

## **Report on ISR activity done on 1<sup>st</sup> December, 2021**

Title of the Activity: International Disability Day  
Venue: Ravidas Temple, Barara, Ambala  
Date: 1<sup>st</sup> December, 2021  
Time: Afternoon (2.30 PM- 3.30 PM)

Faculty members from Department of Biotechnology, MMDU, Mullana, Ambala along with the Head of The Department Prof. (Dr.) Anil Sharma spent time with under privileged children on the occasion of International Disability Day which is observed on 3<sup>rd</sup> December every year. Head of the department (Biotechnology), Dr. Anil Sharma along with teachers of the department Dr. MahitiGupta, Er. PaavanSinghal, Dr. Raj Singh, Dr.Diwakar Aggarwal, Dr.SushilUpadhyay and Dr. Ajay Gupta met around 65 under privileged children studying in Government School, Barara, Distt. Ambala. Dr. Anil Sharma and other teachers briefed the children about International Disability Day and its importance. Teachers tried to know about the problems childrenface, related to their studies. Dr. Anil Sharma motivated the children with several examples that how many people with physical challenges got success in their lives. They suggested students not to discriminate any boy or girl who is physically challenged and they should rather help them to make them independent. Teachers distributed food items along with samosa and sweets to the children.





Barara, Haryana, India  
Unnamed Road, Sharaqpur, Haryana 133201, India  
Lat 30.213641°  
Long 77.041629°  
01/12/21 03:39 PM

**MAHARISHI MARKANDESHWAR ENGINEERING COLLEGE, MULLANA,  
AMBALA**

**CIVIL ENGINEERING DEPARTMENT**



We buy a lot of clothes throughout the year. And if we notice, a good amount of clothes lie untouched in our wardrobes. Why dump them when there are millions of under-privileged people in this world struggling to get enough bread to live for the next day, enough rag to cover themselves away from humiliation and enough shelter that promises them some hope for tomorrow. So in view of the above context a cloth distribution drive was organized by the Civil engineering department on **14th November, 2021** for the poor and needy people. All the faculty members and students of Civil engineering department donated open heartedly for the noble cause. **Mr. Amanpreet Singh** of Civil engineering department, MMEC, MMDU, Mullana coordinated the entire drive. The donation of cloth was done at **slum area in Sector-8, Grain Market, Ambala City, Haryana**. We as a department strongly feel about destitute and for us

**MAHARISHI MARKANDESHWAR ENGINEERING COLLEGE, MULLANA,  
AMBALA**

**CIVIL ENGINEERING DEPARTMENT**

nobody should suffer the lack of clothes. The smiles on the faces of the needy people proved the success of the event.

mmdumullana The Institute of MMICT&BM (Hotel Management) MMDU,Mullana has organized a fun filled day on 24.12.2021 with the specially-abled children of ASHA School Ambala Cantonment on the occasion of Christmas. Our Institute students spent some joyful moments with these little bundles of joy. Celebration started with the cutting of cake, followed by some fun-filled games. The children were overloaded with the happiness of receiving Christmas greeting cards made by our students.



**MAHARISHI  
MARKANDESHWAR**  
(DEEMED TO BE UNIVERSITY)  
Mullana-Ambala, Haryana

(Established under Section 3 of UGC Act, 1956)

(Accredited by NAAC with Grade 'A++')

## CHRISTMAS CELEBRATION WITH ANGELS OF ASHA SCHOOL AMBALA



MM INSTITUTE OF NURSING



GROUP PROJECT ON  
MALNUTRITION

SUBMITTED TO -  
MS. JYOTI PHOUGAT  
(Assit. Professor)

SUBMITTED BY-  
B.Sc. NURSING 3<sup>rd</sup> Yr  
Roll no.(21-40)

SUBMITTED ON – 07/12/2021



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



## REPORT OF GROUP PROJECT

We are the students of B.Sc Nursing 3<sup>rd</sup> year conducted a group project on MALNUTRITION to educate the patients and their relatives about malnutrition.



SUPERVISED BY –

MS. JYOTI PHOUGAT (ASSIT. PROFESSOR)  
MS. PARVINDER KAUR (CLINICAL INSTRUCTOR)

### INTRODUCTION –

We are the students of B.Sc Nursing 3<sup>rd</sup> year conducted a group project on MALNUTRITION to educate the children and their family members about malnutrition. This group project was started with the introductory speech which was preceded by the role play than the explanation of charts



**OBJECTIVES-**

- To create awareness among people regarding malnutrition.
- To impact knowledge regarding the management and prevention of malnutrition.

**DAY-** 7<sup>TH</sup> December '2021

**VENUE-** MMIMSR hospital of ground floor OPD registration area

**TIME-** 10:30 am onwards

**COMMITTIES:**

**TOPIC - MALNUTRITION**

**THEME :- EAT RIGHT BITE BY BITE**

**SLOGAN:-** " Jruratmand tak bhojan pohnchaye , kuposhn ko door bhagaye"

**ROLE PLAY-**

**NAME OF THE CHARACTERS-**

**SCRIPT WRITER-** Ramandeep kaur (2019025) and Reman (2019028)

**NARATOR-**Parag (2019021)

**ROLE PLAY CHARACTERS**

Sushma – Ritika (2019032)

Preeti – priyanka bhatti (2019022)

Sushma's saas (taai)- vishakha (2019040)Preeti's saas- sonika(2019037)

Teacher – reman (2019028)

Sushma's child(Abhi) – razia-(2019031)

Preeti's child(Gaurav)- Sangeeta(2019033)

Student – riya(2019030)

**CHART EXPLANATION BY**

Ramandeep kaur (2019025)

Reman(2019028)

**DISCIPLINE AND REFRESHMENT-**

Sonam (2019036)

Sakshi (2019034)

Yadav(2019023)

Swarpreet kaur (2019038)

**REPORT-**

Swarpreet kaur (2019038)

**CHART PREPARE-**

Parag (2019021)

Priyanka bhatti (2019022)

Priyanka yadav (2019023)

Ramandeep kaur (2019025)

Reman (2019028)  
Renu(2019029)  
Riya(2019030)  
Razia(2019031)  
Sangeeta(2019033)  
Ritika(2019032)  
Sakshi(2019034)  
Sheetal (2019035)  
Sonam(2019036)  
Sonika(2019037)  
Swarpreet kaur(2019038)

**INVITATION CARD-**

Sonam (2019036)  
Rashmi (2019027)

**LESSON PLAN-**

Rakesh (2019024)

**PAMPHLET-**

Riya (2019030)

Swarpreet kaur (2019038)

Ramandeep kaur(2019025)

CONCLUSION-

It was a short educational play on the topic – ‘MALNUTRITION’.

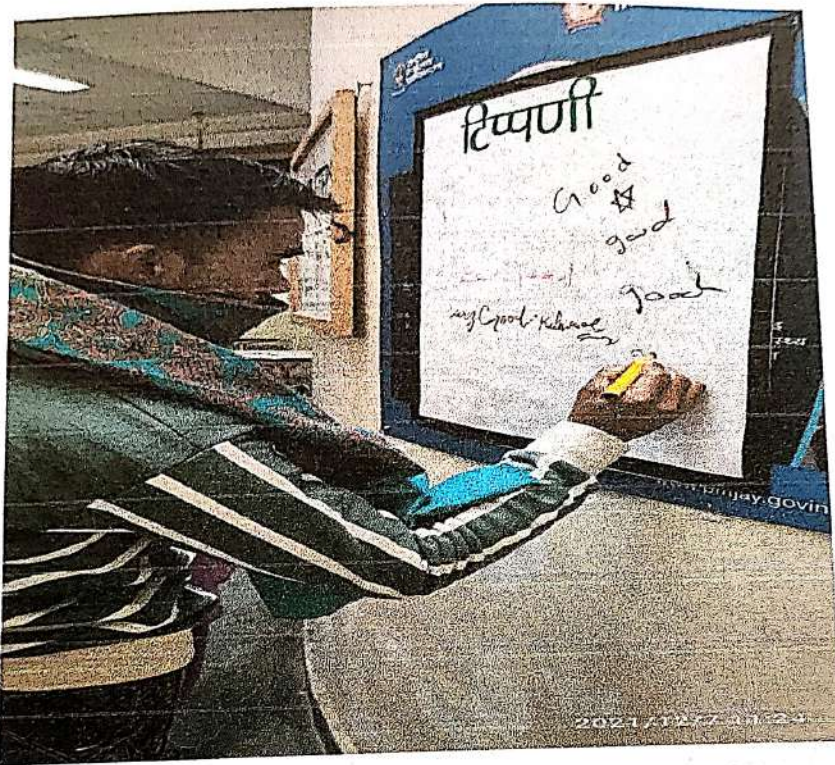


## CHARTS EXPLANATION

Introduction and definition , causes ,sign &symptoms explained by Ramandeep kaur ,sign& symptoms , prevention explained by Reman and treatment explained by Ramandeep kaur.

All students are confidence in organizing the project.

## COMMENTS-



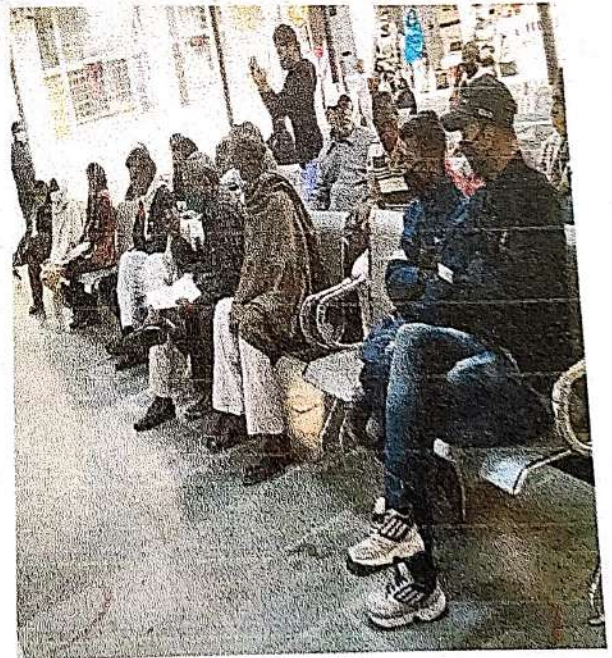
## REMARKS

At the end of the group project, the group praised the student's effort in execution of the group project. They gave positive comments. The concerned teachers also praised the students and also told the students about their shortcomings. It was the appreciating moment for the whole group. As all of the students worked hard together for the group project.



VOTE FOR THANKS

At the end of the role play and chart explanation, vote of thanks was given by





#### FEEDBACK-

Patient was able to understand the topic clearly and relatives of the patients also understand the topic very well. When questions were asked to the patients and relatives, they were able to give proper answer. It was a very effective role play the ward people were able to understand it and they enjoyed the role play and understand about MALNUTRITION.

#### **ROLE PLAY**

Swastya he jeevan ka saar , iske bina hai sb bekar

Namaskar! Mai Parag or ye mere Sehpathi. Hum B.SC Nursing teesre varsh ki chaarty hai or aaj hm aapke saamne ek laghu natika prastut karne ja rhe hai. Iss natak ke dauara hum aap logo ko jaagruk krenge ki kaise kuposhn kya hota hai or isse kaise bach skte hai .

To aiye mei aapko is natak ki kirdaro se parchit karwati hu.

Sushma – Ritika (2019032)  
Preeti – priyanka bhatti (2019022)  
Sushma's saas (taai)- vishakha (2019040)  
Preeti's saas- sonika(2019037)  
Teacher – reman (2019028)

Sushma's child(Abhi) – razia-(2019031)  
Preeti's child(Gaurav)- Sangeeta(2019033)  
Student – riya(2019030)

Mujhe aasha hai ki aap is natak ki kirdaro se bhali bhati parchit ho chuke hai.  
To aaiye iss natak ki suruwat karte hai.

### SCENE 1

Sushma: Ati hu , Namaste didi kaisi ho , yeh lo parsad khao , apki bhen garbvati hai, kal janch karwa k ayi hu , aap kab suna re ho khushkhabri .  
Preeti - teri saas ne btaya nahi hai , mein bhi garbvati hu.  
Sushma- aare badai ho didi , chlo mein chlti hu baad mein milte hai abhi kam hai.



### SCENE 2

Sushma – kam karti hui , chkr aa jate hai  
Preeti – bhen tum itni bhari vajan kyu utha rahi ho , is avastha mai itna vajan nhi utate  
Sushma – kuch dino se mere sir mein dard , chakkar aa rahe , thakan , na khane ka mn krta hai .  
Preeti- chal tere ghar chalet hai , taai Namaste  
Taai – kaisi ho beti , tabiyat thik hai sushma teri  
Preeti – ha ji taai mein to thik hu , taai sushma ko kya hua itni kamjor kyu ho gyi hai , khati piti nahi hai kya  
Taai – aare khati to hai jo hum khate hai vo bhi yahhi khati hai , abhi to isne raat ki roti khai hai

Preeti- dekho taai mein apki baat kaat nhi rhi lekin avastha mai poshtik , taza aahar ka  
sewan krna chahiye , is avastha mai samanya se jyada diet ki jrurt hoti hai , jaise hari sabjiya ,  
Dudh , palak , falo , aadi khane chaiye

Sushma- in chijo se to mera mann kacha hota hai

Taai - yeh dekhlo iska mann hi nahi karta , hum to khane ko dete hai

Preeti- taai aap iske saath kam karne main madad kr diya karo aagr isko rasoi main  
karni karti huye mann kacha hota hai , acha , taai apne preeti ka panjikan karvaya hai ?  
mujhe to vaha se folic acid , iron goli dete hai jo ache aur maa dono ke liye  
bhut jruri hai

Taai - yeh to ajkl ke chochle hai , hmare bache bhi to bina panjikan ke sawasth  
ghum rahe hai

Preeti- apko karvana panjikan ya na karvana apki marji hai



### SCENE 3

#### Delivery Time

Sushma ko 8 mahine main dard shuru ho gya hai , aur preeti ke 9 mahine

Doctor- aap mai se sushma ke saath kon hai osko khoon ki kami hai , is samay khoon ki  
bhut jrurt hai jldi se intzam karwao vrna maa aur bacha dono ke liye khtra ho skta hai A+  
Blood ki jrurt hai

Taai - Doctor mai kaha se lekr aau khoon , mein is umar mein kaise khoon dhan karu



Sushma ki saas- aare bhut kuj nhi hota, khoondhan krna to sbse bda daan hai , khiin ka kya  
120 dino mai dubara hai

Taai- chlo thik hai bhen ji

Doctor- badhai ho aap dono ko ladke hue hai , Preeti ko aap kal ghar leke ja skte hai ,  
Sushma aur oska bacha thode dino ke liye hospital main rkhna padega , yeh dono kamjor hai

Taai – na ji na hum nhi rkhte hai , hum to kal hi leke ja rahi hu , are mai apne pote ko  
aese hi paal lugi



### After One Month Birth

Taai- mere pote ka vajan kyu nhi bad raha , yeh sara din rota rehta , itna dudh pilati hu ,  
gaye ka bhi aur powder ka bhi

Sushma ki saas – aare isko koi aur dudh nhi sirf maa ka dudh pilao hor fir dekhna kaise  
vajan badega , kkoii upri aahar nhi dete 6 mahine tak

### School Ka Darishye

Bche class main bethe hai

Abhi- aare aaj bhi mummy ne palak ki sabji dedi main hi khauga , chlo yar bhar kuj aur  
khane chalet hai

Gaurav- chlo chlte hai yar , jldi –jldi khalo fir race competition hai , mam ne bola thajldi –  
jldi aa jana

Teacher- sb khana kahke aye ho ? sb tayr ho race ke liye



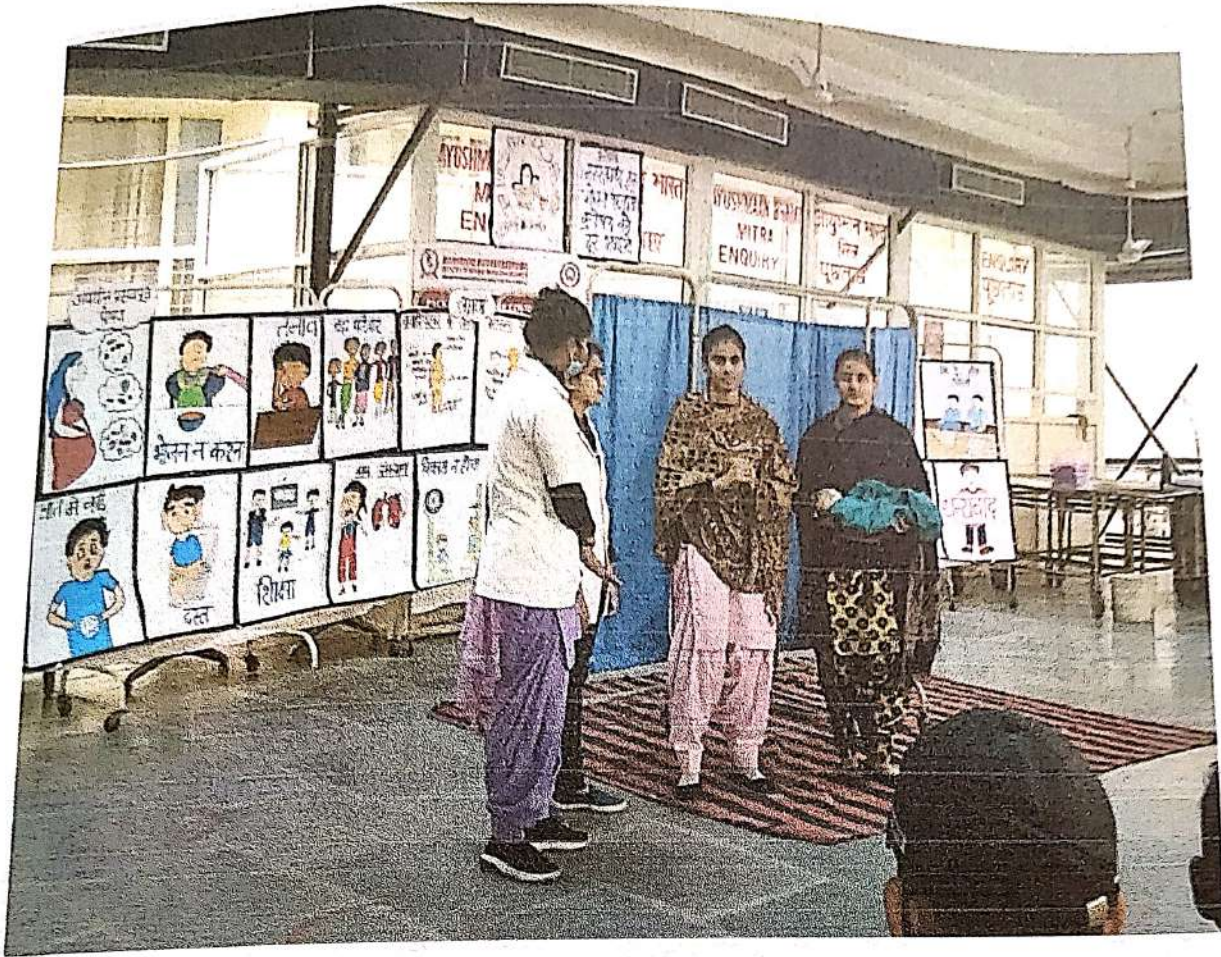
Bcha dord lagatē huyē gir jatā hai

Teacher- beta kya hua , pani lekr aao , khana nhi khaya tha beta

Doctor- bche ka to vajan bhut kamm hai , khoon ki bhi kami lg rhi hai , bache ka ache se vikas nhi ho raha

Taai - aese kaise vikas nhi ho raha , mera pota to ache se khata – pita hai , jab se peda hua gaye ka dudh pilana shuru kr diya tha

Doctor – apne maa ka dudh nhi pilaya 6 mahine taak aur lagatar 2 saal tak maa ka dudh anivarye hai , aur 6 mahine ke baad upri aahar ke sath sath maa ka dudh pilana bhut jruri hai , yahi vajan jiske karan apke bche ka vikas nhi ho pa rha



After the role play and chart explanation, we have extended our heartfelt gratitude to all Audience and our supervision and guidance Mrs. Jyoti phougat , Ms. parvinder kaur , for esteem support and guidance to us to outcome as successful group project work . The role play and encourage us to do these knowledge programme next time also.

THANKYOU

**\*\*\* Notice \*\*\***

Students of B.Sc.Nursing 3<sup>nd</sup> year of MMIN are going to  
organise a mass awareness programme on the


*Topic: Malnutrition*

*Theme: "Eat Right Bite By Bite"*

*Date: 7/11/2021*

*Time: 10:00-11:00 AM*

*Venue: OPD Registration, MMIN&R Hospital*

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

M.M INSTITUTE OF NURSING (MULLANA-AMBALA)

B.Sc. 3<sup>rd</sup> YEAR (2019-2023)

Attendance sheet for

Group project malnutrition (7/11/21)

Sr. No.	Roll No.	Student Name	signature
1	2019021	Parag	Parag
2	2019022	Priyanka Bhatti	Priyanka Bhatti
3	2019023	Priyanka Yadav	Priyanka Yadav
4	2019024	Rakesh Kumari	Rakesh
5	2019025	Ramandeep Kaur	Ramandeep Kaur
6	2019027	Rashmi	Rashmi
7	2019028	Reman	Reman
8	2019029	Renu	Renu
9	2019030	Riya Garg	Riya
10	2019031	Razia Yasin	Razia
11	2019032	Ritika	Ritika
12	2019033	Sangeeta Devi	Sangeeta
13	2019034	Shakshi Devi	Shakshi
14	2019035	Sheetal Thakur	Sheetal Thakur
15	2019036	Sonam	Sonam
16	2019037	Sonika Saini	Sonika
17	2019038	Swarpreet Kaur	Swarpreet Kaur
18	2019040	Vishakha Tomar	Vishakha

*[Handwritten signature]*

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

**NOTICE**

**MENTAL HEALTH NURSING**

**SESSION 2021-2022**

This is to inform all that B.Sc Nursing 3<sup>rd</sup> year students (Group-1) of M.M Institute of Nursing are organizing a group project on **02/11/2021**. All the faculty members are cordially invited in the event.

**Theme:** Drug addiction

**Date and time :** 02/11/2021 from 10:00AM- 11:00AM

**Venue:** Old OPD corridor of MMIMS & R Hospital, Mullana, Ambala

**Subject coordinator**

**Principal**

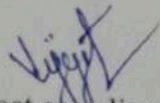
**Principal**  
**M. M. Institute of Nursing**  
**Maharishi Markandeya University**  
**(Deemed to be University)**  
**Mullana (Ambala)**


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

LIST OF PARTICIPANTS

GROUP PROJECT ON DRUG ADDICTION (2/11/2021)

ROLL NO	NAME	Signature
2019001	CHANPREET	
2019002	CHANDA KUMARI	Chanpreet kaur
2019003	CHHAVI	chanda kumari Chhavi
2019004	HARJEET VAID	Harjeet
2019005	JAGRIRI RAJ	Jagriti Raj.
2019006	JASMINE	Jasmine.
2019007	JYOTI DEVI	Jyoti Devi.
2019008	KAJAL	Kajal
2019009	KALPANA	Kalpna
2019011	KOMALPREET	Komalpreet
2019012	LOVENEET KAUR	Loveneet kaur.
2019013	MANPREET KAUR	Manpreet kaur.
2019014	MANPREET KAUR	Manpreet kaur.
2019015	NANDINI PASAN	-
2019016	NAVDEEP KAUR	Navdeep kaur
2019017	NEETU	Neetu
2019018	NEHA	neha
2019019	NEHA KAKRAN	Neha
2019020	NIDHI SHARMA	Nidhi sharma
2019032	RITIKA	Ritika

  
Subject coordinator

  
Principal

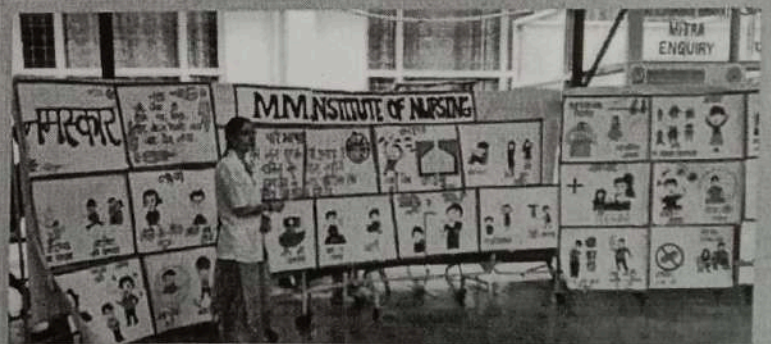
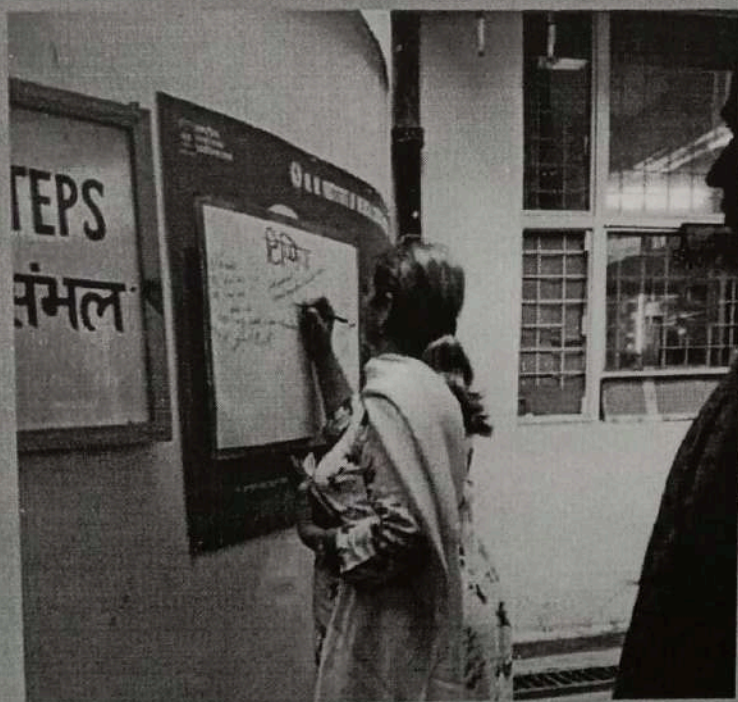
Principal  
M. M. Institute of Nursing  
Meharaj Park, Ambala  
(Deemed to be University)  
Mullana (Ambala)

A glimpse of group #project done by students to create awareness for Mental Health Nursing



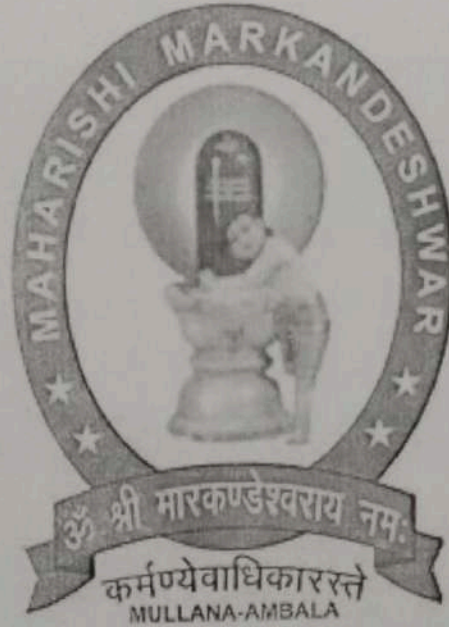
**MAHARISHI MARKANDESHWAR**  
**(DEEMED TO BE UNIVERSITY)**  
Mullana-Ambala, Haryana

## Group Project- Mental Health Nursing





**MAHARISHI MARKANDESHWAR INSTITUTE**  
**OF NURSING**



**GROUP PROJECT**  
**ON**  
**DRUG ADDICTION**

SUBMITTED TO-  
MS. VIJYETA BHASIN  
(NURSING TUTOR)  
MENTAL HEALTH NURSING

SUBMITTED BY-  
B.SC NURSING 3<sup>RD</sup> YR (Roll no=1-20)

SUBMITTED ON - 04-01-21

*Vijeta*

*[Signature]*

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

## REPORT OF GROUP PROJECT

We are the students of B.SC Nursing 3<sup>rd</sup> year conducted a group project on DRUG ADDICTION to educate the patients and their relatives about drug addiction.



