Doc. 300.1.2

Date: 11.7.2022

Higher Education Institution's Response

- **Higher Education Institution:** European University Cyprus
- Town: Nicosia
- Programme of study
 Name (Duration, ECTS, Cycle)

In Greek:

"Μαιευτική (2 Έτη/120 ECTS, Μεταπτυχιακό)"

In English:

"Midwifery (2 Years/120 ECTS, Master of Science)"

- Language(s) of instruction: Greek
- Programme's status: Currently Operating
- Concentrations (if any): N/A
- In Greek: ConcentrationsIn English: Concentrations

KYΠΡΙΑΚΗ ΔΗΜΟΚΡΑΤΙΑ REPUBLIC OF CYPRUS

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The present document has been prepared within the framework of the authority and competencies of the Cyprus Agency of Quality Assurance and Accreditation in Higher Education, according to the provisions of the "Quality Assurance and Accreditation of Higher Education and the Establishment and Operation of an Agency on Related Matters Laws" of 2015 to 2021 [L.136(I)/2015 – L.132(I)/2021].

A. Guidelines on content and structure of the report

- The Higher Education Institution (HEI) based on the External Evaluation Committee's (EEC's) evaluation report (Doc.300.1.1 or 300.1.1/1 or 300.1.1/2 or 300.1.1/3 or 300.1.1/4) must justify whether actions have been taken in improving the quality of the programme of study in each assessment area. The answers' documentation should be brief and accurate and supported by the relevant documentation. Referral to annexes should be made only when necessary.
- In particular, under each assessment area and by using the 2nd column of each table, the HEI
 must respond on the following:
- the areas of improvement and recommendations of the EEC
- the conclusions and final remarks noted by the EEC
 - The institution should respond to the EEC comments, in the designated area next each
 comment. The comments of the EEC should be copied from the EEC report <u>without any</u>
 interference in the content.
- In case of annexes, those should be attached and sent on separate document(s). Each document should be in *.pdf format and named as annex1, annex2, etc.

The members of the Midwifery Program (M.Sc.) of the European University Cyprus wish to express their sincere gratitude to the External Evaluation Committee (EEC) for its evaluation and for the positive feedback.

We appreciate the insightful recommendations as they are an excellent opportunity for further improvement of the program quality.

In the following pages we address in detail all recommendations for improvement suggested by the EEC. We provide relevant information on the actions taken to ensure the high quality and considerable impact of the Program.



1. Study programme and study programme's design and development (ESG $1.1,\ 1.2,\ 1.7,\ 1.8,\ 1.9$)

Areas of improvement and recommendations by EEC	Actions Taken by the Institution	For official use Only
1.1 The programme information that is publicly available on the University website needs to be	The program information will be available on the University website immediately after CYQAA's approval as follows:	
reviewed and amended so that it aligns with the information provided in the application document.	The postgraduate program of Midwifery is a program of total 120 ECTS, divided into 70 ECTS compulsory courses, 30 ECTS of practical exercise courses and 20 ECTS Master's Thesis or two elective courses (10 ECTS each). For more details. please see ANNEX I: COURSE DISTRIBUTION , Table 1: STRUCTURE OF THE PROGRAM OF STUDY on page 31).	Choose an item.
	The applicants will have the opportunity to enter the Midwifery (M.Sc.) program, once a year every Fall Semester as per the suggestion of the EEC. Upon graduation from the program "Midwifery", students will meet all requirements for registration in the Cyprus Nursing and Midwifery Council - Midwives Registry and will be able to obtain a training license of the Midwifery profession in all European countries.	
1.2 The supplementary modules should be embedded in the programme as pre-requisite modules and delivered in a logical sequence in line with a Spiral Curriculum. The two intakes per year appear to confuse the sequence of module delivery for students; the EEC suggests	We thank the EEC for this recommendation, as it makes the Midwifery Program completion path clearer to prospective students. The revised Midwifery program curriculum now includes these supplementary courses as compulsory courses, which are prerequisites for the progression toward completion of the degree. The curriculum has now been organized to offer courses in a spiral curriculum (please see ANNEX I: COURSE DISTRIBUTION, Table 2: Course distribution per semester, on page 31).	Choose an item.
that an annual intake only should be considered to resolve this issue	The EEC's recommendation for one admission cohort per year of incoming Midwifery students has also now been applied; namely the applicants will now have the opportunity to enter in the Master program of Midwifery once a year, at the beginning of every Fall Semester, and start with the three compulsory courses during the first semester of study. All relevant information will be	





