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2.3. 2. Report on training programmes in clinical skill lab/simulator centre:

Programmes in clinical skill lab:

- 1. CPR
- 2. Mechanism of labour
- 3. Physical Examination
- 4. Specific Task
- 5. Respiratory Care
- 6. Urinary Catheterization
- 7. Wound Care
- 8. Suturing Simulator

CPR

Facilitator: Mrs. Subashini

Participants:99 Nursing students

Objectives:

- To equip participants with the knowledge and skills necessary to perform CPR effectively.
- To enhance confidence in responding to cardiac emergencies.
- To understand the importance of early defibrillation and the use of AEDs.

Training Overview:

The CPR training session included both theoretical and practical components:

- 1. Introduction to CPR:
 - Explanation of cardiac arrest and the importance of immediate action.
 - Overview of the Chain of Survival.
 - Discussion on the signs and symptoms of cardiac arrest.
- 2. Basic Life Support (BLS) Techniques:
 - Adult CPR: steps for compressions and rescue breaths.
 - Child and Infant CPR: adaptations and differences from adult CPR.
 - Importance of calling for help and activating emergency services.
- 3. Use of Automated External Defibrillators (AED):

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- Explanation of how AEDs work and when to use them.
- Hands-on practice with an AED simulator.

4. Practical Exercises:

- Participants practiced CPR on manikins, focusing on compression technique, depth, and rate.
- Scenario-based simulations where participants responded to mock cardiac arrest situations.

5. Feedback and Assessment:

- o Participants received feedback from instructors on their technique.
- Opportunity for questions and clarifications on procedures.

Outcomes:

- All participants demonstrated improved understanding of CPR techniques.
- Participants expressed increased confidence in their ability to perform CPR.
- Feedback indicated a strong appreciation for hands-on practice and scenario training.

2. Mechanism of Labor

Facilitator: Prof. Latha

Participants:99 Nursing students

Objectives:

- To understand the stages of labor and the physiological changes that occur.
- To observe and practice the mechanics of labor using models and simulations.
- To enhance clinical skills related to the management of labor.

Overview of the Mechanism of Labor:

The mechanism of labor involves a series of movements that the fetus undergoes during delivery, critical for successful childbirth. The following stages were covered in detail:

1. Engagement:

The fetal presenting part (typically the head) descends into the pelvic inlet.

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 Discussion on the importance of the biparietal diameter in engaging with the pelvic brim.

2. Descent:

- Focus on the downward movement of the fetus due to uterine contractions.
- Practical demonstration of how descent can be monitored through vaginal examinations.

3. Flexion:

- Explanation of how the fetal head flexes to present the smallest diameter to the pelvis.
- o Participants practiced observing flexion using pelvic models.

4. Internal Rotation:

- o The fetal head rotates to align with the widest diameter of the pelvic outlet.
- Hands-on activities involved simulating various positions (occipito-anterior and occipito-posterior).

5. Extension:

- o The process of the fetal head extending as it passes under the pubic symphysis.
- Participants were shown how to identify extension through palpation techniques.

6. External Rotation (Shoulder Rotation):

- After the head is delivered, it rotates to allow the shoulders to pass.
- Practical exercises demonstrated how to assist in shoulder rotation.

7. Expulsion:

- Delivery of the fetal body after the shoulders have cleared.
- Discussion on the importance of monitoring the mother's condition during expulsion.

Hands-On Practice:

- Participants were divided into small groups to practice the mechanism using models.
- Each group was tasked with demonstrating each step of the mechanism, reinforcing their understanding through active learning.

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 Simulations included variations in fetal positions and the associated clinical implications.

Outcomes:

- Increased understanding of the mechanism of labor and its clinical significance.
- Enhanced confidence in recognizing normal and abnormal presentations during labor.
- Improved teamwork and communication skills among participants.

