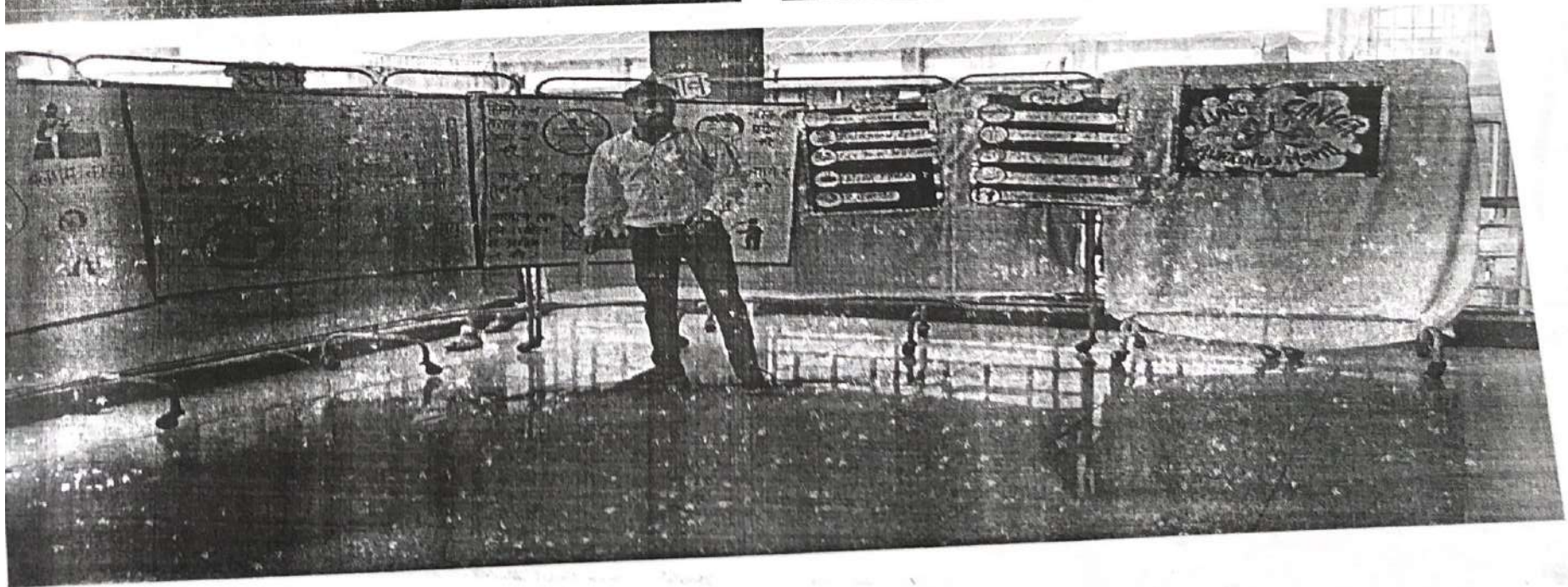
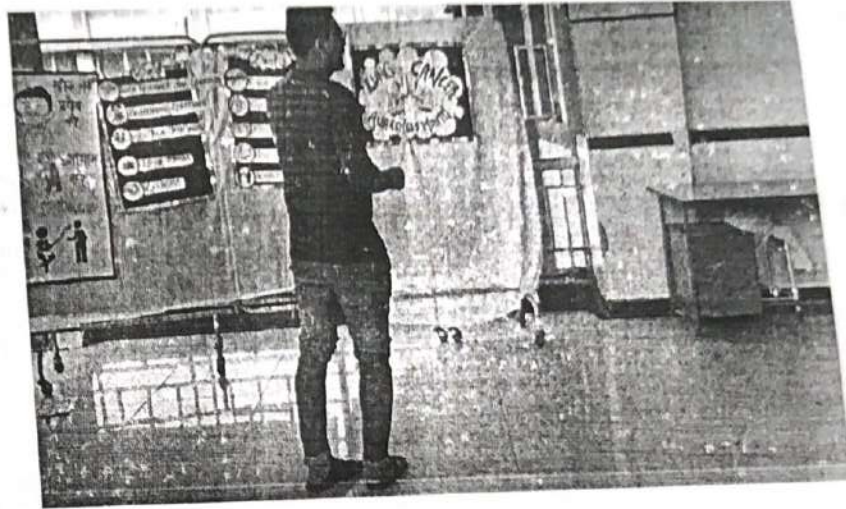
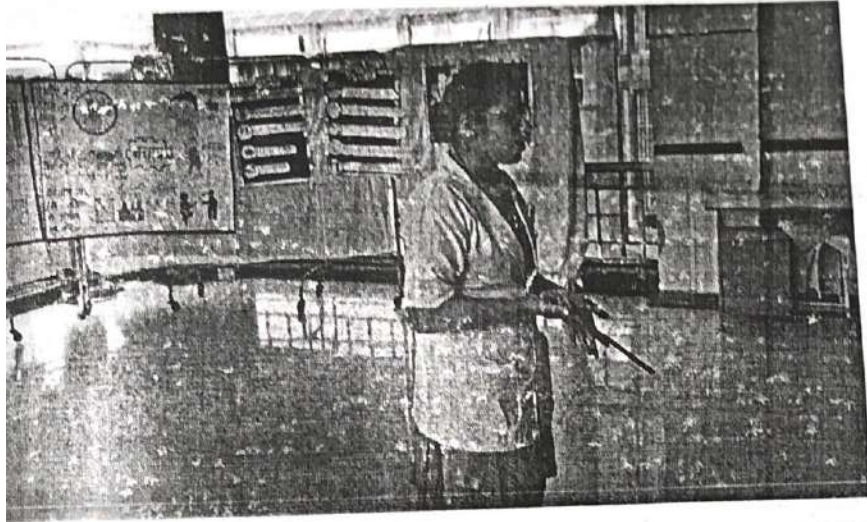
SCENE II

- Ravi: Yar neend b bahot aarhi hai.....yar seema aek glass pani lana....
- Seema: uth gye aap...
- Ravi : haa uth gya....
- Seema: Badi jldi uth gye...
- Ravi: yar kya karo factory mai bht kaam krna pdta hai.... Nend toh aayhgye na....
- Seema: lo pani peelo
- Ramesh: knock knock.... Koye hai ghr py
- Seema : pata nhi koun aagya.....
- Ramesh: namsty babhi ji....
- Seema :namsty....
- Ramesh: ravi ghr py hai....
- Seema: g ghr py hai.....
- Ramesh: ary bhai ravi kya haal chaal, aaj factory nhi chyly ga
- Ravi: Haa chalo ga thodi dair mai

- Ramesh: yar factory ka kaam b na kasm sy, pura din br thakaan rhti hai, ary yar tu phir sy shuru hogye..
- Ravi: kya howa..
- Ramesh: sube sube tu shuru hogya...
- Ravi: kuch nhi hota..
- Ramesh: abhy tuje pata b hai tere choti si bachi hai, tere iss dumar paan krne sy tere bachi py kya prabaav pade ka aur tum py kya prabaav pade ga...
- Ravi: yar kue chik chik kr rha hai, sube sube bewi naankh mai dm k rakha hai aur ab tu b shuru hogya hai, peene dy yaar....
- Ramesh: mai tera dost hou isse liye tumhe samja rha hou..
- Ravi: kuch nhi hota, peene dy...

- Pinki: nhi mai yehi baithu gi..
- Seema: la rhi hou..baya g yeh lo cha pee lo aap, kya aap subh subh shoru hogye cigratte peena, apni beti ki tabiyt ka khayaal rakho..
- Ravi: ary mai iss ko bola yeha sy jany k liye..
- Seema: toh bejo na, baya g aap inn ko samjaav na...
- Ramesh: babhi g mai samja samja k takh gya..
- Seema: baya rouz sube sube shuru hojata hai cigratte peena...
- Ravi: toh aap iss ki debi chupa kue nhi dyty...
- Seema: sunte hi nhi maire baat..
- Ramesh: ravi kise ki toh sunle...
- Ravi: kue dimaag kharaab kr rhe ho sube sube..
- Ramesh: acha ravi factory py milta hou kl...
- Ravi: theeq hai..

CHART EXPLANATION



- Doctor: aap k pate ko phephdu [lungs] ka cancer hogya hai, hame unka lamba ilaaj chalana pade ga..
- Ramesh: yeh baat aap ny ravi ko bataye toh nhi...
- Doctor: nhi
- Ramesh: unko iss k bare mai nhi batana...
- Seema: woh theeq toh hojaye gy na...
- Doctor: g who theeq houngy par lamba ilaaj chaly ga,, aur hame unko cigratte peene sy rookhna hai.
- Seema: hame aun ko dakl krna pade ga,,
- Doctor: nhi dakl toh nhi krna pade ga, aur hame aunko cigratte peeny sy rookna pade ga warna cancer dousry phephday mai b phounch jaye ga...

- Nurse: aap ko pata hai yeh kya hai, yeh aek cigratte hi nhi hai, yeh aek chl ti phrti mout hai, aap ko pata hai is ki waja sy sirf aap ko hi nhi aap, k ghr walou ko b tkleef howe hai, aap ko dyaan rakhna chahiyeh.....
- Nurse: acha aap din mai kitne cigratte pete hai..
- Ravi: yehi kuch 1-2 debeya
- Doctor: kya 1-2 debeya, aap ko pata hai iss py aap ki syht pai kya asr pdta hai....
- Ravi: kya karou choutti nhi hai...
- Doctor: aap apni aur apni bete ki kuch test krwali jiyeh....
- Ravi: doctor sahab yeh report aagye hai...
- Doctor: aap apne dost ko bolayeh...
- Ravi: kaha py hai who, yehi py dakhl kr waya tha...

INCHARGES OF THE GROUP PROJECT

- ✓ TEACHER INCHARGE: Ms. Shikha and Ms. Harmeet Kaur
- ✓ GROUP LEADER: MS Simran and Mr Sandeep
- ✓ LESSON PLAN: Ms Thinley and Ms Stanzin
- ✓ INVITATION CARDS: Ms Simran , Ms Anjali
- ✓ AV AIDS; Mr Susheel, Ms Shalu, Ms Anjali, Ms Samantha, Ms Shubangi, Ms Sushri, Ms Swati, Ms Simran, Mr Rohan, Mr Yam, Mr Suraj.
- ✓ SCRIPT WRITTING: Mr Rohit and Ms Tamana
- ✓ NARRATOR: Mr Tarun
- ✓ ROLE PLAY: Mr Rajat, Mr Rohan, Mr Rohit, Ms Ruby, Mr Tarun, Ms Ruchika, Ms Tamana, Ms Simran
- ✓ CHART EXPLANATION: Mr Rohit, Ms Ruchika, Mr Tarun
- ✓ REPORT WRITING: Mr Kamran, Mr Gazanfar
- ✓ REFRESHMENT: Mr Vishal, Ms Satwant, Mr Sukhpreet
- ✓ ARTICLES: Mr Oyeas , Mr Sahil

MM COLLEGE OF NURSING
MULLANA, AMBALA

REPORT ON WORLD EPILEPSY DAY



Epilepsy
Awareness

A Day For Epilepsy Awareness



74/100

Checked
Vinay Kumari

SUBMITTED TO

Dr. (Mrs.) Vinay Kumari

H.O.D

Medical Surgical Nursing

SUBMITTED BY

MSN Speciality students

Msc.Nursing.2ND year

Date of submission: - 05.11.2018

GROUP PROJECT

Date of group project- 5th /November/2018

Venue-Corridor of medicine ward

Time-10:30 am

Organizers- M.Sc. (N) 2nd year students of Medical Surgical Nursing

1. Kajal nameirakpam
2. Neha Thakur
3. Shabnam sharma
4. Shakuntala devi
5. Shilpa
6. Shiwani Kadyan
7. Sosunika hijam

Topic of group project- "WORLD EPILEPSY DAY"

Narrator-Ms. Shivani Kadyan

Characters in role play- kajal (teacher), Neha (patient), Shabnam sharma (nursing student), Shakuntala (housewife,mother), Shilpa (father), Shiwani (baba), Sosunika (doctor),

Audience- Patients and family members (35).



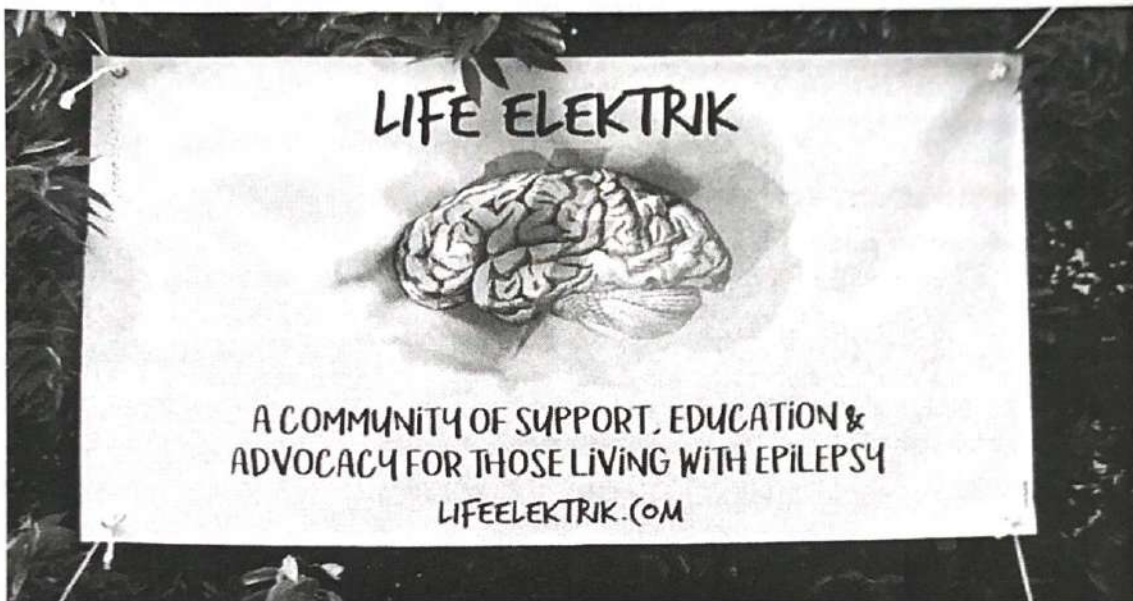
INTRODUCTION:

WORLD EPILEPSY DAY

In India, November 7 is observed every year as National Epilepsy Day to create awareness about epilepsy. Epilepsy is a chronic disorder of brain characterized by recurrent 'seizures' or 'fits'. The seizures are caused as a result of sudden, excessive electrical discharges in the neurons (brain cells). The condition can affect people at any age and each age group has unique concerns and problems.

According to World Health Organization (WHO), about 50 million people have epilepsy across the world, out of which 80 percent people are living in developing countries. Although epilepsy is treatable, yet three-fourth of affected people in developing countries does not receive the required treatment. In India, about 10 million people suffer from seizures associated with epilepsy.

THEME (2018):- LIFE IS BEAUTIFUL



OBJECTIVE:

- To increase the knowledge regarding Epilepsy.
- To make people aware about common myths and misconception of epilepsy.
- To teach the causative factors, sign and symptoms of epilepsy.
- To teach the management of epilepsy.
- To educate the people regarding facts of epilepsy.

PLANNING:

- The group project was organized to more people aware about the causes, sign and symptoms, treatment of Epilepsy.
- So in order to teach this a role play was organized.
- Students gave message that how Epilepsy occurs and how it can be treated by the help of charts and role play.

ORGANIZERS:

Group project was conducted by M.sc Nursing 2nd Year, (Medical Surgical Nursing) students. The group project was prepared under the guidance of Dr. Vinay Kumari H.O.D & Professor (Medical Surgical Nursing).

ORGANIZATION:

Following activities were carried out at MMIMS&R hospital.

ACTIVITIES CARRIED OUT:

- Role play.
- Health education.
- Refreshment of patient and patient's attendants.

INVITATION:

We invited all the staff members of MMCON and Nursing Superintendent of MMIMS&R hospital on the occasion of WORLD EPILEPSY DAY. (Annexure 1)

SCRIPT

Characters in role play

- Shiwani – Narrator, Baba
- Shabnam – Nursing student
- Sakuntala – Housewife, mother
- Shilpa – Father
- Kajal – Teacher
- Neha Thakur – Patient
- Sosunika - Doctor



Narrator – Chaliye aj hum apko ek laghu natika ke dwara mirgi ke bare mai btayenge.

Classroom– vidyarthi baithe hain aur adhyapika kaksha me aati hai.

Students – khade hokar kehte hain good morning mam

Teacher – bacho ko baithne k liye kehti hai aur puchti hain ki kal humne kya pada tha

Students –sabne jawab diya sivaye neha ke- mam kal humne cells pade the

Teacher- neha se puchti hai ki kal humne kya pada tha? bahut der puchne tak bhi neha koi jawab nhi deti hai fir teacher ko gussa ata hai aur wo uske pas jake dobara puchti hai neha kal mene kya pdhya tha?

Neha- hanji mam, kya pucha apne? (bikul besudh hokar)

Teacher- Neha ke jawab na dene par adhyapika ne neha ko kaksha se bahar nikalne ko kaha.



Ghar ke kamre me – neha phone dekh rahi thi , baithi hui neha ko maa awaj lagake school jane ko kehti hai, par neha koi jawab nahi deti hai. Fir uski maa uske paas jati hai aur neha ko thoda hilati hai tabhi neha neeche gir jati hai aur uske hath pair kanpne lagte hain. Itne me neha ki maa neha ke pita ko ghabra kar awaj lagati hai.



Pita – are ye meri beti ko kya ho gya? Ye theek to hai na ye kuch bol kyu nahi rahi, ye behosh kaise ho gyi. humari beti pe kahi koi chudail ya dayan ka saya to nahi hai.

Neha ki Maa- ye kamre me baithi thi maine ise awaj lagai ki school chali ja kafi der tak isne kuch jawab nahi diya fir mai iske paas gyi aur ise hilaya tabhi ye neeche gir gayi. Ek din iski adhyapika ne bhi bataya tha ki ye kbhi kabhi ekdum se gumsum ho jati hai aur kaksha me bhi koi jawab nahi deti hai. Suniye mere mayke me ek baba ji hain jo iska ilaj karte hain hum subah hi waha chalte hain.