### SUPERVISED BY -

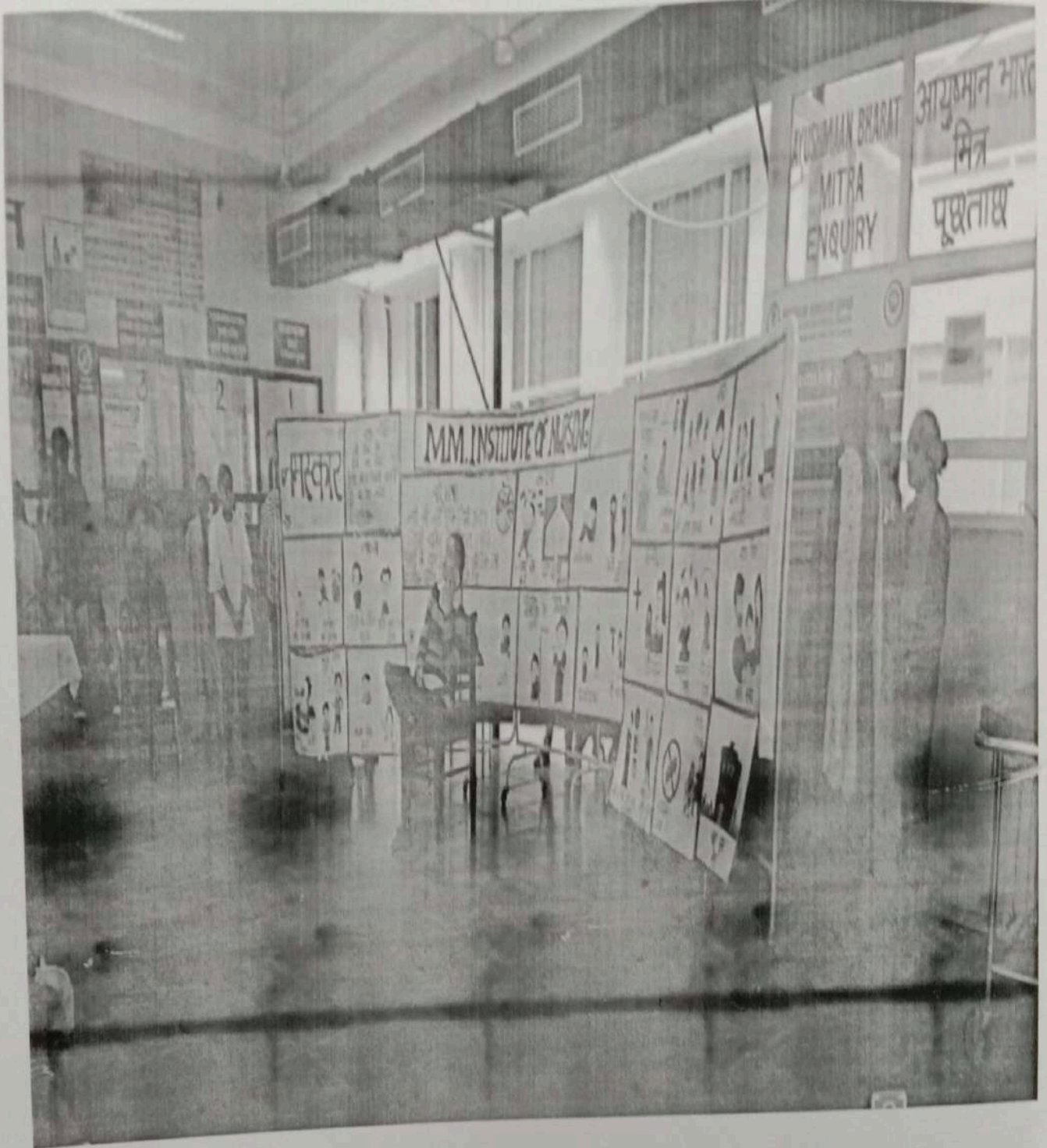
- MS. VIJYETA BHASIN (NURSING TUTOR)
- MS ABHILASHA YUSSOUF (CLINICAL INSTRUCTOR)



### INTRODUCTION –

We are the students of B.SC Nursing 3<sup>rd</sup> year conducted a group project on DRUG ADDICTION to educate the patients and their relatives about drug addiction.

This group project is containing a role play and charts that will help you to understand the disadvantages and the consequences of drugs.



OBJECTIVES-

- To create awareness among people regarding drug addiction.
- To impact knowledge regarding the management and treatment of drug addiction.

DAY- 2<sup>ND</sup> November '2021

VENUE- OPD of MMIMS&R hospital of psychiatric

TIME- 10:00 am onwards

THEME- DRUG ADDICTION

COMMITTIES:

1. ROLE PLAY-

NAME OF THE CHARACTERS-

- SCRIPT WRITER- Neha Kakran (2019019) and Chanpreet Kaur (2019001)
- NARATOR- Kalpana (2019009)
- VISHAL- Jasmine (2019006)
- VISHAL'S FATHER- Komalpreet Kaur (2019011)
- VISHAL'S MOTHER- Loveneet Kaur (2019012)
- VISHAL'S FRIENDS- Nidhi (2019020) and Harjeet (2019004)
- ROHAN- Manpreet Kaur (2019013)
- ROHAN'S MOTHER- Kajal (2019008)
- ROHAN'S FATHER- Neha Kakran (2019019)
- ANJALI- Jyoti (2019007)
- ANJALI'S MOTHER- Neha (2019018)
- ANJALI'S FATHER- Neetu (2019017)
- ANJALI'S FRIEND- Nandini Pasan (2019015)
- CONSTABLE- Nandini Pasan (2019015)
- INSPECTOR- Ritika (2019032)
- DOCTOR- Chanpreet Kaur (2019001)
- NURSES- Rakesh (2019024) and Rashmi (2019027)

2. CHART EXPLAMATION BY-

- Chanpreet Kaur (2019001)
- Loveneet Kaur (2019012)

3. MANAGEMENT AND REFRESHMENT-

- Neetu (2019017)
- Neha (2019018)

4. REPORT-

- Jagriti Raj (2019005)

5. CHART MAKING-

- Jagriti Raj (2019005)
- Loveneet (2019012)
- Komalpreet (2019011)
- Nidhi (2109020)
- Chanda (2019002)
- Manpreet (2019013)
- Manpreet (2019014)
- Navdeep (2019016)

- Jyoti (2019007)
- Nandini (2019015)
- Neha (2019018)

6. INVITATION CARD-

- Jasmine (2019006)
- Komalpreet (2019011)

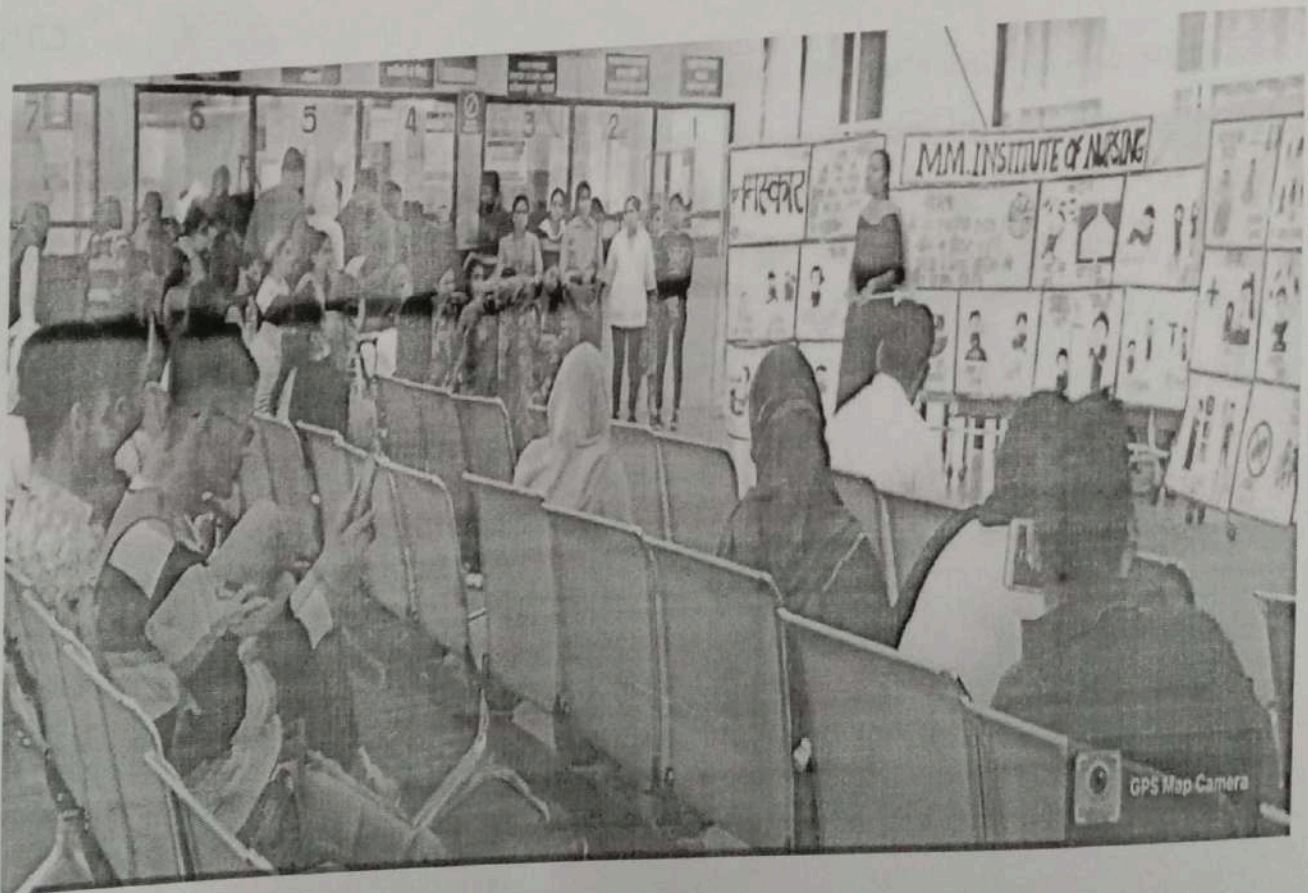
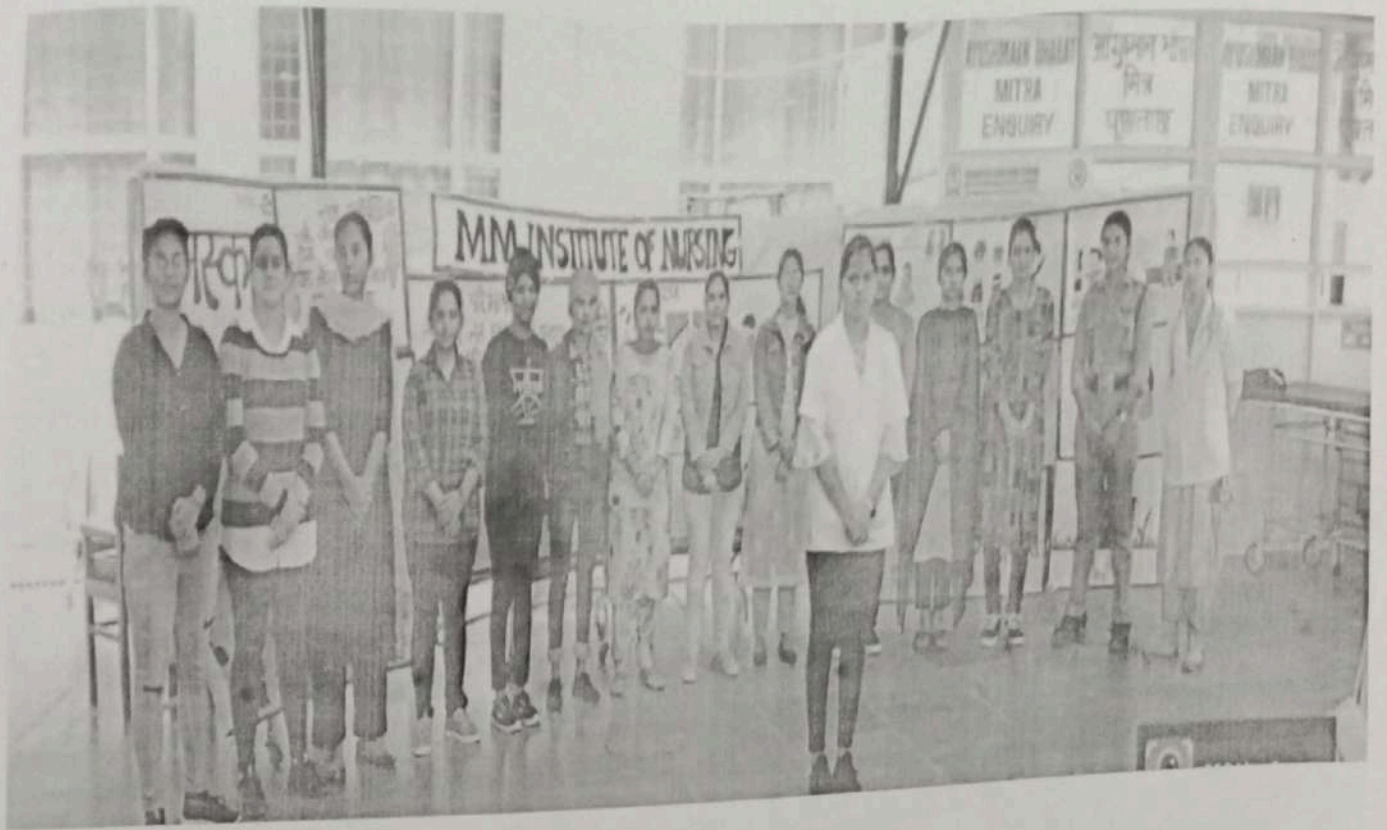
7. LESSON PLAN-

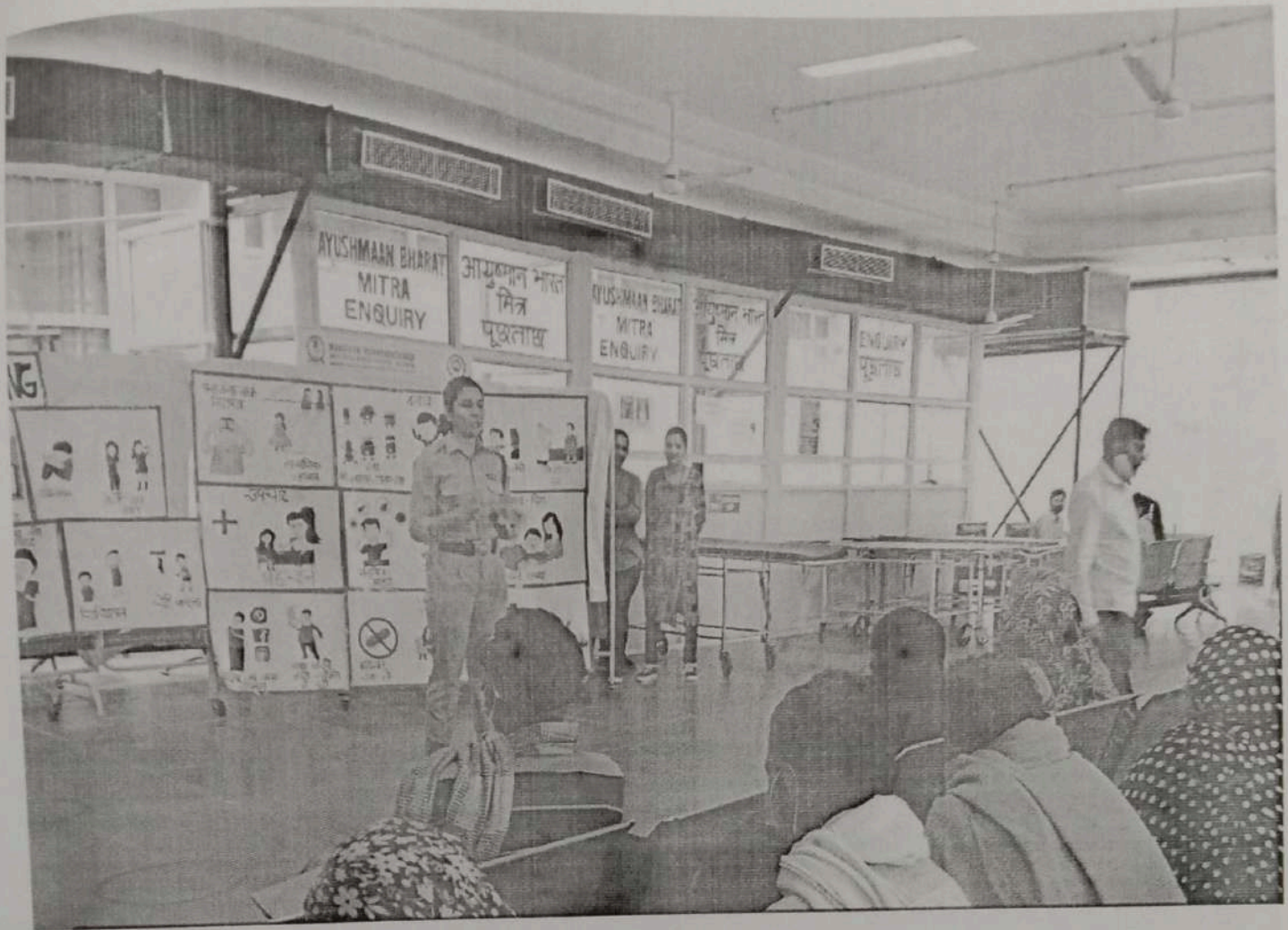
- Navdeep (2019016)



CONCLUSION-

It was a short educational play on the topic – 'DRUG ADDICTION'.





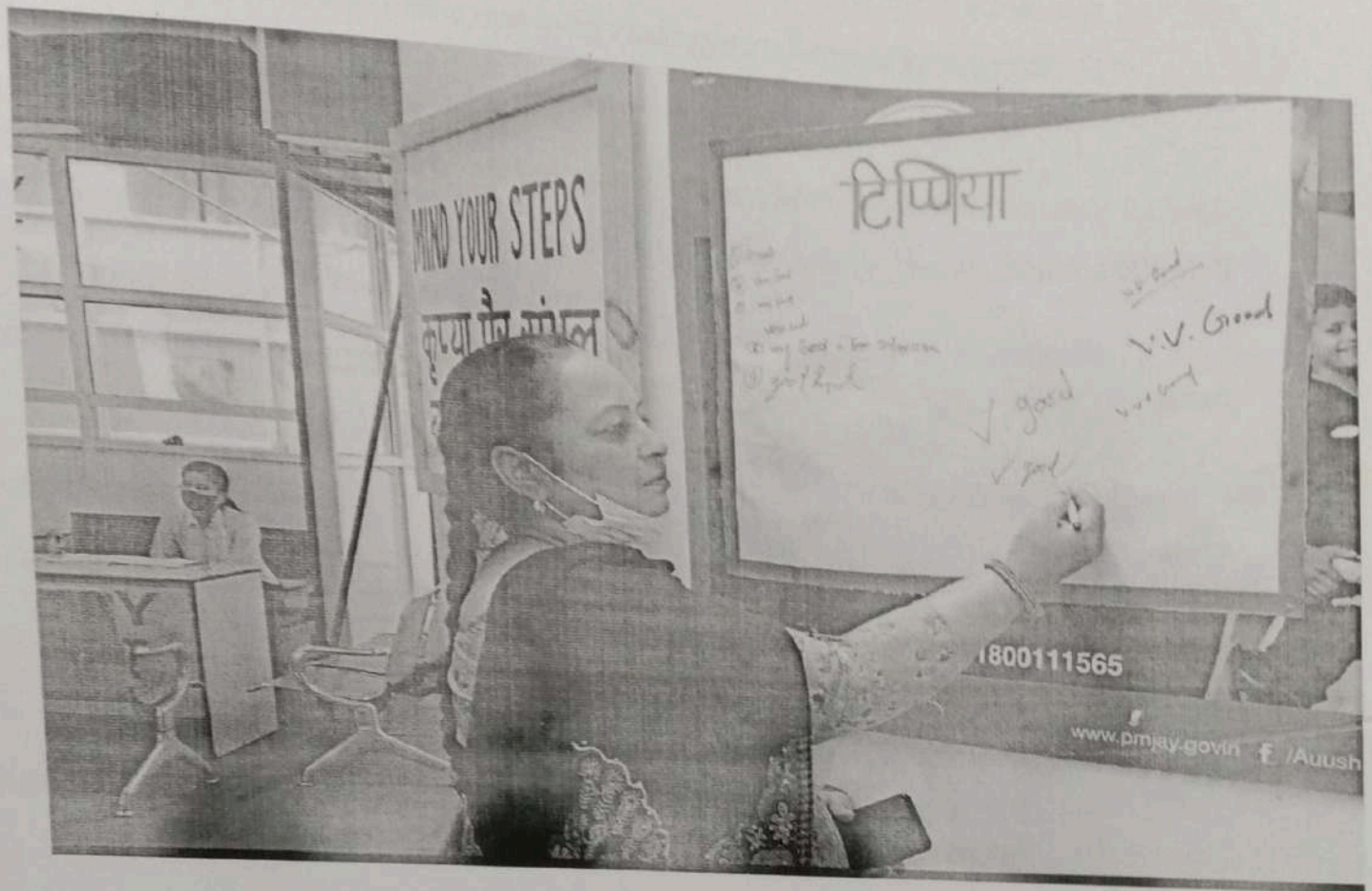
### REMARKS-

At the end of the group project, the group praised the student's effort in execution of the group project. They gave positive comments. The concerned teachers also praised the students and also told the students about their shortcomings. It was the appreciating moment for the whole group. As all of the students worked hard together for the group project.



## VOTE FOR THANKS

At the end of the role play and chart explanation, vote of thanks was given by



## FEEDBACK-

Patient was able to understand the topic clearly and relatives of the patients also understand the topic very well. When questions were asked to the patients and relatives, they were able to give proper answer.

It was a very effective role play; the ward people were able to understand it and they enjoyed the role play and understand about Drug Addiction.

## ROLE PLAY

Namaskar! Mai Kalpana or ye mere Sehpathi. Hum B.SC Nursing teesre varsh ki chaartry hai or aaj hm aapke saamne ek laghu natika prastut karne ja rhe hai. Iss natak ke dauara hum aap logo ko jaagruk krenge ki kaise nashe mei kitni zindagyo ko barbaad kr diya hai.

Aaj ke smaye mei nashili padartho ka sewan ek badi chunoti ban chuki hai. Yuwavo ka bada varg iski chapet mei aa gya hai!! Nashili padarth jaise bhang, chitta, sharab, heroine ethiyadi ka sewan kar log apna jeewan kharab kar rahe hai

To aiye mei aapko is natak ki kirdaro se parchit karwati hu.

Jasmine – Vishal

Komalpreet – Vishal's Father

Loveneet – Vishal's Mother

Nidhi – Vishal Friend (1)

Harjeet – Vishal Friend (2)

Kajal – Rohan's Mother

Neha Kakran – Rohan's Father

Jyoti – Anjali

Neetu – Anjali's Father

Neha – Anjali's Mother

Nandini – Anjali Friend and Constable

Ritika – Inspector (Police)

Chanpreet – Doctor

Rakesh – Nurse

Rashmi – Nurse

Mujhe aasha hai ki aap is natak ki kirdaro se bhali bhati parchit ho chuke hai.

To aaiye iss natak ki suruwat karte hai.

Isne phle pariwar hai Vishal ka jo ek ameer Parivar se hai or vo apne maata or pita ke sath rhta hai.... To aaiye dekhiye phle drishya.

### SCENE - 1

Vishal - Ahaaa kaha chli

Friend 2 - Oye hoye

Anjali - Akal nhi h tumhe ladkiye ched te rhte ho Batimij sharam nhi aatii.

Friend 2 - Na hme nhi aati

Friend 1 - Are yaar use kys lete ho dekho tumhare lia kya laya hu (give alcohol)

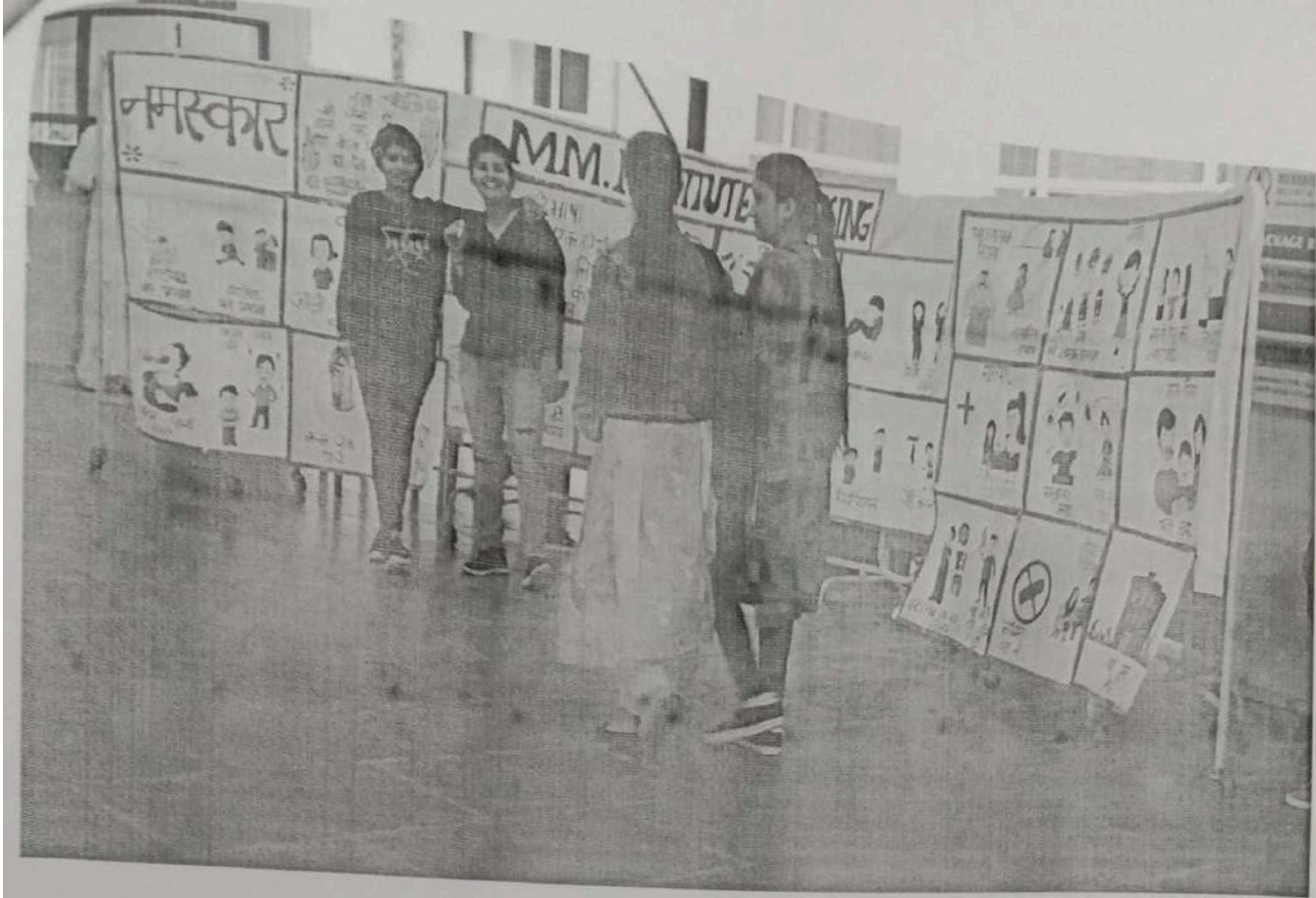
Vishal - Waah iss brand ko to mai kab se dhund raha tha... mooj kr di tmne to chlo mei chlta hu papa ko dunga ye

Friend 2 - bottle milte hi yr ko bhul gya

Friend 1 - ham hum bhi peeyenge

Peele peele oo mere raja peele peele

Narrator - Jese ki aapne dekha ki kse vishal or uska dost alg alg tarah k nashe karte hai jese sharab or cigratte ka sewan krte hi or kayi apradho ko anjam dete hai. To aaiye aage dekhte hai iske parinam Swaroop smjhkar kya asr pdega.