3. Physical Examination

Facilitator: Mrs. Madhavi latha Participants: 99 Nursing students

Objectives:

- To enhance participants' skills in conducting comprehensive physical examinations.
- To familiarize participants with the proper techniques and tools used during examinations.
- To improve the ability to recognize normal and abnormal findings.

Training Overview:

1. Introduction to Physical Examination:

- o Importance of physical examinations in patient assessment.
- Overview of the components of a comprehensive physical exam: inspection, palpation, percussion, and auscultation.

2. Preparation for Examination:

- o Discussion on patient history and its significance.
- Techniques for ensuring patient comfort and confidentiality.
- o Importance of informed consent.

3. Examination Techniques:

- General Survey: Observing the patient's overall appearance, hygiene, and mobility.
- Vital Signs Assessment: Measuring temperature, pulse, respiration rate, and blood pressure.

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Head-to-Toe Examination:

- HEENT (Head, Eyes, Ears, Nose, Throat): Techniques for assessing each area.
- Chest and Lungs: Inspection, palpation, and auscultation techniques.
- Cardiovascular System: Assessment of heart sounds and circulation.
- Abdomen: Techniques for palpation, percussion, and auscultation.
- Musculoskeletal System: Assessing range of motion and strength.
- Neurological Assessment: Basic neurological checks including reflexes and sensation.

4. Hands-On Practice:

- o Participants paired up to practice examination techniques.
- Use of anatomical models and manikins to simulate various examination scenarios.
- Each participant took turns performing and receiving physical exams.

5. Case Scenarios:

- Simulation of clinical cases to apply examination skills in real-life contexts.
- Group discussions following scenarios to reflect on findings and decisionmaking processes.

6. Feedback and Evaluation:

- Instructors provided real-time feedback on techniques and approaches.
- Participants engaged in self-assessment and peer assessment to enhance learning.

Outcomes:

- Participants reported increased confidence in performing physical examinations.
- Improved skills in identifying normal versus abnormal findings.
- Enhanced understanding of the importance of thorough and systematic examinations.

Challenges Identified:

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Some participants struggled with specific techniques, such as auscultation.

Time constraints limited the ability to cover all examination areas in depth.

4. Oxygen Administration

Facilitator: Mrs. Merlin golda **Participants:** 99 Nursing students

Introduction

Oxygen therapy is a critical intervention in various clinical scenarios, particularly for patients experiencing respiratory distress or hypoxemia. This report summarizes the procedures, techniques, and safety measures observed during the oxygen administration training in the skill lab.

Objectives

- To familiarize participants with different methods of oxygen delivery.
- To enhance skills in assessing patient needs for oxygen therapy.
- To reinforce safety protocols during oxygen administration.

Methods of Oxygen Delivery

1. Nasal Cannula

o Flow Rate: 1-6 L/min

Used for patients with mild to moderate hypoxia.

o Advantages: Comfortable, allows for oral communication.

2. Simple Face Mask

o Flow Rate: 6-10 L/min

o Provides higher oxygen concentrations than a nasal cannula.

Not suitable for patients with respiratory distress requiring higher flow rates.

3. Venturi Mask

Provides a precise concentration of oxygen.

Flow Rate: Varies (24%-50% oxygen concentration).

Ideal for patients with COPD or those needing controlled oxygen delivery.

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4. Non-Rebreather Mask

Flow Rate: 10-15 L/min

- o Delivers high concentrations of oxygen (up to 90%).
- o Used in emergency situations or severe respiratory distress.

5. High-Flow Nasal Cannula

- Delivers heated and humidified oxygen at flow rates up to 60 L/min.
- o Useful for patients requiring significant oxygen support.

Procedure Overview

1. Assessment

 Evaluate patient's respiratory status, oxygen saturation (SpO2), and clinical indications for therapy.

2. Preparation

- Gather necessary equipment: oxygen source, delivery device, and pulse oximeter.
- o Ensure the oxygen supply is sufficient and the device is functioning properly.