Baba ke paas- Neha ke mata pita baba ko namaskar karte hain aur neha ki dasa ke bare me batate hain

Baba- neha ko babut deta hai khane ke liye aur kehta hai isko raat ko 11:52 par dena hai aur jab bhi ise chudail aye to ise ye babut khila dena. Ab kuch dakshina daan peti me daal dijiye.



Neha ke mata pita- waha se babuti lekar chale jate hain

Maa- chai lekar neha ke paas jati hai aur dekhti hai ki neha fir se neeche giri hui thi aur uske hath pair karnpe lagte hain. maa fir neha ke pita ko awaj lagati hai aur use baba ka babut dene ko kehti hai.

Neha ki bua ki ladki (Nursing student) – are fufa ji ye neha ko kya ho gya ye behosh kyu hai aur apne ise itna jakad ke kyu rakha hai.

Neha ki Maa- beta ye ekdum se aise hi behosh ho jati hai to humare yaha se mai ek baba se babut lekar ayi thi unhone bataya ki isme chudail ka saya hai agar ise ye babut doge to ye bilkul theek ho jayegi.

Nursing student- are nahi nahi ye baba kuch nahi hota yeh ek tarah ki bimari hoti hai jaise ki apko pata hai ki mai nursing ki chatra hu aur mujhe pata hai ki aise bahut se mareej humare aspatal me bhi ate hain aur maine aise bohot se mareejo ko bhi dekha hai sabse pehle to ap ise dheela chod dijiye iske hatho ko jakadiye mat.

Neha ke pita- are nahi beta tum kya kehna chahti ho humari beti pagal hai? ye theek hai aur ye baba ke babut se theek ho jayegi.

Nursing student – are nahi nahi fufaji maine ye nahi kaha ki ye pagal hai ye sirf ek bimari hai jo ki doctor ko dikhane se hi theek hogi.

Neha ke pita- theek hai hum ise kal hi aspatal leke challenge.



Hospital- neha ko aspatal leke ate hain jaha doctor neha aur uske mata pita se uske pichle dore ke bare me puchte hain aur kuch janch karwane ko kehte hain.

Neha ke mata pita- jaanch karwane ke liye chale jate hain aur kuch der baad report leke ate hain.

Doctor- report dekhne ke baad neha ke mata pita se kehte hain ki apki beti ko mirgi ka dora padta hai jiski wajah se apko agli baar se dhyan dena hai ki isko dore ke samay koi bhi nokili cheez iske muh me nahi dalni hai aur ise jakad ke nahi rakhna hai ise dheela chod dena hai aur ise lagatar jaanch ke liye leke ana hai aur samay se dawaiyan deni hai jisse ye jaldi hi theek ho jayegi

Neha ke mata pita- dhanyawad doctor sahab hume samjh aa gya hai ki hume iska ilaj doctori salah lekar hi karwana chahiye tha apka bahut bahut dhanaywad.



CONTENT:

World Epilepsy Day 2018: Life is beautiful

INTRODUCTION:

Epilepsy is a central nervous system (neurological) disorder in which brain activity becomes abnormal, causing seizures or periods of unusual behavior, sensations, and sometimes loss of awareness.

Anyone can develop epilepsy. Epilepsy affects both males and females of all races, ethnic backgrounds and ages.

Treatment with medications or sometimes surgery can control seizures for the majority of people with epilepsy. Some people require lifelong treatment to control seizures, but for others, the seizures eventually go away. Some children with epilepsy may outgrow the condition with age.

The seizures in epilepsy may be related to a brain injury or a family tendency, but often the cause is completely unknown. The word "epilepsy" does not indicate anything about the cause of the person's seizures or their severity.

SEIZURES:

A seizure, technically known as an epileptic seizure, is a period of symptoms due to abnormally excessive or synchronous neuronal activity in the brain. Outward effects vary from uncontrolled

shaking movements involving much of the body with loss of consciousness (tonic-clonic seizure), to shaking movements involving only part of the body with variable levels of consciousness (focal seizure), to a subtle momentary loss of awareness (absence seizure). Most of the time these episodes last less than 2 minutes and it takes some time to return to normal. Loss of bladder control may occur.

Seizures may be provoked and unprovoked. Provoked seizures are due to a temporary event such as low blood sugar, alcohol withdrawal, low blood sodium, fever, brain infection, or concussion. Unprovoked seizures occur without a known or fixable cause such that ongoing seizures are likely. Unprovoked seizures may be triggered by stress or sleep deprivation. Diseases of the brain, where there has been at least one seizure and a long term risk of further seizures, are collectively known as epilepsy. Conditions that look like epileptic seizures but are not include fainting, non epileptic psychogenic event, and tremor.

A seizure that lasts for more than a brief period of time is a medical emergency. Any seizure lasting longer than 5 minutes should be treated as status epilepticus. A first seizure generally does not require long term treatment with anti-seizure medications unless a specific problem is found on electroencephalogram (EEG) or brain imaging. Typically it is safe to complete the work-up following a single seizure as an outpatient. In many, with what appears to be a first seizure, other minor seizures have previously occurred.

CAUSES:

Epilepsy has no identifiable cause in about half the people with the condition. In the other half, the condition may be traced to various factors, including:

- **Genetic influence.** Some types of epilepsy, which are categorized by the type of seizure we experience or the part of the brain that is affected, run in families. In these cases, it's likely that there's a genetic influence.

Researchers have linked some types of epilepsy to specific genes, but for most people, genes are only part of the cause of epilepsy. Certain genes may make a person more sensitive to environmental conditions that trigger seizures.

- **Head trauma.** Head trauma as a result of a car accident or other traumatic injury can cause epilepsy.
- **Brain conditions.** Brain conditions that cause damage to the brain, such as brain tumors or strokes, can cause epilepsy. Stroke is a leading cause of epilepsy in adults older than age 35.
- **Infectious diseases.** Infectious diseases, such as meningitis, AIDS and viral encephalitis, can cause epilepsy.

- **Prenatal injury.** Before birth, babies are sensitive to brain damage that could be caused by several factors, such as an infection in the mother, poor nutrition or oxygen deficiencies. This brain damage can result in epilepsy or cerebral palsy.
- **Developmental disorders.** Epilepsy can sometimes be associated with developmental disorders, such as autism and neurofibromatosis.

RISK FACTORS:

Certain factors may increase our risk of epilepsy:

- **Age.** The onset of epilepsy is most common in children and older adults, but the condition can occur at any age.
- **Family history.** If a person has a family history of epilepsy, he may be at an increased risk of developing a seizure disorder.
- **Head injuries.** Head injuries are responsible for some cases of epilepsy. We can reduce our risk by wearing a seat belt while riding in a car and by wearing a helmet while bicycling, skiing, riding a motorcycle or engaging in other activities with a high risk of head injury.
- **Stroke and other vascular diseases.** Stroke and other blood vessel (vascular) disease can lead to brain damage that may trigger epilepsy. We can take a number of steps to reduce our risk of these diseases, including limiting intake of alcohol and avoiding cigarettes, eating a healthy diet, and exercising regularly.
- **Dementia.** Dementia can increase the risk of epilepsy in older adults.
- **Brain infections.** Infections such as meningitis, which causes inflammation in your brain or spinal cord, can increase your risk.
- **Seizures in childhood.** High fevers in childhood can sometimes be associated with seizures. Children who have seizures due to high fevers generally won't develop epilepsy. The risk of epilepsy increases if a child has a long seizure, another nervous system condition or a family history of epilepsy.

SYMPTOMS:

Because epilepsy is caused by abnormal activity in the brain, seizures can affect any process in the brain. Seizure signs and symptoms may include:

- Temporary confusion
- A staring spell
- Uncontrollable jerking movements of the arms and legs
- Loss of consciousness or awareness
- Psychic symptoms such as fear, anxiety

Symptoms vary depending on the type of seizure. In most cases, a person with epilepsy will tend to have the same type of seizure each time, so the symptoms will be similar from episode to episode.

Focal seizures

When seizures appear to result from abnormal activity in just one area of your brain, they're called focal (partial) seizures. These seizures fall into two categories:

Symptoms of focal seizures may be confused with other neurological disorders, such as migraine, narcolepsy or mental illness. A thorough examination and testing are needed to distinguish epilepsy from other disorders.

Generalized seizures

Seizures that appear to involve all areas of the brain are called generalized seizures. Six types of generalized seizures exist.

DIAGNOSIS:

- **A neurological exam.** It includes testing of our behavior, motor abilities, mental function and other areas to diagnose your condition and determine the type of epilepsy we may have.

There are also certain tests to detect brain abnormalities, such as:

- **Electroencephalogram (EEG).** This is the most common test used to diagnose epilepsy. In this test, electrodes are attached to our scalp. The electrodes record the electrical activity of your brain.

If we have epilepsy, it's common to have changes in our normal pattern of brain waves, even when we're not having a seizure. Monitoring on video while conducting an EEG to record any seizures may help the doctor determine what kind of seizures we're having or rule out other conditions.

- **High-density EEG.** In a variation of an EEG test high-density EEG may be recommended, which spaces electrodes more closely than conventional EEG — about a half a centimeter apart. High-density EEG may help us more precisely determine which areas of your brain are affected by seizures.
- **Computerized tomography(CT) scan.** A CT scan uses X-rays to obtain cross-sectional images of our brain. CT scans can reveal abnormalities in our brain that might be causing our seizures, such as tumors, bleeding and cysts.

- **Magnetic resonance imaging (MRI).** An MRI uses powerful magnets and radio waves to create a detailed view of our brain. It will be able to detect lesions or abnormalities in our brain that could be causing our seizures.
- **Functional MRI (fMRI).** A functional MRI measures the changes in blood flow that occur when specific parts of our brain are working. Doctors may use an fMRI before surgery to identify the exact locations of critical functions, such as speech and movement, so that surgeons can avoid injuring those places while operating.
- **Positron emission tomography (PET).** PET scans use a small amount of low-dose radioactive material that's injected into a vein to help visualize active areas of the brain and detect abnormalities.

TREATMENT:

Treatments generally begin with medication. If medications don't treat the condition, surgery or another type of treatment can be done.

Medication: Most people with epilepsy can become seizure-free by taking one anti-seizure medication, which is also called anti-epileptic medication. Others may be able to decrease the frequency and intensity of their seizures by taking a combination of medications.

Many children with epilepsy who aren't experiencing epilepsy symptoms can eventually discontinue medications and live a seizure-free life. Many adults can discontinue medications after two or more years without seizures.

For 70% of patients with epilepsy, drugs can control seizures. However, they can't cure epilepsy, and most people will need to continue taking medications. The type of medication prescribed will also depend on several factors specific to each patient, such as side effects can be tolerated, other illnesses he or she may have, and which delivery method is acceptable.

SURGERY: When medications fail to provide adequate control over seizures, surgery may be an option. With epilepsy surgery, a surgeon removes the area of our brain that's causing seizures.

The type of surgery depends on the type of seizures where in our brain they start.

Lobe resection: The largest part of your brain, the cerebrum, is divided into four sections called lobes: the frontal, parietal, occipital, and temporal lobes. Temporal lobe epilepsy, in which the seizure focus is within our temporal lobe, is the most common type in teens and adults. In a temporal lobe resection, brain tissue in this area is cut away to remove the seizure focus. Extra temporal resection involves removing brain tissue from areas outside of the temporal lobe.

Corpus callosotomy: The corpus callosum is a band of nerve fibers connecting the two halves (called hemispheres) of our brain. In this operation, which is sometimes called *split-brain surgery*, it cuts the corpus callosum. This stops communication between the hemispheres and prevents the spread of seizures from one side of our brain to the other. It works best for people with extreme forms of uncontrollable epilepsy who have intense seizures that can lead to violent falls and serious injury.

Vagus nerve stimulation (VNS): A device put under your skin sends an electronic jolt to the vagus nerve, which controls activity between our brain and major internal organs. It lowers seizure activity in some people with partial seizures.

THERAPIES: Apart from medications and surgery, these potential therapies offer an alternative for treating epilepsy

- **Ketogenic diet.** Some children with epilepsy have been able to reduce their seizures by following a strict diet that's high in fats and low in carbohydrates.

In this diet, called a ketogenic diet, the body breaks down fats instead of carbohydrates for energy. After a few years, some children may be able to stop the ketogenic diet — under close supervision of their doctors — and remain seizure-free.

Side effects of a ketogenic diet may include dehydration, constipation, slowed growth because of nutritional deficiencies and a buildup of uric acid in the blood, which can cause kidney stones. These side effects are uncommon if the diet is properly and medically supervised.

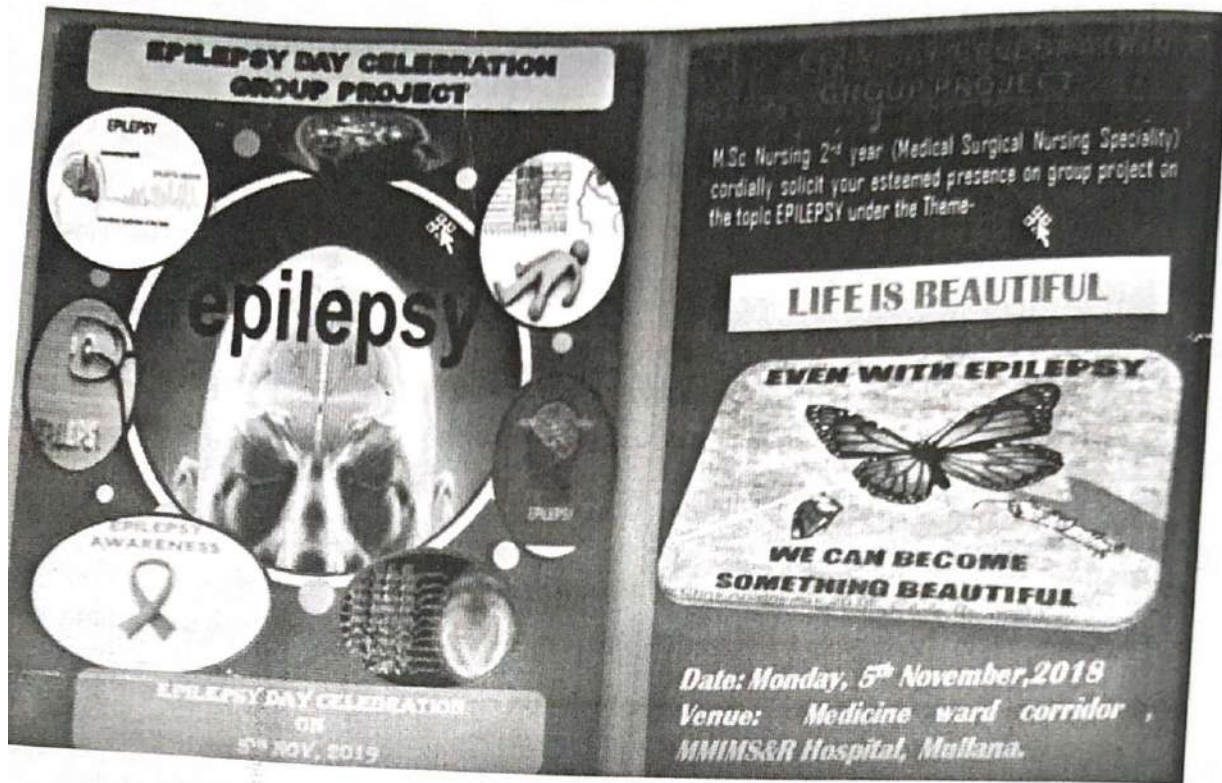
Following a ketogenic diet can be a challenge. Low-glycemic index and modified Atkins diets offer less restrictive alternatives that may still provide some benefit for seizure control.

- **Deep brain stimulation.** In deep brain stimulation, surgeons implant electrodes into a specific part of our brain, typically the thalamus. The electrodes are connected to a generator implanted in our chest or our skull that sends electrical pulses to our brain and may reduce seizures.

CONCLUSION:

As we conclude that, today we performed a role play here. The main purpose of this role play is to provide the knowledge to people about the epilepsy, its causes, signs & symptoms, what all test are there to perform to diagnose epilepsy issues and its treatment. We even provide knowledge regarding the life style modifications which can help to prevent from the epilepsy disease.

ANNEXURE- 1



To
The Nursing Superintendent
M.M.I.M.S.R
Mullana, Ambala

Date: 2/11/18

Subject :- Seeking permission regarding conduction of Group project (Role play) on "World Epilepsy Day".

Respected Madam,

With due respect we want to state that we, the students of MSc. Nursing 2nd year of Medical- Surgical Nursing (Neuroscience nursing) Department are going to organize a group project (role play) on "World Epilepsy Day" on 5th November, 2018 at 10:00 am to 11:30 am in Medicine 'A' block corridor. We would like to request you to kindly allow us organize our group project with the participation of patients and their attendants.

Also you are cordially invited to this occasion. And, we will be grateful if you kindly allow us.