PART 2 of SCENE 1

Vishal's Father – (Cigarette peete peete phone per baat karte huye) Hello... hnji... mei badiya aap btao... kaam to acha chl rha hai ekdm badhiya

Vishal's Mother – (Enter) Suno mei party mei ja rhi hu raat ke 11-12 bje tk aaaungi theek hai

Vishal's Father – Arey suno jaate huye meri blender ki bottle dete huye jaana

Vishal's Mother – Arey usko toh kl hi aapne khtm kr di thi..

Vishal's Father – Nhi wahi pdi hogi dhyn se dkhna

Vishal's Mother – Nhi wo aapne khtm kr di thi

Vishal's Father – Phir suno aate huye mere liye ek bottle lete huye aana

Vishal's Mother – Theek h lete aaungi

Vishal's Mother leave..

Vishal's Father – Smoking.. are bottle v nhi h usk binna kya krunga tym v pass nhi hoti

Vishal enter with his friends

Vishal – Hey daddy

Father – arey aa gaye beta tum

Vishal – papa ye dkho aapk liye kya laaya hu (give alcohol bottle)

Father – wah bete mei toh kbse aisa dund rha tha... Shabhas beta

Friend 2 of Vishal – are uncle hm v aaye h aapke beta k sath

Father – are beta tum bhi aaye ho maja aayega aaj toh... chlo baitho saare piyngae aaj toh

Friend 2 – hanji uncle hum v piyngae aaj to aapk sath mje aayngae

Father – chlo mei tmhare liye peg bnata hu

Sabhi gaana gaate huye mei Sarabi mera peeyo Sarabi asi sari Sarabi

Narrator – Jese ki aapne dekha ki kese Visal jese choti umar ke log kese nashe karte hai or sath hi usk parivaar wale uska uss kaam mei or badhavna dete hai. Toh aaiye dkhte hai agla drishay

#### SCENE – 2

Rohan's Mom – are aa gye aap mene thoda paise chahiye tha paise de do

Rohan's Father – ghar mei pair baad mei rkhta hu inhe paise phle chahiye hote hai. Chahe paani pucha toh nhi bas paise dedo... jaa mere liye roti laa

Mom – Nokar nhi lg rhi mei kisi ki khud jaakr laa osaara kaam mei karu

Father – kya kra saara din toh velli raha

Mom – mei toh kch nhi krti sara kaam toh aap krte h

Rohan – are mummy papa kya hua kyu lad rhe ho aap mera sir dard hone lga hai

Father – aapni maa ko smjha tu mereko nhhi

Rohan – mei toh tang ho gya hu ghar ki ladai jhagdo se ab mei kya kru

Father – tum hi rho yaha mei toh ja rha hu

Narrator – jaise ki aapne dekha kaise rohan mata pita ka jhagda, rohan ko tanaav mei le aata hai toh aage dkhte h Rohan apni dosto k sangat meia akr kya kadam utaata hai



### SCENE - 3

Rohan - taang aa gya hu roj roj ke drama se kya kru mei

Friend 1 - kya hua tujhe itna preshaan kyu h

Rohan - kya btau yr mei toh taang aa gya hu ghar ki ladai jhagdo se

Friend - arey kch nhi hota h sbk ghar mei chlti rhti hai ladaiya mere ghar mei v hoti hai

Rohan - toh tu itna khus rhta hai kaise sambhalata hai inn sbko

Friend 1 - arey mera dost bht acha h mereko tnsion lene hi ni dets hai... chl mei tereko apne dosto se milwata hu

Rohan meet Vishal

Friend 2 - Drinking... Wah bhai kitna maja aa rha hai

Friend 1 - hello

Vishal - aa gya tu kya haal hai?

Friend 1 - thk hu bhai

Friend 2 - Yeh kaun h tere sath

Friend 1 - ye mera dost h pados mei hi rhta hai bs ghr mei ladai se preshaan aa gya hai

Vishal - kyu tnsion lete ho zindagi h mze maaro

Friend - chl mei tereko apna waala maal deta hu

Rohan - arey ye kya h mujhe nhi lena hai ye

Friend 2 - are tu dar mt badi hi majedaar chiz h

Vishal - keh nhi hota mei v leta hu aisa

Vishal inject the injection to Rohan

Friend 2 - mujhe peene ka shauk nhi peeta hu ghum bhulane ko

Narrator - jaise ki aapane dekha kaise Rohan Tanaav mei or aone dosto ki sangat mei aakr nasha ki chapet mie aa jata hai.. dkhte h nashas uske jeewan mei aage kya prabhav daalta hai

#### SCENE - 4

Anjali - Rote huye ghr mei aai

Anjali's Father - are roo kyu rhi ho kya hua .. yaha baitho.. Anjali ki maa sunti ho yaha aao

Anjali's mother- Kya hua beta

Anjali - mujhe nhi jana klse tuition.... Waha larke larkiya ko dekh ke gande gande gaane gaate hai sitiya bjate hai larkiya ko dekh k chedte hai.. mujhe bht bura lgta

Mother - tum roo mt beta hm keh karte hai in ladko ka tum jao or paani piyo Kapre badlo or roo mt.

Anjali chli jaati hai.

Mother - Ajji kya karna chahiye

Father - hme police station jaakr complaint likhwani chahiye... Tumhari kya raaye hai

Mother - haa hm kl police station jaynge

Narrator - jesa ki aapne dkha vishal or usk dost nashi ki haalt mei kitne apradho ko anjaam dete hai jese ladkiya cherte hai chori karte hai aise hi Anjali bhi umhi apradho ki shikar bnni or usne aapne ghar btaya to aage dekhte hai ki police station me kya hota hai.



SCENE – 5

Police Station

Father – Namashkar

Police – hnji namashkar

Father – sahab mera naam Rakesh h or mei ek teacher hu. Mei yaha ek sikayat darjj krane aaya hu.

Police – ji btaiye kya preshani h

Father – Meri beti Anjali roz shaam ko tuition jaati h toh kch larke preshaan krte h

Police – Constable FIR chrgre kro ye sb kah rhe h

Anjali ki maa – ye ladke mere beti ko 8-10 din se preshaan kar rhe hai. Roj usk tuition jaane k samay preshan krte hai . sitiya marte h gaane gaate or usko bht preshaan krte hai uski wajah se meri beti waha jaana v chod diya hai. Meri beti kareeb roj 4:30 mei waha jaati hai

Police – theek hai aap ghabraiye nhi aap apni avhi ko tuition bhjiye. Hmari team 4 bje ke pass pahuch jayegi unn logo ko hm siddha krte hai

Father – Dhyanwaad

Mother – Dhyanwaad Sahab

Police – Constable team taiyaar kre kal tuition k pass chlte h inn ladko ko siddha karne

Constable – Ji sir Jai Hind sir



Narrator – jese ki aapne dekha ki Anjali ke mata pita police station pahuch chuke hai or unhone waha vishal or usk dost k khilaf sikhayat darj krwa di ab aage dkhte h police aage kya kadam utati h

### SCENE – 6

Vishal Friend 2 – Drink krte huye ( Zindagi mei mje lo bhai) are dkho wo aa gai chlo aajao

Vishal – ye Anarkali bade dino k baad aai

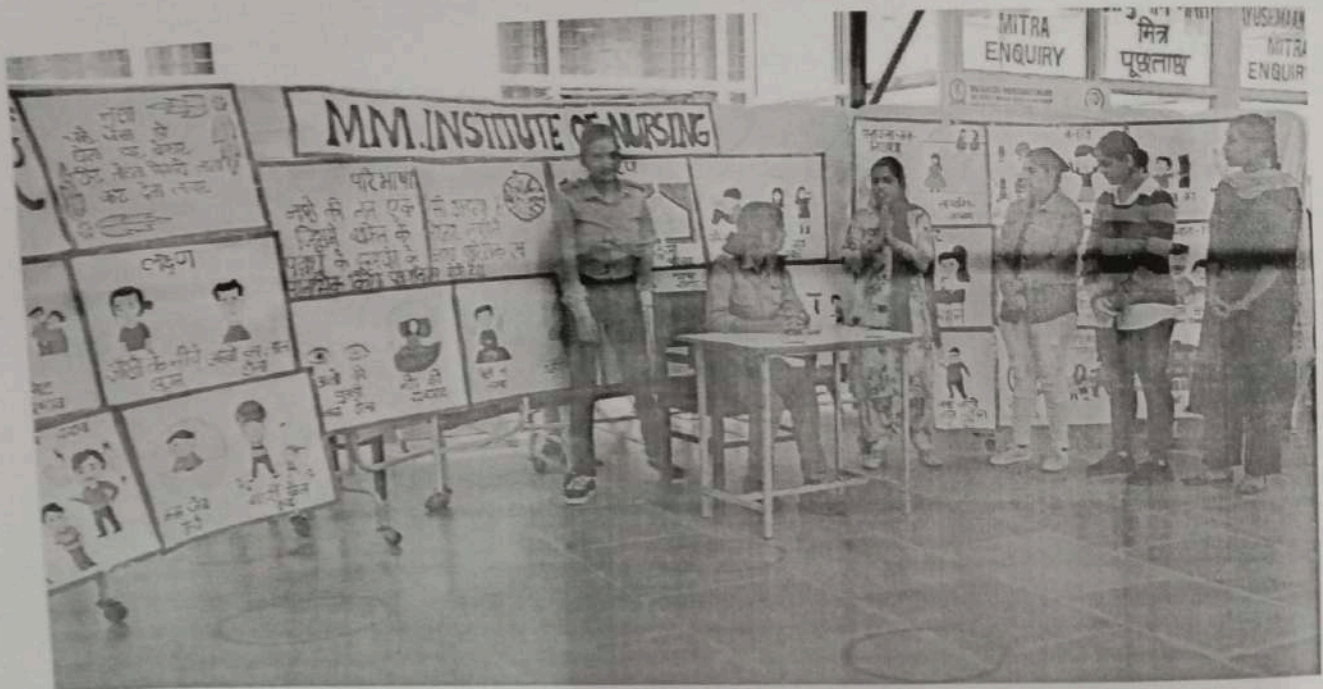
Vishal Friend 2 – kitte chli goobi de doal bann ke.. aree police bhaagoo

Vishal – Bhaago

Police – Pakdo inn larko ko

Narrator – jese ki aapne dekha Anjali tuition ja rhi hoti h or police v waha jati hai. Vishal or usk dost fir Anjali ko chedte h or police unhe pkr kr giraftaar kr lete h

Ab aage dekhiye police station mei kya hoga



SCENE - 7

Rohan k pita - kaha h mera beta kaha hai

Constable - kyu halla macha rkha h itna

Police - Aaane do inhe andr. Ye unn Honhaar k maa papa hai

Parent - Tum mere beta ko laao

Police - aapko pta h aapk bache ne kya kiya h. ye shareef ghr ki lrki cheda hai

Parent - dekh liya aapne ladle bete ki harkat ko natija kya gul khila rha hai

Vishal's Mother - dekho aapko kaha tha na meine bacho k saamne ni piya karo aapk lad pyaar ne mere bete ko bigad k rkh diya h

Police - tum sb larna band kro

Rohan ki maa - sahab mere bache ko chod do

Police - dkhiye inn mei kch ni kr skta jo v faisla hoga wo ab court mei hoga

Anjali k pita- Are nhi Inspector sahab inhee or inke bcho ko kali di kdi sja dijiye

Police - ye uss bachi k maa baap hai

Rohan k pita - Sahab mei aapse maafi maangta hu mere bete ko chudwa de wo aage se aisa kch nhi krega

Anjali ki maa - Dekho iss baar hum chod rhe hai lekin agli baar agar kch esa kch v hua aapk ladke kch v kiya toh hm billkul maaf nhi krnge iss baar hm chod rhe h

Anjali k pita - thk h agr dubara tum ye sb harkat ki toh acha nhi hoga

Vishal ki maa - Vishal meine tmhe isliye itne paise diye tha ki tu ye kaam kare. Mujhe sharam aati h tujhe apna beta bolte huye

Rohan ki maa - tune mera sir sharam se jhuka diya tumhe sharam nhi aai

Dekh lo bahen ji hmare bacho ka kya haal ho gya hai

Police - Aap apne bacho ko kisi asptaal mei lekr jao or unke ache se elaj krwao ya kisi nashe mukhti kendra mei Bharti krao

Parents - Dhayanwaad

Narrator - Police ne vishal or uske dosto ko pakad liya tha or unk ghar wale police station pahuch jate hai or police se maafi maangte hai or idhr Anjali or usk mata pita bhi waha pahuch jate h. Vishal or Rohan ke maa - baap maafi maangte hai, vishal or rohan ko maafi

maangte hi ehsas ho jata hai or use police station se rihayi mil jati hai or hospital mei jaanch k liye bbheja jata hai

Dekhhte h aage kya hota hai

#### SCENE - 8

Rohan k pita - Namashkar Doctor Sahab

Doctor - Namashkar. Aaiye kaise aana hua

Rohan k pita - Mera beta nasha leta hai mujhe iski nasha ki lat chudwani h

Doctor - ye sbse nasha ka sevan krte ho

Rohan k pita - mujhe nip ta me Naukri pr ehla jata h meri biwi bhr hoti hai ye ghar pe late aata tha apne dost k sath rhta tha

Doctor - aap inka ghar pe dhyn ni dete

Vishal ki maa - Doctor mujhe to pta nahi mei to Naukri pe chli jati hu piche or vishal apne papa k sath sharab pii leta h

Vishal - Aaa aaa

Vishal ki maa - kya hua beta

Doctor - ye toh hona hi tha iski report aa gai h iski lier had se jada khrn ho chuka h or Rohan ko saans ki dikat hai

Aap inka illaj krwaye

Rohan k pita - hm iski nasha ki lat kaise churwaynge

Doctor - mei kch dawaiya inhe likh k deti hu or inko samay samay pr dena or samay pe jaanch krwana.

Aur agar aap inke ghar par dhyn nhi rakh skte to hospital me Bharti krwa skte hai

Vishal ki maa - Doctor aap vishal ko hospital mei Bharti kr lijiye nhi toh ghar pe ye apne papa k sath firse sharab pine ki koshish kr skta hai

Rohan k pita - Doctor sahab mei apne rohan ko ghar pr hi rkhunga uski dekh bhaal krunga samay samay pe iski jaanch krane k liye aapk pass lekr aaunga

Doctor - jaisa aapko theek lge

Aage ink swastya ke baare mei btaiyega

Narrator – Jese ki aapne dekha ki kaise vishal or rohan nashe ki chapet mei aate hi alg alg apradho ko anjaam dete hai or jaise hi wo jaanch krwate h wo nashe ki wajh se kai bimariyan ka shikar bann jate hai or unko sabak mil jata hai

Aasha hai ki aapko hmare laghu natak se nashe or usk nuksaan ke baare mei jaankaari mili hogi.

THANK YOU

**M.M INSTITUTE OF NURSING MULLANA -AMBALA**  
**GROUP PROJECT REPORT**  
**ON FAMILY PLANNING**



**DATE:- 22-10-2021**

**TIME: 10:30AM**

**Venue: Civil Hospital, AmbalaCantt**

**Submitted to:**

**Mrs. Manpreet  
(Assistant professor)**

**Submitted by**

**BSC.(N) 4th year  
Roll no :(2018021-2018042)**

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

- |                      |  |
|----------------------|--|
| Accident In Children | Classroom Of B.Sc Nursing 1 <sup>st</sup> Year |
| - On                 | Child  |
2. Invitation Card Committee:- Komal
  3. Content committee:- Preeti baliyan , Tanvi
  4. Role Play:- Vrindashree, Saarti , Simran, Sunita, Swati , Riya, Priya, Rashmi
  5. Narrator:- Priti
  6. Video and Photography Committee:- Komal , Simranjeet
  7. Charts Explanation Committee:- Preeti sainsi , Vibhuti
  8. Chart making committee:- Ramanpreet, Preeti , priya , Komal , Vrindashree, Rashmi , Sunita, simran , Swati , Tanvi
  9. Script Writing:- Sarita, Rubina
  10. Refreshment Incharge:-preeti,ramanpreet,Sunita,ujjwal
  11. Group Project Report:- Ujjwal
  12. Arrangements:- , priya , Komal , Vrindashree, sunita,rashmi

### CHART EXPLANATION :-

Introduction and definition , types of contraceptives , explained by Vibhuti, methods of contraception explained by Preeti sainsi .

### SCRIPT:

#### Roles :-

Vrindashree - Mohan  
 Saarti - Radha  
 Sunita - Boss  
 Simran - Sheela ( padosan )  
 Swati - kuldeep ( mohan ka dost)  
 Riya - Doctor  
 Priya, Rashmi - mohan aur radha ke bacche

### Script

#### Part -1 (office )

Mohan- mohan office mai jaldi kaam krta hua .

Boss → Are mohan itni kya jaldi aaram se kaam krlo.

Mohan - sir aaj mereko ghar jaldi jaana hai.

Boss-kyu??

Mohan( Samoate hue) - sir kuchKaam Hai

Mohan- thik h doctor saab ab ham chahte hai...

## GLIMPS GROUP PROJECT:



After the role play and chart explanation, we have extended our heartfelt gratitude to all Audience, audience and our supervision and guidance Mrs ManpreetKaur , Ms simran sainsi and Ms salma for esteem support and guidance to us to outcome as successful group project work. The role play and encourage us to do these knowledgeable programme next time also.

### REFRESHMENT:-

End of role play and chart explanation, we gave biscuits to the audience.

REMARKS:-At the end of group project people and audience praised students and give positive views about health camps and thanks for the valuable Programme for them.

### CONCLUSION:-

By this group project, people and family members got enough knowledge regarding family planning and contraceptive methods. Audience was so cooperative and showed active interest during group project. It was acknowledge and enriching experience as the students got confidence in organizing the project.

# परिवार नियोजन पर आधारित लघु नाटिका प्रस्तुत कर छात्राओं ने किया जागरूक

अम्बाला छावनी, 22 अक्टूबर (जतिन) : छावनी के नागरिक अस्पताल में एम.एम.यूनिवर्सिटी के नर्सिंग छात्राओं ने परिवार नियोजन को लेकर एक लघु नाटिका प्रस्तुत करके उपस्थित गर्भवती महिलाओं व उनके साथ आए परिजनों को जागरूक करने का कार्य किया। बी.एस.सी नर्सिंग की छात्राओं ने लघु नाटक में परिवार नियोजन को लेकर जरूरी बातें एक लघु नाटिका के रूप में सभी के समक्ष पेश की गईं। जिसको देख सभी ने उसकी सराहना की। यह कार्यक्रम कॉलेज की असिस्टेंट प्रोफेसर मनप्रीत कौर व उनकी टीम की देखरेख में हुआ। इस अवसर पर करीब 80 लोगों ने इस कार्यक्रम में भाग लेकर उसको सफल बनाया। सभी ने कार्यक्रम की सराहना की।

जानकारी देते हुए असिस्टेंट प्रोफेसर मनप्रीत कौर ने बताया कि नागरिक अस्पताल में नर्सिंग छात्राओं द्वारा ट्रेनिंग की जा रही है। इस ट्रेनिंग प्रोग्राम के साथ-साथ छात्राओं के द्वारा



नागरिक अस्पताल में नर्सिंग की छात्राएं परिवार नियोजन को लेकर जागरूक करती।  
(चंद्रमोहन)



कार्यक्रम में उपस्थित गर्भवती महिलाएं व उनके परिजन सदस्य। (चंद्रमोहन)

अस्पताल में आने वाले मरीजों को इसी कड़ी में आज यह लघु नाटिका समय-समय पर स्वास्थ्य से संबंधित प्रस्तुत की गई। जिसका विषय परिवार विषयों पर जागरूक किया जाता है। नियोजन रहा।



MM - Deemed to be University 23 Oct

A glimpse of Awareness Program organized about family planning by the students of MM(DU)



MAHARISHI MARKANDESHWAR (DEEMED TO BE UNIVERSITY) Mullana-Ambala, Haryana

AWARENESS PROGRAM PARIWAR NIYOJAN KO APNAGO, JEEVAN KO KHUSHHAL BNAOGE



You, Riya Dabas and 72 others 1 Comment • 8 shares

Like

Comment

Share

WhatsApp



M.M.INSTITUTE OF NURSING

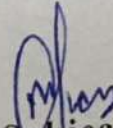
Attendance sheet

Group Project

Topic: Family Planning Methods

Date: 22/10/21

S.NO.	ROLL NO.	NAME	Signature
1.	2018021	Preeti	Preeti
2.	2018022	Preeti Baliyan	Preeti
3.	2018023	Priti	Priti
4.	2018024	Priya	Priya
5.	2018025	Ramanpreet	Raman
6.	2018026	Rashmi Saini	Rashmi
7.	2018028	Riya Dabas	Riya
8.	2018029	Rubina Khatri	Rubina
9.	2018030	Saarti	Saarti
10.	2018031	Saiqa Bilal	Saiqa
11.	2087032	Sarita Devi	Sarita
12.	2018033	Simran	Simran
13.	2018034	Simranjeet	Simranjeet
14.	2018035	Sunita	Sunita
15.	2018036	Swati Rohilla	Swati Rohilla
16.	2018037	Tanvi	Tanvi
17.	2018038	Ujjwal	Ujjwal
18.	2018039	Vibhuti	Vibhuti
19.	2018040	Vrinda Shree	Vrinda Shree
20.	2018042	Komal	Komal

  
Subject Coordinator  
22/10/21

**M.M. (DEEMED TO BE UNIVERSITY)**

**M.M.INSTITUTE OF NURSING**

**NOTICE**

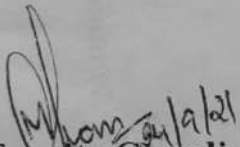
This is to inform you all that Students of B.Sc. Nursing 4<sup>th</sup> Year group I organizing a group project on Postnatal care, Subject: Midwifery and Obstetrical Nursing.


Theme: **“Jab Rakhoge Jacha-Bacha Ka Dhyaan, Tabhi Hoga Pure Pariwar Ka Kalyaan”.**

Date: 25/09/21

Time: 10:30 AM – 11:30 AM


VENUE: Civil Hospital, Ambala Cantt.

  
Faculty Coordinator

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



**MAHARISHI MARKANDESHWAR  
(DEEMED TO BE UNIVERSITY)**  
Mullana-Ambala, Haryana  
(Established under Section 3 of the UGC Act, 1956)  
(Accredited by NAAC with Grade 'A')






# AWARENESS PROGRAM

जब रखोगे जच्चा बच्चा का ध्यान,  
तभी होगा पुरा परिवार का कल्याण

25th September, 2021  
10:30 AM Onwards

Venue : Civil Hospital, Ambala Cantt.

*Organized By :* **M.M. Institute of Nursing**



MM - Deemed to be University

22h

M.M Institute of Nursing is organizing a awareness Program -जब रखोगे जच्चा बच्चा का ध्यान,तभी होगा पुरा परिवार का कल्याण on 25th September 2021,10:30 AM onwards



23

2 Shares

Like

Comment

Share



Write a comment...





### INTRODUCTION:

Under the stated theme mass awareness program was organized by the students of B.Sc.Nursing<sup>4<sup>th</sup></sup> year (22) of M.M. Institute of Nursing Mullana Ambala, Under the guidance of Mrs.Manpreet Kaur (Assistant Professor), Ms.Abhilasha (Clinical Instructor), & Ms.Anshul (Clinical Instructor).

**Date: 25/09/2021, Time: 10:30 to 11:30 am, Venue: Civil Hospital, Ambala Cantt, Topic: Postnatal Care**

### INTRODUCTION TO POSTNATAL CARE:

Postnatal care includes systemic examination of mother and baby and appropriate advice given to the mother during postpartum period. Over 5,36,000 women die annually from complications during pregnancy, child birth or postpartum period. Almost all 95% of the maternal death occurred in Africa and Asia. The burden of maternal complications and deaths is also higher in the first few days of delivery.

### DEFINITION:

Care of mother and newborn from 1 hour after delivery up to 6 weeks of post delivery is known as postnatal care.

### SLOGAN:

“JAB RAKHOGE JACHHA BACHHA KA DHYAN, TABHI HOGA PURE PARIVAR KA KALYAN”

### AIMS OF GROUP PROJECT:

1. To improve the knowledge regarding Postnatal Care
2. To educate public about postnatal care and its complications
3. To make awareness about postnatal exercises, diet and newborn care

### OBJECTIVES:

1. Introduce postnatal care
2. Define the postnatal care
3. Enlist the important conditions we shall enquire in postnatal care
4. Explain schedule of postnatal follow up visits.
5. Demonstrate postnatal exercises
6. Explain the postnatal diet
7. Enumerate do's and don'ts of newborn care
8. Enumerate advice to the mother for self and newborn care.

### COMMITTEES FOR THE PROJECT:

**No of students involved: 21**

1. Overall coordinator:- Amita, Minakshi
2. Invitation Card Committee:- Anu, Gayatri, Ayushpreet
3. Content Committee:- Navdeep, Gaganpreet

4. Role Play:-Minakshi, Aayushi, Amita, Jaskirat, Muskan, Khushboo, Manisha, Poornima, Yogita
5. Narrator:- Manju
6. Video and Photography Committee:-Gaganpreet, Navdeep
7. Charts Explanation Committee:-Nandita, Jaskirat, Manju
8. Chart Making:-Ayushpreet, Anu, Mandeep, Manju, Muskan, Manisha, Muskan, Minakshi, Poornima, Gayatri
9. Script Writing:- Charu, Hritika
10. Refreshment Incharge:-Hritika, Himani
11. Group Project Report:- Charu, Himani
12. Arrangements:- Charu, Yogita, Anu, Ayushpreet, Muskan, Gayatri, Navdeep, Hritika, Manju, Amita

#### CHARTS EXPLANATION:

Introduction and definition explained by **Nandita**, postnatal care schedule and postnatal exercises explained by **Jaskirat**, newborn care and postnatal advices explained by **Manju**.