	uploaded on the University's website upon program's final approval by the CY.Q.A.A.	
1.3. Consideration should be given to introducing a separate module on Gynaecology and reproduction inclusive of content related to fertility, ARTs, etc.) 1.4 Module descriptors need to be reviewed to ensure	The course MID665 "Gynaecology, reproduction, assisted reproductive technology (ART) and Women's Health Promotion" has now been added to the M.Sc. in the Midwifery curriculum as an elective course (please see ANNEX II: COURSE SYLLABI, syllabus MID665 on page 72). The Committee's recommendation on reviewing the module descriptions to ensure that the	Choose an item.
that the language used is Midwifery-orientated specifically	language used is specifically aimed at Midwifery has been implemented. We have now revised the following syllabi accordingly and specific examples of changes are listed below:	
	a) Course (MID600) "Midwifery I: Anatomy, Physiology of Pregnancy, Midwifery Care During Pregnancy, Childbirth Education" has now changed to "Anatomy, Physiology of Pregnancy, Midwifery Care During Pregnancy, Childbirth Education".	
	In this course, the course objective was changed and learning outcomes were added to emphasize exclusively the anatomy and physiology of the female reproductive system, conception and development of the fetus, physiology, and biochemistry of pregnancy. Also, laboratory exercises (such as pregnancy diagnosis, calculation of the estimated date of delivery, planning of prenatal care of a pregnant woman, determination of gestational age, Leopold maneuvers, fetal heart rate listening position) have been added to the course description. In addition, two new core textbooks have been added (please see	
	ANNEX II: COURSE SYLLABI, syllabus MID600 on page 37).	
	b) Course (MID605) "Normal Labor, Midwifery Care during the Postpartum Period" has now changed to "Normal Labor, Midwifery Care during the Postpartum Period"	
	In this course, we revised the course objective and learning outcomes to focus on bony pelvis	



and pelvic floor anatomy, normal pelvic inlet, midpelvis (cavity) and outlet diameters and factors influencing the natural birth process. Laboratory exercises and the use of the simulator have been added to the course content to monitor normal labor by using the Victoria birth simulator, recognizing the signs of reassuring patterns of the fetal heart rate, predicting the course of labor and determining the features of uterine involution and lochia. In addition, two new core textbooks have been added (please see

ANNEX II: COURSE SYLLABI, syllabus MID605 on page 41).

c) Course (MID610) "Neonatology, Neonatal Nursing Care, Newburn Nutrition and Feeding, Breastfeeding" has now changed to "Neonatology, Neonatal Care, Newborn Nutrition and Feeding, breastfeeding".

In this course, we revised the course objective, learning outcomes and content of the course with a focus on Midwifery-oriented language. Two new core textbooks have been added (please see

ANNEX II: COURSE SYLLABI, syllabus MID610 on page 46).

d) Course MID635 "Midwifery II: Special Problems, High Risk Pregnancy and Midwifery Care" how now changed to "Special Problems, High Risk Pregnancy and Midwifery Care"

The changes are related to course objectives, learning outcomes as well as course content. Also, two new core textbooks have been added (please see

ANNEX II: COURSE SYLLABI, syllabus MID635 on page 50).

e) Course MID645 "Midwifery III: Labor and Birth Complications, Postpartum, Complications and Midwifery care" has now changed to "Labor and Birth Complications, Postpartum Complications and Midwifery care".