Thanking you

Yours sincerely
MSc. Nursing 2nd year students
Medical Surgical Nursing (Neuroscience nursing)
M.M. College of Nursing

[Handwritten signature]
2/11/18

[Handwritten signature]
Dr. (Mrs.) Jyoti Sarin
PRINCIPAL
Maharishi Markandeshwar College of Nursing
Maharishi Markandeshwar (Deemed to be University)
Mullana-Ambala, Haryana-India, 133007

M.M. COLLEGE OF
NURSING

MEDICAL SURGICAL NURSING-II

GROUP PROJECT REPORT
ON
ALZHEIMER'S DISEASE

SUBMITTED TO:

Ms. Kanika

(Associate professor)

SUBMITTED BY:

B.Sc Nursing 3rd year

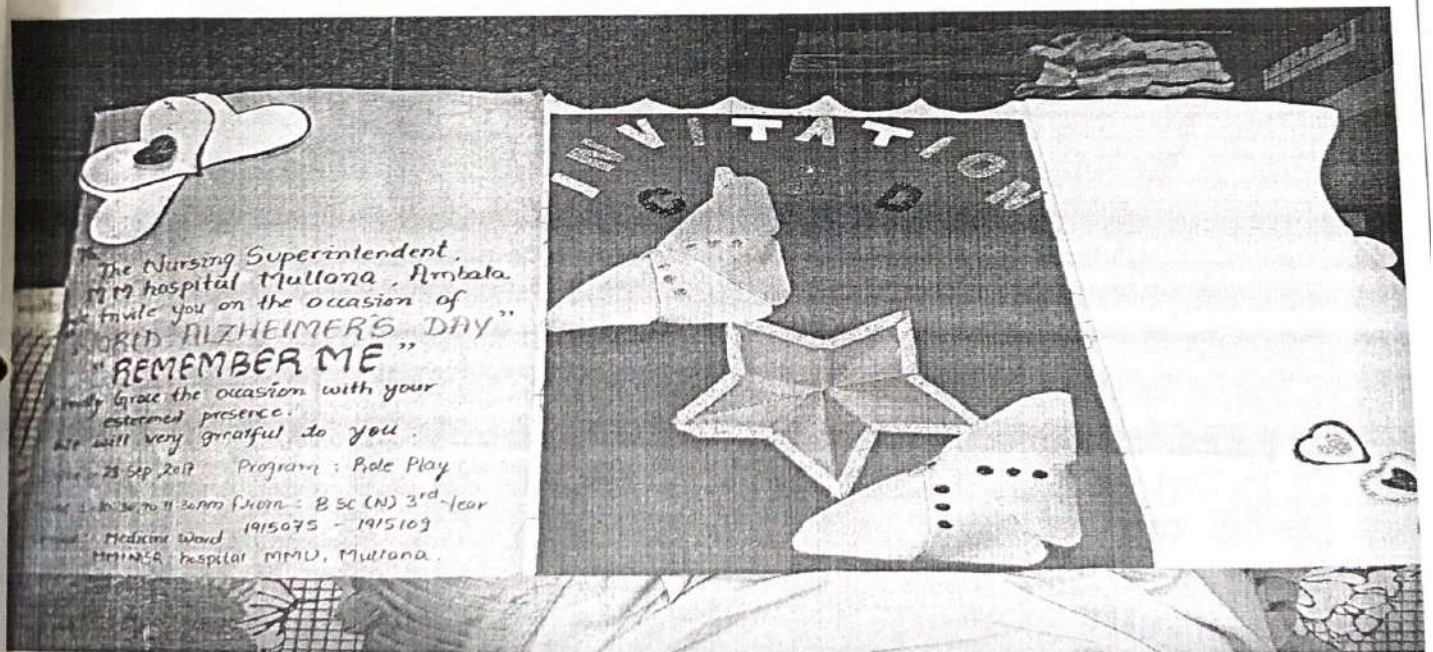
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*Innovation Card
+ C.D
+ Photograph*

*Checked
Kanika*

INTRODUCTION

We are students of B.Sc nursing 3rd year had performed a group project at MMIMS&R Hospital on 28-09-2017 on 'World Alzheimer's Disease'. The theme of the play was "REMEMBER ME". The supervisor of the play was Ms. Kanika (Associate professor) and Ms. Aman (Nursing Tutor). The invitation was given to the principal and all the faculty members of the M.M. College of Nursing and the Nursing Superintendent of MMIMS&R.



OBJECTIVES

- ***To create awareness among people regarding the disease.***
- ***Teach them regarding the management of disease for the people suffering.***

INCHARGES OF GROUP PROJECT

- Group leader: Ms Sandeep kaur
- Lesson Plan: Ms. Kusum & Ms. Anmol
- Articles: Mr. Shwet & Mr. Yashvir
- Invitation Card : Ms Shabnam
- A.V Aids: Ms. Pinky, Ms. Prabhjot, Ms. Nitika, Ms. Shalin Thakur, Ms. Vini, Ms. Prerna, Ms. Ridhi , Ms. Priyanka, Ms. Priyanka Chandel, Ms. Sonia, Ms. Sonia Rani
- Script Writing: Ms. Prerna, Ms. Ridhi
- Narrator: Ms. Prerna Tayagi
- Role Play: Mr. Tushar, Ms. Ridhi, Ms. Sonia, Ms. Saila, Ms. Pariyanka , Ms. Banza, Ms. Shabnam , Ms. Ramaneet, Ms. Sharanjeet kaur, Ms. Kusum, Ms. Pooja, Ms. Pinky, Ms. Nitika
- Chart explaining: Ms. Sharanjeet kaur, Ms. Sonia yadav, Ms. Prerna Tayagi
- Report Writing: Ms. Sharanjeet Kaur, Ms. Ramaneet Kaur
- Refreshment: Mr. Shakti Dangi

ROLE PLAY

DATE: 28-09-2017

VENUE: MMISM&R

LANGUAGE: HINDI

THEME: 'REMEMBER ME'

A Display of story is based on a family in which a person is already suffering from the Alzheimer's Disease and the person is showing the sign & symptoms of the disease but the family members were unable to understand the problem and later on when the symptoms become severe then they decided to consult a nurse and took them to a camp organized by M.M. college of nursing and educate them about the disease, its causes and about its management.

MEMBERS

- ***Tushar: Radhesham(old patient)***
- ***Sonia: Rakesh (patient's son)***
- ***Ridhi: Sunita (Patient's daughter in law)***
- ***Pooja & Sayla: Pinki & Chinki (patient's grandchildren)***
- ***Banza & Kusum: Ramu & Kashi (Patient's friends)***
- ***Priyanka & Shabnam: Strangers***
- ***Ramneet kaur: Rekha (Patient's Daughter)***
- ***Sharanjeet kaur: Nurse***

SCRIPT OF THE ROLE PLAY

SCENE :1(HOME)

- **Sunita:** Ajji sunte ho?subah subah itna kaam ho jata h. sb kuch mujhe akele karna padta h.koi hath bataaney vala nhi h.
- **Rakesh:** bta mein kr deta hu koi kaam!
- **Sunita:** baccho k school ka time ho gya h, unhe jakr utha do
- **Rakesh:** accha theek h jata hu.
- **Radheyshaam:** bahuu!!
- **Sunita:** ji pita ji.
- **Radheyshaam:** subah ki chae deni h ya nhi aaj?
- **Sunita:** chae?? abhi toh pee thi chae .
- **Radheyshaam:** tune nhi banani toh rehne de, jhut mat bol
- **Sunita :** Nhi mein jhut nhi bol rhi
- **Radheyshaam:** chup kr tu, Rakesh!!
- **Rakesh:** ji pita ji kyu subah subah shor kr rahe ho?
- **Radheyshaam:** teri Bahu mujhe chae nhi de rhi.
- **Sunita:** Ji 2 baar pee chuke h aur keh rahe h ki ek baar bh nhi pee.
- **Rakesh:** tu ek baar aur bna de.
- **Sunita:** ji theek h.jaati hu.
- **Chinky:** daadu! aap kya kr rhe ho?
- **Radheyshaam:** mein ek sawaal hal kr raha hu akhbaar Pta nhi ho hi nhi raha.

- Chinky: aap toh pehle ye bahut ache se kr lete the .ab kyu nhi ho raha?
- Pinky: mummy ! mummy! Mein tayar ho gyi school k liye chlo chodne jaldi vrna late ho jayenge.
- Sunita: beta mein nhi ja sakti mujhe bahut kaam h, pr ruk mein dekhti hu.
- Sunita: pita ji !baccho ko school chod aaoge?
- Radheyshaam: haan theek h jata hu.
- Pinky: nhi mummy! Hum nhi jayenge dada ji k saath
- Sunita: kyu? Kya hua.
- Chinky & Pinky: ihne kuch yaad toh rehta nhi h, kon c gali me mudna h. Parso bhi hum late school pahunche the.
- Sunita: accha!! Pr beta mein toh nhi chl sakti apne papa se puch lo.
- Chinky & Pinky: Papa aap chlo hume school chodne
- Rakesh: accha theek h, mein tayar ho raha hu. Chalta hu
- Sunita: ji aap tayar ho gye ho toh baccho ko school chodte jana
- Rakesh: accha jata hu
- Sunita: ye lo pita ji aapki chae , tisri baar bnagr de rhi hu. Ab mat bhulna.
- Radheyshaam: jaa.. jaa..
- Sunita: kuch yaad toh rehta nhi, mujh pr ilzaam lga rhe ho.

Scene: 2(playing cards with friends)

- Raamu: aurradheyshaam kya haal h?
- Radheyshaam: badiya, tum sunao
- Kaashi: aaja beth patte khelte h.
- Radheyshaam: accha theek h toh shuru kro
- Kaashi: arey bhai kaha dhayan h apni baari chl
- Radheyshaam: acha meri bari h?
- Kaashi : haan! Kaha dhayan h. ab tune do baar apni baari chl di .ab meri baari thi
- Radheyshaam: accha mujhe dhayan nhi tha.
- Kaashi: dhayan se khel
- Radheyshaam: le mein jeet gya
- Kaashi: itni jaldi kaise jeet gya? Dikha patte.
- Radheyshaam: bs jeet gya. Le dekh le.
- Kaashi: arey tujhse ache pattey toh mere paas h. tera dimaag fir gya h kya? Paatey milana bhul gya
- Radheyshaam: chl-chl mein nhi khelta mein jar aha hu. Mujhe kaam h
- Kaashi: arey beth ja theek se khel le
- Radheyshaam: mein nhi khelta
- Kaashi: ye toh sathiya gya h, Iska dimaag kharab ho gya h.

SCENE-3 (HOME)

- Sunita: Arey baccho k school jaane ka time ho gya h. Pita ji!
Pita ji
- Radheyshaam: haan bol bahu

- Sunita: kuch kaam nhi kr rahe toh bacho ko school se hi le aaoge?
- Radheyshaam: haan chla jaata hu meri thodi sair bhi ho jayegi
- Sunita : kya dhundh rhe ho pita ji?
- Radheyshaam: bahu !mere chashme nhi mil rhe
- Sunita: dekho vahi mej pr rakha hoga
- Radheyshaam: nhi mil rhe tu dhundh kr de
- Sunita: arey ye toh rahe aapke sir pr. Kuch yaad nhi rehta aapko
- Radeyshaam: accha mein jata hu
- Sunita: dhayan se jana

SCENE-4 (WAY TO SCHOOL)

- Stranger 1: arey baba dekhkr chalo
- Stranger 2:baba kaha ja rhe ho aap?
- Radheyshaam: mein shayad mandir ja raha hu.
- Stranger 2: pr iss taraf toh koi mandir nhi h
- Radheyshaam: toh fir shayad ghr ja raha haunga
- Stranger 2: aapka ghr bhi iss taraf nhi h , chlo hum aapkc aapke ghr tak chod aate h.
- Radgeyshaam: aapko pta h mera ghr kaha h?
- Stranger 1: haan! Mera aana jana h sunita bhabi k ghr
- Radheyshaam: chlo theek h

AT HOME

- Radheyshaam: Bahu ! dekho kon aaya h
- Stranger 1: Namaste bhabi ji
- Sunita : Namaste didi.. aap yaha pita ji k saath kaise?
- Stranger 2: ji ye hume bahar mile. Raasta bhul gye the isliye hum inhe le aaye. Ab hum chalet h
- Sunita: acha did dhanyawaad aapka,,, pita ji bacche kaha h?
- Radheyshaam: bacche ! khel rhe honge.
- Sunita: Kaha khel rhe honge. Meine aapko school bheja tha bacho ko laane
- Radheyshaam: arey haan mein toh bacho ko lane gya tha, bahar jaakr bhul gya
- Sunita: haaye ram! Aaj toh had ho gyi pita ji baccho ko bhul aaye?

SUNITA CALLED RAKESH

Rakesh: Hello! Ha sunitabol

Sunita: ji aap jaldi ghraao, aaj toh pita ji ne had kr di

Raksh: kyu? Kya hua

Sunita: meine baccho ko school se lane bheja tha pita ji ko,, bhul gye unko laana aur khud ko bhi padosi ki ladkichod kr gyi h ghr.

Rakesh: acha tu chinta na kr mein aa raha hu, aur bacho ko bhi le aaunga school se

Sunita: haan jaldi aa jao!!

SCENE-5 (HOME)

- Rakesh: Sunita! Kaha h? mein baccho ko le aaya.
- Pinky & Chinky: Mummy! Mummy! Hume bhook lagi h jao khana do.
- Sunita: haan beta tum muh haath dhokar kamre me jao me khana lekr aati hu.
- Pinky: mummy ab hum nhi jayenge kahin daadu k saath
- Sunita: koi baat nhi beta mein bhejungi bhi nhi.
- Rakesh: Sunita yaad h na aaj Rekha aane vaali h?
- Sunita : ji haan yaad h , ab inki beti aa jayegi vahi sambhaleg apne pita ji ko
- Rakesh: haan , theek h

Knok knok

- Sunita: aayi! Kon h?....., Arey Rekha..aa gyi tum. Aao andr aao
- Rekha: Namaste Bhabhi g kaisi ho?
- Sunita: mein achi hu, le paani pee, tum batao kaisi ho?jo tumhare pita ji andr h jakr mil aao
- Rekha:Namaste pita ji kaise ho?
- Radheyshaam: haan surekha theek hu beta tu bta?
- Sunita: dekh le tera naam bhi yaad nhi h inko
- Rekha: Kya hua bhabhi ? kya baat h?
- Sunita: kya batau, mein bahut preshan ho gyi hu pita ji ki haalata se.
- Rekha: kyu kya hua h?

Sunita: inhe kuch yaad nhi rehta thodi der pehle hui cheez bhi bhul jaate h, aaj toh baccho ko school se laana bhi bhul gye the aur toh aur ghr ka raasta bhi bhul gye.

Rekha: acha ye toh bahut badi baat h, kb se ho raha h ye sb?

Sunita: Bahut time ho gya h, mein toh bahut preshan ho gyi hu kuch ilaaz krva inka.

Radheysaam: Mujhe kuch nhi hua koi ilaaz nhi krvana mujhe.

Rekha: bhabhi mei ek saheli nurse h mein use bulati hu.

Sunita: acha theek h.

REKHA CALLED NURSE

- Sharan: Namaste bhabhi ji, kya hua?
- Sunita: rekha tu inko pitaji ka haal suna mein abhi aati hu.
- Rekha: behan sharan pita ji ko kuch bhi yaad nhi rehta, dekh gakat juraab pehn lete h aur ghr ka raasta bhi bhul jaate h
- Sharan: acha ye sb lakshan toh bhudhaape k saath hone vaali dikkato k karan aate h, inke bare me mm vaalo ne ek camp laya h aao mein aapko vaha lekr chalti hu
- Sunita: acha theek h hum sb jayenge

SCENE – 7 (CHART EXPLANATION)

SCENE -8 (MANAGEMENT)

- Pinku & Chinky: chlo did hum baba ko album dikhate_h
- Radheyshaam: haan beta kya hua?
- Pinky: Dekho dada g mere janamdin ki photo, mein kitni achi lahh rhi hu aur yaad h hume cake bhi khaya tha.
- Raadheyshaam: haan beta , chlo mein thodi der bahar ghum kr aata hun, bahuu meri juraabe de de.
- Sunita: pita ji , almaari k andr aapki juraabe rakhi h, aur ek k andr hi dusri h
- Radheyshaam: acha theek h, mein aata hu thodi der tak.
- Sunita: Rekha! Apne pap k haath pr band baandh de jispr naam , pta aur phn no. likha hua h, taaki ye kahin raasta bhul jaaye, toh sahi ghr pahunch jaaye.
- Rekha: theek h bhabhi ji;
- Sunita: pita ji isey nikalna nhi h
- Radheyshaam: theek h beta!

MESSAGE FROM THE GROUP

MEIN TUMHE BHUL SAKTA HOON!

PR

TUM MUJHE YAAD RAKHNA!

SUMMARY & CONCLUSION

By this role play people get the enough knowledge about the Alzheimer's Disease. It was a knowledgeable and enriching experience as the student we got.



REPORT ON ANAEMIA IN PREGNANCY

‘Swaysth ahar ka sevan karein, sharer ko sehatmand rakhein.’

INTRODUCTION

Under the above stated theme group project was done by B.Sc (Nursing) 4th Year students of M.M College of Nursing, Mullana on 6th October 2018 in Civil Hospital, Ambala City. Under the guidance of Ms. Neha Patyal (Nursing Tutor), Ms. Preety (Clinical Instructor). Ms. Attika (Clinical Instructor).



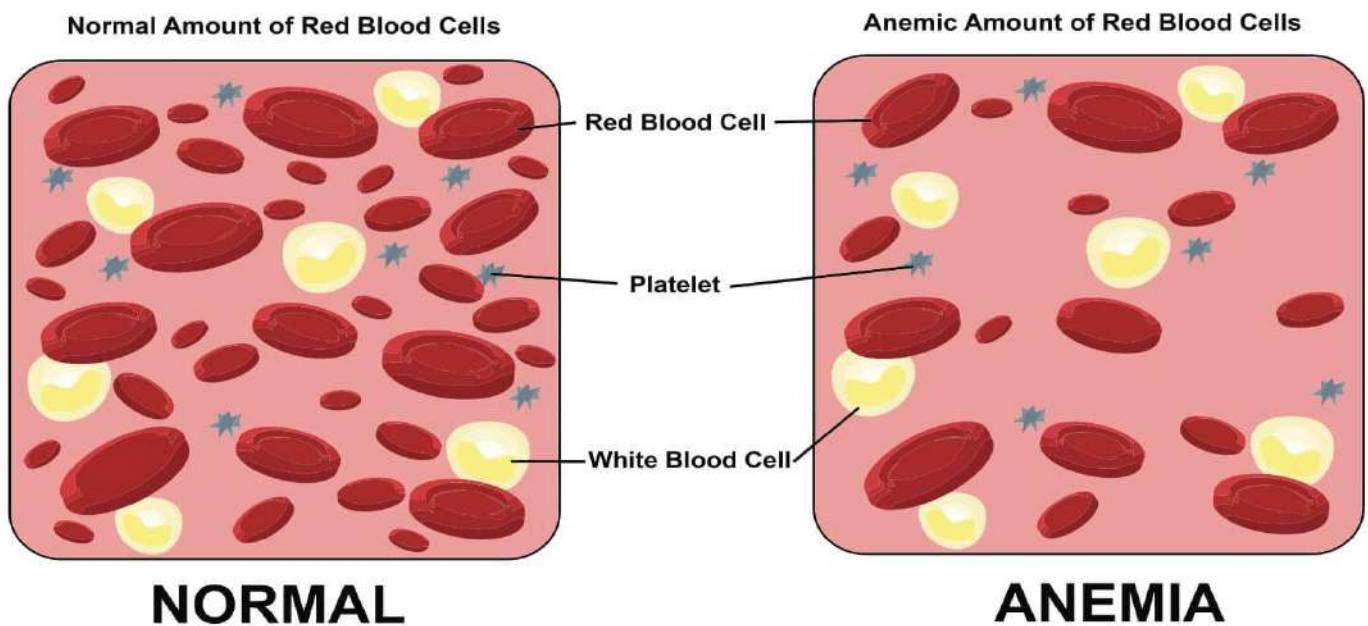
PREGNANCY IN ANAEMIA

Anaemia is a decrease in the total amount of RBC or HB in the blood. Anaemia is present in very high percentage of pregnant women in India.