#### SCRIPT:

##### Roles:-

Minakshi:- Asha worker

Ayushi:- gudiya k papa (Sumit)

Amita:- Nurse

Jaskirat:- Maa (family 2)

Manisha:- Pinky

Poornima:- bahu

Yogita:- Saas

## ROLE PLAY:



After the role play and chart explanation, we have extended our heartfelt gratitude to all Audience, audience and our supervision and guidance MrsManpreetKaur ,MsAbhilasha, MsAnshul for esteem support and guidance to us to outcome as successful group project work. The role play and encourage us to do these knowledgeable programme next time also.

### REFRESHMENT:-

End of role play and chart explanation, we gave biscuits to the audience.

**REMARKS:-**At the end of group project people and audience praised students and give positive views about health camps and thanks for the valuable Programme for them.

### CONCLUSION:-

By this group project, people and family members got enough knowledge regarding postnatal care. Audiences were so cooperative and showed active interest during group project. It was acknowledge and enriching experience as the students got confidence in organizing the project.



# MAHARISHI MARKANDESHWAR INSTITUTE OF NURSING

MAHARISHI MARKANDESHWAR (DEEMED TO BE UNIVERSITY)

MULLANA (AMBALA), HARYANA - 133207


(Established under Section 3 of the UGC Act, 1956 vide Notification No. F.9-65/2006-U.3 (A) dated 12-6-2007)

(NAAC ACCREDITED WITH GRADE 'A')

Ph.: 01731-282749, FAX No. 1731-274495 Email: principalmmmin@mmumullana.org

## Group project on 25/09/21 Attendance Sheet

S.NO.	ROLL NO.	NAME	Signature
1.	2018001	Aayushi Rohilla	Aayushi
2.	2018002	Amita	Amita
3.	2018003	Anu	Anu
4.	2018004	Ayushpreet	Ayushpreet
5.	2018005	Charu	Charu
6.	2018006	Gaganpreet Kaur	Gaganpreet
7.	2018007	Gayatri Kumari	Gayatri Kumari
8.	2018008	Himani	Himani
9.	2018009	Hritika	Hritika
10.	2018010	Jaskirat Kaur	Jaskirat
11.	2018011	Khusbhu	Khusbhu
12.	2018012	Mandeep Kaur	Mandeep Kaur
13.	2018013	Manisha	Manisha
14.	2018014	Manju	Manju
15.	2018015	Minakshi	Minakshi
16.	2018016	Muskan	Muskan
17.	2018017	Muskan	Muskan
18.	2018018	Nandita	Nandita
19.	2018019	Navdeep Kaur	Navdeep
20.	2018020	Poornima	Poornima
21.	2018041	Yogita Rohilla	Yogita

  
Subject Coordinator  
25/9/21



M.M INSTITUTE OF NURSING

NOTICE

Session 2020-21

This is to inform you that B.Sc. Nursing 4<sup>th</sup> year students going to organize a group project on 27.3.21. All faculty members are cordially invited in this project.

Topic: Tuberculosis.

Theme: THE CLOCK TICKING.

DATE: 27.3.21.

VENUE: Anganwadi, Mullana.

*Pabal*

Subject Coordinator

*[Signature]*

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

**MAHARISHI MARKANDESHWAR UNIVERSITY**  
**(DEEMED TO BE UNIVERSITY)**

**M.M.I.N**



**COMMUNITY HEALTH NURSING –II**  
**GROUP PROJECT REPORT ON TUBERCULOSIS**

**SUBMITTED TO:**

**Mrs. Pabalpreet Kaur**  
**(Nursing Tutor)**

*Checked*

*Pabalpreet  
Kaur  
25/04/2021*

**SUBMITTED BY:**

**B.Sc Nursing 4<sup>th</sup> Year**  
**(2017001-44)**

**REPORT ON**  
**TUBERCULOSIS**

**THEME : THE CLOCK IN TICKING**

**INTRODUCTION**

Under the stated theme group project was done by the students of B.Sc. Nursing 4<sup>th</sup> year of M.M. Institute of Nursing, Mullana, Ambala on 27<sup>th</sup> March in Mullana under the guidance of Mrs. Pabalpreet Kaur, Ms. Riya Saini.

**INTRODUCTION OF TB**

Tuberculosis is the infectious disease. Primarily affecting lung parenchyma is most often caused by Mycobacterium Tuberculli. It may spread any part of the body including meninges, kidney, bones.

**PREVALENCE**

The WHO TB statistics for India for 2019 give an estimated incidence figure of 2.64 million cases. This is a rate of 193 per 100,000 population{ Acc. To WHO}

State Name	Population	TB patient notified public sector	TB patient notified private sector	Paediatric patient notified public sector
HARYANA	289.7	51471	22526	2684

**AIM OF GROUP PROJECT**

To create awareness regarding prevention from tuberculosis in Mullana.

**OBJECTIVES**

- ◆ To perform the physical assessment of community.
- ◆ To create awareness regarding tuberculosis and its prevention by role play and chart explanation.

**SLOGAN:**

"JAN JAN KO JAGANA HAI.... TB KO BHAGAN HAI"

## **ORGANIZATION**

DATE: 27<sup>th</sup> March, 2021

TIME: 10:30 AM - 12:30 PM

VENUE: Anganwadi, Mullana

LANGUAGE: Hindi

## **GROUP PROJECT SUPERVISORS:-**

Mrs. Pabalpreet Kaur

Ms. Riya Saini

## **INCHARGE OF THE GROUP PROJECT:**

Invitation incharge: Amandeep kaur, Archana

Lesson Plan incharge: Simran Saini, Vinita

AV Aids incharge: Gunjan, Jeevan jot, Anjali Bisht,

Anjali Sharma, Ritu, Samriti, Navpreet, Amandeep, Manpreet, Parminder

Video and Photo incharge: Lovepreet, Simran, Kajal, Shivani

Chart Explanation incharge: Jeevanjot, Poshika, Manita, Simran Boperai

Role Play incharge: Sunaina, Poshika, Manita, Lata, Yashika, Jeevanjot, Anju, Perna

Refreshment incharge: Amanjotkaur, Simrankaur

Report writing: Himanshi, Manpreet Kaur

Budget: Jasmine

Physical assessment: Manpreet Kaur, Jasmine, Navneet, Anjali bisht

## **PARTICIPATION OF GROUP MEMBERS:**

There were approximately gathering of 25 members from Mullana.

## **PRE- GROUP PROJECT:**

We had taken permission from Anganwadi workers i.e. Mrs. REKHA RANI and Mrs. MEENA for conducting group project in Anganwadi. We invited an honorable principal mam and all the faculty members of M.M Institute of Nursing for their presence at group project. All the family members were also invited.

## SCRIPT

### NUKAD NATAK ON PREVENTION FROM TUBERCULOSIS:

#### PEHLA DRISHYA

Ramlal- are sunti ho kyakarrahi ho.

Khanabanaaliya.

Ramlal's wife- hanji bus kam hi karrathikhanaabhitaiyarhaiabhiLagadeti hun.

Ramlal-hanlaga do main bhikhanakhakarapnidadimajduri per jaaun .

( Ramlalkam par chalajaatahaa.)

Padosi- bhankasi ho or kyakarrahihoo.

Ramlal's wife-kyabataunmeri to zindagi hi barbad Ho gai. tumhen to pata hi haiMeraPatidaru pee kegharaatahaiuskivajah se uskopura din Kasihotihaiaur sab log mere ko to aate Hain .

Padosi-pataterePatikitabiyattheek ho jaaye. Ramlal's wife- bahan main to dikhaLun

per tumhen to patahaivahmerisunta hi kahanhaichalo fir bhi main

tujhsebaatkarkedekhtihunShayad hospital meinchalajaayedikhanekeliye

Padosi – theekhaibahan ham chalte Hain.

#### DUSRA DRISHYA

Rat kadrishya

RamlalGharaatahai cigarette Peete hue aurgutkakhate hue

Ramlal's wife- are FIR a Gaya Nashakarkepatanahin yah kyakarkemanaga.

Ramlal- kyakarrahi ho?

Ramlal's wife- kismat per rorahihun...

Ramlal- pura din kit Kartirahtihaitakharke sham kogharaayahunacche se

baatnahinkarsakti to Suna mat.

Main pura din kamkartahunkamaata Hun to kya main apniMarji se

kuchhkafibhinahinSaktaaur yah cigaret to main apni Shanti keliye pita hoontakimeri sari thakawatdur ho sake.

Pura din tanne mat Diya karkhanaLaga de main Khake so jaaun.

#### TISRA DRISHYA

Rat kadrishya

RaatkoRamlalJyadakhansikarte hue

Ramlal's wife - are aapkokyahuaitnikhansikyon ho rahihai main  
aapkeliyethodaPanilekaraatehunaappk so jao.

Agle din - subha -

Ramlalkoultiaatihai)

RamlalkaladkaChintuaate hue-

Chintu- mummy jaldiaaodekho papa koulti ho rahihai.

Ramlal's wife - dikhtehainkyapatakokyahuahaiinko.

Ramlal-mujhekuchhnaihinhuahaihethodisiultituti ab main Pani Pi liya ab main theekhun  
ab mujhe kuchh bhinahin huahaichalo tum khalaga do aur main kam per  
chalajatahun.

Asha worker gaav me aati h-

Asha worker se batchitkarte hue

Padosi- bahutDinon bad aapyahanaayekyahuakahankahingaye hue the kya...

Asha worker - han main kahingai hui thiisliyeitneDinon bad gaonmeinaana.....

aurbataohai koi jacchabacchagaonmein...

Padosi- are bahanji yah

hamarepadosihainaRamlalinhenbahutkhasirahtihaiaurultiyanbhiaatihairojkhasterehte

Hain kitnibaarhumneboleaki hospital meindikha Lo hospital meinnahindikhathe....

Upar se rojdaru pi ke a jaate Hain gutkakehtehaincigaretPeete Hain itnikhansiHotihai  
fir bhinahinmantehumne to bahut bar samjhaliya agar aapkesamjhane se mante Ho to  
aapdekhI Asha worker-theekhai main jakarbaatkarkeaatihunRamlal se.

Asha worker Ramlalkegharjaate hue

Asha worker - koi haighar per

Chintu gate khol de

Chintu-namaste madam ji. Ghar par mummy papa hai

Asha worker-achchatere papa kyakartehain

Chintu-mere papa daddy majdurikarte Hain.... Madam jiaapKobataun mere Papa

rojbhikegharaate Hain itnebimarrehte Hain khasterehtehainaurulta mummy se

ladaikarte Hain....

Asha worker-theekhaiapni mummy kobulao.

Chintuapni mummy koawaazlagate

Chintu-mummy Madam jiaayibaiaapkobularahihai

Ramlal wife- han Adam jikyahuaboliye

Asha worker- Maine sunahaiaapkePatikhasterahtehainbimarrahtehainaurupar se sharabpikarGharaate Hain yah sab kitneDinon se chalrahahaikitneDinon se huabimarhai

Ramlal's wife- are unkokhasi to pichhle 3 4 hafte se ho rahihai

Asha worker- aapkopatahai agar do hafton se jyadalagatarkhansihotihai to vah TB kaeklakshan ho saktahai. Hospital meindikhanachahie

Ramlal wife- Main to unhenbahut bar bolchuki Hun ki hospital chalte Hain per vahmeribaatmante hi nahin.

Asha worker-theekhaiunhen agar vahGhar per Hain to unhenbulao main unsebaatKartihun..

Ramlalki wife Ramlalkobulate hue... Ajisunte ho ya madam jiaayithaiaap se kuchkehnachahti Hain ekbaarbaatkar lo inde ..

Ramlal- han Madam Ji bolo kyahua

Asha worker ab ki wife batarahihaikiaaapkokhansihaikitneDinon se yah aapkokhasi ho rhi h .

Ramlal-bus do char din se hi ho rahi h..

Asha worker-jhoot mat bolo aapki wife batarahihaikiaaapko teen char hafteseikasi ho rahi

Ramlal-khansihone se kyahotahaithodabahutkhasijukam to chalta hi rahatahai use kuchhnaahinhots.

Asha worker theekhailekinaapekbaar hospital dikhalijiyeaursare test karvalijiye

Ramlaltheekhai main hospital jakarapneaap test karvalunga Tum jaoyahan se..

Agladrishya

Ramlalkoultimeinkhoonaate hue...

Chintu- mummy dekho Papa kiultiyan main to kitnasarakhoon a rahahai yah dekhokya Ho Gaya...

Ramlal wife- are going kiladkiyonmein to khoonhaichalChintutere papa ko hospital lekarchalte Hain.

Chintu- chalo hi nahin hospital lekarchalte Hain.

RamlalChintuaur and Ramlalwife hospital meinjaate hue

doctor sahabdekhoinhenkyahuahaiaajunkikutiyameinkhoonaayahai...

Doctor-achchaurunhenkyahuahai

Ramlal wife-pahle hi ne Kasihotithi FIR ultiyanhunauraaj to  
inkeultimeinkhoonbhiaaya..

Doctor tumharanaamkyahai

Ramla-l Ramlal

Doctor- tumhariumrakitnihai

Ramlal- 65 sal

Doctor- achecha yah batao Tum kabhi Bidi cigarette gutkavagairakhate ho

Ramlal- ha khaletaHuu

doctor -kitnesamay se le rhehoo

Ramla-l yah to main karib 10 salon se KhaRaha Hun lekin yah sab to mere  
sathabhishuruuhahai

Doctor- nurse 2 minutkesare test karoaur TV kabhi test karkemujhe Bata dena  
(Nurse RamlalKesare test karte hue..)

Ramlal -ab tum kalaanaapni report lenekeliye

(Chinturamlal or uski wife Gharjaate hue)

Agla din

Ramlal- chalo hospital chalte Hain report lekeanihainaaspataal se...

Ramlalwife- haantheekhaichaltehain

(RamlalaurRamlalki wife aspataaljaate hue)

Doctor- Ramlaltumhenpatahaitumhen TV hai ab tumhenbahut hi savdhani se  
savdhanibartaniilaajshurukardenetumhenvahdavaaiyanrojlenihaikabhibhiunhenchhod  
ananahinhai.

Aursunotumhen logon se duribanayerakhnihaiapnemunh per hamesha mask

Lagakerakhnahaiidharudharkahinbhithuknanahinhai.

tum meribaatsamajhrahe ho na ab ham tumharailaajshurukartehain.

(Nurse Tum inkoinekidavaaiyan de do).

Ramlaltheekhai doctor sahabmeinapnakhyalrakhungaaur jo aapanebatayahaivah sari  
batenmanunga.

Agladrishya

Ramlal- are sunti Ho main jara ration kidukaan per jatahunaur ration lekaraatahun FIR  
tum khanabanaa Dena ab main theekhunuske bad meinmajduri per chalajaunga

Lals wife theekhaiji

Ramlaldukaan per jaate hue

Ramlal are bhaidaalehinaata sab de do



Dukandar- are bhai Tum to vahibonajisko TV Hui hai Tum hum Tum to humsehar hi  
rahoBannahamenbhitbhojgi.

Ramlalitnadarkyonrahe ho tum mujhesaman do.

**Mahinebaad:**

Ramlal- are tumnekhanabanaaliya ho to khanaLaga do main

khanakhakarapnidadimajduri per chalajaungaaur ab to main bilkultheekhun.

Ramlalwife- achchatumnekhanakhaliyahai ab apniduaaenbhi le Lo

Ramlal- theekhai

(dawayoke pass jaate hue apneaap se baatkarte hue...)

Ab itne din Ho gayimujheyadenkhatehue ab to main bilkultheekhunekkamkartahun

ab main indrawanKochhoddetahunvaise main bhithakChukahununkoKhake

**Agale din:**

Ramlalauruski wife Sathiek plate mein Khanakhalete Hain-

**KuchhDinon bad**

Ramlal wife- ajisunte Ho mujhe to bahutjyadakhansi ho rahihaichaloeek bar jakar  
hospital meindikhalete Hain.

Ramlal are hanmujhebhi do teen din se bahutkhasi ho rahihaichaloeekar hospital  
meindikhalete Hain. Chlodono dr. k pass chlte h

Ramlal or uski wife dr. ka pas jaate hue....

Doctor - namastekase ho app.. kyahua h apko.

Ramlal-maribebekobhotkhasi ho rhi h .. ak bar isse check krlo.

Doctor- apkophlebhikbhiasahua h kya...

Ramlal wife - nhi .. lakinnrepatikoyakhasiwalibimari h.. ji ski wjha se usno Tb

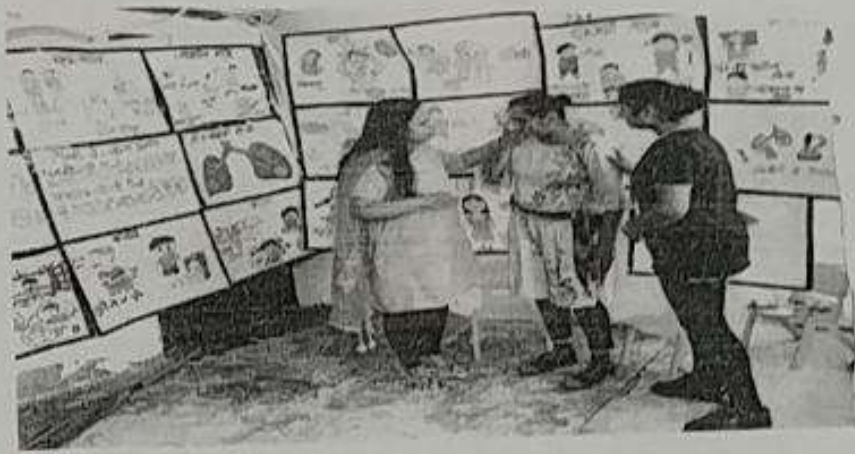
HOGYA

## GROUP PROJECT ACTIVITY

SCENE 1



SCENE 2



SCENE 3



SCENE 4



## ACTIVITY IN GROUP PROJECT (HEALTH CAMP)

1. Registration counter
2. BP monitoring
3. Height and weight monitoring

PHYSICAL EXAMINATION DATA REPORT :-  
**MM INSTITUTE OF NURSING**  
 B.Sc (N) III<sup>rd</sup> year  
 Community Health Nursing - II  
 Group Project (Tuberculosis) :-

Sr No	Name	Age	Gender	Address	Vision	Blood Pressure	Weight	Height	BMI	Interpretation
1	Mrs. Anand	25	Female	Mullana	120/80	120/80	55 kg	1.70 m	18.8	Normal
2	Mrs. Anand	45	Female	Mullana	120/80	120/80	65 kg	1.50 m	28.3	Obese
3	Mrs. Anand	25	Female	Mullana	120/80	120/80	55 kg	1.70 m	18.8	Normal
4	Mrs. Anand	25	Female	Mullana	120/80	120/80	55 kg	1.70 m	18.8	Normal
5	Mrs. Anand	25	Female	Mullana	120/80	120/80	55 kg	1.70 m	18.8	Normal
6	Mrs. Anand	25	Female	Mullana	120/80	120/80	55 kg	1.70 m	18.8	Normal
7	Mrs. Anand	25	Female	Mullana	120/80	120/80	55 kg	1.70 m	18.8	Normal
8	Mrs. Anand	25	Female	Mullana	120/80	120/80	55 kg	1.70 m	18.8	Normal
9	Mrs. Anand	25	Female	Mullana	120/80	120/80	55 kg	1.70 m	18.8	Normal
10	Mrs. Anand	25	Female	Mullana	120/80	120/80	55 kg	1.70 m	18.8	Normal
11	Mrs. Anand	25	Female	Mullana	120/80	120/80	55 kg	1.70 m	18.8	Normal
12	Mrs. Anand	25	Female	Mullana	120/80	120/80	55 kg	1.70 m	18.8	Normal
13	Mrs. Anand	25	Female	Mullana	120/80	120/80	55 kg	1.70 m	18.8	Normal
14	Mrs. Anand	25	Female	Mullana	120/80	120/80	55 kg	1.70 m	18.8	Normal
15	Mrs. Anand	25	Female	Mullana	120/80	120/80	55 kg	1.70 m	18.8	Normal
16	Mrs. Anand	25	Female	Mullana	120/80	120/80	55 kg	1.70 m	18.8	Normal
17	Mrs. Anand	25	Female	Mullana	120/80	120/80	55 kg	1.70 m	18.8	Normal
18	Mrs. Anand	25	Female	Mullana	120/80	120/80	55 kg	1.70 m	18.8	Normal
19	Mrs. Anand	25	Female	Mullana	120/80	120/80	55 kg	1.70 m	18.8	Normal
20	Mrs. Anand	25	Female	Mullana	120/80	120/80	55 kg	1.70 m	18.8	Normal

RBS MONITORING :-

S.No	Name	Age	Gender	Address	RBS	Interpretation
1	Mrs. Anand	25 yrs	Male	Mullana	211 mg/dl	Diabetes Mellitus
2	Mrs. Anand	51 yrs	Female	Mullana	205 mg/dl	Diabetes Mellitus
3	Mrs. Anand	25 yrs	Female	Mullana	91 mg/dl	Normal
4	Mrs. Anand	25 yrs	Female	Mullana	95 mg/dl	Normal
5	Mrs. Anand	25 yrs	Female	Mullana	142 mg/dl	Normal
6	Mrs. Anand	51 yrs	Female	Mullana	147 mg/dl	Normal
7	Mrs. Anand	45 yrs	Female	Mullana	245 mg/dl	Diabetes Mellitus
8	Mrs. Anand	50 yrs	Female	Mullana	244 mg/dl	Diabetes Mellitus
9	Mrs. Anand	45 yrs	Female	Mullana	111 mg/dl	Normal

### THE HEALTH CAMP ON PERSON WITH TUBERCULOSIS

- All students of B.Sc nursing 4<sup>th</sup> year invited to all family members by visiting door to door for attending the health camp.
- After that registration was done to all member who visited at the site of health camp.
- In health camp the student had checked the weight, height, blood pressure and report were given to each member.
- Chart explanation was done, which include definition, causes, sign and symptom, diagnostic test, prevention.
- Comment was taken from family members about health camp.

- Recording and reporting was done.
- Refreshment was distributed to Audience.

### **BLOOD PRESSURE MONITORING COUNTER:**



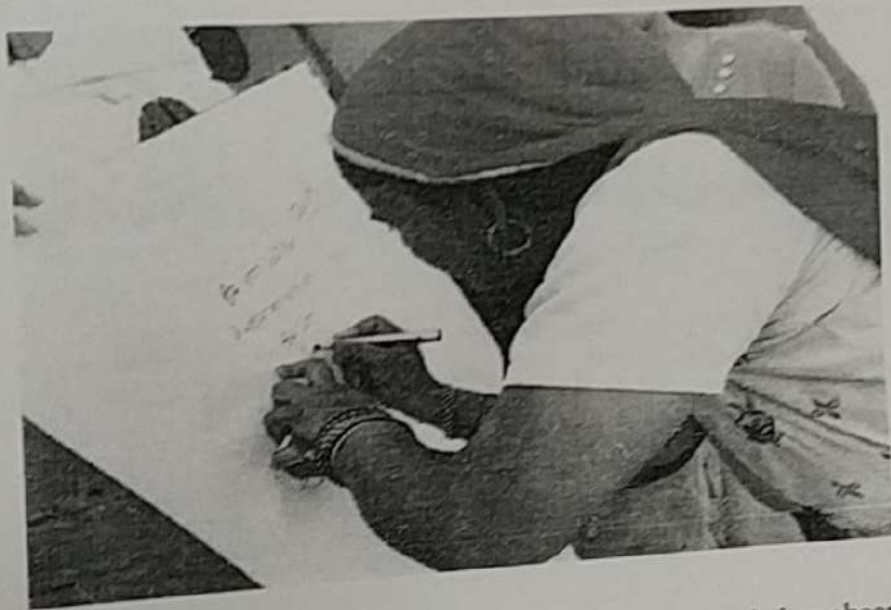
### **HEIGHT AND WEIGHT MONITORING:**



## RBS Monitoring :



## VOTE OF THANKS:



After the role play and chart explanation, we have extended our heart felt gratitude to all Audience , family members of Mullana and our supervision Mrs. Pabalpreetkaur . Ms Riya Saini for their support and guidance to us and take this event successful. The role play encouraged us to do these knowledgeable programme next time also.

## REFRESHMENT:

At the end of role play we distribute biscuits to the people pf mullana.

**REMARKS:**

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

**CONCLUSION:**

By this group project, community people and family members get enough knowledge regarding Tuberculosis. Community people are so co-operative and show active interest during our group project. It was acknowledge and enriching experience for us as we got enough confidence in organizing the project at community level.