The content of the course has changed and mainly now includes childbirth and childbirth complications, infections, mental health problems of the postparturn women. Also, laboratory exercises and simulation scenarios have been added to maximize learning through simulated clinical meetings (please see ANNEX II: COURSE SYLLABI, syllabus MID645 on page 57). We thank the EEC for the recommendation. As recommended, we divided the three clinical practice courses according to the program's goals and the module descriptions and included new reading lists of the respective Module Descriptors a) MID625 Practical Exercise of Midwifery I: In this clinical practice we added the following two new textbooks in the syllabus: • McDonald S, Johnson G – Maye's, Mayes'. Midwifery 15th Edition (2017) (JSBN: 978070206336 (translated in Greek language: McDonald S, Johnson G, — Maye's Περιγεννητική Μαιευτική Φροντίδα. Πριν, κατά τη διάρκεια και μετά τον τοκετό. (2022) • Vivilaki V. Primary Obstetric Care. Midwifery in Primary Health Care. Βιβιλάκη Β. — Πρωτοβάθμα Μαιευτική Φροντίδα. Η μαία στην Π.Φ.Υ. (2016) (Please see ANNEX III: CLINICAL PRACTICE, syllabus MID625 on page 83) b) MID640 Practical Exercise of Midwifery II In this clinical practice we added three new textbooks in the syllabus as follows: • Netter's Obstetrics and Gynecology 2nd edition (06/2019) translated in Greek language: Netter's Maιευτική και Γυναικολογία 2 ¹¹ έκδοση • Efstratios A. Asimakopoulos — Clinical Ultrasound in Obstetrics and Gynecology (2022) • Alexandros Sotiriadis — Obstetrics and Gynecology (2022)			
1.5 Appropriate Midwifery textbooks should be included in the Clinical Practice reading lists of the respective Module Descriptors We thank the EEC for the recommendation. As recommended, we divided the three clinical practice reading lists of the respective Module Descriptors a) MID625 Practical Exercise of Midwifery I: In this clinical practice we added the following two new textbooks in the syllabus: McDonald S, Johnson G – Maye's, Mayes'. Midwifery 15th Edition (2017), ISBN: 978070206336 (translated in Greek language: McDonald S, Johnson G, – Maye's Περιγεννητική Μαιευτική Φροντίδα. Πριν, κατά τη διάρκεια και μετά τον τοκετό. (2022) Vivilaki V. Primary Obstetric Care. Μidwifery in Primary Health Care. Βιβιλάκη Β. – Πρωτοβάθμια Μαιευτική Φροντίδα. Η μαία στην Π.Φ.Υ. (2016) (Please see ANNEX III: CLINICAL PRACTICE, syllabus MID625 on page 83) b) MID640 Practical Exercise of Midwifery II In this clinical practice we added three new textbooks in the syllabus as follows: Netter's Obstetrics and Gynecology 2nd edition (06/2019) translated in Greek language: Netter's Mαιευτική και Γυναικολογία 2 ^η έκδοση Efstratios A. Asimakopoulos – Clinical Ultrasound in Obstetrics and Gynecology (2022) Alexandros Sotiriadis – Obstetrics and		mainly now includes childbirth and childbirth complications, infections, mental health problems of the postpartum women. Also, laboratory exercises and simulation scenarios have been added to maximize learning through simulated clinical meetings (please see ANNEX II: COURSE SYLLABI, syllabus MID645	
, , , , , , , , , , , , , , , , , , , ,	textbooks should be included in the Clinical Practice reading lists of the respective Module	We thank the EEC for the recommendation. As recommended, we divided the three clinical practice courses according to the program's goals and the module descriptions and included new reading textbooks in all, as follows: a) MID625 Practical Exercise of Midwifery I: In this clinical practice we added the following two new textbooks in the syllabus: • McDonald S, Johnson G – Maye's, Mayes'. Midwifery 15th Edition (2017) ,ISBN: 978070206336 (translated in Greek language: McDonald S, Johnson G, – Maye's Περιγεννητική Μαιευτική Φροντίδα. Πριν, κατά τη διάρκεια και μετά τον τοκετό. (2022) • Vivilaki V. Primary Obstetric Care. Midwifery in Primary Health Care. Βιβιλάκη Β. – Πρωτοβάθμια Μαιευτική Φροντίδα. Η μαία στην Π.Φ.Υ. (2016) (Please see ANNEX III: CLINICAL PRACTICE, syllabus MID625 on page 83) b) MID640 Practical Exercise of Midwifery II In this clinical practice we added three new textbooks in the syllabus as follows: • Netter's Obstetrics and Gynecology 2nd edition (06/2019) translated in Greek language: Netter's Mαιευτική και Γυναικολογία 2 ^η έκδοση • Efstratios A. Asimakopoulos – Clinical Ultrasound in Obstetrics and Gynecology (2022)	