In India incidence of anaemia during pregnancy has been noted as high as 40-50%.

During **pregnancy**, your body produces more blood to support the growth of your baby. If you're not getting enough iron or certain other nutrients, your body might not be able to produce

the amount of red blood cells it needs to make this additional blood. It's normal to have mild **anaemia** when you are **pregnant**.



AIM OF GROUP PROJECT:

- 1) TO IMPROVE THE KNOWLEDGE REGARDING ANEMIA IN PREGNANCY.
- 2) TO CREATE AWARENESS ANEMIA AMONG THE PEOPLE.

OBJECTIVES OF GROUP PROJECT:

1. To provide knowledge to the public regarding anaemia in pregnancy.
2. To conduct role play on anaemia during pregnancy.
3. To reduce morbidity rate.
4. To educate regarding healthy and balanced diet.

PLANNING

We planned to conduct a group project in Civil Hospital, Ambala City in obstetrical and gynaecology ward on the topic **Anaemia during pregnancy**.

We invited teachers from M.M College of Nursing and staff members from the Civil Hospital, Ambala City.

On 3rd October 2018 we the students B.Sc (Nursing) 4th Year came to college for attendance then we visited Civil Hospital, Ambala City.

Firstly we assessed the suitable place for the role play. Then we arranged the charts on the sheets. Then we arranged the chairs for the teachers and the audience. After that we arranged the necessary things on the stage. Then at 11.00 am we started our role play.



ORGANIZATION

DATE: 06TH OCTOBER 2018

VENUE: Civil Hospital, Ambala City.

LANGUAGE: HINDI

SUPERVISOR: Ms.Neha Patyal (Nursing Tutor)

Ms.Preety (Clinical Instructor)

Ms.Attika (Clinical Instructor).

INCHARGES OF THE GROUP PROJECT:

GROUP LEADER- Damanjeet

CONTENT- Jasdeep

SCRIPT- Gurleen, Anshul, Deepak Rathee

NARRATOR- Damanjeet

INVITATION- Anaya, Ajuni

A.V.AIDS- Aarti, Akriti, Amandeep (5), Amandeep (6), Anjali, Anjana, Anuradha, Deeksha (23), Jasleen (33)

CHARTS EXPLANATION- Ankita, Archana, Deeksha thappa (22)

REFRESHMENT- Goldenjeet, Ashish, Dinesh, Shubham, Simran

BUDGET- Damanjeet

VIDEO AND PHOTOGRAPHY- Hashim, Anshul, Saravjeet

REPORT- Hardeep, Anjali, Anjana

ROLE PLAY- Bhavna, Harmanpreet, Deepak Rathee, Jasleen (34), Anshul, Ankush, Hardeep, Angrej.



PARTICIPATION OF GROUP

There were approximately gathering of 40-50 members which included students, teachers, staff nurses, pregnant mothers and public. And in between we gave refreshment (gud and channa) to the audience. and we ended our group project by 12.30 pm and then we came back to college.



M.M COLLEGE OF NURSING, MULLANA, AMBALA

DATE OF GROUP PROJECT: 23/10/2018

VENUE: Ambala

TIME: 10:00 AM TO 11:00 AM

NO. OF TEACHERS INVOLVED: 05

NO. OF STUDENTS: 34

THEME OF THE GROUP PROJECT: Food Safety

ACTIVITES:

At first the introduction was given regarding the theme of “Food Safety” then a short role play was done. At last health education was given with the help of charts. Feedback was taken from participants as well as supervisors.


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Mullana-Ambala, Haryana-India, 136007

MM COLLEGE OF NURSING

GROUP PROJECT ON PREVENTION OF DIABETES MELLITUS



SUBMITTED TO:-

Mrs. POOJA JASWAL
ASSISSTANT PROFESSOR
COMMUNITY HEALTH NURSING
DEPARTMENT

SUBMITTED BY:-

Bsc. Nursing 4th year
Group 2 (1915035-1915069)

GROUP PROJECT REPORT ON PREVENTION OF DIABETES MELLITUS

B.Sc. Nursing 4th year student did the group project on prevention of Diabetes Mellitus. We teach the urban people regarding prevention of Diabetes Mellitus.

Diabetes Mellitus is a disease in which the body's ability to produce or respond to the hormone insulin is impaired, resulting in abnormal metabolism of carbohydrates and elevated levels of glucose in the blood.

OBJECTIVES

1. To assess the health status of community people .
2. To provide general awareness on prevention of Diabetes Mellitus.
3. To conducted a role play to enhance the knowledge regarding prevention of Diabetes Mellitus.

THEME- DIABETES AND FAMILY

DATE-16th November 2018

VENUE-Dina ki mandi (Ambala Cantt)

LANGUAGE-Hindi

COMMUNITY FIELD SUPERVISORS

- Ms. Uma Deaver
- Ms. Eenu
- Mrs. Pooja Jaswal
- Mr. Prakash
- Ms. Pabalpreet Kaur
- Ms. Jitender kaur

TOTAL NO. OF GROUP MEMBERS:

B.Sc Nursing 4th year students (1915035-1915069)

INCHARGE OF GROUP PROJECT

- Group Leader-Manpreet Kaur

- Invitation Incharge- Manpreet Kaur, Mandeep Kaur
- Content-Kajal, Kulpreet kaur
- A.V.Aids In Charge- Komalveer Kaur, Komal Saini, Narender Kaur, Manu, Monika, Kulwinder Kaur, Jaswinder Kaur, Jesika,
- Role Play- Jeevan Singh, Jaspreet Kaur, Mandeep Singh, Megha, Manpreet Kaur, Navjeet Kaur, Meenakshi, Lovepreet Kaur, Mansi, Mahira.
- Refreshment In charge-Kamal, Jony
- Narrator- Manish
- Video and Photo Incharge- Mohit, Komal
- Report Making Incharge- Jaspreet Kaur, Manpreet kaur
- Articles Incharge- Karamvir

GROUP

There was approximately gathering of 40-50 members who include teachers of MMCON, People of Dina ki Mandi (Ambala Cantt).

PHASES

• PRE GROUP PROJECT

On the previous day of the group project, we went to urban community Amabala cantt for conducting the group project, we have taken permission from care takers of house for conducting group project on Prevention of Diabetes Mellitus. We prepared all the A.V. Aids and did the rehearsal for the role play and give the invitation to Principal Mam and all faculty members of M.M. College of Nursing for the group project.

• GROUP PROJECT

The group project on “Prevention of Diabetes Mellitus” was conducted by Bsc. Nursing 4th year students with the help of faculty members on 16th November 2018 at the big hall of village Ambala Cantt at 10:30am – 12:30pm.

ROLE PLAY

Introduction about the topic prevention of Diabetes Mellitus by the narrator.

Scene 1: It was about the Risk Factors of Diabetes mellitus.



Scene 2: It was about the Causes of Diabetes Mellitus.



Scene 3: It was about the Sign and Symptoms of Diabetes Mellitus.



Scene 4: It was about the Management of the Diabetes Mellitus.



Scene 5: It was about the Complications of the Diabetes Mellitus.



Scene 6: It was about the prevention of Diabetes Mellitus.



HEALTH EDUCATION

Health education on definition, causes, sign and symptoms, management and prevention of Diabetes Mellitus is given with the help of charts.

REFRESHMENT

One packet of Biscuit was given to all the community people who attended the group project.


VOTE OF THANKS

After role play and comments, teachers and community people. We thank to all teacher and community people, who carefully listen the role play and encouraging us to these knowledge full project next time also.



SUMMARY AND CONCLUSION

Because of this role play on “Prevention of Diabetes Mellitus”, community people got adequate knowledge. It was knowledgeable for the community people.


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M.M COLLEGE OF NURSING, MULLANA, AMBALA

DATE OF GROUP PROJECT: 24/11/2018

VENUE: MMIMS&R Hospital, Mullana

TIME: 10:00 AM TO 11:00 AM

NO. OF TEACHERS INVOLVED: 03

NO. OF STUDENTS: 30

THEME OF THE GROUP PROJECT: Home Based Care Of Premature Babies

ACTIVITES:

At first the introduction was given regarding the theme of “Home Based Care Of Premature Babies” then a short role play was done. At last health education was given with the help of charts. Feedback was taken from participants as well as supervisors.


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INTRODUCTION

EXCLUSIVE BREAST FEEDING

We are the group of **B.Sc. Nursing 4th year** from **roll number 70-109** posted in **Civil Hospital Ambala City** for our OBG posting and there we performed a group project on "**Breastfeeding**" on 30th Nov 2018. We made different committees for distribution of work among the students. We reached there at 9:30 am and find a site to perform our role play. We prepared our chart display sheet and attached attracted a number of people.

Date: 30th Nov 2018

Time: 10:00 am - 12:00 pm

Venue: In front of OPD Block

Theme: "Breast Feeding: A winning goal of life."

Slogan

यह थी हमारी जिम्मेदारी पहुंचना आपको यह जानकारी
बचा आपका स्वस्थ रहेगा जब माँ का दूध पियेगा



Aims

To contribute to social and cultural change by promoting an environment where breastfeeding is seen as the normal way to feed infants and young children.

Objectives

- 1.To provide appropriate education and training for staff to enable them to promote, protect and support breastfeeding.
- 2.To support informed choice in relation to infant feeding.
- 3.To increase awareness of sources of support and information for breastfeeding.
- 4.To use resources which reflect breastfeeding as the cultural norm.
- 5.To support early breastfeeding among staffnurses & mothers.
- 6.To develop public acceptability and the promotion of breastfeeding.
- 7.To contribute to the promotion of social and attitude change in relation to breastfeeding.
- 8.To enhance knowledge of mother regarding breastfeeding.

Benefits

- 1.Breast milk contains antibodies that helps the baby to fight against viruses and bacteria.
- 2.Breastfeeding lowers your baby's risk of having asthma or allergies.
- 3.Babies who are on breastfeeding have less chances of ear infection, respiratory illness and diarrhea.
- 4.Breast milk contains all Vitamins& Nutrients required for growth and development.

Conclusion

We performed a group project in **Civil Hospital, Ambala City** on 30th Nov 2018. We prepared charts and performed a role play to make people learn about breastfeeding, its benefits for mother, baby & family. We performed our role play very well and get satisfactory evaluation.



Summary

We performed a group project on breastfeeding in which we educated people about breastfeeding, purposes of breastfeeding and benefits for mother, baby & family, positions of breastfeeding, myths regarding breastfeeding, good attachment signs, BFHI guidelines of breastfeeding, contraindication of breastfeeding.



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M.M.COLLEGE OF NURSING

(MULLANA AMBALA)

GROUP PROJECT REPORT

ON




HIV/AIDS

SUBMITTED TO

**MS PABALPREET KAUR
(NURSING TUTOR)**

SUBMITTED BY

**POST BASIC BSC NURSING
2nd YEAR
(1917201 – 1917231)**


Dr. (Mrs.) Jyoti Sarin
PRINCIPAL
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Maharshi Markandeshwar (Deemed to be University)
Mullana-Ambala, Haryana-India,13607

REPORT ON HIV/AIDS AWARENESS

AIDs ka shai gyaan bacha sakhta hai apki jaan.

INTRODUCTION:-

Under the above stated theme group project was done by the students of Post Basic BSc Nursing 2nd year of M.M College Of Nursing Mullana Ambala on 07 December 2018 in community area Deena ki mandi , basanti mata mandir (AMBALA CANTT.) Under the guidance of Mrs. Uma Jebamana Deaver maam, Ms Eenu, Ms Pabalpreet Kaur, Mr. Prakash, Ms jitender.

INTRODUCTION OF TOPIC

The first case of AIDS was reported in the United State in the spring of 1981 and HIV infection in India was detected in 1986 among female sex worker in Chennai. By 1983 the HIV, the virus that causes AIDS, had been isolated early in the US, HIV/AIDS pandemic, the role of substance abuse in the spread of clearly established. Injection drug used was identified as a direct route on HIV infection and transmission among injection drug user. AIDS is caused by HIV infection and is characterised by severe induction in CD4 and T- cells, which means and infected person develop a very weak immune system and become vulnerable to life threatening infections.

AIM OF GROUP PROJECT

1. To improve the knowledge regarding HIV/AIDs awareness.
2. To educate the community about the sign and symptoms and prevention about HIV/AIDS.

OBJECTIVES

1. To create awareness about the HIV/AIDS including its management and prevention.
2. To identify the high risk cases of HIV/AIDS in the community.
3. To educate the people about the sign and symptoms of HIV/AIDS.
4. To monitor the blood pressure, weight, height, RBS of the community.

SLOGAN:-

AIDS ka shai gyaan bacha sakta hai apki jaan.

ORGANIZATION

DATE:- 07-12-2018

TIME:- 11:00am

VENUE:- Basanti Mata Mandir.

LANGUAGE:- Hindi

GROUP PROJECT SUPERVISORS

Mrs. Uma Jebamana Deaver maam.

Ms Eenu.

Ms Pabalpreet Kaur.

Mr. Prakash.

Ms Jitender.

INCHARGE OF THE GROUP PROJECT:

Group Leader:- Preeti.

Invitation incharge: Jyoti and Rashi.

A.V Aids incharge: Rupinder kaur , Damanpreet Kaur, Money, Seema, Sweety,

Yogeshwari, Arti, Hemkala, Neelam, Nivedita, Shivali, Vidhya,

Priyanka, Neha, kaushalya.

Registration Incharge: Seema, Rupinder.

Weight and BP monitoring By: Neelam.

RBS monitoring by: Jaswinder.

Video and photo incharge:- Syed Junaid And Tshering.

Refreshment incharge: Sukhwinder, Tshering.

Report writing:- Syed Junaid And Renu Thakur.

Chart Explanation:- Shivali, sweety, Anita.

Nukad natak: Gurpreet , Sukhvinder , Rashi ,Money , pooja , priti , shelly , priyanka , priyanka kaundal.

Post basic Bsc Nursing 2nd year students (1917201- 1917231)

PARTICIPATION OF GROUP MEMBERS There were approximately gathering of 50-60 members which include teachers, students, family members/ public and in between we gave refreshment (Biscuit) to the audience and ended the group project by 12:15 pm.

PHASES

Pre Group Project

On the previous day of the group project we surveyed the Dina ki mandi ambala Cantt. We give the invitation to principal mam and all the faculty members of MM College of Nursing for the group project. We conducted the group project in Basanti Mata Mandir we had taken permission from care taker for conducting the group project in Basanti Mata Mandir on HIV/AIDS awareness .Informed all the family members and invited them to decided venue. We prepared all the AV aids(charts and flash cards) and did the nukad natak.

GROUP PROJECT

Scene I: It was about on awareness about the HIV/AIDS



Scene II: it was about the diagnostic evaluation of HIV/AIDS



Scene III: Its all about the causes of HIV/AIDS



Scene IV: Its all about the prevention of HIV/AIDS



ACTIVITY IN GROUP PROJECT (HEALTH CAMP)

1. Registration counter.
2. Blood Pressure and weight monitoring counter.
3. RBS analysis monitoring counter.

THE HEALTH CAMP ON HIV/AIDS:

- All students of Post basic BSc Nursing 2nd year were inform to all family members by visiting door to door for attending the health Camp .
- After that the registration was done to all members who were visited at the site of health camp.
- In health camp the students had checked the weight, Bp, Height, RBS and reports were given to each member.
- Chart explanation was done, which includes the meaning, causes, signs and symptoms, diagnostic evaluations, management and specific dietary plane.
- Comments were taken by member about the health camp.
- Recording and reporting was done.
- Refreshments were distributed to audience.

S.NO	NAME	AGE(in years)	SEX	BP (mmHg)	WEIGHT (Kg)	HEIGHT (Cm)	BMI(kg/m2)	RBS(mg/dl)
1.	Sareeta	36	Female	120/80	60	146	28.1	
2.	Rashmi	45	Female	134/84	55	150	24.4	
3.	Lalita	50	Female	140/94	65	150	28.9	93
4.	Sondi	22	Female	124/86	45	139	23.3	
5.	Pinky	25	Female	106/70	55	153	23.5	
6.	Sheela	61	Female	113/95	60	151	26.3	178
7.	Asha	35	Female	108/77	39	148	17.8	
8.	Meena	55	Female	136/80	50	149	22.5	307
9.	Muni	60	Female	154/84	85	159	33.6	
10.	Lalita	45	Female	110/70	42	142	20.8	
11.	Rachni	40	Female	150/100	58	147	26.8	
12.	Soni	70	Female	128/90	68	142	33.7	158
13.	Sarooj	48	Female	110/60	80	142	39.7	160
14.	Harzinder	58	Female	210/100	86	150	38.2	
15.	Shardha	40	Female	124/84	55	147	25.5	107
16.	Chander	47	Female	124/76	52	141	26.2	146

	kala							
17.	Geeta	27	Female	120/70	52	152	22.5	
18.	Pinky	27	Female	110/72	57	148	26	
19.	Suman	24	Female	128/110	63	149	28.4	
20.	Ishwari Lal	70	Male	130/70	70	160	27.3	
21.	Arjun	60	Male	114/94	57	148	26	
22.	Mukul	20	Male	138/96	68	160	26.6	
23.	Radha	56	Female	114/70	56	145	26.6	307
24.	Sarooj	50	Female	120/70	54	148	24.7	
25.	Sama	55	Female	110/86	62	160	24.2	
26.	Babli	40	Female	120/90	72	160	28.1	
27.	Neha	24	Female	132/94	65	148	29.7	
28.	Asha	50	Female	130/98	98	152	42.4	109
29.	Kaveeta	35	Female	122/90	40	160	15.6	
30.	Mala	47	Female	140/80	64	148	29.2	239
31.	Rajni	35	Female	112/84	56	149	25.6	118
32.	Sarti	36	Female	148/90	49	148	22.4	
33.	Rocky	30	Male	112/70	60	148	27.4	
34.	Arjun	60	Male	118/70	78	152	33.8	140
35.	Rajini	42	Male	112/92	70	147	32.4	142
36.	Sayamb er	66	Male	140/70	50	152	21.6	135
37.	Anjili	23	Female	114/82	47	150	20.9	

RBS analysis Monitoring Counter.