Principal  
St. St. Institute of Nursing  
Mangalochi, Mangalochi  
2/4/21  
**SIGNATURE OF PRINCIPAL MAM**  
Mukunda (1500-100)

PHYSICAL EXAMINATION PHIN REPORT

# MM INSTITUTE OF NURSING

B.Sc(N) IV<sup>th</sup> year  
Community Health Nursing - II  
Group project (Tuberculosis)

Sr. No	Name	Age	Gender	Address	Vitals: Blood Pressure	Weight	Height	BMI	Interpretation
1.	Mr Baldev Singh	75	Male	Mullana	130/80 mmHg	85 kg	177 cm	28.1 kg/m <sup>2</sup>	Overweight
2.	Mrs Sushil Kaur	45	Female	Mullana	120/80 mmHg	64 kg	156 cm	26.3 kg/m <sup>2</sup>	Overweight
3.	Mrs Monika	24	Female	Mullana	110/70 mmHg	55 kg	154 cm	23.2 kg/m <sup>2</sup>	Normal
4.	Ms. Rani		"		110/70 mmHg	77 kg	154 cm	30.7 kg/m <sup>2</sup>	Obese
5.	Ms. Rajender	72	"	Mullana	100/70 mmHg	55 kg	154 cm	21.7 kg/m <sup>2</sup>	Normal
6.	Salma	51	"	Mullana	120/90 mmHg	60 kg	153 cm	25.0 kg/m <sup>2</sup>	Overweight
7.	Anita	29	Female	Mullana	110/70 mmHg	45 kg	156 cm	18.5 kg/m <sup>2</sup>	Normal
8.	Anisha	3yr	Female	Mullana	120/70 mmHg	10 kg	110 cm	8.3 kg/m <sup>2</sup>	Normal
9.	Rishika	5yr	Female	Mullana	120/70 mmHg	50 kg	154 cm	24.5 kg/m <sup>2</sup>	Normal
10.	Ashvi	18yr	"	Mullana	110/70 mmHg	40 kg	162 cm	15.2 kg/m <sup>2</sup>	Normal
11.	Iskita	16yr	Female	Mullana	110/70 mmHg	60 kg	170 cm	20.8 kg/m <sup>2</sup>	Normal
12.	Babli	58yr	"	Mullana	110/80 mmHg	65 kg	155 cm	27.1 kg/m <sup>2</sup>	Overweight
13.	Pooja	12yr	"	Mullana	-	27 kg	143 cm	13.2 kg/m <sup>2</sup>	Normal
14.	Dimple	15yr	"	Mullana	-	31 kg	145 cm	14.7 kg/m <sup>2</sup>	Normal
15.	Disha	9yr	"	Mullana	-	22 kg	152 cm	9.5 kg/m <sup>2</sup>	Normal
16.	Prerna	48yr	"	Mullana	100/70 mmHg	52 kg	162 cm	19.8 kg/m <sup>2</sup>	Normal
17.	Paras	9yr	Male	Mullana	-	17 kg	110 cm	14.0 kg/m <sup>2</sup>	Normal
18.	Yashika	4yr	Female	Mullana	-	13 kg	-	-	-
19.	Sarej	"	"	Mullana	110/70 mmHg	54 kg	151 cm	23.7 kg/m <sup>2</sup>	Normal
20.	Kirandeep	42	"	Mullana	110/80 mmHg	55 kg	152 cm	23.1 kg/m <sup>2</sup>	Normal

## RBS MONITORING :-

S.No	Name	Age	Gender	Address	RBS	Interpretation
1.	Mr Baldev Singh	75 yrs	Male	Mullana	211 mg/dl	Diabetes Mellitus
2.	Mrs Salma	51 yrs	Female	Mullana	255 mg/dl	Diabetes Mellitus
3.	Mrs Sarej	35 yrs	Female	Mullana	125 mg/dl	Normal
4.	Mrs Sarej Bala	28 yrs	Female	Mullana	81 mg/dl	Normal
5.	Mrs Nanti	29 yrs	Female	Mullana	95 mg/dl	Normal
6.	Mrs Kanchan	5 yrs	Female	Mullana	142 mg/dl	Normal
7.	Mrs Babli	52 yrs	Female	Mullana	245 mg/dl	Diabetes Mellitus
8.	Mrs Pramila	47 yrs	Female	Mullana	244 mg/dl	Diabetes Mellitus
9.	Mrs Shreeta	50 yrs	Female	Mullana	114 mg/dl	Normal
10.	Mrs Kiran	42 yrs	Female			

M.M. INSTITUTE OF NURSING  
 GROUP PROJECT ATTENDANCE LIST  
 DATE-27/3/21

Roll No	Name	SIGNATURE
2017001	Amandeep Kaur	Amandeep Kaur
2017002	Amanpreetkaur	Amanpreet
2017003	Amanjotkaur	Amanjot
2017004	Anjali	Anjali
2017005	Anjali Sharma	Anjali
2017006	Anju	Anju
2017007	Anshul Saini	Anshul
2017008	Chahat	Chahat
2017009	Diksha	Diksha
2017010	Gunjan Sharma	Gunjan
2017011	Himanshi	Himanshi
2017012	Jasmine	Jasmine
2017013	Jeevanjot Kaur	Jeevanjot
2017014	Jyotiverma	Jyoti
2017015	Kajal	Kajal
2017017	Kusum Devi	Kusum
2017018	Lata	Lata Devi
2017019	Lovepreet	Lovepreet Kaur
2017020	Manpreet kaur	Manpreet Kaur
2017021	Manpreetkaur	Manpreetkaur
2017022	Manitarauniyar	Manita
2017023	Navneetkaur	Navneetkaur
2017024	Navpreet Kaur	Navpreet
2017025	Parvinderkaur	Parvinder
2017026	Payal dhiman	Payal
2017027	Poornima Barman	Poornima
2017028	Poshika	Poshika
2017029	Prerna	Prerna
2017031	Ramneet	Ramneet
2017032	Renu	Renu
2017033	Rituchahal	Ritu
2017034	Samriti	Samriti
2017035	Shivani	Shivani
2017036	Simranboperai	Simranboperai
2017037	Simrankaur	Simrankaur
2017038	Simransaini	Simran
2017039	Sonali	Sonali
2017040	Sunaina	Sunaina
2017041	Vinita	Vinita
2017042	Yashika	Yashika
2017043	Archana	Archana
2017044	Balwinder	Balwinderkaur

SIGNATUTRE OF SUBJECT INCHARGE



# MAHARISHI MARKANDESHWAR (DEEMED TO BE UNIVERSITY) MULLANA-AMBALA, HARYANA (INDIA), 133-207

(Established under Section 3 of the UGC Act, 1956)  
(Accredited by NAAC with Grade 'A')

Ph: 0091-1731-274475-78  
Fax: 0091-1731-274495



Website: [www.mmumullana.org](http://www.mmumullana.org)  
E.Mail: [info@mmumullana.org](mailto:info@mmumullana.org)

## Independence Day Celebration

Dated- 15<sup>th</sup> Aug, 2021

We celebrated our 75<sup>th</sup> Independence Day with full joy, proudness and enthusiasm on 15<sup>th</sup> August, 2021 at Maharishi Markandeshwar International School, Mullana. The celebration began with Drill by our Cadets. For this programme, Dr. G.M. Sogi (Principal of Dental Department, MMDU) was the chief guest and hoisted the national flag accompanied by the National anthem and everyone saluting the flag created the different ambience in the premises. The Cultural program began with reciting of patriotic songs, poems and speeches. The Hon. Chief guest delivered the speech of the struggle, blood and sacrifices that our freedom fighters did to give us this Independence of life and congratulated everyone for the 75<sup>th</sup> Independence Day.

  
Dr. MEENU GUPTA  
CTO, NCC,  
MMDU, MULLANA

Dr. Meenu Gupta  
NCC Officer  
MMDU, Mullana

**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)**

Dated: 26.11.2021

**Report**

**Legal Awareness Programme at ADR Centre, Ambala**

A Legal Awareness Programme for the Law students was organized for the celebration of Constitution Day on 26th November, 2021 at 11:00 am in ADR Centre, Ambala. A total of 40 students from B.B.A.LL.B/B.COM.LL.B. III semester participated in the Programme. The students visited Front Office Desk, Lok Adalat and Mediation Centre at District Court, Ambala. During the visit, the students observed the proceedings of the ADR Centre, where aggrieved person is guided by the panel advocate of DLSA (Ms. Bindu) in response to their problems. It has collaboration with other government departments like ADC office, Municipality Office etc. The students also observed the proceedings of Lok Adalat in which Chairman S.L. Sharma and two other members, Ms. Anita Khanna and Dr.S. K. Takyar briefed them about functioning of Permanent Lok Adalat. In addition to that, mediation proceedings was also observed by the students, which was presided by Honourable CJM, Dr. Sukhda Pritam and Ms. Rekha Lekhi, Panel Advocate. The visit to ADR Centre, Ambala proved much beneficial for the students as they learn about the procedure of mediation in settlement of disputes.

*Bindu*  
*26/11/21*  
**Head of Department**

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

Sr. no.	Roll no.	Name of the Student	
1	2520107	Sakshi/ Lathor	
2	2520011	Diksha Gill	Diksha
3	2520122	Sonal Deswal	
4	2520214	Arjundeep	
5	2520231	Maan Aram	
6	2520205	Khem Rana	
7	2520108	Yuvraj	
8	2520041	Sakshinder	Sigri
9	2520305	Sahil Mea	Sahil Mea
10	2520086	Prashant Kumar	Prashant
11	2520028	Mannat Jowetian	Younif Khan Aardhara
12	2520002	Aardhara	
13	2520007	Anushka	
14	2520038	Samriti	Samriti
15	2520033	Neetu Rana	
16	2520219	Saksham	Sak
17	2520218	Paras	A
18	2520316	Sourav	Sau
19	2520301	Hritik	Hritik
20	2520309	yatharth	yath
21	2520211	Pranav	Pran
22	2520208	Shivam	Shi
23	2520320	Samriti	
24	2520322	Peranjali	Per
25	2520321	Jiya	Jygg

Sr. no.	Roll no.	Name of the Student	
1	2520223	Pragya Raj	Pragya
2	2520230	Kishan Kumar	Kishan k.
3	2520085	Apoti	Apoti
4	2520080	Neha	Neha
5	2520119	Gunjan	Gunjan
6	2520226	Pavan	Pavan Kumar
7	2520210	Nikita	Nikita
8	2520314	Gaurama	Gaurama
9	2520034	Neha	Neha
10	2520016	Harshdeep Kaur	Harshdeep Kaur
11	2520308	Tanya	Tanya
12	2520212	Tannu	Tannu
13	2520211	Poanav	Poanav
14	2520209		
15	2520303	Keshav Chauhan	Keshav Chauhan
16	2520317	Deyansh Sharma	Deyansh Sharma
17	2520221	Simranjeet Kaur	Simranjeet Kaur
18	2520074	Nikhil Meheran	Nikhil
19	2520069	Kusha	Kusha
20	<del>2520013</del> 2520013	Akshita	Akshita
21	2520104	Dhruv	Dhruv
22	2520093	Akash	Akash
23	2520213	Tushar Sethi	Tushar Sethi
24	2520306	Sayam Goyal	Sayam Goyal

MM (DU)/LAW/21/

Dated: 06.03.2021

**Report**  
**Internship Program under DLSA (District Legal Service Authority,**  
**Ambala)**

The students of Department of law, MMDU, Mullana, Ambala have attended 10 days internship program under DLSA (District Legal Service Ambala).

On 18/1/2021 the Students visited the D.L.S.A OFFICE AMBALA. They interacted with **ADV. DHANUNJAI DHAR (PENAL ADVOCATE)**, who told them about the primary objectives & main functioning of the DLSA, at the front office there he introduced them with various documents.

On 19/01/2021 the Students visited the distt. Court, Ambala along with **ADV. DEEPAK MAKAN**. He told the students about various types of courts which are present in the court complex mainly the CJM court, the family court and special court for the POCSO. Students saw the proceedings of the criminal and civil courts and also the Court of Session.

On 21/1/2021 the Students attended a legal literacy camp which was organized by **adv. BALBIR SINGH AND P.L.V DEEPANSHU** in the village Sadopur. The students also assisted them in organizing this camp and after that they also organized a traffic awareness camp on the Chandigarh highway near the sultanpur police check post with the police officers and made the people aware about the traffic rules which should be followed while driving.

**4<sup>th</sup> & 5<sup>th</sup> DAY**

On 22/1/2021 through video conferencing with the help of Microsoft teams, the students virtually visited **OLD AGE HOME, AMBALA**, where warden of the old age home told them about the admission, management and maintenance of the senior citizens which are present in the home. She told them that they also provide medical services as well as legal aid to the senior citizens in collaboration with **D.L.S.A. AMBALA**.

### 6<sup>th</sup> DAY

On 25/1/2021 through video conferencing with the help of Microsoft teams, the students virtually visited Juvenile Observation Home Ambala. The main work of Observation Home is to be a place for changing attitude and behavior of intimate.

### 7<sup>th</sup> DAY

On 26/01/2021 the students attended a legal literacy camp which was organized by **Adv. Himanshu Kaushal, panel advocate** in Ambala Cantt. (near KD Hospital). In this camp the students interacted with laborers and made people aware about the fundamentals rights and duties of the citizens as mentioned in the Indian constitution. If any right is violated then they can come to the DLSA office for taking legal help.

### 8<sup>th</sup> DAY

On 27/01/2021 the students attended a traffic awareness camp which was organized by the **P.L.V BALRAM AND P.L.V. ARVIND JAIN** at the INCO CHOWK & POLYTECHNIC CHOWK to make people aware of the traffic rules while driving on the road.

### 9<sup>th</sup> DAY

On 28/01/2021 the students visited the sub-divisional court Naraingarh along with the **Adv. Davinder Singh, Panel Advocate**. They also visited the court of SDM, this court deals with the cases of senior citizens also.

### 10<sup>th</sup> DAY

On 29/01/2021 the students submitted their presentations.

Coordinator

Head of Department

Head  
Department of Law  
Maharaja of Chandeshwar  
(Deemed to be University)  
Multana (Ambala)-133207

No.	Name of Student	18.01.2021	19.01.2021	20.01.2021	21.01.2021	22.01.2021	23.01.2021	24.01.2021	25.01.2021	26.01.2021	27.01.2021	28.01.2021	29.01.2021
1	N. N. S. R.	Absent	Present	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent
2	K. N. S. R.	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent
3	N. S. R.	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent
4	P. S. R.	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent
5	K. S. R.	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent
6	A. S. R.	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent
7	S. S. R.	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent
8	H. S. R.	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent
9	P. S. R.	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent
10	C. S. R.	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent

Workshop Program dated 20.01.2021 held on 23.01.2021

**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)**

Dated: 14.10.2021

**Report**

*"Mega Legal Service Camp" under "Azadi Ka Amrit Mahotsav"*

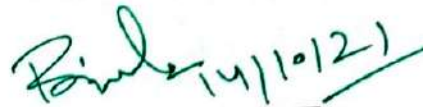
The District Legal Service Authority, Ambala in collaboration with Department of Law organized the Mega Legal Service Camp on October 14, 2021 at the MM Institute of Management, MM (DU), Mullana. The camp was organized under the campaign of Azadi Ka Amrit Mahotsav, celebrating and commemorating 75 years of progressive India & glorious history of its people, culture & achievements. The chief guest of the event was Sh. T.C Gupta – chairman of Right to Service Commission, Haryana & the program was headed by Dr. Sukhda Pritam – CJM cum Secretary DLSA Ambala. ADC Ambala Sachin Gupta, Secretary Haryana Right to Service Commission Meenaxee Raj, SDM Barara Girish Kumar and Mr Sanjeev Garg, Treasurer MM (DU) Mullana, were also present in the Programme. The Head & Dean, Department of Law, MM (DU), Prof. Bindu Jindal formally welcomed the Chief Guest and dignitaries of the event. Sh. T.C Gupta addressed the gathering that the services notified under Right to Service Act, 2014 would serve as a great base to the DLSA to spread its ambit towards making people aware of these services and the Commission, in turn, would ensure all possible cooperation from departments regarding notified services to the legal services authority. Around 31 departments of District Ambala administration and some NGOs had set up their exhibition stalls for general public for providing and to make them aware of welfare schemes. The Legal Aid Clinic of Department of Law, also set up their stall to provide free legal aid to general mass. Cultural events including skit on legal and social issues were organised for general public. Students from various schools and colleges of Ambala gave performances including poem recitation, mono act, songs and skits on social issues.

The general public was benefitted with various governmental schemes on the spot, such as Rs 1,100, along with a box of sweets were handed over to parents of couples under the "Mukhyamantri vivah shagun yojna", Sarabjot from Barara, Ambala was honoured for winning gold at junior shooting world championship, sanctioning of loan amounting to Rs.18,00000/, issuance of marriage certificate, caste certificate, Aadhar card,



income certificates, Haryana residence certificates, e-shram card, distribution of sewing machines to widows and needy women, ration kits, wedding quilt, ; drafting and consultation was done on the spot and 500 certificates were also distributed to students for their participation in various competitions and their involvement in social work. Beside these, one child was sponsored educational assistance by issuing cheque of Rs.2500/, 30 hygiene kits were provided as gifts to the participants of cultural activities, 5500 sanitary napkin pads were distributed amongst the women/girls to promote the use of sanitary napkin in order to avoid health issues. Moreover, 200 face masks, 750 sanitizers, 300 Dettol soaps and 100 saplings were also distributed amongst the general public. 150 people were vaccinated to defeat covid-19. Bharat scouts' volunteers actively participated in the event. The NGOs, novelty educational society registered people for free of cost training of skill development, Madhav Netra bank organised an eye check-up camp. The Medical and Dental College of MM (DU) also arranged the stall for providing free check up to general public. The program culminated with a pledge that legal services institutions will reach the far-flung areas to provide legal aid to the poor and needy persons. Approximately 6000 people visited and benefited by this camp.

No. of students Participated	No. of Teachers participated	Beneficiaries (if any)
145	28	6000

  
**HEAD OF DEPARTMENT**  
 Head  
 Department of Law  
 Maharaja Ganga Prasad  
 (Deemed to be University)  
 Mullanpur, Jalandhar-133207

## Department of Law (Deemed to be University)

## Volunteer List of Mega Legal Service Camp, DLSA

sr. No.	Name	Father's Name	Contact No.	Course/ Year
1	Harit	Mr. Babu Ram Sharma	8295824568	Ba.IIb/ 1 <sup>st</sup>
2	Rakshit	Mr. Maan Singh Kakran	7876411111	Ba.IIb/1st
3	Anshika	Mr. Manoj Kumar	8307194054	Ba.IIb/1st
4	Milan	Mr. Satinder Kumar	745047194	Ba.IIb/ 1 <sup>st</sup>
5	Arpit	Mr. Vivek Sharma	8683015211	Ba.IIb/ 1 <sup>st</sup>
6	Madhav Krishna	Mr. Vipin Shastri	9917072200	Ba.IIb/ 1 <sup>st</sup>
7	Mankirat Singh	Mr. Simple Singh	9416378481	B.com LLB/1st
8	Manav Sablok	Mr. Sanjeev Sablok	9700799998	BBA IIb/1st
9	Anamika	Mr Karambir singh	9466221475	ballb /3rd
10	Raushan Kumar	Mr. Ajay Dass	8002496057	BBA IIb/1st
11	samriti	Mr.Rakesh kumar bagga	9518077503	BCOM LLB/2ND
12	Kishan Kumar	Mr. Devendra Pashwan	8935949864	BbA IIb/2nd
13	Pragya Raj	Mr.Bhupendra Kumar Roy	7999314451	BbA IIb/2nd
14	Pranjal	Mr.Ravinder Kumar	9306509436	B.com LLB/2nd
15	Garima	Mr.Brijmohan	7411214344	B.com LLB/2nd
16	Anshika Dhiman	Mr.Rajendra Kumar Singh	8571829937	B.com LLB/2nd
17	Pavan Kumar	Mr.Laxman sah	6204494142	BbA IIb/2nd
18	Prerna	Mr.Dilip Kumar	6201890087	BbA IIb/2nd
19	Simranjeet Kaur	Mr. Amarjeet Singh	8930956085	BbA IIb/2nd
20	Mannat Jonathan	Mr. Bishop Sukhdev Jonathan	8559075085	Ba.IIb/2nd
21	Shubham	Mr. Bansi lal	9991119520	Ba.IIb/2nd
22	Aaradhana	Mr.krishan lal gaba	9588106044	Ba.IIb/2nd
23	Harshdeep	Mr. Jaswinder Singh	8684089520	Ba.IIb/2nd
24	Neha	Mr.Vikram Sigh	9306171704	Ba.IIb/2nd
25	Preeti bijay	Mr. Bijay kumar tiwari	9140216730	Ba.IIb /4 <sup>th</sup>
26	Nikhil Mahajan	Mr. Rakesh Mahajan	9816475169	Ballb/2nd
27	dhruv	Mr. Dinesh Kumar	9991177705	Ballb/2nd
28	Vishant Saini	harish kumar	9354813102	b.com LLB/4th
29	Kavery Sharma	Mr.Dau Dayal Sharma	7289920136	Ba.IIb/4th
30	Jaspreet	Gulab Singh	9053771960	Ba.IIb/4th
31	Sukwinder	Mr.Pardeep Kumar	9306896297	Ba.IIb/4th
32	Pankaj	Ranjit Singh	8396953445	Ba.IIb/4th
33	Atul	Barkha Ram Sharma	8168038516	Ba.IIb/4th
34	Saksham	Mr. raj kumar	8814850860	Ballb/2nd
35	Apurva Bhalla	Mr.Ashu kumar	8708294100	Ba.IIb/4th
36	Karishma Sharma	Lt. Col. Satyapal Sharma	9896933188	Ba.IIb/5th
37	Vishesh Bhatia	Mr. Umesh Kumar	9996973295	Ba.IIb/5th
38	Siddharth Sharma	Mr.Pyare lal	7009897629	Ba.IIb/5th
39	Rajat Verma	Mr.Rajesh Verma	8283867105	Ba.IIb/5th
40	Diksha	Mr.Rajender	8684067814	Ba.IIb/5th
41	Vanshika Rana	Mr. Kaptan Singh	9729396923	Ba.IIb/5th
42	Lovepreet Singh	Mr. Raj Kumar	9098000500	Ba.IIb/5th
43	Abhikant Vats	Mr. Balkesh Vats	8683081005	Ba.IIb/5th
44	Jashndeeep Singh	Mr. Amarjeet Singh	8930680185	Ba.IIb/5th
45	Muskan Singla	Mr.Rajish	8168296216	Bcom LLB/3rd
46	Kajal Sharma	Mr.Mahendra Sharma	9896092964	Bcom LLB/3rd
47	Jiya Nagpal	Mr. Tarun Nagpal	8572862683	B.com LLB/2nd
48	Aaradhana	Mr. Krishan Lal Gabba	9588106044	B.com LLB/2nd

49	Prachi	Mr.Ashok Kumar	9812644100	B.com LLB/3rd
50	Gurusha Bhalla	Mr.Manoj Bhalla	9499492696	Ba.IIb/3rd
51	Rakshita	Mr.Chander Shekhar		Ba.IIb/3rd
52	Nidhi	Mr. Harvinder	9518174066	Ba.IIb/3rd
53	Anchal pal	Mr. Omprakash Pal	9996092964	Ba.IIb/3rd
54	Isha Gupta	Mr. Pramod Gupta	7082372735	Ba.IIb/3rd
55	Mohini	Mr. Shiv Kumar	8307349482	Bcom LLB/9thsem
56	Parth Goel	Mr. Vipran Chander Pal	8295951114	Ba.IIb / 5 <sup>th</sup> yr
57	Paras Bhalla	Mr. Ramesh Bhalla	9518415942	Ba.IIb / 5 <sup>th</sup> yr
58	Ananya Srivastava	Mr.Kamal Kumar Srivastava	7985378848	Ba.IIb / 5 <sup>th</sup> yr
59	kapil chauhan	Mr. Amarpal Singh	7495038824	ballb/2nd
60	Diksha Sharma	Mr. Virender Kumar Sharma	8333659358	BCOM LLB/3rd
61	Muskan Gondi	Mr. Ved Prakash	9358010008	ballb /3rd
62	dimple rana	Mr Bhupender Singh	8307379689	BCOM LLB/4th
63	Karan	Mr. Shyam Lal Saini	9588518470	ballb/2nd
64	tushar sethi	Mr. Vishnu Sethi	7876959633	bballb/2nd
65	Sayam Goel	Mr. Atul Goel	8699619851	B.com LLB/3rd
66	Mehandi Hassan	Md. Murtja Ali	8235510087	ballb/2nd
67	Gurpreet Saini	Mr. satish kumar	9729721983	Ballb/4th
68	Ravinder Kaur	Mr Chand Lal	9729011897	Ballb/4th
69	Aakash Garg	Mr. Vikash Kumar	8059678712	BCOM LLB/3rd
70	Anchal Madhad	Mr. Sanjay Kumar	9306968856	Ballb/4th
71	Nikhil	Mr Mohan Lal	9770557288	Ballb/5 sem.
72	Anoordeep singh	sukhbir singh	98175833689	Ballb/5 sem.
73	Bhanupartap	Raj kumar singh	9817171297	Ballb sem I
74	sukriti	sanjiv sharma	9817171297	BALLB SEM I
75	Sanny	shamlal	7053422168	Ballb sem I
76	KAJAL	Rajeshwar rai	7365044549	Ballb sem I
77	vivek kumar	chandeshwar yadav	9142836966	bbabcom sem 5
78	Hirsimran	late iinder mohan singh	9468412129	ball.b sem 9

Head of Depatment



**M.M. COLLEGE OF PHARMACY**  
**MAHARISHI MARKANDESHWAR**  
**(DEEMED TO BE UNIVERSITY)**  
**MULLANA- AMBALA, HARYANA (INDIA) -133207**  
 (Established Under Section 3 of UGC, Act., 1956)  
 (Accredited by NAAC with Grade 'A')



**Vaccination Awareness Rally**



*[Handwritten Signature]*  
 06/8/2021  
 Principal  
 M.M. College of Pharmacy  
 Maharishi Markandeshwar  
 (Deemed to be University)  
 Mullana-133207 (Ambala) HR

**VISION:** "Providing technical and practice oriented pharmacy education to prepare students with attributes to meet the need of industry and society."  
**MISSION:** To develop best technically competent pharmacy professionals by inculcating desired attributes in them for meeting industry demands. \* To make best pharmacists who can practice pharmacy to become effective team member of healthcare system and provide optimum pharmaceutical care solutions. \* Promotion of useful and innovative research to contribute in development of nation and global society.



**M.M. COLLEGE OF PHARMACY**  
**MAHARISHI MARKANDESHWAR**  
**(DEEMED TO BE UNIVERSITY)**  
**MULLANA- AMBALA, HARYANA (INDIA) -133207**  
 (Established Under Section 3 of UGC, Act., 1956)  
 (Accredited by NAAC with Grade 'A')



*[Handwritten Signature]*  
 06/08/2021  
 Principal

M.M. College of Pharmacy  
 Maharshi Markandeshwar  
 Deemed to be University  
 Mullana, Ambala, Haryana

**VISION:** "Providing technical and practice oriented pharmacy education to prepare students with attributes to meet the need of industry and society."  
**MISSION:** To develop best technically competent pharmacy professionals by inculcating desired attributes in them for meeting industry demands. \* To make best pharmacists who can practice pharmacy to become effective team member of healthcare system and provide optimum pharmaceutical care solutions. \* Promotion of useful and innovative research to contribute in development of nation and global society.



**M.M. COLLEGE OF PHARMACY**  
**MAHARISHI MARKANDESHWAR**  
**(DEEMED TO BE UNIVERSITY)**  
**MULLANA- AMBALA, HARYANA (INDIA) -133207**  
(Established Under Section 3 of UGC, Act., 1956)  
(Accredited by NAAC with Grade 'A')



**Vaccination Awareness Rally Report**

On 5<sup>th</sup> August 2021, a Vaccination drive was conducted by MM College of Pharmacy, MM (Deemed to be University), Mullana-Ambala. On this occasion "A Rally cum Awareness Campaign on" COVID-19 VACCINATION GUIDE" was organized by MM College of Pharmacy. Students of PharmD 5th year (17) along with two faculty members and one staff member of MMCP visited Mullana Village, Ambala. Information related to COVID-19 Vaccination, advantages of getting vaccinated, side effects of vaccination, post vaccination precautions and general information about the medicines were given to the people of this village by door to door campaign. During this door to door campaign many families and shopkeepers take interest in this awareness educational activity. This awareness programme will definitely be helpful for the people in the society in the prevention and control of COVID-19 infection.

Event Incharge

*06/08/2021*

Dr Md Shamshir Alam  
Associate Professor  
Department of Pharmacy Practice  
MM College of Pharmacy  
Maharishi Markandeshwar (Deemed to be University)  
Mullana-Ambala

*[Signature]*  
Principal

*06/08/2021*  
Principal  
M.M. College of Pharmacy  
Maharishi Markandeshwar  
(Deemed to be University)  
Mullana-133207 (Ambala) HR



**M.M. COLLEGE OF PHARMACY**  
**MAHARISHI MARKANDESHWAR**  
**(DEEMED TO BE UNIVERSITY)**  
**MULLANA- AMBALA, HARYANA (INDIA) -133207**  
 (Established Under Section 3 of UGC, Act., 1956)  
 (Accredited by NAAC with Grade 'A')



**National Pharmacovigilance Week-2021**



*[Handwritten Signature]*  
 18/11/2021

Principal  
 College of Pharmacy

**VISION:** "Providing technical and practice oriented pharmacy education to prepare students with attributes to meet the need of industry and society"  
**MISSION:** To develop best technically competent pharmacy professionals by inculcating desired attributes in them for meeting industry demands. \* To make best pharmacists who can practice pharmacy to become effective team member of healthcare system and provide optimum pharmaceutical care solutions. \* Promotion of useful and innovative research to contribute in development of nation and global society.