	(Please see ANNEX III: CLINICAL PRACTICE , syllabus MID640 on page 87)	
	c) MID655 Practical Exercise of Midwifery III In this clinical practice we added two new textbooks in the syllabus as follows:	
	• McDonald S, Johnson G,. – Maye's Περιγεννητική Μαιευτική Φροντίδα. Πριν, κατά τη διάρκεια και μετά τον τοκετό. (2022)	
	• Oxorn-Foote – Τοκετός και Γέννηση, 6 ^η έκδοση. (2019)	
	Best Practice in Labor and Delivery 2nd Edition, 2017Cambridge University Press; 2nd edition. ISBN-13: 978-1107472341	
	 High Risk Pregnancy and Delivery 2nd Edition Jaypee Brothers Medical Pub; 2nd edition (January 1, 2021) ISBN: 978-9390020812 	
	Edwin Chandraharan and, Sir Sabaratnam Arulkumaran (2021) Obstetric and Intrapartum Emergencies: A Practical Guide to Management 2nd Edition, ISBN 1108790933	
	(Please see ANNEX III: CLINICAL PRACTICE , syllabus MID655 on page 91)	
word count so that this aligns	In all compulsory and elective courses in the Syllabi we have now included the number of words required in the assignments to align with the required course workload as follows:	
Decemptore, unione relevant	Assignments (8000 words, without including in the word count the abstract, references and cover page).	
	(Please see for examples	
	ANNEX II: COURSE SYLLABI, on page 36).	
1.7. Consideration can be given to the involvement of other important stakeholders in the content and design of the programme (e.g., clinical midwives from student	The design and implementation of the program is based on the Program Evaluation Review (PER) process. Alumni and employers have a significant role in the PER procedure and the current quality assurance mechanisms in the European University Cyprus programs. Alumni	



placement areas of practice, or women and their families as recipients of midwifery care). representatives participate in the PER process to ensure ongoing monitoring and evaluation. PER is an integral part of the University's overall quality assurance procedures, and every program must complete the PER process at least once every five years. The PER is initiated by any stakeholder and participant in the process (please see **ANNEX V: PROGRAM EVALUATION REVIEW**, on page 158).

The programs' Advisory Boards constitute a main source of input in this process. The Midwifery M.Sc. Advisory Board consists of:

Dr. Ioannis Leontiou, President of Cyprus Nursing and Midwifery Association

Dr. Eleni Hadjigeorgiou, Ph.D., M.Sc., B.Sc. (Hons), CM, RN. Assistant Professor- Midwifery Care, Director, M.Sc. in Midwifery, Department of Nursing, School of Health Sciences, Cyprus University of Technology

Stella Leontiou, M.Sc, European Midwifery, B.Sc. (Hons) Nursing, RM, RN A' – Midwife, Cyprus Ministry of Health

Bouroutzoglou Maria, Lecturer in International Hellenic University, Midwifery

Theophano Papastephanou, President of Nursing and Midwifery Council in Cyprus

In addition, the Cyprus Nursing and Midwifery Association (CYNMA) and midwives from the Clinical area are part of the Midwifery Program's Advisory Board.

Input from the Midwifery professionals is applied in placements where our students complete their clinical exercises. These are also considered in the PER process and in improving our Program. During the clinical practice the students are followed in each department from the head midwife of the ward and from the midwives. Every day they take guidance and feedback according to their assigned goals that they had to fulfil every day. At the end, the head midwife of the ward





provides feedback both to the students and to the clinical supervisor of the students. In this way the stakeholders help and empower the students in their everyday clinical activity with innovative ways. Participation of women or families as receivers of midwifery care presents a challenge for the Midwifery M.Sc. We provide priority to cooperation with Midwifery care receivers to further improve implementation of the program.