Blood Pressure Monitoring counter.



Group Project supervisor and group members



REMARKS

At the end of group project people praised students and give positive views about health camp and thanks the students for the programme.

CONCLUSION:

By this group project community people got enough knowledge regarding HIV/AIDS. Community people are so cooperative and showed active interest

during the group project. It was acknowledge and enriching experience as the students got confidence in organising the project at community level.

M.M COLLEGE OF NURSING, MULLANA, AMBALA

DATE OF GROUP PROJECT: 13/12/2018

VENUE: general OPD of MMIMS&R Hospital, Mullana

TIME: 10:00 AM TO 11:00 AM

NO. OF TEACHERS INVOLVED: 03

NO. OF STUDENTS: 26

THEME OF THE GROUP PROJECT: Women Violence “ Jab Hai Naari Mein Shakti Saari, Toh Nari Ko Kyo Kahein Bichari”

ACTIVITES:

At first the introduction was given regarding the theme of Women Violence “ Jab Hai Naari Mein Shakti Saari, Toh Nari Ko Kyo Kahein Bichari” then a short role play was done. At last health education was given with the help of charts. Feedback was taken from participants as well as supervisors.


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01/Jan
M.M.COLLEGE OF NURSING

(MULLANA AMBALA)

01/May/19

SCHOOL HEALTH PROGRAMME

ON



**LEARNING THROUGH
PLAYING**

[Signature]
SUBMITTED TO:
MS PABALPREET KAUR
(NURSING TUTOR)

SUBMITTED BY:
POST BASIC BS NURSING
2nd YEAR
ROLL NO (1917201-1917231)

[Signature]
Dr. (Mrs.) Jyoti Singh
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Mullana-Ambala, Haryana India-132007

REPORT ON SCHOOL HEALTH PROGRAM
"LET ME PLAY TRUST ME, I AM LEARNING"

INTRODUCTION:-

Under the above stated theme school health program was done by the students of Post Basic BSc Nursing 2nd year of M.M College of Nursing, Mullana , Ambala on 1st June , 2019 . Under the guidance of Mrs. Uma Jebamma, Ms Eenu, Mrs.Pooja Jaswal, Ms Pabalpreet Kaur, Mr.Parkash Jha, Ms Amanda.

INTRODUCTION

Learning through play is a term use in education and psychology that describe how a child can learn . Through play children can develop social and cognitive skills ,mature emotionally and gain self confidence regarding new experience and environment .

THEME: "LET ME PLAY , TRUST ME, I AM LEARNING "

AIM OF SCHOOL HEATH PROGRAMME :

1. To provide the basic knowledge regarding personal hygiene and daily routine activity,good habits etc.
2. To provide the education through the playing i.e. Alphabets,Countings.
3. To involve in creative activity i.e. Painting, Drawing, etc

OBJECTIVES:-

1. To check the growth and development of the children according to age group.
2. To check for malnutrition of the children.
3. To monitor the weight, height, of the child according to the age
4. To provide the education personal hygiene and daily routine activity,good habits etc.

SLOGAN:-

"KHEL KHEL ME PADHNA SIKHE ,AAGE AAGE BADHNA SIKHE"

ORGANIZATION:-

DATE:01-6-2019

TIME:10:00am to 12:30pm

VENUE Common girls' room, MMCON

LANGUAGE: Hindi

SCHOOL HEALTH PROGRAM SUPERVISORS:-

Miss . Pabalpreet kaur mam

Mrs. Pooja mam

MEMBERS OF THE SCHOOL HEATH PROGRAMME :

Group Leader:-Tshring, Rupinder

Invitation incharge: Jyoti and Rashi.

A.V. Aids incharge : Rupinder kaur, Damanpreet Kaur, Money, Seema, Sweety,

Yogeshwari,Arti, Jyoti,Hemkala, Neelam, Priyanka bishnoi, Ajay, Rashi pal.

Video and photo incharge:-Ajay, Tshring ,Priynka kundal

Refreshment incharge :Priti, Neha.Tshring, Gurpreet kaur

Report writing:- Sukhvinder sandhu ,Priyanka bishnoi

Chart Explanation:-.Rupinder , Daman ,Sukhvinder

Activity :- Priti,Vidya, Kaushalya, Neelam, Sukhvinder, Priyanka. Yogeshwari, Shyed junaid, Anita Shvali , Neelam ,Arti, Nivedita Shelly.

Venue arrangement : Post basic Bsc Nursing 2nd year students (1917201- 1917231)

PARTICIPATION OF GROUP MEMBERS:

There were approximately gathering of 35 to 40 children of (3 to 8 ages) from slum area near by MMU.

PHASES

PRE SCHOOL HEATH PROGRAMME :

On the previous day of the School health programme we surveyed in slum area near by MM UNIVERSITY . We give the invitation to principal ma'am and all the facility members of MM College of Nursing for the School health programme . We conducted the school health program in common girls room of , MMCON we had taken permission from Principle mam, Prof. Uma mam (CHN) for conducting the school health program. We informed all the family members and invited them. We made a line of all childrens and proper sitting arrangement in hall after then we checked the height and weight and then involved in the different activities by prepared all the AV aids like charts and did the rhymes poem and play activities.

RHYME:

Brush karo brush karo Daanto ko tum brush karo-2

aage aur piche bhi tum brush karo

upr k daant niche ki taraf,

niche k daant upr ki taraf,

Brush karo brush karo Daanto ko tum brush karo-2

Subha aur shyam bhi tum brush karo

tum brush karo,khaane k baad

kulla karo-2 kitaanuo ko duur bhagao,

Brush karo brush karo Daanto ko tum brush karo-2

SCHOOL HEALTH PROGRAM

ACTIVITIES 1: Good morning , Good afternoon , Good evening



ACTIVITIES 2: learning English word like ,walking setting standup



ACTIVITIES 3: Tell about how to do the tooth brush with the help of play activities .



ACTIVITIES 4: Give the knowledge regarding personal hygiene with help of video play.



ACTIVITIE 5: Counting 1 to 10 and A to Z with the help of play .



ACTIVITIE 6 : Explain the charts

THE SCHOOL HEALTH PROGRAMME ON LEARNING THROUGH PLAYING:

- All students of Post. Basic. BSc Nursing 2nd year were inform to all family members about school health program.
- After that the registration was done to all children who were visited at the site of Common girls hall, MMCON.
- In school health programme the students had checked the height, weight.
- Chart explanation was done, which includes the play process , types , and importance of play learning .
- Recording and reporting was done.
- Refreshments were distributed to all presenting children .

School heath programme supervisor and group members:-



Vote for thank you:-

REFRESHMENT:-

At the end of play activities we gave the refreshment (Biscuit and tooth brush) to the children.

REMARKS:-

At the end of School health programme teachers praised students and give positive views about school health program .

CONCLUSION: -

By this School health programme children got enough knowledge regarding play and alphabets and counting ,colour ,painting clay puzzle extra . Children are so co operative and showed active interest during the School health programme . It was acknowledge and enriching experience as the students got confidence in organising the programme at school health program.

MM COLLEGE OF NURSING MULLANA -AMBALA

REPORT OF GROUP PROJECT

ON

“HIV/AIDS IN PREGNANCY”



SUBMITTED TO

MS. Deepshikha

Nursing Tutor

Maternal Health Nursing

SUBMITTED BY

POST BASIC BSC. NURSING

1ST YEAR (2018 -2019)

SUBMITTED ON:28-01-2019

INTRODUCTION

We the Post Basic Bsc. Nursing 1st year students with 26 members (Rollno starts from 1918201 to 1918229) did the role play on HIV/AIDS IN PREGNANCY on 19-01-2019 at Civil Hospital in the Ambala city . World health organization (WHO) theme “KNOW YOUR STATUS”. HIV is a ribonucleic acid (RNA) retrovirus that infects the immune cell of its human hosts; in particular, CD4 helper T cells.HIV infection leads to Acquired immune Deficiency syndrome (AIDS) in most patients if left untreated. HIV in pregnancy is of concern because women with HIV/AIDS may transmit the infection to their child during pregnancy, childbirth, and while breastfeeding. We have made focus on raising global Health awareness of Incidence,prevention,treatments,Integrated Counseling and testing centre, Route of transmission and risk factor, voluntary screening and know your status, services provided to affected people, legal aspect of dealing with people,Myths,signs and symptoms, causes , risk factor , mother to child transmission, mode of feeding education, diagnosis and laboratory investigation, antenatal care, intranatal care, postnatal, medical management, role of health personnel for health education in society and public gathering ,regimen of HAART of HIV in pregnancy to public of Civil hospital patient and educates the public , patient at tender, patient regarding the HIV/AIDS in pregnancy

OBJECTIVES

Following objectives were met through role play :

1. Literal meaning of HIV/AIDS in pregnancy explained
2. Incidence and Epidemiology explained.
3. The Routes of Transmission and mode of transmission of HIV explained by using AV aids such as charts.
4. Risk factors and Incubation period, window period explained through role play and by using AV aids such as charts and flash cards.
5. The stigma targeting and legal aspect of HIV explained
6. Integrated counseling and testing centre in Ambala city explained through role play and by using chart
7. The services provided by government of India to affected people explained through role and by using chart
8. The stages of HIV and its signs and symptom respectively explained by using charts.
9. The immune pathogenesis of HIV explained through role play and by using charts .
10. The diagnostic evaluation explained
11. The prenatal management, intranatal management, postnatal Management, Medical management ,nursing management explained through role play and by using AV aid such charts
12. The prevention of mother to child transmission of HIV explained
13. The prevention program ,health education of HIV explained through role play and using charts .

THEME :“HIV/AIDS IN PREGNANCY”



GROUP

There were approximately 100-150 members gathering which includes patient at tender, public and Teachers , All health faculty.

INCHARGE OF THE PROJECT

Teacher In charge:- Ms. Deepshikha Ma'am.

1. Group leader: - Monika Sharma
2. Invitation committee: - Ashu, varsha, sajni,jaskirin,
3. AV aids committee: - Ramdeep kaur and Shivani Verma.
- 4.Roleplay:-Pinki,Pooja Dhiman,Pratikasha,PriyaSharma,Priyankakumar ,priyanka paumar, ramdeepkaur ,yangzeen, sheeba malik, deepa ,shivani verma
5. Refreshment committee: - Ramandeep Kaur, Payal, Alisha, Jasmeet kaur
6. Narrator: - Upma sharma
7. Video and Photo commitee: -Priya sharma and Aushu
8. Charts explanation: -Monika Sharma ,Monika Chauhan,Alisha, Payal Gulati Mandeep Kaur,and pinki,
- 9.Script Writer committee: Upma Sharma
10. Report making committee: - Sangay Tshewang



CHARTS EXPLANATION

Miss monika Sharma,payal,mandeep,Alisha, pinki, explained the all Charts regarding Definition, incidence, causes, Epidemiology,sign and symptoms ,risk factor ,Stages of HIV,mode of transmission, stigma, services provided by government of india,Immune pathogenesis,mother to child transmission, diagnostic test , Integrated counseling and testing centres,medical management .health counseling and health education regarding HIV/AIDS, its prevention of mother to child transmission of HIV.



FEEDBACK

After the role play we are asking question from public, patient at tender regarding HIV/AIDS in pregnancy. The student's will be able Improved more knowledge regarding HIV/AIDS in pregnancy in future Endeavour .

REFRESHMENT

Biscuits were distributed to the group as refreshment.

VOTE FOR THANKS

After the role play and chart explanation, we have extended our heartfelt gratitude to all Audience, patients and all the Civil hospital faculty who alternatively attained the role play and encourage us to do these knowledgeable program next time too .our Indebt goes to civil hospital , ambala city for providing cognitive matter of learning during our clinical posting period and we are looking forward same future endeavor.

We would like to extend our principal mam and MMCON Faculty for continuous guidance and support for our project work.

We would like to take opportunity to extended heartfelt gratitude especially MS Deepshikha Mam for continuous guidance and supervisor, ever approachable which finally make our project work successful one.

Lastly but not least we would like to thanks for every individual of colleagues for helping hands and cooperation.



Dr. (Mrs.) Jyoti Sarin
PRINCIPAL
Maharshi Markandeshwar College of Nursing
Maharshi Markandeshwar (Deemed to be University)
Mullana-Ambala, Haryana-India, 130207

REPORT ON ILL EFFECTS OF USING MOBILE PHONES AND VIDEO GAMES...

SLOGAN-Matt kro itni mastii, zindgi nahi hai sasti

INTRODUCTION

Under the above stated theme school health programme was done by B.Sc (Nursing) 4th Year students of M.M College of Nursing, Mullana on 21st January 2019 in Community area in village Adhoya under the guidance of Ms.Uma J Deaver (HOD of community health nursing), Ms.Eenu(Asst. Professor), Ms.Pooja Jaiswal (Asst. Professor), Ms. Pabalpreet kaur (Nursing Tutor) , Ms. Amanda(Clinical Instructor)....



ILL EFFECTS OF USING EXCESSIVE MOBILE PHONES & VIDEO GAMES....

Mobile phone overuse is a dependence syndrome seen among mobile phone users . Some mobile phone users exhibit problematic behaviour related to substance use disorders. .These behaviours can include preoccupation with mobile communication , excessive money or time spent on mobile phones, use of mobile phones in socially or physically inappropriate situations such as driving an automobile. Increased use can also lead to increased time on mobile communication , adverse effects on relationship and anxiety if separated from a mobile phones or sufficient signal....

AIM OF SCHOOL HEALTH PROGRAMME

- 1.To improve the knowledge regarding ill effects of mobile phones and video..
- 2.To create awareness of ill effects of mobile phones and videos among school children.

OBJECTIVES OF SCHOOL HEALTH PROGRAMME:.

- To provide knowledge to the School children regarding ill effects of using mobile phones and video games.
- To conduct role play on using excessive mobile phones and video games..
- To educate regarding healthy and balanced diet.

PLANNING

We planned to conduct a school health programme in govt school of Adhoya on the topic ill effects of using mobile phones and video games..

We invited teachers from M.M College of Nursing and also teachers of govt. School Adhoya..

On 21st January 2019 we the students B.Sc (Nursing) 4th Year came to college for attendance then we visited community area i.e Adhoya Village.

Firstly we assessed the suitable place for the role play. Then we finally got the suitable place for school health programme i.e Govt school of Adhoya. Then we arranged the charts on the sheets. Then we arranged the chairs for the teachers and the audience. After that we arranged the necessary things on the stage. Then at 11.00 am we started our role play.

ORGANIZATION

DATE: 21 January 2019

VENUE: Govt. School,Village Adhoya.

LANGUAGE: HINDI

SUPERVISOR:

Ms.Uma J-Deaver (HOD of Community Health Nursing)

Mr. Prakash Jha (Nursing Tutor)

Ms.Pabalpreet kaur (Nursing Tutor)

INCHARGES OF THE SCHOOL HEALTH PROGRAMME:

GROUP LEADER- Komalveer

CONTENT- Jasdeep , Komalveer

SCRIPT- Gurleen,

NARRATOR- Hardeep

INVITATION- Mahira, kulpreet

A.V.AIDS- Jeevan, kamal,karamveer ,komal, komal saini, Jasleen (33),jasleen (34),Harman ,

CHARTS EXPLANATION- Jaswinder kaur

BUDGET- Jaspreet 35

VIDEO AND PHOTOGRAPHY- kulvinder,kulpreet

REPORT- jasdeep, komalveer

ROLE PLAY- Hardeep, Harman, Jasdeep, jaspreet35,jaspreet36, jaswinder,jesika, kajal, komal,komal saini, mahira,lovepreet

PARTICIPATION OF GROUP

There were approximately gathering of 60-70 members which included students of govt school, teachers. And in between we gave refreshment (Biscuits) to the audience.and we ended our school health programme by 12.30 pm and then we came to college .

PARTICIPANTS GROUP :There is approximately gathering of 60-70 members including teachers of MMCON and students and teachers of govt. School of Adhoya Village.

PHASES

PRE SCHOOL HEALTH PROGRAMME : On the previous day of School health programme, we surveyed the rural community Adhoya Village for conducting the school health programme in government school of Adhoya village'. We have taken permission from Principal of govt. School for conducting school health programme on ILL EFFECTS OF USING MOBILE PHONES AND VIDEO GAMES . We prepared all the AV Aids and did the role play and give the invitation to principal mam and all faculty members of MM College of Nursing for the School health programme.

SCHOOL HEALTH PROGRAMME.: The school health programme on ill effects of using mobile phones and video games was conducted by 4th year students with the help of faculty members at the Adhoya at 11:00am to 12:30 pm.

SCENARIO -1

In the starting of the school health programme, we highlight the matters that a student used to ignore while using mobile phones and playing video games through play .



SCENARIO 2:

In scenario 2 ,we showed how mobile phones affect the concentration power of students in the class.



SCENARIO -3

In scenario -3, we explained that today `s generation focus more on social media rather than saving the life of the person




HEALTH EDUCATION: About definition ,causes, sign and symptoms , management and prevention from ill effects of using mobile phones and videos games is given with the help of charts .

REFRESHMENT: Biscuits is given to all the who attened group project .

VOTE FOR THANKS: After role play and comments teachers and community people . We all thanks to all teachers of govt. School who carefully listen the role play and encouraging us to do these knowledge full programme next time also.



CONCLUSION: : Because of this role play on ill effects of using mobile phones students got adequate knowledge. It was knowledgeable for the school students


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REPORT OF SCHOOL HEALTH PROGRAM ON ILL EFFECT OF DRUG ABUSE

Drug Abuse is also known as substance abuse and considered to be a medical term (medical problem) that develop over time after prolonged use of drugs because they are harmful to the body. It leads to the various physiological disorders, psychological disorders which effect the health and relations of the person with society.

As nowadays the school going children are also doing the drug abuse, so to aware them regarding the ill effects of drug abuse students of Bsc. Nursing 4th year did the school health program on topic of Ill effect of Drug Abuse. We teach the students of 9th class in the Govt. senior secondary school, Adhoya Village regarding ill effect of drug abuse. We invited the teachers from MM College of Nursing and also the teachers of Govt. School, Adhoya.

OBJECTIVES

1. To assess the health status of students of 9th class.
2. To improve the knowledge regarding the ill effects of drug abuse.
3. To create awareness of ill effects of drug abuse on the health of children by conducting a role play.