**M.M. COLLEGE OF PHARMACY**  
**MAHARISHI MARKANDESHWAR**  
**(DEEMED TO BE UNIVERSITY)**  
**MULLANA- AMBALA, HARYANA (INDIA) -133207**  
 (Established Under Section 3 of UGC, Act., 1956)  
 (Accredited by NAAC with Grade 'A')



Principal  
 M.M. College of Pharmacy  
 Mullana, Ambala, Haryana

**VISION:** "Providing technical and practice oriented pharmacy education to prepare students with attributes to meet the need of industry and society"  
**MISSION:** To develop best technically competent pharmacy professionals by inculcating desired attributes in them for meeting industry demands. \* To make best pharmacists who can practice pharmacy to become effective team member of healthcare system and provide optimum pharmaceutical care solutions. \* Promotion of useful and innovative research to contribute in development of nation and global society.





# M.M. COLLEGE OF PHARMACY

MAHARISHI MARKANDESHWAR  
(DEEMED TO BE UNIVERSITY)

MULLANA- AMBALA, HARYANA (INDIA) -133207

(Established Under Section 3 of UGC, Act., 1956)

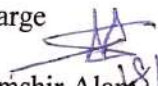
(Accredited by NAAC with Grade 'A')



## National Pharmacovigilance Week-2021 Report

The National Pharmacovigilance Week was celebrated by MM College of Pharmacy, Maharishi Markandeshwar (Deemed to be University), Mullana-Ambala on **dated 18<sup>th</sup> September, 2021**. On this occasion “**An Awareness Campaign: Safe Use of Medications**” was organized by MM College of Pharmacy. A total of 38 students (12 PharmD and 26 Nursing) along with three faculty members of MM College of Pharmacy visited Maharishi Markandeshwar Institute of Medical Sciences and Research hospital, Mullana, Ambala. Information related to safe use of medications and general information about the medicines, storage of medicines and their safe disposal were given to the people/patients who visited in the hospital. During this pharmacovigilance awareness activity about 50 people/patients take interest in this awareness activity. This type of awareness programme will definitely be helpful for the people in the society for the safe use of medicines and hence prevent untoward effects of medications.

Event Incharge

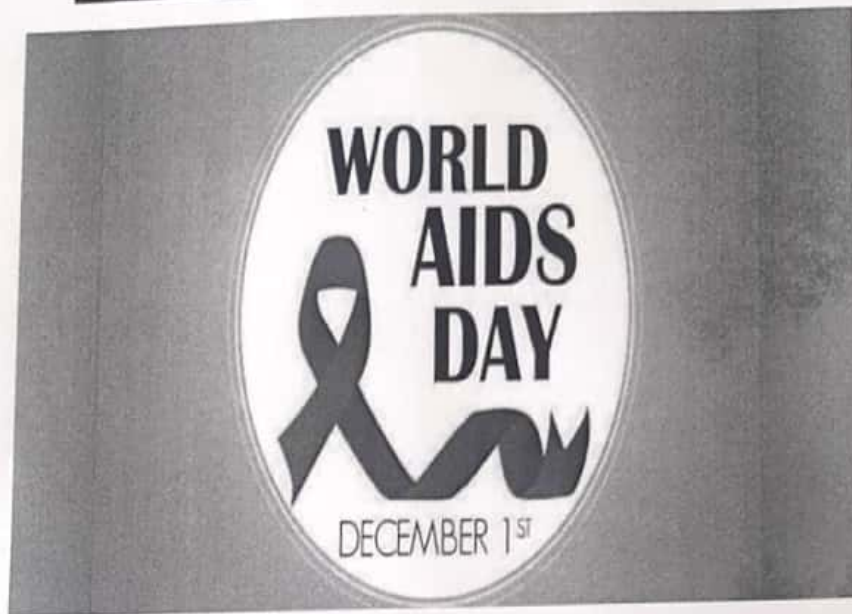
  
Dr Md Shamshir Alam  
Associate Professor  
Department of Pharmacy Practice  
MM College of Pharmacy  
Maharishi Markandeshwar (Deemed to be University)  
Mullana-Ambala

  
Principal

Department of Pharmacy  
Maharishi Markandeshwar  
(Deemed to be University)  
Mullana-133207 (Ambala) HR

**VISION:** “Providing technical and practice oriented pharmacy education to prepare students with attributes to meet the need of industry and society”  
**MISSION:** To develop best technically competent pharmacy professionals by inculcating desired attributes in them for meeting industry demands. \* To make best pharmacists who can practice pharmacy to become effective team member of healthcare system and provide optimum pharmaceutical care solutions. \* Promotion of useful and innovative research to contribute in development of nation and global society.

**M.M. COLLEGE OF NURSING**  
**MULLANA (AMBALA)**  
**GROUP PROJECT ON**



**WORLD AIDS DAY**

**SUBJECT:** MEDICAL SURGICAL NURSING

**SUBMITTED TO:**

MS. ANJULA

(ASSISTANT PROFESSOR)

(MEDICAL SURGICAL NURSING)

**SUBMITTED BY:**

M.Sc (N) 1<sup>ST</sup> YEAR

& M.Sc (N) 2<sup>ND</sup> YEAR

**SUBMITTED ON:** 21-12-2021

*Anjulaman*  
21/12/2021

**A REPORT ON GROUP PROJECT  
ON  
WORLD AIDS DAY**

A group project was organized on December 18 2021 (10:00 AM – 12:00 PM), outside the Medical Ward, Old Building Block 'A' MMIMSR, by a group of MSc. Nursing 1<sup>st</sup> Year & MSc. Nursing 2<sup>nd</sup> Year students, Department of Medical Surgical Nursing, Mullana (Ambala) under the supervision of Ms. Anjula, Assistant professor of Medical surgical Nursing Department.

Role play was performed by students to create awareness among people regarding Myths, prevention and management of HIV/AIDS. We would like to give special thanks to people and all the faculties from Medical Surgical Nursing Department, MMCON for their presence and valuable opinion.

## INTRODUCTION:

HIV (Human Immunodeficiency Virus) remains a major public health issue that affects millions of people worldwide. Although the world has made significant progress in recent decades, important global targets for 2020 were not met. Division, disparity and disregard for human rights are among the failures that allowed HIV to become and remain a global health crisis. Now, COVID-19 is exacerbating inequities. lives of many people living with HIV (Human Immunodeficiency Virus) more challenging.

The theme of World AIDS Day 2021 is "**End inequalities. End AIDS**".

On 1 December 2021, WHO (World Health Organization) is calling on global leaders and citizens to rally to confront the inequalities that drive AIDS (Acquired Immunodeficiency Syndrome) and to reach people who are currently not receiving essential HIV (Human Immunodeficiency Virus) services.

## DEFINITION OF HIV/AIDS (HUMAN IMMUNODEFICIENCY VIRUS/ ACQUIRED IMMUNODEFICIENCY SYNDROME):

Acquired immunodeficiency syndrome (AIDS) is defined as an HIV infection with either a CD4<sup>+</sup> T cell count below 200 cells per  $\mu$  L or the occurrence of specific diseases associated with HIV (Human Immunodeficiency Virus) infection.

## EPIDEMIOLOGY:

- In 2020, about 37 million people worldwide were living with HIV Human Immunodeficiency Virus) and 680,000 deaths had occurred in that year. India has the third largest HIV (Human Immunodeficiency Virus) epidemic in the world, with 2.1 million people living with HIV.
- Between the time that AIDS (Acquired Immunodeficiency Syndrome) was identified (in the early 1980s) and 2020, the disease has caused an estimated 36 million deaths worldwide.
- HIV/AIDS (Human Immunodeficiency Virus/ Acquired Immunodeficiency Syndrome) is considered a pandemic a disease outbreak which is present over a large area and is actively spreading.

## ROUTES OF TRANSMISSION OF HIV:

### a. Sexual contact:

- Male to male
- Male to female or vice versa
- Female to female

### b. Blood exposure:

- Injecting drug use/needle sharing
- Occupational exposure

- Transfusion of blood products
- Open cuts, breaks in skin, mucus membrane

**c. Perinatal:**

- Transmission from mother to baby
- Breast feeding

**d. Occupational transmission:**

- Health care worker/hospital staff
- Laboratory workers

**e. Other routes:**

- Organ transplantation
- Artificial insemination
- Needle prick



### INCUBATION PERIOD:

1. The incubation period is from HIV(Human Immunodeficiency Virus) infection till development of AIDS (Acquired Immunodeficiency Syndrome).
2. It is from a few months to 10 years or more.
3. It is estimated that 75% of people infected with HIV will develop AIDS (Acquired Immunodeficiency Syndrome) at the end of 10 years.

### RISK FACTORS OF HIV/AIDS:

1. Sharing infected injection drug use equipment
2. Having sexual relations with infected individuals
3. Infant born to mothers with HIV (Human Immunodeficiency Virus) infection/who are breast feed by HIV (Human Immunodeficiency Virus) infected mothers.
4. People who received organ transplant, HIV (Human Immunodeficiency Virus) infected blood

### CLINICAL FEATURES/ STAGES OF HIV INFECTION:

There are four stages of HIV and as with all illnesses, how it progresses, how long it takes and the affect it has on the individual depends on a number of factors for example, health, lifestyle, diet etc.

#### **Stage 1: Infection**

- HIV (Human Immunodeficiency Virus) quickly replicates in the body after infection.
- During this time the immune system reacts to the virus by developing antibodies. This is referred to as 'sero-conversion'.
- Fever
- Headache
- Muscle aches and joint pain
- Rash
- Sore throat and painful mouth sores
- Swollen lymph glands mainly on the neck
- Diarrhea
- Weight loss
- Cough
- Night sweats

## Stage 2: Asymptomatic

- As the name suggests, this stage of HIV (Human Immunodeficiency Virus) infection does not cause outward signs or symptoms.
- A person may look and feel well but HIV (Human Immunodeficiency Virus) is continuing to weaken their immune system.
- This stage may last several years (an average of 8 to 10 years) and without a HIV (Human Immunodeficiency Virus) test many people do not know they are infected.

## Stage 3: Symptomatic

- Over time the immune system becomes damaged and weakened by HIV (Human Immunodeficiency Virus) and symptoms develop.
- Initially they can be mild but they do worsen. Symptoms include:
  - Fever
  - Fatigue
  - Swollen lymph nodes — often one of the first signs of HIV infection
  - Diarrhea
  - Weight loss
  - Oral yeast infection (thrush)
  - Shingles (herpes zoster)
  - Pneumonia
- The symptoms are caused by the emergence of opportunistic infections; they are referred to as opportunistic infections because they take advantage of a person's weakened immune system. Some examples of opportunistic infections are toxoplasmosis,
- Tuberculosis and Kaposi sarcoma.

## Stage 4: AIDS/Progression of HIV to AIDS

- There is no single test for AIDS (Acquired Immunodeficiency Syndrome) doctors will look at a variety of symptoms including the CD4 count, the viral load and the presence of opportunistic infections in order to make an AIDS (Acquired Immunodeficiency Syndrome) diagnosis.
- Although HIV (Human Immunodeficiency Virus) disease progression is described in stages, it is not inevitable that a person will go from Stage 1 Infection to Stage 4 AIDS (Acquired Immunodeficiency Syndrome).
- There is treatment available that can prevent a person developing AIDS (Acquired Immunodeficiency Syndrome) and deal with the symptoms of HIV (Human Immunodeficiency Virus) infection.
- There are a number of people living with HIV (Human Immunodeficiency Virus) who have not developed AIDS (Acquired Immunodeficiency Syndrome) even without medical intervention, these people are referred to as 'long-term non progressors and

have been subject to much research in the hope of finding more information about their immune systems.



### DIAGNOSTIC TEST OF HIV/AIDS:

MAJOR SIGNS	MINOR SIGNS
<ul style="list-style-type: none"><li>• Weight loss &gt;10% of body weight</li><li>• Chronic diarrhea &gt; 1 month</li><li>• Prolonged fever &gt;1 month</li></ul>	<ul style="list-style-type: none"><li>• Persistent cough &gt; 1 month</li><li>• Generalized pruritis</li><li>• Oropharyngeal candidiasis</li><li>• Chronic progressive herpes simplex infection</li><li>• Generalized lymphadenopathy</li></ul>



### ELISA:

- ELISA which stands for enzyme-linked immunosorbent assay is used to detect HIV infection.
- If an ELISA test is positive, the Western blot test is usually administered to confirm the diagnosis. If an ELISA test is negative, should be tested again in one to three months.

### 2. Western Blot:

This is a very sensitive blood test used to confirm a positive ELISA test result.

### 3. Viral Load Test:

- This test measures the amount of HIV in blood.
- Generally, it's used to monitor treatment progress or detect early HIV infection.
- Three technologies measure HIV viral load in the blood: reverse transcription polymerase chain reaction (RT-PCR), branched DNA (bDNA) and nucleic acid sequence-based amplification assay (NASBA).
- The basic principles of these tests are similar. HIV is detected using DNA sequences that bind specifically to those in the virus. It is important to note that results may vary between tests.

### 4. Saliva Tests:

- A cotton pad is used to obtain saliva from the inside of cheek.
  - The pad is placed in a vial and submitted to a laboratory for testing.
- Results are available in three days. Positive results should be confirmed with a blood test.



STAGE	LABORATORY EVIDENCE	CLINICAL EVIDENCE
1	Laboratory confirmation of HIV infection and CD4+ T-lymphocyte count > 500 mcL or CD4+ T-lymphocyte percentage > 29	None required
2	Laboratory confirmation of HIV infection and CD4+ T-lymphocyte count 200-499 mcL or CD4+ T-lymphocyte percentage of 14-28	None required
3 (AIDS)	Laboratory confirmation of HIV infection and CD4+ T-lymphocyte count < 200 mcL or CD4+ T-lymphocyte percentage < 14	OR documentation of an AIDS defining condition (with laboratory confirmation of HIV infection)

### MANAGEMENT OF HIV/AIDS:

#### 1. Antiretroviral therapy:

##### Goal:

- To reduce HIV associated morbidity and prolong the duration and quality of survival
- To restore and preserve immunologic

function.

- To maximally and durably suppress plasma

HIV viral load

- To prevent HIV transmission.

a. Nucleoside Reverse Transcriptase

Inhibitors:

- Abacavir
- Lamivudine
- Zidovudine

b. Non- Nucleoside Reverse Transcriptase

Inhibitors:

- Delavirdine
- Nevirapine
- Etravirine

c. Protease Inhibitors:

- Amprenavir
- Indinavir
- Atazanavir

## 2. Antidiarrheal therapy:

- Although many forms of diarrhea respond to treatment, it is not unusual for this condition to recur and become a chronic problem for the patient with HIV infection.
- Therapy with octreotide acetate (Sandostatin), a synthetic analogue of somatostatin, has been shown to effectively manage chronic severe diarrhea.

## 3. Chemotherapy:

It can be given in combination with radiation therapy for the treatment of Kaposi's sarcoma and lymphoma.

## 4. Nutrition therapy:

The basic principles of healthy eating will also serve well if HIV-positive. These principles include:

- Eating a diet high in vegetables, fruits, whole grains, and legumes.

- Choosing lean, low-fat sources of protein.
- Limiting sweets, soft drinks, and foods with added sugar.
- Including proteins, carbohydrates, and a little good fat in all meals and snacks.
- **Vitamin A and beta-carotene:** dark green, yellow, orange, red vegetables and fruit; whole eggs and milk
- **Vitamin B:** meat, fish, chicken, grains, nuts, white beans, avocados, broccoli, and green leafy vegetables
- **Vitamin C:** citrus fruits
- **Vitamin E:** green leafy vegetables, peanuts, and vegetable oil
- **Selenium:** whole grains, nuts, poultry, fish, eggs, and peanut butter
- **Zinc:** meat, poultry, fish, beans, peanuts, and milk and other dairy products



## PREVENTION:

### 1. Primary prevention:

It refers to activity focused on preventing uninfected people becoming infected.

**For example (Pneumonia prophylaxis):** approximately 15-30% of HIV infected people develop pneumonia caused by Opportunistic fungus pneumocytis carinii. Treatment of pneumonia with agents such as Cotrimoxazole is associated with 60-100% response rate.

### 2. Secondary prevention:

It aimed at enabling people with HIV to stay well.

**For example:**

Testing to allow people to know their status, welfare rights advice, lifestyle behaviour.

**3. Tertiary prevention:**

It aims to minimise the effects of ill-health experienced by someone who is symptomatic with HIV disease.

**For example:**

The prophylactic use of drugs and complementary therapies.

**HEALTH EDUCATION:**

- ❖ **Use a new condom:** Use a new condom every time when has anal or vaginal sex.
- ❖ **Tell sexual partners if have HIV:** It's important to tell all current and past sexual partners about HIV-positive. They all need to be tested.
- ❖ **Use a clean needle:**  
If use a needle to inject drugs, make sure it is sterile and do not share it. Take advantage of needle-exchange programs in community. Consider seeking help for drug use.
- ❖ **If pregnant, get medical care right away:** If HIV-positive, may pass the infection to baby.
- ❖ But if receive treatment during pregnancy can significantly cut baby's risk.
- ❖ Avoid intoxication from drug or alcohol.
- ❖ Avoid unnecessary blood transfusions.
- ❖ Use standard precautions, hand hygiene and personal protective wear.
- ❖ Immunization against Hepatitis B virus should be done.

**Management of Exposure site:**

- A percutaneous injury (needle stick, cut with sharp object)
- ❖ Contact with mucous membrane and skin

**Skin:**

- Wash wound and surrounding with soap/water
- Rinse well
- Do not scrub
- Do not use antiseptic or skin washes

## Eye:

- Eye irrigation with water or Saline
- If using contact lens leave them in place while irrigating.
- Remove once eye is cleaned remove them and clean

## Mouth:

- Rinse mouth thoroughly with water / saline repeatedly
- Spit fluid immediately
- Do not use soap or disinfectant

## Post Exposure Prophylaxis:

- In India recommended for occupational exposure.
- It should be started as early as possible (within 72 hours)
- Antiretroviral therapy is given for 4 weeks.
- HIV testing should be done at baseline, 6 weeks, 3months and 6months.



### CARE FOR HIV VICTIMS:

DO'S	DON'TS
Allow them to get back to their work as soon as soon as physically fit since HIV infection not require test	Don't try to probe into when, where the person was infected.
Provide them with a high protein, high vitamin diet and clean potable water (boiled).	Don't share razors, tooth brush and other sharp objects with infected person or for that matter with anybody else.
Dispose of blood stained tampons and bandages properly either by flushing or by disinfecting them first with detergent.	
Educate family members and friends about HIV/AIDS, if they already know the HIV status of the patient.	Don't disclose the HIV status of infected person to friends, employer and Insurance company.

### COMPLICATIONS:

**Pneumocystis pneumonia (PCP):** This fungal infection can cause severe illness. It is still the most common cause of pneumonia in people infected with HIV.

**Candidiasis (thrush):** Candidiasis is a common HIV-related infection. It causes inflammation and a thick, white coating on mouth, tongue, esophagus or vagina.

**Tuberculosis:** In resource-limited nations, TB is the most common opportunistic infection associated with HIV. It's a leading cause of death among people with AIDS.

**Cytomegalovirus:** This common herpes virus is transmitted in body fluids such as saliva, blood, urine, and semen and breast milk.

## **BIBLIOGRAPHY:**

### **Textbook:**

- BRUNNER & SUDDHART'S. Textbook of Medical Surgical Nursing. 13<sup>th</sup> ed. Wolters Kluwer Publishers. 1000-1009
- Chintamani Lewis's. Medical Surgical Nursing. 2<sup>nd</sup> ed. Elsevier Publishers. 565-580

### **Internet sources:**

- World AIDS Day. Available from: <https://www.who.int/campaigns/world-aids-day/world-aids-day-2021> [Accessed 24<sup>th</sup> November 2021]
- World AIDS Day. Available from: <https://www.hiv.gov/events/awareness-days/world-aids-day> [Accessed 24<sup>th</sup> November 2021]
- World AIDS Day. Available from: <https://www.unaids.org/en/2021-world-aids-day> [Accessed 24<sup>th</sup> November 2021]
- STAGES OF HIV/AIDS. Available from: <https://www.hivireland.ie/hiv/stages-of-infection/> [Accessed 24<sup>th</sup> November 2021]
- Mayoclinic.org. HIV/AIDS. Available from: <https://www.mayoclinic.org/diseases-conditions/hiv-aids/symptoms-causes/syc-20373524> [Accessed 24<sup>th</sup> November 2021]



M.M. COLLEGE OF NURSING, MULLANA

GROUP PROJECT

ON

"COMMUNITY ACQUIRED PNEUMONIA"

SUBJECT: COMMUNITY HEALTH NURSING



SUBMITTED TO  
Ms. Pooja jaswal  
Assistant professor

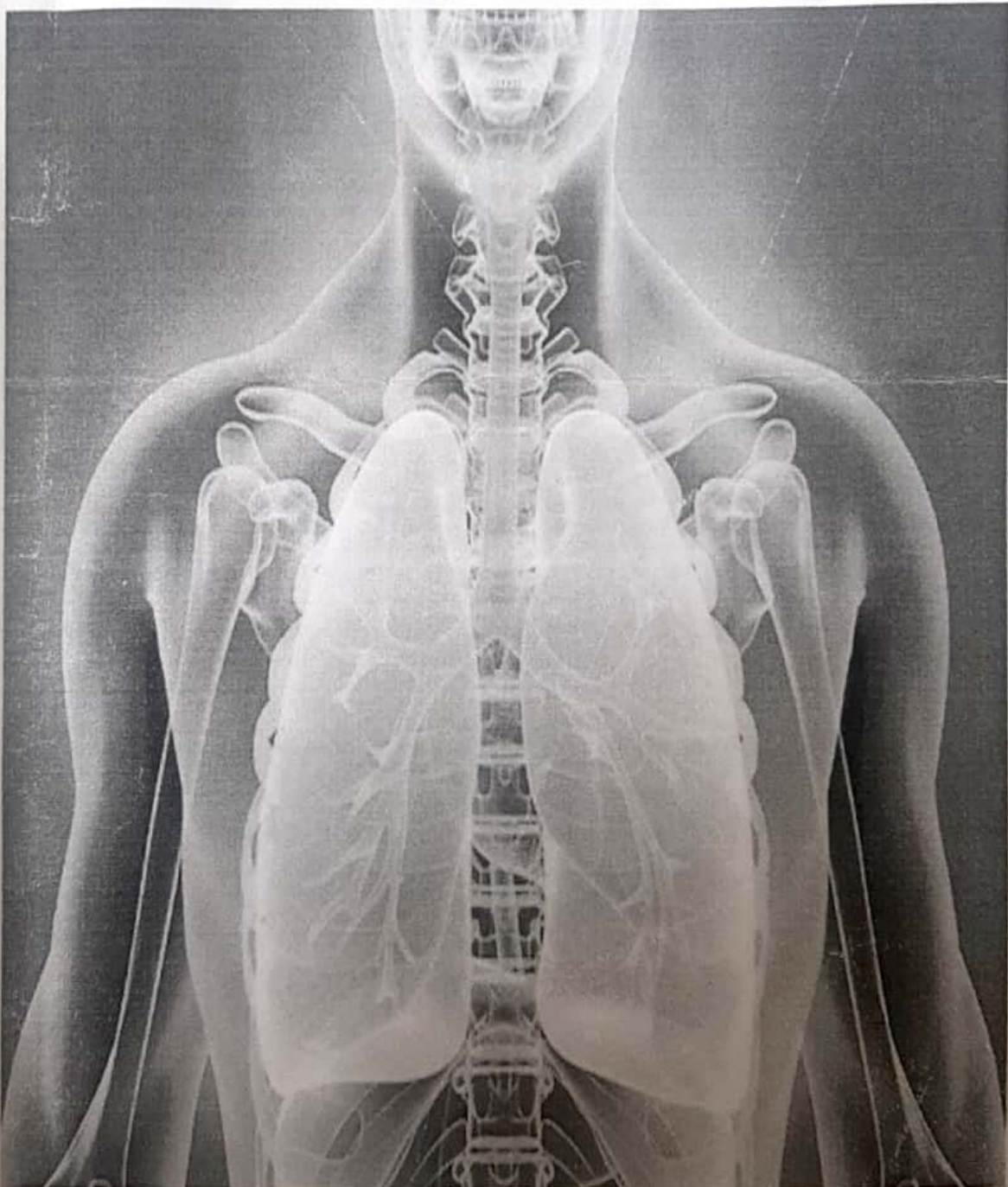
18/12/21

SUBMITTED BY:  
Group 1<sup>st</sup>  
BSc. Nursing 4<sup>th</sup> year  
ROLL NO- {2 - 34 }, 67

## GROUP PROJECT ON

### COMMUNITY ACQUIRED PNEUMONIA

We are BSC Nursing 4<sup>th</sup> Year students organized the group project on COMMUNITY ACQUIRED PNEUMONIA. We taught rural people regarding the topic community acquired pneumonia.



## OBJECTIVES:

1. To create awareness among the people.
2. To prevent the occurrence of disease
3. To educate people regarding the sign and symptoms of disease and focus on prevention and home management of community acquired pneumonia.

## THEME

“ EACH BREATH COUNTS ”

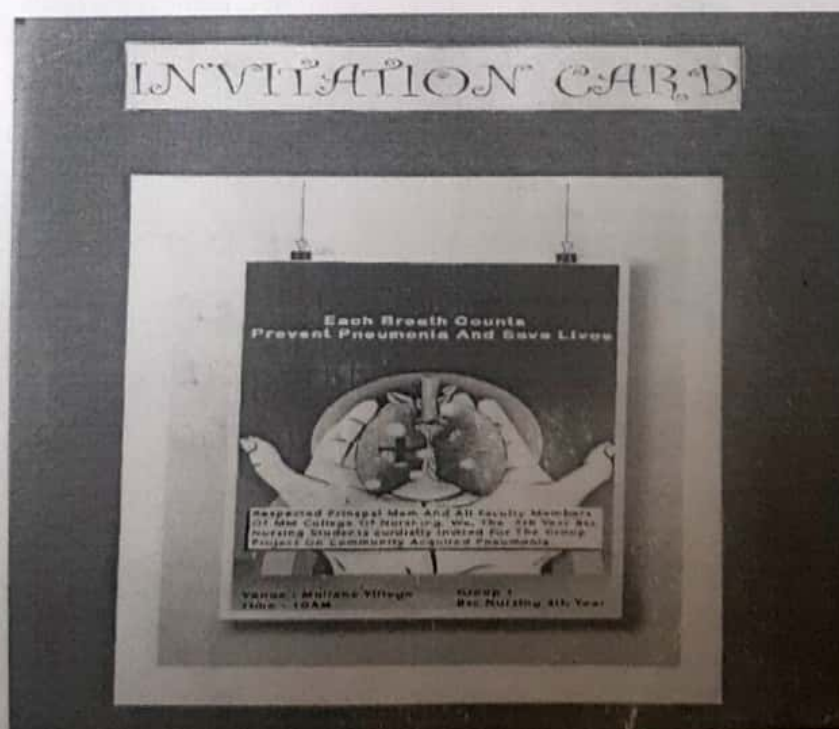
**DATE:** 17/12 /2021

**VENUE:** Mullana village

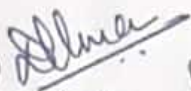
**LANGUAGE:** Hindi


This group project was organised in the village mullana for the community people so as to make them aware about the pneumonia that is acquired in the community. We Explained the people regarding the causes, symptoms, management and prevention of the community acquired pneumonia.