In addition, involvement of Midwifery care receivers take the form of participation in our mother and child health promotion programs by specifically focusing on the empowerment of women and families for natural childbirth and breastfeeding. These health promotion programs provide to our students the opportunity to engage in care for women and their families at the community level, out of the clinical area. Implementation of these programs involve collaborations with external bodies, such as the Filotokos Foundation and CYNMA, as well as experienced midwives working in the clinical field.



2. Student – centred learning, teaching and assessment $(ESG\ 1.3)$

Areas of improvement and recommendations by EEC	Actions Taken by the Institution	For official use Only
2.1Teaching and learning should adhere to spiral development (in line with a Spiral Curriculum) which begins with physiology and basic knowledge of reproduction, midwifery and neonatology and continues to pathology and to high-risk situations in reproduction, midwifery, and neonatology accordingly. The proposed order of a spiral development of teaching and learning should be clearly maintained for all student cohorts and should be clearly presented in the programme curriculum.	Following these EEC recommendations and the thorough discussion during the EEC visit, we have made major changes in the curriculum. The program now includes 7 compulsory courses, and a choice between a master thesis or two 2 elective courses (please see ANNEX I: COURSE DISTRIBUTION on page 31). In order to adhere to spiral development, all the students enter in the program of study only once during the academic year which is every Fall Semester. The students should complete the first three compulsory courses of the Fall Semester in order to move to the next step of the program in the Spring Semester as follows: MID600: Anatomy, Physiology of Pregnancy, Midwifery Care During Pregnancy, Childbirth Education (Please see ANNEX II: COURSE SYLLABI, MID600 on page 37) MID605: Normal Labor, Midwifery Care during the Postpartum Period (Please see ANNEX II: COURSE SYLLABI, MID605 on page 41), MID610: Neonatology, Neonatal Care, newborn Nutrition and Feeding, Breastfeeding (Please see ANNEX II: COURSE SYLLABI, MID610 on page 46) The above courses are prerequisites for course MID635- Special Problems, High Risk Pregnancy and Midwifery Care offered in the 2 nd semester and for the course MID645- Labor and Birth Complications, Postpartum Complications and Midwifery care which is offered in the 3 rd semester.	Choose an item.



As far as the clinical practice, the following changes have been made in order to address the Committee's recommendations:

MID625 Midwifery Clinical Practice I

Emphasis is now placed on female physiology for a smoother familiarization of students in the clinical area (please see **ANNEX III: CLINICAL PRACTICE**, MID625 on page 53).

MID640 Midwifery Clinical Practice II

It now introduces the student to the pathology of gynecology, pregnancy, and the newborn (please see **ANNEX III: CLINICAL PRACTICE**, MID640 on page 64).

MID655 Midwifery Clinical Practice III

It now focuses on training and management of childbirth (delivery) (please see **ANNEX III: CLINICAL PRACTICE**, MID655 on page 68).

2.2. The learning outcomes of the three practical training modules (MID 625, 640 and 655) are the same (according to application document provided to the EEC). These should be explicitly specified and different based acquiring on increasing practical skills (e.g., the learning outcomes specific to each practical module), from the physiological to the more pathological and urgent clinical situations

As we mentioned in item 1.5 above, we have now divided the three clinical practice courses as per the suggestion of the EEC. The learning outcomes of the three practical training modules (MID625, MID640 and MID655) have now been modified as suggested by the EEC, to reflect the acquisition of increasing practical skills. These modifications reflect the accumulation of gradual knowledge and experience from the physiological to the more pathological and urgent clinical situations, as shown below:

a) MID625 Practical Exercise of Midwifery I

During this practical exercise the students have the opportunity to apply theory into practice with documented clinical practice and to acquire specialized knowledge, skills, abilities and attitudes to safely provide individualized and holistic care to the pregnant woman, foetus, women in labour, the new born and to the woman during puerperium, in specific departments, like perinatal care clinic, maternity and child welfare centre, and the Department of Ultrasound and Prenatal Medicine (please see ANNEX III: CLINICAL PRACTICE, MID625 on page 83).