THEME- DON'T GET CAUGHT IN THE WEB OF DRUGS

SLOGAN- “Nashe ki Maar Sabse Badi Maar,
Barbaad karde sukhi parivaar”.

DATE- 13th February 2019

VENUE- Govt. senior secondary school, Adhoya.

LANGUAGE- Hindi

COMMUNITY FIELD SUPERVISORS

- Mrs. Uma Deaver
- Ms. Eenu
- Ms. Pabalpreet Kaur
- Mr. Prakash
- Ms. Kalpana
- Ms. Amanda

TOTAL NO. OF GROUP MEMBERS:

Bsc. Nursing 4th year students (1915056-1915083)

INCHARGES OF THE SCHOOL HEALTH PROGRAM:

- **Group Leader** – Narender
- **Invitation-** Ridham, Shivani, Simran
- **Content-** Navpreet, Pooja
- **A.V. Aids-**Manu, Monika, Mansi, Manpreet Kaur, Mandeep Kaur, Manpreet Kaur, Narender, Navneet, Nishant, Pinki
- **Role Play-** Priyanka, Prerna, Mandeep Singh, Manish, Neha, Nitika, Megha, Meenakshi, Pinki
- **Refreshment-** Navneet, Mohit
- **Narrator-** Prerna
- **Report Making-** Manpreet Kaur, Narender
- **Video Making-** Prabhjot, Mohit, Nishant
- **Articles Issue-** Nishant, Mohit

GROUP

Students of 9th class 61 students and teachers of govt. school of Adhoya and teachers of MMCON.

PHASES

• PRE SCHOOL HEALTH PROGRAM

On the previous day of the School Health Program, we went to Govt. School of Adhoya village for conducting the School Health Program, we have taken permission from Principal of the School for conducting School Health Program on the topic ill effects of Drug Abuse. We prepared all the A.V. Aids and did the rehearsal for the role play and give the invitation to Principal and all teachers of Govt. School, Adhoya and **Principal Mam and all faculty members of M.M. College of Nursing for the school health program.**

• SCHOOL HEALTH PROGRAM

The school health Program on “Ill effects of Drug Abuse” was conducted by Bsc. Nursing 4th year students with the help of faculty members on 13th February 2019 in the Govt. School Adhoya at 10:00am-12:30pm.

NUKKAD NATAK

Introduction about the topic Ill effects of Drug Abuse by the Narrator.



Scene1: It was about the ill effects of alcohol on the health and profession.



Scene2: It was about the ill effects of smoking on health.



Scene 3- It was about the ill effect of Smack, Heroin, Cocaine on the health.



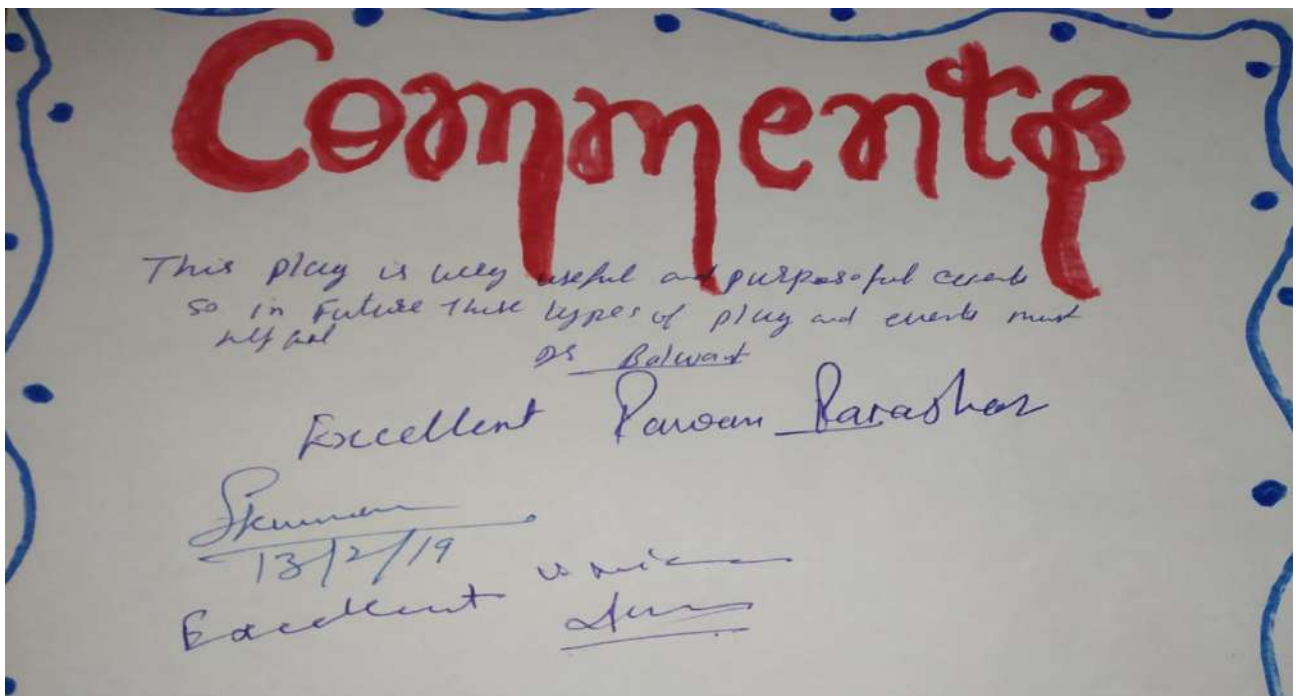
HEALTH EDUCATION

Health education on Definition, types, causes, signs and symptoms, Prevention, Treatment and complication of Drug Abuse with the help of charts.



COMMENTS

After the nukkad natak and health education we ask the principal sir to give their views regarding the school health program.



REFRESHMENT

One packet of Biscuit was given to all the students of 9th students.

VOTE OF THANKS

After nukkad natak and comments of teachers and students. We thank to the principal sir and all teacher and students, who had given us permission to do this school health program and their valuable time and appreciating us to do such school health program in the future also.



SUMMARY AND CONCLUSION

Because of this role play on “Ill effects of Drug Abuse”, students got adequate knowledge. It was knowledgeable for the students.

MM COLLEGE OF NURSING
GROUP PROJECT ON PREVENTION OF
CARDIOVASCULAR DISEASES



SUBMITTED TO:-

MS. EENU

ASSISSTANT PROFESSOR

COMMUNITY HEALTH NURSING

DEPARTMENT

SUBMITTED BY:-

B.Sc. NURSING 4TH YEAR

GROUP 3(1915056-1915083)

GROUP PROJECT ON PREVENTION OF CARDIOVASCULAR DISEASES

B.sc. Nursing 4th year Students did the group project on prevention of cardiovascular diseases. We teach the rural people regarding the prevention of cardiovascular diseases.

Cardiovascular disease is the series of disease which affect the heart and the blood vessels. As a result it can lead to death of the person. In this group project we had discussed about the Hypertension, Coronary Artery Disease and Stroke.

OBJECTIVES

1. To assess the health status of the community people.
2. To provide general awareness about the prevention of Cardiovascular Diseases.
3. To conduct a role play to enhance the knowledge regarding the prevention of Cardiovascular diseases.

**THEME- MAKE A PROMISE-FOR MY HEART, FOR YOUR HEART,
FOR ALL OUR HEARTS.**

**SLOGAN-“Zindagi ko Rakhna ho Khushaal,
Toh Rakhe Haridya ka khyaal”.**

DATE:-21st February 2019

VENUE- Village Adhoya

LANGUAGE- Hindi

COMMUNITY FIELD SUPERVISORS

- Ms. Uma Deaver
- Ms. Eenu
- Ms. Pabalpreet Kaur
- Mr. Prakash
- Ms.Kalpana
- Ms. Amanda

TOTAL NO. OF GROUP MEMBERS:

B.Sc Nursing 4th year students (1915056-1915083)

INCHARGE OF GROUP PROJECT

- Group Leader-Narender Kaur
- Invitation Incharge- Shivani, Simran
- Content- Pooja, Navpreet Kaur
- A.V.Aids In Charge- Narender, Mansi, Mandeep Kaur, Prabhjot, Monika, Manu, Navneet, Navjeet, Megha
- Role Play-Mandeep Singh, Priyanka, Prerna, Neha, Pinky,Nitika,Manpreet Kaur, Meenakshi, Manish
- Refreshment In charge- Nishant, Mohit, Anuj
- Narrator- Priyanka
- Video and Photo Incharge- Mohit, Nishant, Anuj
- Report Making Incharge- Manpreet kaur
- Articles Incharge- Nishant, Mohit

GROUP

There was approximately gathering of 40-50 members which includes teachers of MMCON, People of Adhoya Village.

PHASES

• PRE GROUP PROJECT

On the previous day of the group project, we went to rural community village Adhoya for conducting the group project, we have taken permission from care takers of house for conducting group project on Prevention of Cardiovascular Diseases. We prepared all the A.V. Aids and did the rehearsal for the role play and give the invitation to Principal Mam and all faculty members of M.M. College of Nursing for the group project.

• GROUP PROJECT

The group project on “Prevention of Cardiovascular Diseases” was conducted by Bsc. Nursing 4th year students with the help of faculty members on 21st February 2019 at the house of Mr. Sarjant Singh village Adhoya at 10:30am – 12:30pm.

NUKKAD NATAK

Introduction about the topic prevention of Cardiovascular Diseases by the narrator.

Priyanka, Mandeep, Neha, Manish, Meenakshi, Manpreet, Pinky, Nitika- Aao Aao sabko batao in dikato se sabko bachao, swasth jeevan sabko dilao dil ko apne swasth bnao aur bimario ko dur bhagao

Priyanka, Mandeep- Nukkad khta baat smjhlo, Jeevan me inko apnalo, Jo naa maane ye sab baate
Wo ghar apne bimariya late.

Scene1:- It was about the effect of overweight and stress on heart.

Manish- Aur aunty kaise katt rahi hai jindgi

Nitika - kya btau betaa. Kon kon se dukho se katt rahi hai jindgi

Manish- aisa kya hua aunty

Nitika- arey tujhe pta to hai tera dost sharaab pita hai, Usi ki mujhe chinta hai, Kaam dhanda kuch
krta nhi Sharaab peeke danga karta. Ek toh mera motapa aur doosri parivar ki chinta.

Manish- chinta karne se kuch nhi hoga, Ye bs bimaarion ka bulavaa hoga, Motape ko km kriye
Or bimaarion se chutkara paaiye

(One nursing student come and introduces himself)

Pinki - namastey aunty hum mmcon ki taraf se aaye hai aur health -survey kar rahe hain.

Nitika - aao beta betho.

Pinki -(taking history) chaliye main apka BP check krti hu (140/90 mmofHg)

Manish - thik hai kya student ji inka BP

Pinki - nahi, aaj main btaungi aapko baat pate ki Motapa hai jad har bimari ki, Sahi vajan rakhna
jmedaari hai aapki. Tanaav ko door bhgao, Shareer ko swasth bnao, Sahi matra mein khana
khaana, Roz marra m vyayaam apnana.

Manish- student ji kya kya hai khana ,,Kaise kaise vyayaam hai karna.

Pinki- Talaa bhuna nhi hai khana Hari bhari sbji apnana, Ab main apko vyayaam krke dikhati hu

(Pinki performing exercise and Telling stress management)

Nitika- chaliye ye to aapne bhut hi achi baat btai hai .



Scene2:-It was about stroke.

Mandeep - (retired army officer. Drinking alcohol and smoking)

Meenakshi- Or kitni bidi cigarette piyoge papa

Mandeep - beta thodi si to ye jindgi bachi Krne do mujhe mann marji

Meenakshi- padhe likhe hone ka bhi kya faydaa,jab swasth rehne ka hi nhi hai irada

Manpreet- (nursing student come and take history and fill the checklist to know about NCD)

Manpreet - chaliye aaj main aapko btauangi aur check karungi,ki dil ki dikkatein hone ki kitni sambhavnaa hain.

Mandeep- (got paralysed)

Manpreet calls ambulance.



Scene 3:- It was about the effect of Diabetes Mellitus, Ageing, Use of salt on Heart.

Minakshi- arey bahu.. Kab se bukh lgi h.. Khane m kuch nhi bnaya kya abi tk

Neha - nhi maaji aaj ghr ka kaam jada ta to mai ne bahr se mngaaliyaa

Minakshi - thik h bahu.. Laao

Neha- khana leke aati h

(sabhi burger chowmin khaa rhe hote hain tabhi nursing student ata h)

Minakshi - arey bahu isme namak kam hai.. Lanaa zara

Neha - itna namak too h maaji.. Itna kyu khate ho

Priyanka (nursing student):- Namastey aunty hum mmcon se aaye hain or hum yha pe health survey krne aaye hain(.after taking history get to know about the DM) Chlo main apka sugar check krte hu

Priyanka After monitoring RBS- arey ye kya aunty apka suger to bhut bdha hua h.. 250mg/dl h

Minakshi - acha betaa.. Kitna sugar hona chahiye

Priyanka - upto 180mg/dl (and take normal history) Acha aunty btaao aapke ghr m Or kisi ko bhi koi dikkat h?

Minakshi - haan hamaare parivaar mein mere dada ji ko thi sugar

Priyanka- aunty apka BP to nhi km jyada hota.. Vo to thik rehta h naa?

Neha- jb inko bhut gussa ata h tb BP jyada hojata h Or chakkar b aate hain

Priyanka - chlo apka BP check krte hu

Priyanka-Aunty 150/90 mmHg aya h aapka BP toh Aap namak kitna khate ho?

Neha – yeh toh bahut namak khate hain

(Priyanka gave interventions about controlling hypertension eg low salt intake in diet ,avoid oily foods).



HEALTH EDUCATION

Health education on definition, causes, sign and symptoms, management and prevention of Cardiovascular Disease is given with the help of charts.

REFRESHMENT

One Orange was given to all the community people who attended the group project.

VOTE OF THANKS

After role play and comments, teachers and community people. We thank to all teachers and community people, who gave us their valuable time for listening role play and encouraged us to do this knowledge full project next time also.



SUMMARY AND CONCLUSION

Because of this role play on “Prevention of Cardiovascular Diseases”, community people got adequate knowledge. It was knowledgeable for the community people.

M.M COLLEGE OF NURSING, MULLANA, AMBALA

DATE OF GROUP PROJECT: 23/03/2019

VENUE: Village Adhoya

TIME: 10:00 AM TO 11:00 AM


NO. OF TEACHERS INVOLVED: 06

NO. OF STUDENTS: 45

THEME OF THE GROUP PROJECT: Obesity “ Ache Swasthya Se hai Jivan , Bimari Se Hai Sab Kuch Durgam”

ACTIVITES:

At first the introduction was given regarding the theme of Obesity “ Ache Swasthya Se hai Jivan , Bimari Se Hai Sab Kuch Durgam” then a short role play was done. At last health education was given with the help of charts. Feedback was taken from participants as well as supervisors.


Dr. (Mrs.) Jyoti Sarin
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Maharshi Markandeshwar (Deemed to be University)
Mullana-Ambala, Haryana-India,13807

23/March/19

M.M COLLEGE OF NURSING

COMMUNITY HEALTH NURSING II

SCHOOL HEALTH PROGRAMME REPORT

ON

HAND HYGIENE AND ORAL HYGIENE

Checked

[Signature]

Submitted to:


Ms. Eenu

Asst. Professor

Submitted by:

B.Sc (Nsg) 4th year

1915084-1915109


Dr. (Mrs.) Jyoti Saini
PRINCIPAL
Maharshi Markandeshwar College of Nursing
Maharshi Markandeshwar (Deemed to be University)
M. Karnal-Ambala, Haryana India-13207

REPORT OF SCHOOL HEALTH PROGRAMME ON HAND HYGIENE AND ORAL HYGIENE:

1. Hand hygiene is the act of cleaning one's hand with or without the use of water or another liquid, or with use of soap for the purpose of removing soil, dirt and microorganisms.
2. Oral hygiene cleaning the teeth and the oral cavity of the patient, it includes the measures to prevent the spread of the diseases from the mouth and increase the comfort of the patient.

OBJECTIVES:

- To improve the knowledge regarding the hand or oral hygiene via using charts as a A.V. aids
- To assess the health status of students of 1st to 8th standard.

THEME:

SAY AHH!! Think Mouth, Think Health

SLOGAN:

Zindgikoh rakhna ho Khushal,

Tohrakhesawathya ka khayal...

- DATE: - 28 March 2019
- VENUE: - AKAL ACADEMY, HOLI, BARARA
- LANGUAGE: - English, hindi

COMMUNITY FIELD SUPERVISORS: -

- Ms. Uma Deaver
- Ms. Eenu
- Ms. Pooja Jaswal
- Ms. Pabalpreet Kaur
- Ms. Kalpana
- Mr. Prakash
- Ms. Amanda
- Mr. Gautam

Total number of group members: -

B.Sc (Nursing) 4th year students (1915084-1915109)

There were total 300 hundred students along with 20 Teachers of Akal Academy Holi Barara.

S.No	Class	No.of students
1.	1 st A	14
2.	1 st B	18
3.	1 st C	14
4.	2 nd A	21
5.	2 nd B	17
6.	3 rd A	14
7.	3 rd B	17
8.	4 th A	20
9.	4 th B	17
10.	5 th A	21
11.	5 th B	16
12.	6 th A	15
13.	6 th B	17
14.	7 th	16
15.	8 th	19

INCHARGES OF THE SCHOOL HEALTH PROGRAMME: -

- Group leader: - Shwet , Priyanka
- Invitation: - Vini, Priyanka
- Content: - Sonia, Shalini
- Role play: - Sharanjeet, Ramneet, Tushar, Ridhi, Shabnum, Vikram, Saila, Shivani, Benza, Vini, Priyanka & Shalini
- A.V Aids: - Priyanka, Kusum, Ramneet, Tushar, Sonia, Shalini, Saila, Vini, Yashvir, Shwet, Vikram, Shakti
- Refreshment: - Shwet, Sharanjeet, Shakti
- Narrator: - Ridhi
- Report Making: - Anmol, Benza
- Video Making: - Yashvir
- Article Issue: - Shakti, Yashvir, Vikram

GROUP: -

Students of 1st -8th standard and teachers of Akal Academy, Holi (Barara) & teachers of MMCON.