## INVITATION CARD



## COMMUNITY FIELD SUPERVISOR

MS. Uma Deaver ( HOD) 

MS. Pooja jaswal ( Assistant Professor ) 

MR. Rohit Pandita ( Clinical Instructor ) 

**GROUP MEMBERS : 29**

**ROLL NUMBER : 1918001-1918035**

**INCHARGES :**

**Group leader :** Jaspreet Kaur

**Invitation card:** Jaspreet Kaur

**Content:** Sumbul Rasool

**AV AIDS:** Aashna , Akanksha, Chencho, Dorji, Aakash , Anjali, Ekta , Divya Ginni , Deepa , Jasmeet  
Hilal , Basit , Kanishka , Komal , Arju

**Charts explanation:** Akanksha, Diksha, Anshul, Aakash , Basit

**Refreshment:** Gurdeep and ankesh

**Video :** Ankesh , Agam and Ramandeep

**Budgeting :** Amit

**Report making :** Jaspreet and Akshat

**Photography:** Abhinav and Aman

## **GROUP**

There was approximately gathering of 30 - 40 members who include Teachers of MMCON, People of Village mullana.

## PHASES

### PRE- GROUP PROJECT

On the previous day of the group project we went to rural community mullana to inform about the group project , We have taken permission from ASHA worker of Mullana for conducting group project on COMMUNITY ACQUIRED PNEUMONIA in the Aanganwadi centre of Mullana. We prepared all the AV-aids and did the rehearsal for the chart explanation and gave the invitation to the principal mam and all the faculty members of MMCON for group project .

### POST GROUP PROJECT:

The group on community acquired pneumonia was conducted by Bsc Nursing 4<sup>th</sup> year students with the help of faculty members on 17th DEC 2021 at ANGANWADI CENTRE at 11am – 12:30PM.

### ACTIVITY:

#### 1. MYTHS REGARDING PNEUMONIA

#### 2. CONTENT:

Following the myths explanation we elaborated the content for Community acquired pneumonia with the help of charts .





## INTRODUCTION :

Pneumoniae is a breathing condition in which there is an infection in lungs. Community acquired pneumonia is found in people who have not recently visited any health care facility. It is acquired outside the hospital premises and the part foremost affected by this kind of pneumonia is alveoli.

## CLASSIFICATION:

### 1. ANATOMICAL CLASSIFICATION :

- Lobar pneumonia
- Bronchopneumonia
- Interstitial pneumonia

### 2. ETIOLOGICAL:

- Fungal
- Bacterial
- Mycobacterial pneumonia
- Parasitic pneumonia

## RISK FACTORS:

- Chronic disease
- Suppressed immune system
- Malnutrition
- Poor dental health
- Exposure to environmental agents

## CAUSES:

- BACTERIAL :** Streptococci, hemophilus influenza, mycobacterial tuberculosis
- ATYPICAL :** Mycoplasma pneumoniae, chlamydia pneumoniae
- VIRUSES:** Influenza, adenovirus
- FUNGAL :** Histoplasmosis, pneumocystic pneumonia
- Aspiration of fluid within lungs

## **SIGN AND SYMPTOMS:**

Sneezing and runny nose  
Chest pain  
Sore throat  
Fatigue  
Fever  
Myalgia  
Headache  
Loss of appetite  
Confusion

## **Diagnosis:**

Physical examination  
Sputum culture  
Urine analysis  
Polymerase chain reaction  
CT scan  
X-ray

## **Management**

Penicillin  
Amoxicillin  
Tazobactam  
Antiviral and antepyreptic  
Salbutamol

## **SUPPORTIVE THERAPY**

It includes oral rehydration and IV fluids

## **PREVENTION :**

Exclusive breastfeeding for first six months  
Vaccinated children  
Safe drinking water  
Frequently washing should be done  
Good nutrition specially for children age 6 month to 2 years  
Adequate indoor ventilation

### COMPLICATIONS:

Septicemia  
Lung abcess  
ARDS  
Para pneumonic effusion  
Hypotension  
Empyema  
Respiratory failure

### 3. BALLOON BLOW UP ACTIVITY

Like spirometry we know that balloon blowing inflates our lungs so we made the people blow ballon as part of creating awareness



### 4. LAUGHTER THERAPY :

We made people indulge in the laughter therapy to expand the lungs and teach them about how this can increase the vital capacity.





### **Conclusion:**

Community acquired pneumonia is thus acquired outside the hospital  
Its a respiratory condition that is caused by bacteria virus and fungi and is  
preventable to much extent

### **REFRESHMENT:**

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

### **VOTE FOR THANKS:**

After role play we thanks to community people,who carefully listen the role play  
and encouraging us to these knowledge full project next time also.

### **FEEDBACK:**

Ms. Pooja Jaswal (assistant professor)

Mr. Rohit Pandita (assistant professor)

A.W.W. (Mullana)

Community members of village Mullana gave us the feedback regarding the group  
project.

## SUMMARY AND CONCLUSION:

Community people got aware extensively regarding the topic "COMMUNITY ACQUIRED PNEUMONIA" and we got positive feedback for the group project.



# MM COLLEGE OF NURSING

## GROUP PROJECT

ON

## WORLD AIDS DAY



SUBMITTED TO  
MRS POOJA JASWAL  
ASSISTANT PROFESSOR

SUBMITTED BY  
GROUP 2  
ROLL NO. 1918036-1918070

*[Handwritten signature]*  
1/12/21

BSC Nursing 4<sup>th</sup> year students organized the group project on World AIDS day. We teach rural people regarding AIDS and HIV

World AIDS Day was first observed in 1<sup>st</sup> December 1988. Each year, organizations and individuals across the world bring attention to the HIV epidemic, endeavor to increase HIV awareness and knowledge, speak out against HIV stigma, and call for an increased response to move toward ending of HIV.

**OBJECTIVES:**

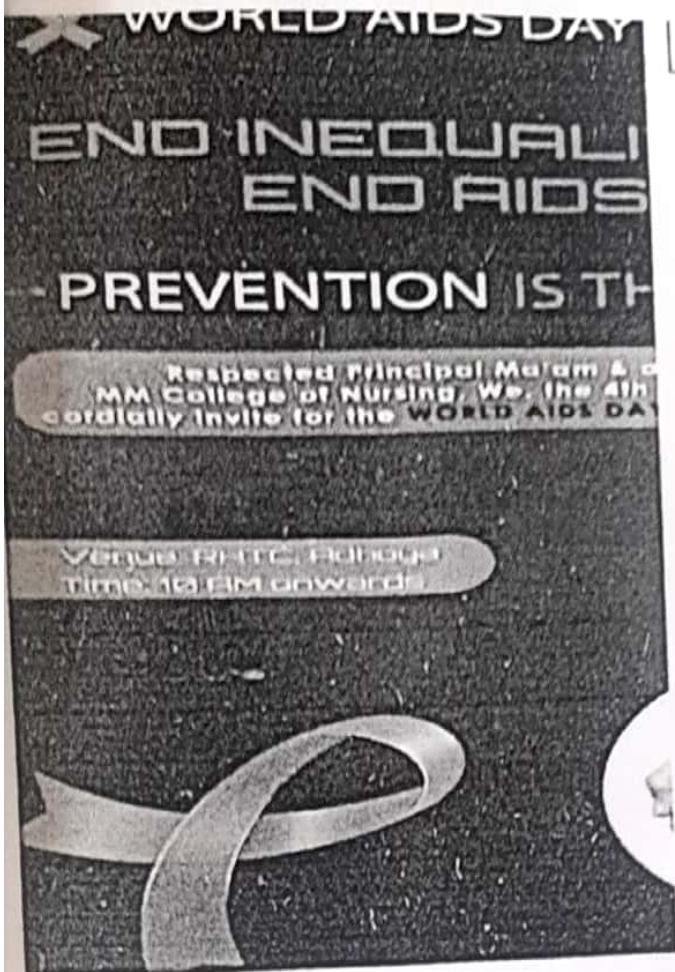
1. To assess the health status of community people.
2. To provide general awareness on AIDS and HIV
3. To conduct awareness programme on WORLD AIDS day

**THEME- "End inequalities. End AIDS".**

**DATE : 1<sup>st</sup>December2021**

**VENUE:RHTC, Village Adhoya Barara,Ambala**

**LANGUAGE -HINDI**



## COMMUNITY FIELD SUPERVISORS

- Ms. Uma Deaver (Head of Department)
- Ms. Pooja Jaswal (Assistant Professor)
- Mr. Rohit Pandita (clinical instructor)

**TOTAL NO. OF GROUP MEMBERS:** -Bsc nursing 4<sup>th</sup> year  
34 students (1918036-1918070)

## INCHARGE OF GROUP PROJECT...

**Group Leaders-**Navneet Kaur and Ashish Kumar

**Invitation incharge-**Navneet Kaur and Ashish Kumar

**AV AidS Incharge:** Priyanshi, Manjita, Manmeet, Radhika,  
, Princi, Nidhi, Moohmin, Priyanka, Muskan

**REFRESHMENT:** Lokesh, Manish

**VIDEO AND PHOTO INCHARGE:** Mayank and Manzoor koul

**REPORT MAKING INCHARGE:** Lalbir Gurung

## **GROUP**

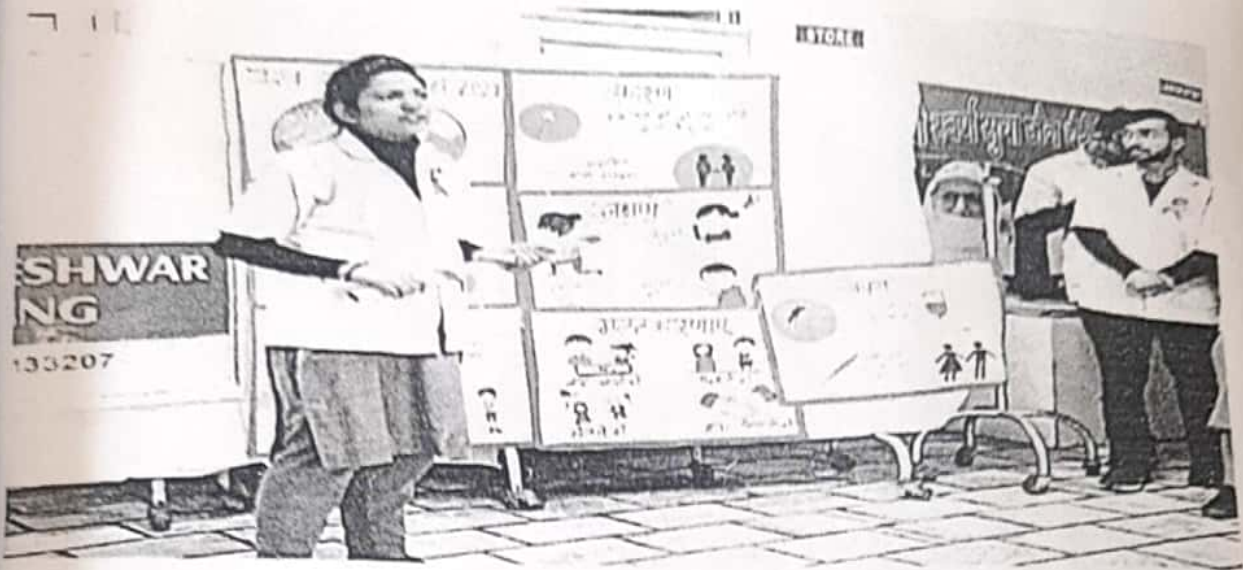
There was approximately gathering of 30-40 members who include teachers of MMCON, People of Village Adhoya.

## **PHASES**

### **PRE-GROUP PROJECT**

On the previous day of the group project, we went to rural community Adhoya for conducting the group project, we have taken permission from Supervisor of RHTC for conducting group project on World AIDS day. We prepared all the Av aids and did the rehearsal and gave the invitation to Principal mam and all faculty members of MMCON for the group project.

SCENE2: IT was about the causesof AIDS and HIV.



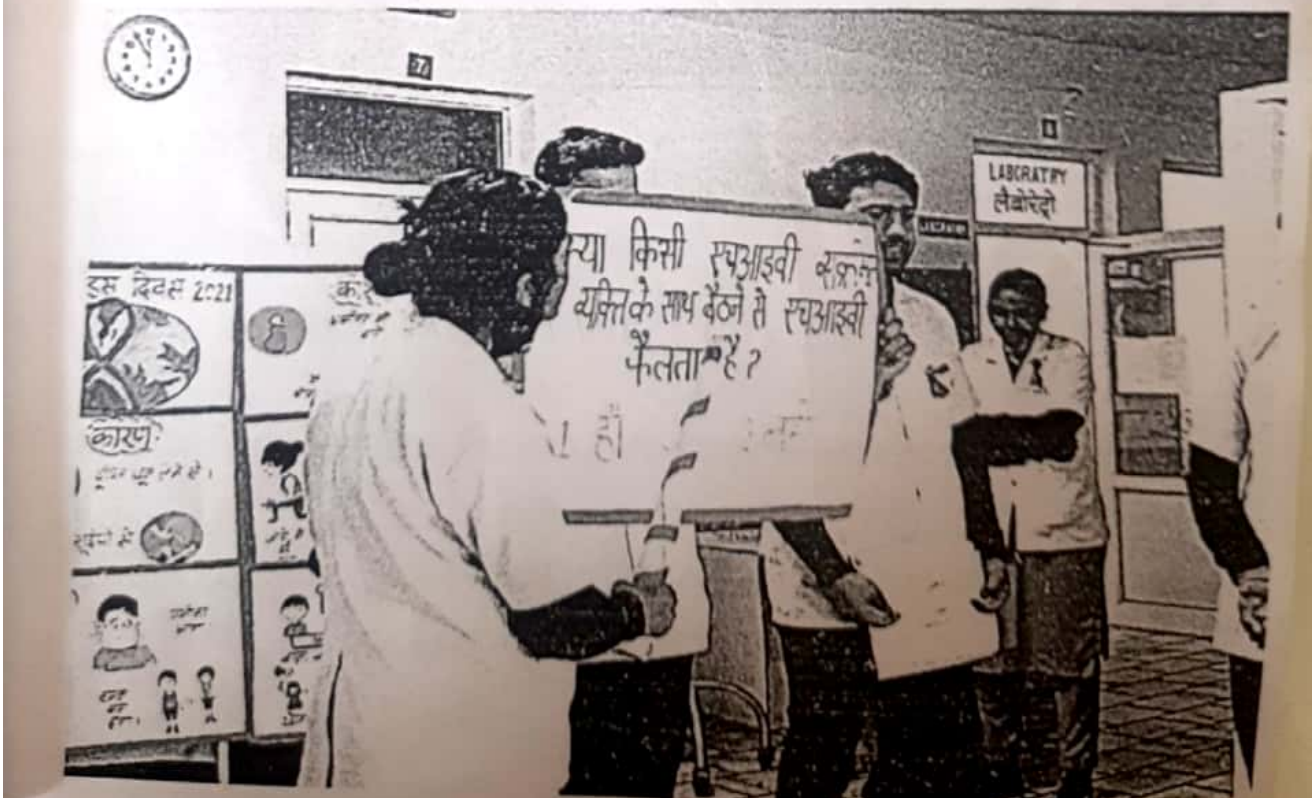
SCENE3: it was about the signs and symptoms of AIDS and HIV.



SCENE4: It was about the prevention of AIDS and HIV.



SCENE5: It was about the quiz programme on AIDS and HIV





# VITAL SIGNS MONITORING AND RBS MONITORING.



S.NO.	NAME	BP(mmHg)
1	Deepa	96/68
2	Sapna	128/80
3	Krishan kr	137/112
4	Babiota	130/70
5	Kavita	112/70

6	Ashwani	114/75
7	Hitesh	163/104
8	Harbeer	140/90
9	Kamlesh	130/80
10	Jagdesb	150/99
11	Gyan	136/84
12	Neelam	120/80
13	Neeta	130/80

## SUMMARY AND CONCLUSION..

Because of this awareness programme on WORLD AIDS day, community people got adequate knowledge. It was knowledgeable for the community people.

GROUP PROJECT ON WORLD AIDS DAY 2021.

**THEME – “End inequalities. End AIDS”.**

**DATE : 1<sup>st</sup> December 2021**

**VENUE: RHTC, Village Adhoya Barara, Ambala**

**M.M.COLLEGE OF NURSING**

**MULLANA, AMBALA**

**GROUP PROJECT ON :**

**“ TROPICAL DISEASE IN PREGNANCY”**



**SUBMITTED TO:**

MISS DEEPSHIKHA  
( NURSING TUTOR ).

**SUBMITTED BY:**

BSC NURSING 4<sup>TH</sup> year  
(1918071-1918105)

**Group project on:**

“ENDING TROPICAL DISEASE IN PREGNANCY:TOGETHER FOR GOOD FOR ALL”

BSc.Nursing4 TH YEAR.....

PRINCIPAL  
Maharshi Markandeshwar College of Nursing  
Maharshi Markandeshwar Deemed to be University  
Mullana-Ambala, Haryana-13607

Students did the Group project on "ENDING TROPICAL DISEASE IN PREGNANCY: TOGETHER FOR GOOD FOR ALL" They educate the people regarding " TROPICAL DISEASE IN PREGNANCY ( malaria, dengue & typhoid).

**OBJECTIVES OF THE GROUP PROJECT:**

1. To educate people regarding "ENDING TROPICAL DISEASE IN PREGNANCY ( malaria, dengue & typhoid) TOGETHER FOR GOOD FOR ALL.
2. To reduce the maternal and neonatal mortality and morbidity rate.
3. To educate the people regarding definition , causes sign and symptoms , preventions and treatment.

**THEME:** "ENDING TROPICAL DISEASE IN PREGNANCY : TOGETHER FOR GOOD FOR ALL"

**Date:** -27 NOVEMBER 2021

**Venue:** Civil Hospital Ambala City.

**Language:** Hindi

**Total number of the group members:**

BSc Nursing 4 TH year students ((1918071-1918105) **In charge of the group project:**

**Group leader:** SIMRANPREET KAUR(80), VISHAL BHARDWAJ (98)

**Invitation in charge MMCON-** YASHIKA, VANSHIKA MATHUR

**STAFF NURSE (CIVIL HOSPITAL)-** SIMRAN(80), SIMRAN(81)

**CONTENT-** SIMRANJEET KAUR(81), SHWETA BRAR(77)

**CHARTS:** SUSHMA(86), SUGANDH(84), SARITA(72), TEENA(87), SONAM(83), THEWANG(89), GAURI(104), VANSHIKA GARG(94), VANSHIKA GUPTA(95), UJAKSHI(90), UTKARSHA, VANDNA, YASHMEEN(101)

**SCRIPT:** VISHAL BHARDWAJ

**NARRATOR:** VISHAL BHARDWAJ

**ROLE PLAY:**

SARITA(72)[PREGNANT LADY], SEWARAM(74)[HUSBAND OF SARITA], MANSI(82)[DOCTOR], SUJATA(85)[NURSE], SHWETA(76)[PREGNANT LADY], SHIVAM(75)[HUSBAND OF SHWETA], SAHIB(71)[DOCTOR], SUGANDH(84)[PREGNANT LADY], SAWAN(73)[HUSBAND OF SUGANDH], YOGESH(103)[DOCTOR].

**CHART EXPLANATION:** TEENA(87), SUGANDH(84), SUJATA(85), VANDNA, YASHIKA(100), VISHAL BHARDWAJ(98), YASHMEEN(101)

**REFRESHMENT INCHARGE:**SIDHANT(78),VINAY(97)

**VIDEO & PHOTO INCHARGE:** URVIL(91) & YOGESH KATARIA(103)

**REPORT MAKING INCHARGE:**SIMRANPREET KAUR (80),SIMRANJEET KAUR(81)

**BUDGETING:**VINAY KUMAR(97)

**DISCIPLINE:**SIMRANPREET KAUR (80)

**Group:**Therewasanapproximategatheringof60-70Peoplewhichincludespregnant women , staff members of civil hospital and teachers of MMCON.

**PREGROUPPROJECT:**Onthe previous dayofgroupproject,the Av aids were prepared and rehearsal of role play was done. The invitation was prepared and signed by principal mam of MMCON and MMNIN and faculty members and staff members of civil hospital ( Ambala ).

**GROUPPROJECT:** Thergroupprojecton“ENDING TROPICAL DISEASE IN PREGNANCY : TOEGETHER FOR GOOD FOR ALL”WasconductedbyBSc.Nursingfourthyearstudentswith thehelpoffacultymemberson27,NOVEMBER2021inthepremisesofCivil HospitalAmbalacityat11-1:00pm.

**ROLEPLAY ON:**“ENDING TROPICAL DISEASE IN PREGNANCY : TOEGETHER FOR GOOD FOR ALL”

**VISHAL98:Namashkar!!!**

Hum sabhi MMCON kechhatr-  
chhatrayeaajaapsabhikesamneekklaghunatikaprastutkrnejaarahehai .Iskemadhyam se hum aapko

batayenge ki grabhvasthamein bahut khatrnakbimmariya se jaiseDengue,malaria,typhoidsekaisebachsktehai.

**(INTRO OF ALL STUDENTS DURING ROLE PLAY):**

**SCENE-1**

**SARITA72:(PREGNANT LADY)**Hyemeintohtkkgayi hu aajkaamkarkar ye naalisaafkrne vale ptanhikabtakaaayenge.

**SEWARAM74:(KNOCK AT DOOR)**

**SARITA72:**Hanjikaunaati hu (opens door).Haaaagayeaap lo chai lelo.(TEA SERVES)

**SEWARAM74:**Yehhitnigandi smell kischeez ki aa rahihai.

**SARITA72:**aree yeh naalisaafkrnekeliyeeapne 1 week pehlecomplaintkithi,orwohaabtaknhiaaye h, naalisaafkrne vale.

**SEWARAM74:**koibaatnhii aa jayengemeinaajphirvaha complaint krrdeta hu

**2 days later**

**SARITA72:**Ptanhiiaaajmujhekyuuthand lag rahahai..... meinbhukhar check krti hu....hayeemujhetoh 102`F bhukharhaimeratohpurasharrer tut rahahai..

**SEWARAM74:**Tumhebhukharhaichlo koi nii , abhi hospital chaltehai



## SCENE-2

**SEWARAM74:**Doctor meri wife ko bhukharhaiekkbaaar check krnaplz.

**82MANSI:**Hayeeabhikrtehai sister inke vitals lo

**85 SUJATA:**(after vitals) mam yehhraheinke vitals Inka bp kaamhai or fever bhihai.

**MANSI82:**Aapko yeh sab jaanchkrvanihaiaapkekhon ki bhijaanchhogi

## (AFTER BLOOD TEST)

**MANSI82:**Aapkakhoonmein platelets kaamhai.Aapko dengue hai .Koi baatnhiaapchinta mat karoo Aapkokhoonchadhadetehai.

**98:**Toh in drishymeinaapnedekhaaapnegharkeaaspaassafayinaarakhne se macharjyadahotahai aur uskekaran dengue hotahai.aurgarbhavasthameinbimmar hone ke chances jyadahotehaiTohumareaaspaasharjagahsafayihonichahiye .Paani ko jyadaekhtanhi hone denachahiye aur agar kisi ko dengue hojatahaitoh hospital meindekhanachiye .

**AAYIE AAB DEKHTE HAI AGLA DRISH:**



### SCENE:3

**SHWETA76:**(LUNCH WITH SHIVAM)Sunomujhenaaaaj burger khanekaamannhai aur saathmein cheese pizza bhi mil jayetohmzzaaajaye.

**SHIVAM 75:**Areeeeeeyehbahar ka khanaitnanhikhanachahiye.Teen din pehle hi tumnegolgappekhaye the tum aajphir pizza keliyebolrahi hu.

### AT NIGHT

**SHWETA76:**Sunoomujhenaaa bahut dardhorahahai pet meinptanhikyahogaya.

**SHIVAM 75:**Kyahuatumhechlo hospital chle

**SAHIB 71:**Hnjikyahuaaapko?

**SHIVAM 75:**Doctorsahab meri wife ko bahut tez pet meindardhorahahai...ekkbaar check krlo please....

**SAHIB 71:**Ohk sister inki vitals lo.Apkokyalakshn aa rahehaishweta g.

**SHWETA76:**Doctormujhe sir meindardhai , looseemotion or fever bhilai.

**SAHIB 71:**sisterinkawidal test kro.

### (AFTER WIDAL TEST)

aapko typhoid haimeinaapkodwayilikhedeta hu aapwoh le lena.



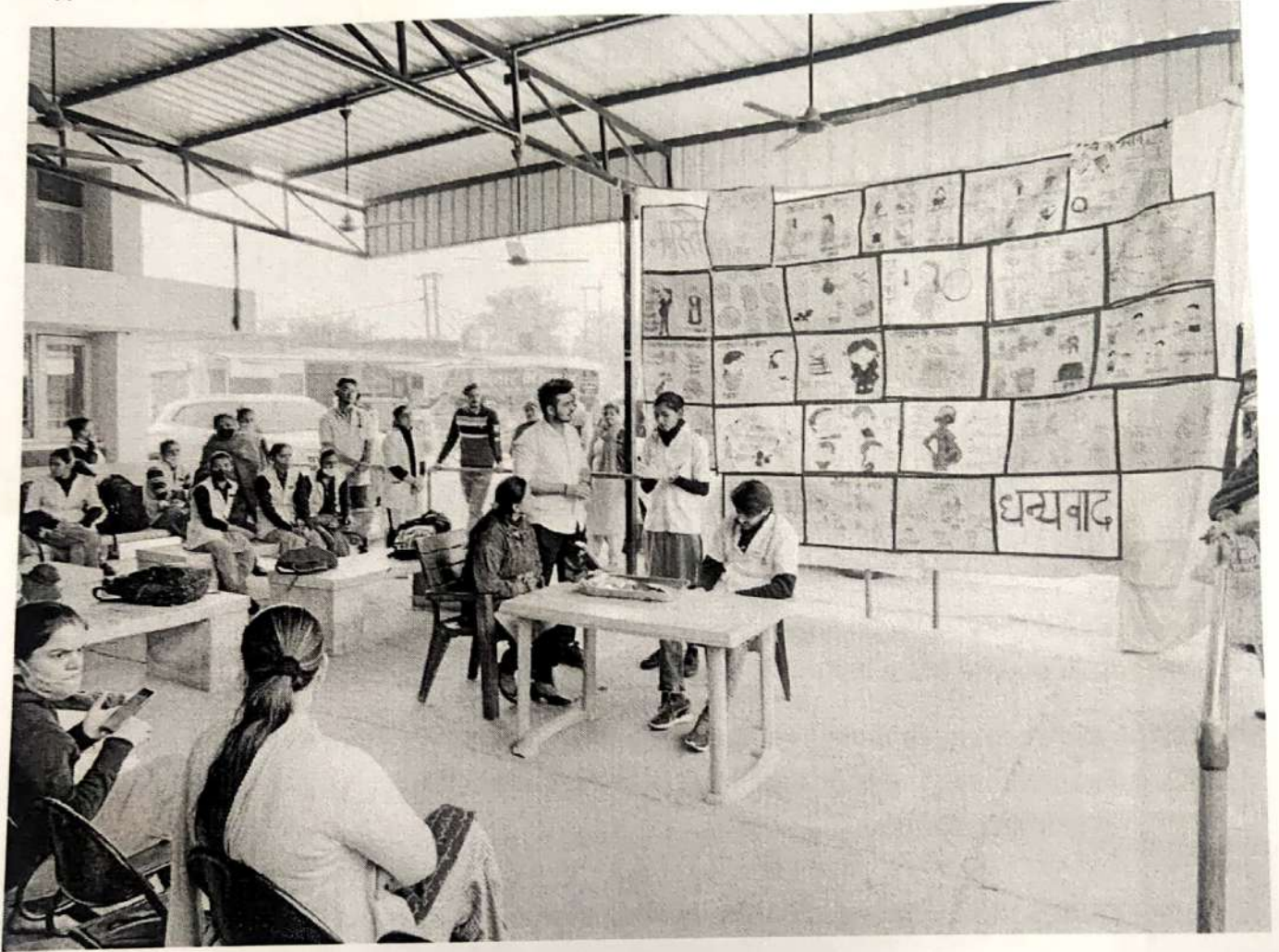
**SHWETA76:**gthikkhai doctor.