3. Administration

- o Attach the chosen delivery device to the oxygen source.
- Adjust flow rates according to the patient's needs and type of device.
- Position the device correctly for comfort and effectiveness.

4. Monitoring

- Continuously monitor SpO2 levels and respiratory status.
- Adjust oxygen flow as necessary based on patient response.

5. Documentation

 Record oxygen delivery methods, flow rates, patient responses, and any adverse effects.

Safety Considerations

Always check the oxygen supply and equipment for leaks or malfunctions.

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- Ensure the environment is free from potential fire hazards (e.g., smoking, flammable materials).
- Educate patients and families about the purpose and use of oxygen therapy.
- Be vigilant for signs of oxygen toxicity, especially in patients receiving high concentrations.

5. Airway Management

Facilitator: Mrs. Madhavi latha Participants: 99 Nursing students

Introduction

Airway management is a crucial component of patient care, especially in emergencies and critical care settings. This report outlines the procedures, techniques, and skills practiced in the skill lab focused on airway management.

Objectives

- To develop proficiency in assessing and managing airway patency.
- To familiarize participants with various airway management devices and techniques.
- To enhance teamwork and communication skills during airway interventions.

Key Areas of Focus

1. Patient Assessment

- Airway Evaluation: Assessing the airway for patency, potential obstruction, and the need for intervention.
- Signs of Distress: Identifying indicators of respiratory distress, including stridor, wheezing, and altered consciousness.

2. Basic Airway Techniques

- Positioning: Practicing the proper positioning of patients (e.g., the sniffing position) to facilitate airway access.
- Manual Airway Maneuvers: Utilizing techniques such as the chin lift and jaw thrust to open the airway.

3. Airway Adjuncts

 Oropharyngeal Airway (OPA): Learning the correct sizing, insertion, and use of OPAs in unconscious patients.

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 Nasopharyngeal Airway (NPA): Practicing insertion techniques and indications for use in conscious or semi-conscious patients.

4. Advanced Airway Management

- Endotracheal Intubation: Demonstrating the steps involved in intubation, including equipment preparation, laryngoscopy, and tube placement.
- Bag-Valve-Mask (BVM) Ventilation: Practicing BVM techniques to ensure effective ventilation, including seal creation and adequate breath delivery.

5. Suctioning Techniques

- Indications for Suctioning: Understanding when suctioning is necessary to clear secretions.
- Procedure: Practicing proper suctioning techniques, including catheter insertion depth and suction pressure settings.

6. Emergency Procedures

- Recognition of Failed Airway Management: Identifying signs of unsuccessful intubation or ventilation and knowing alternative strategies (e.g., cricothyrotomy).
- Team-based Response: Practicing scenarios that require coordinated efforts in airway management.

Skills Practiced

- **Communication**: Enhancing verbal and non-verbal communication skills in a team setting.
- Technical Proficiency: Gaining hands-on experience with airway devices and techniques.
- Critical Thinking: Developing quick decision-making skills in high-pressure situations.

Safety and Infection Control

- Emphasizing the importance of personal protective equipment (PPE) during airway procedures.
- Ensuring all equipment is properly sterilized and maintained.
- Following protocols to minimize the risk of cross-contamination.



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6. Urinary Catheterization

Facilitator: Mrs. Subashini

Participants: 99 Nursing students

Introduction

Urinary catheterization is a common procedure used for diagnostic and therapeutic purposes in healthcare settings. It involves the insertion of a catheter into the bladder to drain urine. This report outlines the training, techniques, and safety measures practiced during the urinary catheterization skill lab.

Objectives

- To develop proficiency in the techniques of urinary catheterization.
- To understand the indications and contraindications for catheter use.
- To reinforce infection control practices and patient safety.

Key Areas of Focus

1. Understanding Catheter Types

- Intermittent Catheters: Used for short-term drainage; suitable for patients who can self-catheterize.
- Indwelling Catheters (Foley Catheters): Used for continuous drainage; features include a balloon to keep it in place.
- Suprapubic Catheters: Inserted through the abdominal wall; used when urethral catheterization is not possible.