PHASES: -

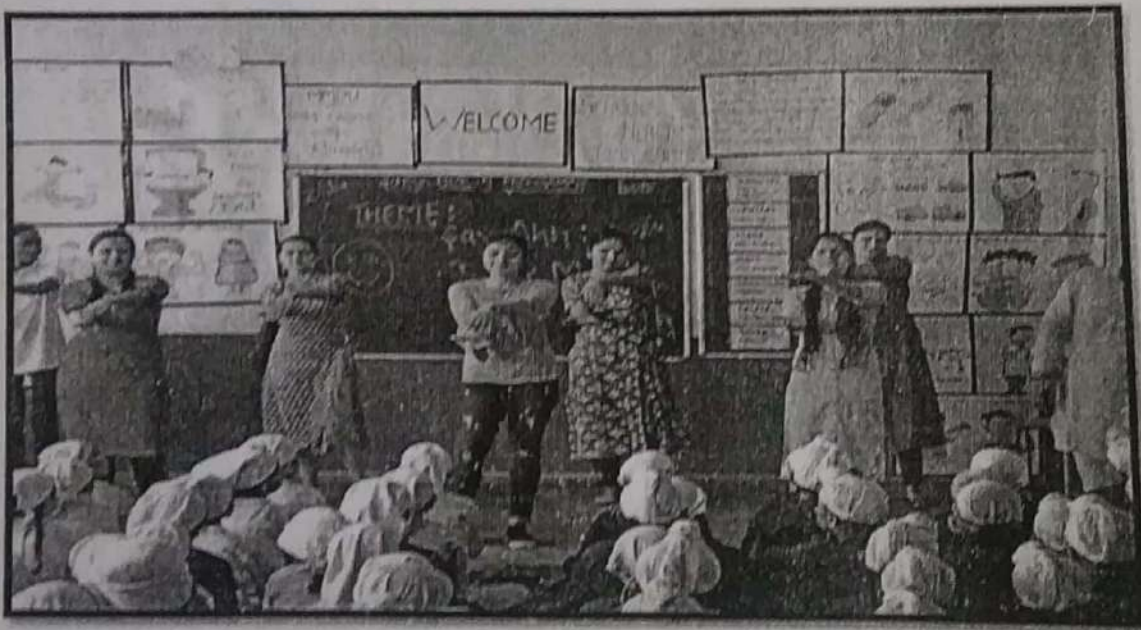
- PRE-SCHOOL HEALTH PROGRAMME: - On the previous day of the school health programme, we went to Akal Academy, Holi (Barara) for conducting the school health

programme, we have taken permission from the principal of the school for conducting this programme on topic HAND HYGIENE & ORAL HYGIENE. We prepared all the A.V aids & did the rehearsal for the role play as well as given the invitation to the principal and staff members of Akal Academy, Holi (Barara) and principal mam and all the faculty members of M.M College of Nursing for the school health programme.

- SCHOOL HEALTH PROGRAMME: - The school health programme on "HAND HYGIENE & ORAL HYGIENE" was conducted by B.Sc Nursing 4th year students with the help of faculty members on March 28, 2019 in Akal Academy, Holi (Barara) at 10:00-12:30pm. We measured the Antropometric Assesment of all students of the school.

Role play

Hand hygiene : we performed a dance performance on hand hygiene and covered all the steps of hand washing with proper explanation of each step to students and also explain charts showing health hazards of hand washing.





Oral hygiene: In this phase we performed a small skit on oral hygiene and teach brush techniques by using a model of teeth and brush and explain charts.



SCRIPT:

(SCENE 1)

Teacher enter the class

Students : good morning mam

Teacher : good morning students, sit down..aajhome workkrkeaye ho jo maine kl diyatha ?

Students : yes mam

Teacher : tell me 5 vegetables names , ramaneet

Ramaneet(student) : brinjal,potato,tomato, lady finger, spinach

(lunch break)

Student :chlokanakhaatehain..btaao sb kyakyaalaaye ho

Syla : m to aloo kisbjilaa hu

Shivaani :arey m to khane k sath chocolates b laai hu

Ramaneet : wow..

chlohme b dedoekek

(next day)

Student :good morning mam

Teacher : good morning bachon , sit down ,,chlo ab konmujhe 5 fruits names btyga

Student (ramaneet) : mam m sunaati hu.

Teacher :chlosunaao

Student : apple , mango, banana, orange or watermelon

Teacher : very gud, sit down

(lunch break)

Student :aaj tum kyalayehokhane m ?

Shivani : m to aaj b tofeeslaai hu

Ramaneet :yaarturoj ye sbbkhatih..humnhikhyenge ,meri mummy mnakrti h chocolates tofeeskhane k liye.

Shivani : (drinks water and shout)

Shivaani :aaahhh, mekodrd ho rha h daanto m

Ramaneet :haaw...chl mam k paaschlte h tujheleke

Syla : mam Shivani rorhih..usedrd ho rha h daant m

Teacher :chlotumhedoctr k paas le jati hu

Doctor :hloshivaani , kyahuaaapko

Shivani : mam mujhedrd ho rha h daanto m

Doctor : kb se ho rha h apkodrd ? kya khaya tha?

Shivani : mam bs abihua..paanipikr

Ramaneet : mam isnebhutsaari chocolates khaithi, ye daily khati h

Doctor : (checks the oral cavity)

Doctor : beta aapko dental caries ho gyi h..keede lg gye h daanto m itni chocolates kha krungi se.

Shivani : mam ab drd ho rha h

Doctor : tum brush krti ho ?

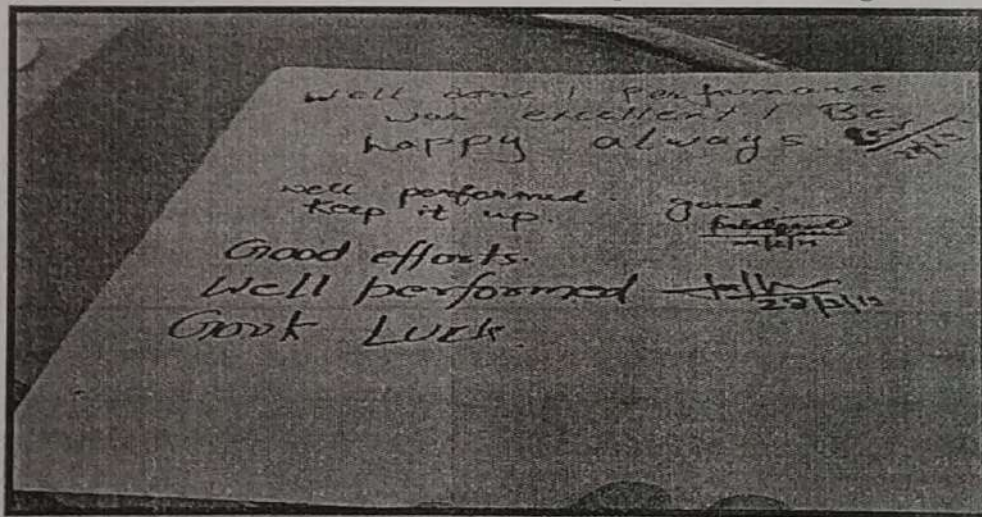
Shivani : yes mam kbhikbhikrti hu

Doctor : beta roz brush kiyakrovrnadaantkhrab ho jyga or m frdaantnikaaldungi. ~~Brush krungi~~

Shivani :nhi mam .. m ab brush krungi

Doctor :chlo m aapkobtati hu ki brush kaisekrtehain

(Performed brush techniques using model)





SUMMARY:

- Self introduction
- Previous knowledge of children are assessed.
- Dance on hand hygiene.
- Chart explanation on hand hygiene.
- Skit is performed on oral hygiene.
- Steps of brushing technique was explain with the help of model.
- Chat explanation on oral hygiene.
- Anthropometric assessment of the children was assessed.
- Evaluation was taken from children.

VOTE OF THANKS: They gave their precious time to us. We all were very thankful to the principal and the school staff for their cooperation and for giving us permission to conduct the school health program.

REFRESHMENT: We gave biscuits to the students and smosa and cold drink to the school staff.

CONCLUSION: Hand hygiene is the act of cleaning one's hand with or without the use of water or another liquid, or with use of soap for the purpose of removing soil, dirt and microorganisms. Oral hygiene cleaning the teeth and the oral cavity of the patient, it includes the measures to prevent the spread of the diseases from the mouth and increase the comfort of the patient.

M.M COLLEGE OFNURSING

COMMUNITY HEALTHNURSING II

GROUP PROJECT REPORT

On

TUBERCULOSIS

Submitted to:

Ms. Eenu

Asst. Professor

Submitted by:

B.Sc (Nsg) 4th year

1915084-1915109

REPORT OF TUBERCULOSIS

1. Tuberculosis is potentially fatal contagious disease but is mainly an infection of lungs caused by mycobacterium tuberculosis

OBJECTIVES:

- To improve the knowledge regarding the transmission of tuberculosis via using charts as a A.V. aids
- To minimize ,to both immune suppressed and immune competent person

THEME:

ITS TIME

END TB

SLOGAN;chaltihgaadi,udti h dhool,rehna h khushhaal ,to TB k lakshano ko
Andekharnekinakrenbhool

- DATE: - 29 March 2019
- VENUE: - community Area Adoya village
- LANGUAGE: - Hindi

COMMUNITY FIELD SUPERVISORS: -

- Ms.Uma Deaver
- Ms. Pooja Jaswal
- Ms. Pabalpreetkaur
- Ms. Eenu
- Ms. Kalpana
- Ms. Amanda
- Mr. Gautam

INCHARGES Of ROLE PLAY PROGRAMME: -

- Group leader: - Shwet ,priyanka
- Invitation: - Vini,
- Content: - Sonia, Shalini
- Role play: - Sharanjeet, Ramneet,Tushar, Ridhi,Shabnum,Vikram,Saila,Shivani,& Shalini
- A.V Aids: - Priyanka, Kusum, Ramneet, Tushar,Sonia,Shalini,Saila,Vini,Yasvir,Shwet, Vikram, Shakti
- Refreshment: - Shwet, Sharanjeet, Shakti
- Narrator: - Ridhi
- Report Making: - Anmol,Benza
- Video Making: - Yashvir
- Article Issue: - Shakti,Yashvir, Vikram

GROUP: people of community area adoya village & teachers of MMCON

PHASES: -

- COMMUNITY Area PROGRAMME: - On the previous day of the communityprogramme,we went to ADHOYA VILLAGE ,for conducting the role play in community area on topic TUBERCULOSIS We prepared all the A.V aids & did the rehearsal for , COMMUNITY ADOYA and principal mam and all the faculty members of M.M College of Nursing for role play programme.
- PROGRAMME: - role play programme on “TUBERCULOSIS ”was conducted by B.Sc Nursing 4th year students with the help of faculty members on March29,2019 in COMMUNITY AREA ,ADOYA VILLAGE at 10:00-12:30pm. We measured the AntroprometricAssesment of all People in adhoya village

Role play

TUBERCULOSIS: with provided materials is one health education method that can empower school aged people to understand tuberculosis prevention .the purpose of this role play is to identify the influence of role playing on tuberculosis transmission prevention in village adaoya

Role play script

SCENE 1(HOME)

Grand daughter : dada ji m aagyi

Dada ji : aagyi beta school se, aja mere pas beth ja

Grand daughter :nhi dada ji m nhiaati, ye aapkyaa pi rhe ho pipe sa..dekhoisme se kala dhuaanniklrha h, mmy ne b mnakiya h aapkepaasbethne se , aapkokhaansi h naa

Dada ji: achaterimmy ne mnakiya h, aajkl to terimaaabhuttej ho gyi h, bacho ko b paasnhaanedeti

Grand daughter :chlo ye choro , aapnedwai li ?

Dada ji :nhi, m nhileta

(2 mahine baad)

Dada ji : (cough a lot) blood in hanky

Grand daughter :khon ! daddy, jldi aao dekho dada ji hanky mein khon h

Son: papa kya hua yeh

Dada ji: beta ptanhichaati m dard ho rhi h or tujepta to h kiraat ko kitnapaseenabhiaatahai

Son :chlo doctor k pass chltehain

Scene 2 (clinic)

Dada ji: namastey madam ji

Dr :hnjinmste y, kya naam h apka, kaiseanahua ?

Son : madam papa ko 3 hfte se khaansi h , thik hi nhi ho rhi or aaj to khon b aya h blgum m chaati m drd b rehta h

Dr : ji thik h m aapko ye jaanchlikhkr de rhi h isekrake reports lekeana

Laal dibba : m hu laal dibba , m un logo ka sathi hu jin logo kit b kishuruaatidwaaichlrhihoti h , lekin m kbikbi fail ho jata hu frmera dost merasathdeta h vo h neeladibba

Neeladibba : m hu niladibbajbmera dost fail ho jata h to m kaamata hu lekinjb hum dono fail ho jate h to hum milkrkaamkrte h use khte h dots plus.

(2 din baad)

Son : lo madam ji ye reports

Dr : ji inko TB h , ye ek infection hota h jo , mycobacterium tuberculi se hotahai or khnsne , thukne, cheekne se failtahi m apko 6 mahinekidwailikhkrdeti hu je aapkobina skip kiyakhnihai daily

Son : ji theekhai madam, m inkodwai de dunga

(2 mahinebaad) clinic

Son: dr ji dekhainhe ye dwainhilehrhehai

Dr :hnpjibabajiaapdwai kyu nhilehrhe

Dadji : m nhiletamujheultiatihaiaur bathroom meibhikhoonatahai

Dr :areyvokhoonnhi h dwai ka asr h abh m apkodusridwaideti hu von hi chodhni h vernaapthiknihoge

(TB day celebration)

Giving rewards to the old TB patient by ASHA WORKER ND DOCTAR

CHAT EXPLANATION




SUMMARY :

- **Group introduction.**
- **Role play on tuberculosis.**
- **Chat explanation.**
- **Evaluation from the community people.**

REFRESHMENT:

We gave biscuits to the community people and smosa and coldrink for teachers.

CONCLUSION: Tuberculosis is potentially fatal contagious disease but is mainly an infection of lungs caused by mycobacterium tuberculosis.


Dr. (Mrs.) Jyoti Sarin
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Maharshi Markandeshwar (Deemed to be University)
Mutana-Ambala, Haryana-India,133007

M. M. COLLEGE OF NURSING, MULLANA

“REPORT ON GOOD TOUCH AND BAD TOUCH”

“Bachon Ka Jeevan Samporan Banaye, Ache Bure ki Samjh Padhaye”

INTRODUCTION

Under the theme of “**Bachon Ka Jeevan Samporan Banaye, Ache Bure ki Samjh Padhaye**”, school health programme was done by B.Sc (Nursing) 4th Year students of M.M College of Nursing, Mullana on 23rd April 2019 in Giandeep Public School, Adhoya. Under the guidance of Mrs. Uma J. Deaver (HOD), Ms. Eenu (Assistant Professor), Ms. Pooja Jaswal (Assistant Professor), Ms. Pabalpreet Kaur (Nursing Tutor), Ms. Kalpana (Nursing Tutor) and Ms. Amanda (Clinical Instructor).



GOOD TOUCH AND BAD TOUCH:



- Today, child molestation and physical abuse are so very rampant. Every other day we get to know and hear stories about child being molested or touched inappropriately. Therefore, there is a need to teach the children about safe (good) and unsafe (bad) touch to prevent child abuse and harassment.
- Good touch makes a child feel secure, cared for and happy.
- Bad touch makes child feel uncomfortable, afraid or nervous.

AIM OF SCHOOL HEALTH PROGRAMME:

- To improve knowledge of people regarding good touch and bad touch among children.
- To create awareness among people regarding good touch and bad touch.
- To conduct a school health and awareness programme for the school children and teachers.

OBJECTIVES OF SCHOOL HEALTH PROGRAMME:

- To provide knowledge to the school children regarding good touch and bad touch.
- To conduct health assessment of children.
- To conduct role play on topic good touch and bad touch.
- To educate regarding good touch and bad touch, and child helpline number.

PLANNING:

We planned to conduct a health assessment and school health programme in Giandeep Public School, Adhoya on the topic **Good Touch and Bad Touch**. We invited teachers from M.M College of Nursing, teachers from Giandeep Public School and school children for the school health programme.

On 23rd April 2019 we the students B.Sc (Nursing) 4th Year came to college for attendance then we visited Giandeep Public School, Adhoya for conduction of school health programme under the theme **Bachon Ka Jeevan Samporan Banaye, Ache Bure ki Samjh Padhaye**.

GROUP:

There was approximately gathering of 40-50 members which includes teachers of MMCON, teachers of Giandeep Public School and school children.

PHASES:

• PRE GROUP PROJECT

On the previous day of the school health programme, we went to Giandeep Public School, Adhoya to take permission from the school Principal for conducting the school health programme. We have taken permission from the school Principal and faculty. We prepared all the A.V. Aids and did the rehearsal for the role play and gave the invitation to Principal Ma'am and all faculty members of M.M. College of Nursing for the school health programme.

• GROUP PROJECT

The school health programme on topic "Good Touch and Bad Touch" was conducted by B. Sc. Nursing 4th year students with the help of faculty members on 23rd April, 2019 at Giandeep Public School, Adhoya from 10:30 am to 12:30pm.