**SHIVAM 75:**doctorsaabeskokyakhanahainhi yeh bhibtado

**DR.SAHIB :**Inkojyadabharikhana matt denabsskhichdi,daliyadena

**SHIVAM 75:**doctorsaab typhoid se kaisebachsktehai?

**SUJATA:**Aapkoachakhanakhana h. Bahar ka khanachod do. Tala hua matt khao.Kuchbhikhane se pehledekhlo ki vobinakitanuvalakhanakhane se or gandapaanipeene se typhoid hota h.



#### SCENE-4

**SUGANDH84-** Aye haye m tothkkgayi hu aaj.(PREGNANT LADY ) (GOES TO SAWAN)

sunoji ,maaj bahut thkki hui simehsooskrriahi hu .bhotthandbhi lag rahihai....

**SAWAN75:**Areekyahuahaitumhe .Areekyatumheapnadhyaanrakhnachahiyenaa.Abbtao tum pregnancy time bimmarhogayi ho. chlo hospital chle.

**SUGANDH84:**DR.sahab mujhe bahut thand lag rahihai.

**YOGESH103:**Koibaatnhi,loapka fever check krtehai.

(AFTER CHECKING FEVER)

**SUGANDH JI**,aapkelakshan malaria vale hai.koibaatnhimeinaapkodwailikhdetahu .Aapvolelena ,thikkhojaoge.

**SAWAN75**:DR.sahib pregnancy mein malaria se bache par koi asarpadegakya.

**YOGESH103**:Ha,ye baatharkisi ko dhyaanrakhnichahiye ki pregnancy se pehlemata or pita ko swaachhonajarurihaitabhiswasth bacha hoga or pregnancy meinapkobimmariyon se bachne kikoshishkrnichahiyeenhito h bache par bahut gehraasarpdhtahai.

**VISHAL98**:Tohessdrishymeinaapnedekha ki hume pregnancy meinhameshashudh or ghar ka saafkhanakanachahiye or aapneaapko koi bimmariyon se bchalerakhnachahiye.Aapneaas-passmacharnaa hone de,poori baju kekapdepehne,machro se apnabchavkre.Aab mere sehpaathiaapkobtayenge ki ennsabhibimaarion se kaisebchajaasktahai.

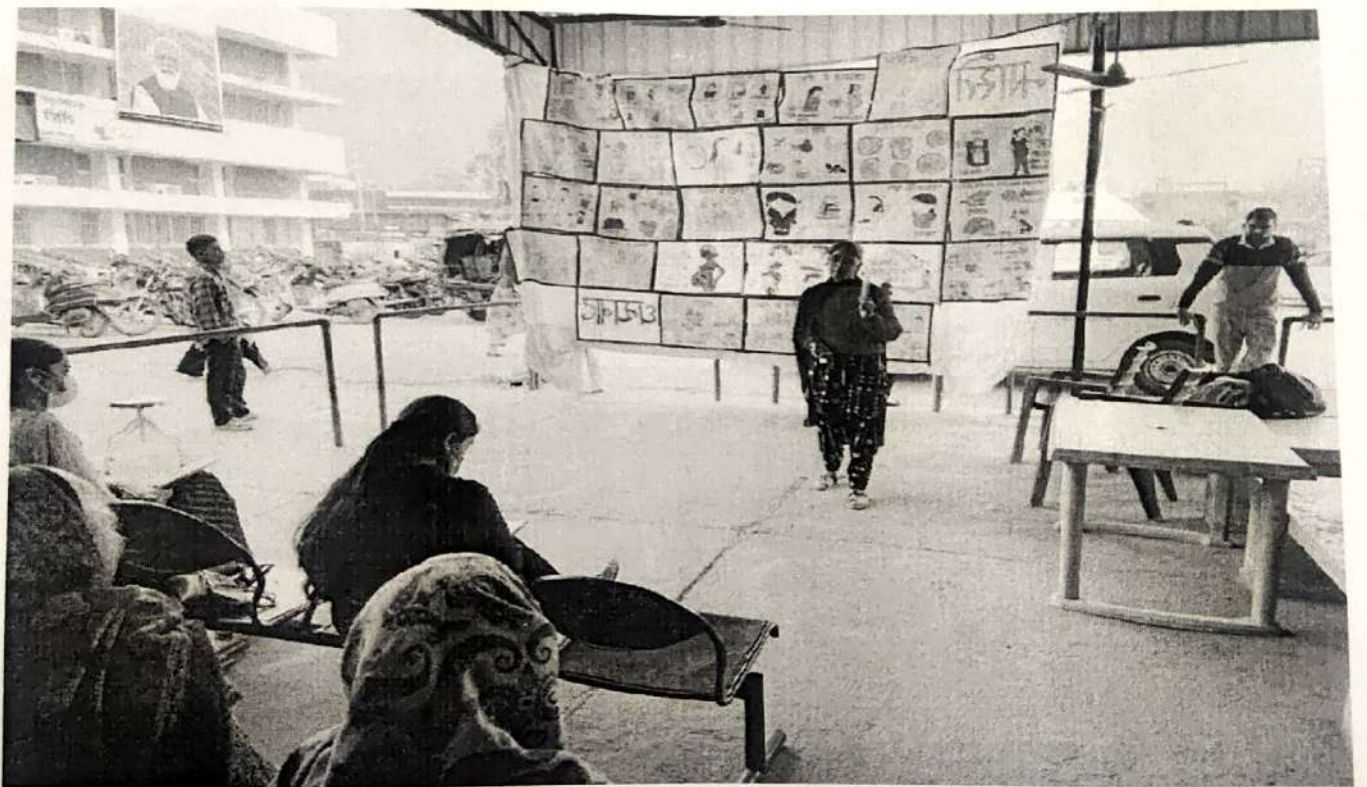


**YAHHI HAI HAMAR NAARA:**

**“GARABAVASTHA MEIN HUME INN BIMMARION KO KHATAM KRNA HAI, YEH HI SAB KE LIYE ACHA HAI”**

**CHART EXPLAINATION:**









**Health education:** It was given on tropical diseases in pregnancy - dengue , malaria , typhoid; their causes ; symptoms during 1st , 2nd , 3rd trimester in pregnancy ; the treatment should be taken and precautions that have to be taken during pregnancy to reduce prevalence of these tropical diseases in pregnancy were enumerated with the help of the role play and charts.

**Refreshment:**

One small packets of biscuits was given to all people who attended our mass awareness project.

**Vote of thanks:**

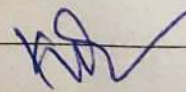
After the role play and comments from teachers we thanked all the people and teachers and staff members of civil hospital ( Ambala ) for attending our mass awareness project .

**Conclusion:**

Because of this role play pregnancy and non pregnantwomen got enough knowledge regarding what precautions they can take during pregnancy against dengue , malaria , typhoid so that the mortality and morbidity rate will be reduced.

Group project attended by the students

1918071	
1918072	Sahibjada umer
1918073	Sarita
1918074	Savan gollen
1918075	Sevaram
1918076	Shivam
1918077	Shweta
1918078	Shweta
1918079	Sidhant
1918080	Simran preet kaur
1918081	Simran jeet kaur
1918082	Mansi
1918083	Sonam chodan
1918084	Sugandh
1918085	Sujata
1918086	Sushma
1918087	Teena
1918088	Tshewang
1918089	Ujjakshi
1918090	Urvil
1918091	Uttkarsha
1918092	Vandna
1918093	Vanshika garg
1918094	Vanshika gupta
1918095	Vanshika mathur
1918096	Vinay kumar
1918097	Vishal bhartvaj
1918098	Vishal ruhella
1918099	Yashika
1918100	Yashmeen
1918101	



PRINCIPAL  
Maharishi Markandeshwar College of Nursing  
Maharishi Markandeshwar (Deemed to be University)  
Mutliana-Ambala, Haryana-India 13207

Group project attended by the students

1918102	Yogesh shota
1918103	Yogesh ktariya
1918104	Gauri thakur
1918105	Damini



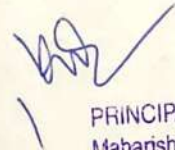
PRINCIPAL

Maharishi Markandeshwar College of Nursing  
Maharishi Markandeshwar (Deemed to-be University)  
Mullana-Ambala, Haryana-India, 133207



Group project attended by the teachers

MRS SIMARJEET KAUR
MISS DEEPSHIKHA
MISS SAKSHI
MISS MANDEEP



PRINCIPAL  
Maharishi Markandeshwar College of Nursing  
Maharishi Markandeshwar (Deemed to be University)  
Bullana-Ambala, Haryana-India, 133207

# MM COLLEGE OF NURSING

AMBALA

## REPORT OF GROUP PROJECT ON WORLD COPD DAY



SUBMITTED TO

Mrs. Shabnam Mam

Nursing tutor

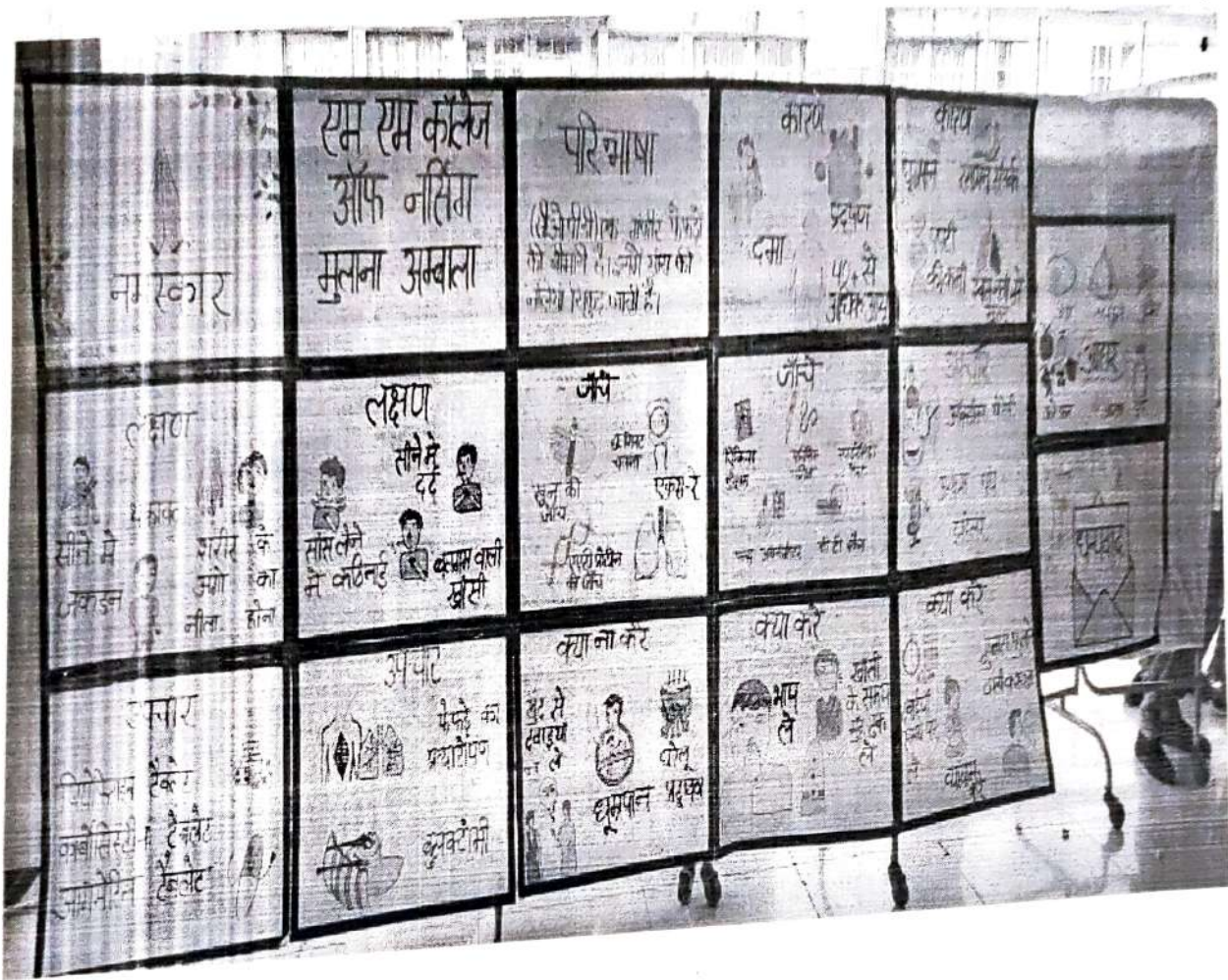
SUBMITTED BY

Post Basic Bsc,nursing 1<sup>ST</sup> year

Group A

SUBMITTED ON :-18-11-2021

  
18/11/2021



## INTRODUCTION

Medical Surgical surgical department celebrated world COPD day on 21

November 21,2021 under The theme ”  
**“HEALTHY LUNGS -NEVER MORE  
 IMPORTANT”.**

group project was organized by the group A members of Post Basic

B.Sc. Nursing 1st year students with 13 members (Roll no from 1921201

to 1921213). A role play was conducted on "venue:medicine- B block

The focus was on raising global awareness about preventive measures

such as diet, exercise, awareness about risk factors, causes, signs &

symptoms, diagnostic criteria, treatment strategies (medical and

surgical management of COPD ) of public of MM hospital

patients and educate the public, patient attendees, about COPD .

## OBJECTIVES

Following objectives were met through role play

:

1. Literal meaning of COPD explained
2. Incidence and prevalence explained.
3. Signs and symptoms of COPD explained by using AV aids such as charts.
4. Risk factors and causes of COPD explained through role play and by using AV aids such as charts and flash cards.
5. Diagnostic test for COPD explained
6. Medical, surgical and nursing management explained through role play and by using AV aids such as charts.
7. Foods to be avoided and foods to be taken explained.
8. Role of exercise and physiotherapy
9. Preventive measures of COPD explained.
10. Complication of COPD

WHO THEME FOR WORLD COPD DAY ON  
21 NOVEMBER, 2021

“LIVING WELL WITH  
COPD-EVERYBODY, EVERYWHERE”

GROUP

There were approximately 50-60 members  
gathering which  
includes patient attender, public and Teachers.

No of teachers :- 6

No of student :- 13

No of total member:-50-60

SUBJECT INCHARGE OF THE PROJECT

Subject Teacher In charge :- Mrs. Shabnam mam

Group leader :- Kanchan Chauhan & Guleasta

Invitation committee:- Sheetal Sharma &  
Anamika

Av aids committee:- Sandeep, Dinesh, Neha  
Rani, Guleasta, Shahalam, Nisha

, Neha, Sheetal, Anamika, Kanchan, Sakshi, Simran

Jeet Kaur, Manpreet

Roleplay:-

Dinesh, Neha rani, Neha, Sandeep Kumar, Simran  
Jeet Kaur, Anamika

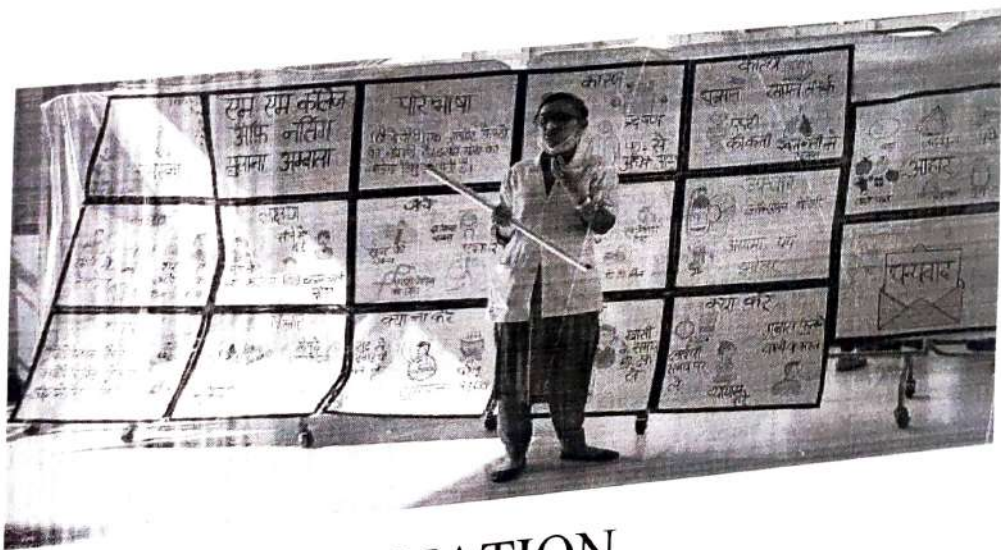
Refreshment committee:- Nisha, Sakshi

Narrator:- Guleasta

Video and Photo committee:- Sheetal, Shahalam

Charts explanation:- Kanchan, Guleasta

Report making committee:- Sandeep kumar



## CHARTS EXPLNATION

Kanchan and Guleasta explain the charts regarding definition Incidence, causes, sign and

symptoms, risk factor, management  
,exercise,healthy diet,diagnostic test and  
prevention of COPD



After the role play we are asked question from  
public, patient attender regarding heart attack .  
The student's will be able more knowleadgable  
regarding copd

### REFRESHMENT

1. Juice distributes to the patient attender
2. Tea and Samosa for teachers.



## VOTE FOR THANKS

After the role play and chart explanation, We have extended our COPD gratitude to all Audience, patient attender and all the MMCON faculty who alternatively attended the role play and encourage us to do these knowledgeable program next time too.

## SUMMARY AND CONCLUSION

At the end of role play held in the MM Hospital in Medicine Block- B Mullana –ambala Haryana students were able to aware the public, Patients, Patients attender/ Escort regarding Definition, Causes, Riskfactor, symptoms, diagnostic, treatments, healthy diet, exercise and its prevention of COPD. It was a knowledgeable and enriching experience as the students got confidence in organizing the awareness programme.



## SCRIPT

Aao natak dekho

Aao aao natak dekho

kyu itna chilate ho

kahe sbko bulate ho

kyu tum batlaoge kaise natak dihaoge

Aji natak mera bda shi

Baate isme khub khi

Jo in baton ko apnaega

fefdo ki bimari se bch Payega.

Namaste hm MM college of nursing se aaye hai. Aaj hm aapko ek natak ke madym se btayenge ki fefdo ki bimari se bchne ke liye kin kin baato ka dhayan rkhna cahiye or kya kya krna chiye or kya nhi krna chahiye .

Scene :-1

**Dinesh:-**Neha pani le kar aana.

**Neha:-**kya bat hai aaj bde preshan lag rhe ho.

**Dinesh:-**Are kuch nahi thoda kaam ki problem hai is liye acha nhi lag rah hai.

**(and this start doing Smooking.)**

**Neha:-**haan pareshani to hogi hi ghar me ek jwaan ladki hai or uske school ka bhi kharcha hai or aage to uski shadi ka bhi kharcha or aap itne bimar rehte ho Aapki thankhva bhi kam hai yha to ghar ka kharcha bhi nhi chalta hai apko kitne bar samjhaya hai cigarette mat piya kro.

**Dinesh:-**Are kuch nhi hota ase he baate bna rakhi hai is se to meri or pareshani kam hoti hai.

**Prity:-**Papa.

**Dinesh:-**Haan beta.

**Prity:-**Muje aapse kuch jruri baat krni hai.

**Dinesh:-**Bolo beta.

**Prity:-**Papa mujhe school me Principal mam ne kaha hai ke jab tak tumhri fees nhi aati tum school mat aana or papa mujhe apni pdai puri karni hai to aap meri fees de do unko.

**Dinesh:-**Dekho beta tumko to pta hi hai mari tankhva kitni kam hai usme me ghar ka karcha bhi mushkil se chalta hai meri tabiyat bhi kharab rehti hai per tum chinta mat kro me karta hu kuch.

**Neha:-**Are tum kumar se paise le lo na.

**Dinesh:-**Thik hai me jata hu.

### AT KUMAR HOUSE

**Dinesh:-**Or bhai kumar kaise hai.

**Kumar:-**Me to thik h bhai tu bta.

**Dinesh:-**Bus thik hu bhai cut rha ha time.

**Kumar:**-Kyu kya ho gya.

**Dinesh:**-bs kya btau yr ek to mari tabiyat or kuch ghar ka itna kharcha Preshan ho gya hu apni jindgi se.

**Kumar:**-Are bhai tu baat bta kya hui.

**Dinesh:**-kuch nhi bhai prity k school ki fees bharni hai or Neha bhi ghar ka kharcha mangti hai smajh nhi aata kha se itna pessa la k du.

**Kumar:**-chal chod to cigarette pete hai.

**Dinesh:**-or bhai terko to khansi ho rhi thi thik hai tu ab.

**Kumar:**-thik hu bhai me gya tha doctor ke paas.

**Dinesh:**-Are doctor to aise he preshan krte hai or bta kya btaya Doctor ne.

**Kumar:**-"**DAMA**" btaya hai Doctor ne.

**Dinesh:**-Acha (**Heran hote hue**) or dwai.

**Kumar:**-haan haan kuch time lag gayega thik me me mane to thode di he dwai le thi fir me k ho gaya to mane leni chod di.

**Dinesh:-**Haan bhai kya rakha hai in dawai me in logo ka to kaam he ye hai paise bnane ka

**(Return to Home)**

**Prity:-** Papa aa gye aap bhut time lga diya apne

**Dinesh:-**Haan beta tera vo kumar uncle ha na bhot bimar hai to unke pas gaya tha

**Neha:-**Are ab usko kya ho gaya.

**Dinesh:-**Doctor ne "Dama" btaya hai usko.

**Prity:-** Papa aap bhi cigareta mat piya kro aap bhi to bimaar rehte ho.

**Dinesh:-**Nhi beta me to thodi bhot pita hu.

**Neha:-**Khana kha lijiye ap.

**Dinesh:-**Thik hai le aao.

**(After meal)**

Chalo thik hai ab me kaam par ja rha hu.

**(Khaste hue)**

**Neha:-**Aaj apki tabiyat kharab hai aaj ap mat jao.

**Dinesh:-**Are nhi gya to mere pase cut jaenge.bus

tum dwai de do meri.

**Neha:-**Thik hai prity papa ki dwai le kar aana.

**Prity:-**Lo papa daiapki.

**Dinesh:-**Thik hai me chalta hu.

(ghar se jate hue)

**At office:-**

**Kumar:-** Aa gaya bhai.

**Dinesh:-**Haan bhai or kesa hai tu.

**Kumar:-**Raat se tabiyat kharab hai bhai khasi ho rahi hai bhot,sine me bhi bhot dard hai,chakar bhi aa rha hai.

**Dinesh:-**Koi nhi me kaam kr lunga tu Doctor se dwai le le ja kar.

**Kumar:-**Merko kuch jada khasi hai me ja rha hu tu bol dena sahab ko.

(or vo waha se cigarette pete hue chala gaya)

**Dinesh:-**Thik hai.

(Kumar ki tabiyat jada kharab hote hue)

**Dinesh:-** Are teri to bhot tabiyat khrab hai chlo me tumko Doctor ke pas le kr jata hu.

**(or dono waha se jate hue)**

**At clinic:-**

**Dinesh:-** Namste Madam ji?

**Nurse:-** Namste han ji boliye.

**Dinesh:-** Dekho isko bhut khansi or bhukhar ho raha hai.

**Nurse:-** Kya naam hai?

**Dinesh:-** Kumar.

**Nurse:-** Kitne umar hai?

**Kumar:-** 40 sal ha madam ji.

**Nurse:-** Kab se hori hai khasi?

**Kumar:-** Bhut din se.

**Nurse:-** Or Kuch dikkaat hai?

**Kumar:-** Khasi k sath sath chaati me bhi dard hota hai.

**Nurse:-** Thik hai. main kuch janch likh dati hu ap



kra lijiye or Doctor ko dikha dena.x-ray bhi jarur krwa lena.

**Kumar:-**Namaste Doctor shab.

**Doctor:-**Namaste.

**Dinesh:-**yeah lijiye x-ray or report.

**Doctor:-**Kab say hai khansi.

**Kumar:-**15-20 din ho gye.

**Doctor:-**Dwai li.

**Kumar:-**Le rha hu pass wale Doctor ne likhi thi.

**Doctor:-**Apko to fefdo ki bemari hai.

**Kumar:-**kyaa!! mujhe fefdo ke bemari hai.

**Dinesh:-**Vo to la ilaj bimari hai ab ya hoga.

**Doctor:-**Darne ki baat nhi hai iska ilaj sambhav hai.app cigarette pite hai.

**Kumar:-**nhi madam nhi pita.

**Dinesh:-**Acha.

**Doctor:-**Chalo main kuch dwai likhi hi nurse say smaj lo kaise leni hai.

**After reaching to nurse**

**Dinesh:-**Dekhna Madam ji yeh dwai.

**Nurse:-**khansi hai apko?

**Dinesh:-**Han ji inke bare main kuch batana tha apko.

**Nurse:-**Haan ji kahiye?

**Dinesh:-**yeah cigarette bhut pita hai or gutkha bhi khata hai.

**Nurse:-**kab say pitey hain yeah cigarette?

**Dinesh:-**20-25 saal say.

**Kumar:-**Are kabhi kabhi pi leta hu main.

**Dinesh:-**Nhi nhi .(khasi ki awaj)

**Nurse:-**apko pta hai ye kitni hani karak hai hmare swasth k liye ye nhi pina chaiye.

**Dinesh:-**Acha ab kya karna padega.

**Nurse:-**Ye dwai le lena.(smjhate hue)

**Kumar:-**Thik hai.

**Nurse:-**(**Dinesh ko**) khansi to apko bhi ho rhi hai aap bhi apni janche kra lena.

**Kumar:-** Hme khane pine main kya parhej karna padega.

**Nurse:-** Apko tali hue chije nhi khani hai apko hari sabjiya or fruit khane hai.

**Dinesh:-** Thik hai madam ji.

**Nurse:-** Cigarette mat pina.

Vapis Ghar aa gaye

**Kumar:-** Bhai thak gaye aaj to.

**(chal Cigarette pitey hai)**

**Dinesh:-** Nhi mna kiya hai na dr ne ye thik nahi hai.

**Kumar:-** nhi bhai kuch nhi hota. dwai kha lunga na main.

**(khasne ki awaj)**

chal main apne ghar chalta hu.

**Dinesh:-** Are bhai ruk pani to pile.

**Neha:-** Pani de do kumar uncle ko

**Neha:-** Pani le k atti hai **(preety bhi aajati hai)**

prity:-Aa gye papa dr ne kya btaya apko.

Neha:-kya kha dr ne.

Dinesh:-Fefdo ke bemari btaye hai kumar ko to.

Neha:-Kya.

Kumar:-Are dwai di hai na thik ho jayge.

Neha:-Ku pitey ho ap ye kya milta hai.is say ap  
bhi mat piya karo

Kumar:-Thik hai.

Dinesh:-Han bhai main bhi nhi piunga tu bhi mat  
pina.