2. Indications for Catheterization

- o Urinary retention.
- o Monitoring urine output in critically ill patients.
- Surgical procedures requiring bladder drainage.
- o Diagnostic procedures.

3. Contraindications

- Urethral trauma.
- Severe urethral stricture.
- Recent prostate surgery in males.



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4. Preparation for the Procedure

- Gathering Supplies: Sterile catheter kit, gloves, lubricant, antiseptic solution, drainage bag, and a clean towel.
- Patient Preparation: Explaining the procedure to the patient, obtaining informed consent, and ensuring privacy and comfort.

5. Technique of Catheterization

- o Hand Hygiene: Performing thorough hand hygiene before the procedure.
- Positioning the Patient: Ensuring the patient is in a comfortable position (e.g., supine with legs slightly apart).
- Aseptic Technique: Using sterile gloves and maintaining a sterile field throughout the procedure.
- o Inserting the Catheter:
 - For females: Cleansing the vulvar area with antiseptic, gently inserting the catheter into the urethra, and advancing it until urine flows.

 Inflating the balloon if using an indwelling catheter.
 - For males: Retracting the foreskin (if applicable), cleansing the glans, and inserting the catheter into the urethra.

6. Post-Procedure Care

- Securing the Catheter: Using a securement device or tape to prevent movement and irritation.
- Monitoring: Observing for signs of complications, such as infection, leakage, or bladder spasms.
- Documentation: Recording the procedure details, including the type and size
 of the catheter, the volume of urine drained, and patient response.

7. Complications and Management

- o **Infection**: Recognizing signs of urinary tract infection (UTI) and understanding prevention strategies.
- Urethral Injury: Being aware of signs of injury during insertion.
- o Bladder Spasms: Managing discomfort through appropriate interventions.



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Skills Practiced

- **Technical Proficiency**: Gaining hands-on experience with catheter insertion techniques and maintaining sterile fields.
- Patient Interaction: Developing communication skills for explaining procedures and providing reassurance.
- Critical Thinking: Assessing patient needs and making decisions based on individual cases.

Safety and Infection Control

- Emphasizing the importance of strict aseptic technique to reduce the risk of infection.
- Using sterile equipment and ensuring a clean environment for the procedure.
- Educating participants on the importance of monitoring for signs of infection postcatheterization.

7. Wound Care

Facilitator: Mrs. Madhavi latha Participants: 99 Nursing students

Introduction

Wound care is a critical aspect of nursing and medical practice, focusing on the assessment, treatment, and management of wounds to promote healing and prevent infection. This report summarizes the key activities, techniques, and findings from the recent skill lab session dedicated to wound care.

Objectives

- To understand the anatomy of wounds and the healing process.
- To practice various wound care techniques.
- To assess and document wound conditions effectively.
- To familiarize participants with different wound dressings and their applications.

Activities Conducted

1. Wound Assessment Training

o Participants learned how to assess wound size, depth, and exudate.

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 Discussion on the importance of recognizing signs of infection, such as redness, warmth, and discharge.

2. Wound Cleaning Techniques

- o Demonstration of proper wound cleaning methods using saline and antiseptics.
- Practice session where participants cleaned simulated wounds under supervision.

3. Dressing Application

- o Introduction to various types of dressings (e.g., gauze, hydrocolloid, foam).
- Hands-on practice in applying and securing different dressings based on wound type.

4. Infection Control Measures

- Overview of infection prevention techniques, including hand hygiene and the use of personal protective equipment (PPE).
- Simulation of situations where participants had to implement these measures effectively.

5. Documentation and Reporting

- Training on how to document wound assessments and care provided in patient records.
- o Emphasis on the importance of accurate documentation for continuity of care.