ORGANIZATION

- **Date:** 23rd April 2019
- **Venue:** Giandeep Public School, Adhoya
- **Language:** Hindi
- **Supervisors:** Mrs. Uma J. Deaver (Head of Department)
Ms. Eenu (Assistant Professor)
Ms. Pooja Jaswal (Assistant Professor)
Ms. Pabalpreet Kaur (Nursing Tutor)
Ms. Kalpana (Nursing Tutor)
Ms. Amanada (Clinical Instructor)

INCHARGES OF THE GROUP PROJECT:

- **Group Leader:** Aarti and Angrej
- **Content:** Amandeep (06) and Damanjeet
- **Script:** Anshul and Amandeep Kaur
- **Narrator:** Amandeep (06)
- **Invitation:** Anaya, Bhawna and Anjali
- **A.V. Aids:** Diksha (23), Ajuni, Aarti, Anaya, Anjana, Archana, Amandeep (05), Amandeep (06)
- **Charts Explanation:** Amandeep (05), Ankush, Deeksha Thapa, Anjana, Anuradha
- **Refreshment:** Goldenjeet and Angrej
- **Budget:** Amandeep Kaur (06)
- **Video and photography:** Anshul and Ajay
- **Management:** Angrej and Goldenjeet
- **Role play:** Ankush, Anuradha, Anjana, Amandeep (05), Damanjeet, Ajuni, Aarti, Bhawna, Deeksha (23), Ashish, Angrej and Goldenjeet

- **Health Assessment:** Ankita Dhiman and Sarabjeet Kaur
- **Report:** Ankita Dhiman



HEALTH ASSESSMENT DATA:

<u>CLASS IV</u>		
NAMES	HEIGHT (cm)	WEIGHT (kg)
Yashpreet	127	30
Tanvi	141	31
Kanika	130	32
Lakshay	127	28
Aditya	135	29
Aniket	139	31
Tanmay	140	33
Deepak	122	26
Aaryan	130	29
Lalit	130	30
Divanshu	126	28
Mayank	119	25
Raghav	133	29
Krish	144	36

CLASS V

NAMES	HEIGHT (cm)	WEIGHT (kg)
Muskan	136	38
Arushi	139	38
Shivangi	153	42
Kanak	136	25
Kalpana	133	29
Rashi	129	27
Mansi	133	26
Karan	128	29
Divyanshu	133	28
Udit	129	30
Harshit	138	25
Navjot	128	30
Varun	142	29
Rohit	133	34
Vansh	142	34
Arnav	133	28
Jatin	141	31
Aaryan	127	24
Ankit	135	31

MM COLLEGE OF NURSING

GROUP PROJECT ON HYPERTENTION



SUBMITTED TO

MS EENU

ASSISTANT PROFESSOR

COMMUNITY HEALTH

NURSING DEPARTMENT

SUBMITTED BY

B.Sc. NURSING

2ND YEAR

GROUP 2

(1917046-1917107)

GROUP PROJECT ON HYPERTENSION

B.Sc. Nursing 2nd year student did the group project on hypertension. We teach the rural people regarding the hypertension.

Hypertension (HTN), also known as high blood pressure, is a long term medical condition in which the blood pressure in the arteries is persistently elevated.

The systolic blood pressure will be more than or equal of 140 mm of Hg and diastolic blood pressure will be more or equal of 90 mm of Hg.

In this project we had discussed about the;

- Definition
- Causes
- Sign and symptoms
- Stages
- Complication
- Treatment and managements

OBJECTIVES

1. To assess the health status of the community people.
2. To provide general awareness about the hypertension.
3. To conduct a role play to enhance the knowledge regarding the hypertension.

THEME-KEEP A HEALTHY HEART, SO WE WOULDN'T BE APART.

SLOGAN-*“hm sbka yhi hai naraa utrktchaaap mukt desh ho hmara.”*

DATE-12th April 2019

VENUE-Village Adhoya (Anganwadi)

LANGUAGE-Hindi

COMMUNITY FIELD SUPERVISIORS

- Ms Uma Deaver
- Ms Eenu
- Ms Pabalpreet Kaur
- Mr Prakash
- Ms Kalpna
- Ms Amanda
- Mr Gautam

TOTAL NO. OF GROUP MEMBERS:

B.Sc. Nursing 2nd year students (1917046-1917101)

INCHARGE OF GROUP PROJECT

Group Leader-Vivek and Shivani

Invitation Incharge –Seemerdeep Kaur

Content-Shivani

AV Aids In charge- Salma Rathor, Sherjana Rai, Shanu Abdula, Sapna , Tenzin Dorji, Sumeer, Shivani Minas, Swati, Zahid, Taheer, Swraj, Seemerdeep kaur, Vandana , Puja, Shokinder.

Role Play- Vivek, Sahil Sharma (80), Swraj , Sumit (97), Yogita, Swati, Sachin , Shivam.

Refreshment Incharge- Vivek and Sumit (96)

Narrator-Sneha Saini , Yogita, Swati, Sanoj.

Video and Photo Incharge- Sahil(79), Vinet, Shivam.

Report Making Incharge - Sherjana Rai, Salma, Shanu.

Health assessment Incharge- Tenzin, Vandana, Sherjana, Shanu, Pooja
(Senior)

Charts Explanation Incharge- Sneha, Sumit (97), Swati.

Invitation Calling Incharge- Shokinder, Wajid, Shivani Rani(88)

Group- There was approximately gathering of 40-50 members which include teachers of MMCON, People of Adhoya Village.

PHASES

- **PRE GROUP PROJECT**

On the previous day of the group project, we went to rural community village Adhoya for conducting the group project, we have taken permission from care takers of house for conducting group project on hypertension. We prepared all the AV Aids did the rehearsal for the role play and give the invitation card to Principal Mam and all faculty members of M M College of Nursing for the group project.

- **GROUP PROJECT**

The group project on hypertension was conducted by B.Sc. Nursing 2nd year students group from (1917046- 1917107) with the help of faculty members on 12th April 2019 at the Anganwadi of village Adhoya at 11:00 -12:40pm.

HEALTH EDUCATION

Health Education on definition , causes , signs and symptoms, complication , management and prevention of hypertension is explained with the help of small role play and charts.

REFRESHMENT

One small biscuit was given to all the community people who attended the group project.


VOTE OF THANKS



After role play and comments from teachers and community people , we thanked to all the teachers and community people who gave us their valuable time for listening role play and encouraged us to do this knowledge full project next time also.

SUMMARY AND CONCLUSION

Because of this role play on “Hypertension”, Community people got adequate knowledge .It was knowledgeable for the community people.



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M.M.COLLEGE OF NURSING

(MULLANA AMBALA)

GROUP REPORT

ON



STUNTED GROWTH AMONG 5 YEARCHILDREN

SUBMITTED TO:
MS PABALPREET KAUR
(NURSING TUTOR)

SUBMITTED BY:
POST BASIC BS NURSING
2nd YEAR
ROLL NO (1917201-1917230)

REPORT ON STUNTED GROWTH

SAHI POSHAN, SAHI VIKAS, YHI H HMARA PRYAS.

INTRODUCTION:-

Under the above stated theme group project was done by the students of Post Basic BSc Nursing 2nd year of M.M College of Nursing Mullana Ambala on 13 May, 2019 in Adhoya village in community area. Under the guidance of Mrs. Uma Jebamma, Ms Eenu, Mrs. Pooja Jaswal, Ms Pabalpreet Kaur, Mr. Parkash Jha, Ms Amanda.

INTRODUCTION

Malnutrition:-

Malnutrition refers to deficiencies, excesses, or imbalances in a person's intake of energy and or nutrients. The term malnutrition addresses 2 broad groups of conditions: under nutrition, which includes wasting, stunting, and underweight.

Stunted growth:-

According to WHO a child who is shorter height than expected based on age is known as stunted growth. It is also known as nutritional dwarfism.

According to the National family health survey -4 years has unacceptably high levels of stunting, despite marginal improvement over the years. In 2015-16 38.4% of children below the 5 years were stunted 35.5% were under weight. India ranks 158 out of 195 countries on the human capital index. More than 90% of the world's stunted children live in Africa, Asia 36% and 56% of the children are affected.

THEME:

EAT RIGHT BE BRIGHT.

AIM OF GROUP PROJECT:

1. To improve the knowledge regarding the stunted growth.
2. To educate the community about the importance of growth and development of under 5 year children.

OBJECTIVES:-

1. To check the growth and development of the children according to age group.
2. To check the degree of malnutrition of the children.
3. To monitor the blood pressure, weight, height, of the community mother and under 5 year children.
4. To check for any growth retardation or any other abnormalities in the under 5 year children.
5. To perform the role play in the community area,

6. Give the health education with the help of charts.

SLOGAN:-

SAHI POSHAN, SAHI VIKASH, YHI HAI HAMARA PRYAS.

ORGANIZATION:-

DATE:13-5-2019

TIME:11:00am

VENUE: Adhoya

LANGUAGE:HINDI

GROUP PROJECT SUPERVISORS:-

Mrs. Uma

Ms. Eenu

Mrs. Pooja

Ms. Pabalpreet Kaur

Mr. Prakash Jha

Ms. Amanda

INCHARGE OF THE GROUP PROJECT:

Group Leader:-Tshring, Rashi.

Invitation incharge:Jyoti and Rashi.

A.V Aids incharge:Rupinderkaur,DamanpreetKaur, Money, Seema, Sweety,

Yogeshwari,Arti, Hemkala, Neelam, Priyanka, Anita, Priyanka.

Video and photo incharge:-Ajay, Tshring

Refreshment incharge:Priti, Neha.

Report writing:-Pooja And Nivedita

Chart Explanation:-.Rupinder,Daman,Sukhvinder

Role play:- Sweety, Vidya, Kaushalya,Neelam,Jasvinderkaur, Sukhvinder, Priyanka.

Script writing: Shvali

Post basic Bsc Nursing 2nd year students (1917201- 1917231)

PARTICIPATION OF GROUP MEMBERS:

There were approximately gathering of 50-60 members which include teachers, students, family members and public.

PHASES

PRE GROUP PROJECT:

On the previous day of the group project we did survey in Adhoya village. We conducted the group project in Adhoya temple and we had taken permission from care taker of temple for conducting the group project in temple on growth and development of the childrens. We gave the invitation to principal ma'am and all the faculty members of MM College of Nursing for the group project. Informed all the family members and invited them to decided venue.

SCRIPT

Avrudh vikas

Sahi poshan sahi vikas, yhi hai hmara prayash.

Narrator: Hum mmu ke chhetr or chatraye ek laghu natika kar ke dikhayege. Jiska shirshak hai Avrudh vikas iss laghu natika ke patr hai anguri devi (asha) santosh (aw) lacho, sunita , batere angrajo (mother) kavita, priya, or chintu(bche)

ASHA: Nameshkaar, aap sab kaise hain?

MOTHER: Hum sab theek hain.

ASHA: Aapka naam kya hai, bache ka naam kya hai or iski umar kitne hain.

1. LACHO: Mere naam lacho hai ,bche ka naam kavita hai or ye 4 saal ki hai.
2. SUNITA: Mera naam sunita hai, or mere bche ka naam priya hai or ye 2 saal ki hai.
3. BATERI: mera naam bateri hai or mere bcha 7 mahine ka hai.
4. Angrajo: mera naam

ASHA : Ap ke bacho ko kya dikat hai.

1. Lachoo: Mere bache ko dast or ulti hai or vo bot kamjor hai.
2. Sunita: Mere bache ka bajan ni badta hai.
3. Batri: Jab mera bacha peda hua yab uska wajan 1.5 kg tha or ab 3.5kg hua hai.
4. Angrajo: Mera bacha bilkul swasth hai.

ASHA: Sathosh (anganwadi worker)in bacho ka wajan or lambai naap lo.

Santosh: Theek hai madam ji.

ASHA: Aap sab kya kya kaam krte ho?

- Lacho: mai ghar pe kaam krti hun.

- Sunita: mai nokari krti hun.
- Bateri: mai ghar ka kaam krti hun.
- Angrajo: mai ghar ka kaam krti hun.

Santosh (anganwadi worker):Madam ji height or weight le liya or ek bache ka theek hai, baki bacho ka kaam hai.

ASHA: Acha theek hai ab tum apna kaam kro

ASHA: Angrajo apke bache ka wajan or lambai uske umar k hishab se bilkul shai hai, or baki ap sab k bacho ki lambai or wajan umar k hishab se kam hai, to apko iska karan kya lgta hai.

Mother: hum to sb ache se khilate pilate hai, pta ni ji kya dikat hai.

ASHA: kya ap khana bnane se phle hath dhote ho or kya apne apne bacho ka tikakaran krvaya hai or janch krvayi thi jab bacha pet mai tha, kya apne bache ko 6 mahine tak dhud pilya tha?

Lacho: ji hath dhone ka time ni lgta bus pani se dho lete hai.

Sunita: ji mai to apne bache ko time ni de pati qki mai subha hi nikari pe chle jati hun.

Bateri: ji maine to apne bache ko 1.5 mahine tak apne dhud pilya baki toh upr ka hi leta hai.

Angrajo:maine to apne bache ko 6 mahine tak dhud pilya or sth main sare tike v lgaye hai or usk baad bache ko daal ka pani or daliya dena shuru kr diya.

Narrator: aap sab ne dekha jin bacho ki height or weight kam hai unki mata ne apne dikte btayi.

ASHA: jasiye ap sab ne btaya ki humre bacho ka vikash ache se ni ho rha or isk kya kya karan hai toh mai apko btati hun ki ache vikash k kiye ap kya kya kr skte hai.

- Sabse phle apko khana bnane se phle apne hath dhone(hand washing steps).
- Garbh awastha ke dawarn apne apne smay smay se jamnch or sare tikakaran krvane hai.
- Or janam k baad bache ka bhi smay pr tikakaran krna hai.
- Bache ko 6 mahine tak apna hi dhud pilna hai, or 6 mahine k baad upr ka aahar shuru krna hai.
- 5 saal se chote bache k liye ghar pe hi laddu bna skte ho(hydrawadi laddu)
- Jin bacho ko dast ya ulтийon lgti hai unko bacho ko ors or nimbu chine ka ghol bna skte ho.(ors prpocedure)
- Bhar ka tala hua khana ni dena hai or ye pepise or cold drink v ni dene hai.
- Khana bnane se phle sabjiyon ko ache se dhoye or fir kahan bbanye.

Narrator: ap sab ne dekha ki hum kasiye bache ka vikash ko badhva de skte hai, kya pa sb ko smajh aaya.

After 10 to 15 days

ASHA: kasi ho ap sab, ab apke bacho ki sehat kasi hai.

Mother: phle se thodi theek hai.

ASHA: ap log ek bar fir se apne bacho ki lambai or wajan ki janch krva lo.

Santosh: theek hai madam ji.

Santosh: ab in sab bacho ka wajan or lambai or wajan shi hai.

GROUP PROJECT

Scene 1: ASHA and anganwadi worker interact with each other.



Scene 2: Identify the problem and make the self help group.



Scene 3: ASHA worker showing the ORS preparation and nutritional laddu.



Scene 4. In this chart explanation definition of shunted growth, causes, sign and symptom, risk factors and prevention.



ACTIVITY IN GROUP PROJECT (HEALTH CAMP)

1. Registration counter.
2. B.P. Monitoring
3. Height and weight monitoring.

THE HEALTH CAMP ON STUNTED GROWTH:

- All students of Post basic BSc Nursing 2nd year were inform to all family members by visiting door to door for attending the health Camp .
- After that the registration was done to all members who were visited at the site of health camp.
- In health camp the students had checked the weight, Bp, Height, and reports were given to each member.
- Chart explanation was done, which includes the shunted growth, causes, signs and symptoms, diagnostic evaluations, management and specific dietary plane.
- Comments were taken by member about the health camp.
- Recording and reporting was done.
- Refreshments were distributed to audience.

MOTHER:-

Sr. NO	AME	AGE(in years)	SEX	BP (mmHg)	WEIGHT (Kg)	HEIGHT (Cm)	BMI(kg/m ²)	Interpretati on
1.	Rajbala	35	Female	120/80m mhg	63kg	156cm	25.9	Over weight
2.	Jumera Devi	65	Female	120/80 mmhg	56kg	160cm	21.9	Normal

3.	Paninder	28	Female	120/80 mmhg	45kg	152cm	19.5	Normal
4.	Pinki	26	Female	100/70 mmhg	44kg	149cm	19.8	Normal
5.	Indrumati	40	Female	130/70m mhg	56kg	156cm	23.0	Normal
6.	Mangeet	29	Female	110/80 mmhg	55kg	154cm	23.4	Normal
7.	Nirmda	50	Female	120/70m mhg	34kg	151cm	19.8	Normal
8.	Mindro	60	Female	130/80m mhg	55kg	155cm	22,9	Normal
9.	Rajani	48	Female	120/70m mhg	55kg	164cm	20.4	Normal
10.	Champa	40	Female	110/70m mhg	58kg	168cm	20.5	Normal
11.	Sangita	22	Female	110/80m mhg	42kg	160cm	16.4	Under weight
12.	Meenu	20	Female	100/70m mhg	40kg	157cm	12.8	Under weight
13.	Alka	21	Female	100/80m mhg	49kg	160cm	19.1	Normal

CHILD:-

1.	Mayank	18 month	Male	-	7kg	73cm	13.1	Underweig ht
2.	Priya	7	Female	-	19kg	120cm	13.2	Under weight
3.	Kahav	2	Male	-	10kg	97cm	10.6	Under weight
4.	Dinesh	14	Male	-	27kg	145cm	12.8	Under weight
5.	Aadi	1	Male	-	9kg	78cm	14.8	Under weight

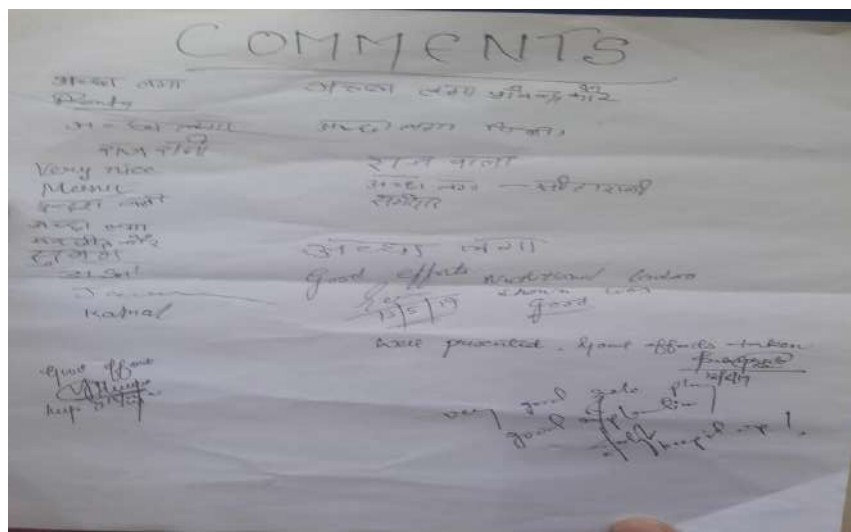
Blood Pressure Monitoring counter:-



Group Project supervisor and group members:-



Vote for thank you:-



REFRESHMENT:-

End of laghunatak we gave the refreshment (Biscuit) to the audience.

REMARKS:-

At the end of group project people praised students and give positive views about health camp and thanks the students for the programme.

CONCLUSION:-

By this group project community people got enough knowledge regarding Stunted growth. Community people are so cooperative and showed active interest during the group project. It was

acknowledge and enriching experience as the students got confidence in organising the project at community level.SSSSSSSS



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