Key Findings

- Skill Proficiency: Most participants demonstrated significant improvement in wound cleaning and dressing application techniques by the end of the session.
- Common Challenges: Some participants struggled with recognizing the subtleties of wound assessment, particularly in identifying signs of infection.
- Importance of Protocols: Adhering to protocols for infection control was emphasized as crucial for patient safety and effective wound management.

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8. Suturing

Facilitator: Prof. Latha

Participants: 99 Nursing students

Introduction

Suturing is an essential skill for healthcare professionals, particularly in surgical settings and emergency care. This report outlines the key activities, techniques, and outcomes from the recent skill lab focused on suturing.

Objectives

- To understand the principles of suturing and wound closure.
- To practice various suturing techniques.
- To learn about the materials and instruments used in suturing.
- To develop confidence in performing sutures on simulated models.

Activities Conducted

1. Introduction to Suturing Techniques

- o Overview of different types of sutures (e.g., absorbable vs. non-absorbable).
- Discussion on various suturing methods, including simple interrupted, continuous, and mattress sutures.

2. Demonstration

- Instructors demonstrated each suturing technique on practice models, highlighting key steps and best practices.
- Emphasis on proper needle handling, tension, and knot tying.

3. Hands-On Practice

- Participants practiced suturing on synthetic skin models, allowing for real-time feedback.
- o Focus on achieving proper depth and spacing in sutures to promote healing.

4. Assessment of Techniques

 Peer assessments were conducted where participants evaluated each other's suturing skills.

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o Instructors provided individualized feedback to enhance technique and address specific challenges.

5. Discussion on Complications

- o Identification of common complications associated with suturing, such as infection and dehiscence.
- o Strategies to prevent complications and manage issues if they arise.

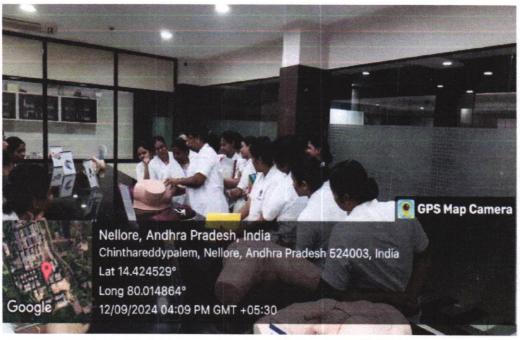
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Training programme on CPR



Training programme on Mechanism of labour

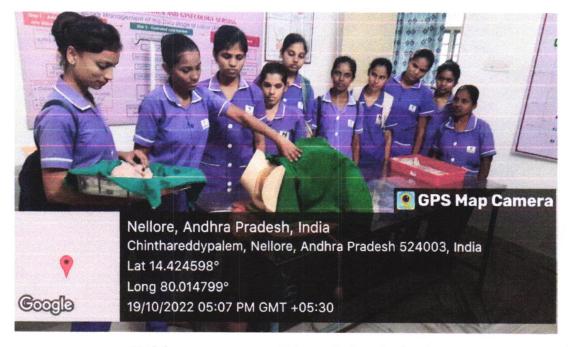
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Training programme on Respiratory Care



Training programme on Urinary Catheterization

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Training programme on Physical Examination



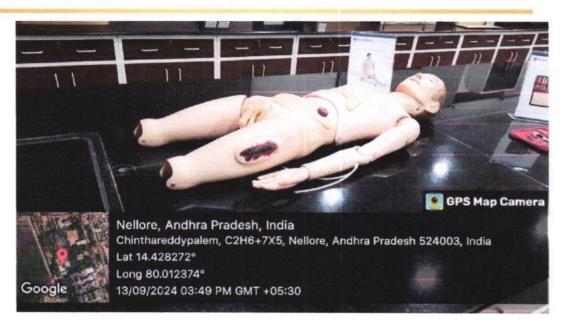
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Training programme on Wound Care



Training programme on Suturing Simulator