Choose an item.



b) MID640 Practical Exercise of Midwifery II

During this exercise students have the opportunity to apply theory into practice in the Department of Postpartum Obstetrics and Neonatal Care, gynecological ward, gynecological outpatient clinics, gynecological and midwifery surgical units. (please see **ANNEX III: CLINICAL PRACTICE**, MID640 on page 87).

c) MID655 Practical Exercise of Midwifery III

During this exercise students have the opportunity to apply theory into practice in the neonatal intensive unit and in childbirth department where they have the opportunity to complete the needed numbers of births according to the EU legislation, the EU directive and the Cyprus Nursing and Midwives Council, in to order to have the license after their graduation to register as a Midwife (please see **ANNEX III: CLINICAL PRACTICE**, MID655 on page 91).

2.3. The EEC recommends the Department to consider a student cohort intake of every two years (or at a minimum an annual cohort intake) for the viability and sustainability of practical component of the programme (i.e., attaining the necessary number of normal births). lt is additionally recommended the midwife that coordinating the practical training of the students is employed on a full-time basis ensure to consistency and continuity of midwifery support for the programme

We thank the Committee for this recommendation which we have incorporated in the admission process. As we mentioned in 1.2, the applicants will now have the opportunity to enter in the Master program of Midwifery once a year, at the beginning of every Fall Semester.

Furthermore:

- In addition to the state maternity hospitals, private maternity centres have recently been added to the clinical practicum sites and have been evaluated and approved by the Midwives Association and the Ministry of Health. The cooperation agreement that has been implemented with private maternity centres is expected to increase opportunities for students to accomplish the number of births required by the European directive.
- The current Clinical Practicum Coordinator has been directing the student clinical exercises for the past 3 years, with efficiency and excellent student and clinical placement mentors' feedback. The Clinical Practicum Coordinator is available to students 7 days a week, including weekends and holidays to provide full support and to resolve issues regarding students' clinical practice.

Choose an item.





2.4 Although, the EUC is fully equipped with innovative and effective midwifery simulation technologies (Victoria birth simulator) it was explicitly defined in which semesters and for how many hours the students have access to this equipment. Therefore, it is recommended that hours allocated to simulation are explicitly detailed in the relevant Module Descriptors and in which semesters the midwifery simulation equipment is used

All the above mentioned are expected to lead to the viability and sustainability of the practical component of the program.

We thank the Committee for this comment to specify the simulator availability to students. The simulation labs available hours are now indicated in the course syllabi.

Choose an item.

Specifically, the two courses

- MID600 "Anatomy, Physiology of Pregnancy, Midwifery Care During Pregnancy, Childbirth Education" and
- MID605 "Normal Labor Midwifery care during the postpartum period"

 now include 13 hours per course per semester in simulation experiences (i.e. Laboratory exercises: 13 hours in total).

The thirteen hours in the course <u>MID 600</u> include manikins and simulators use, as well as, educational videos, so that, students fully understand the basic concepts of the unit taught. Students will be able to apply techniques and acquire the following skills:

- Diagnosis of pregnancy, calculation of the estimated date of delivery, planning of antenatal care of pregnant woman.
- Measurement of the height of the fundus of the uterus in a manikin and determination of gestational age;
- Perform abdominal palpation on a manikin to determine the presentation and lie of the fetus (Leopold manoeuvres);
- Determination and demonstration in a manikin of the most appropriate site for the auscultation of the fetal heart rate depending on the gestational age and the presentation of the fetus.

The thirteen hours in the course <u>MID 605</u> include manikins and simulators use, as well as, educational videos, so that, students fully understand the basic concepts of the unit taught. Students will be able to apply techniques and acquire the appropriate skills, as follows:

 Observation and demonstration of the bony pelvis structures, pelvic inlet, mid pelvis, pelvic





outlet and	pelvic c	liameters
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- Observation and demonstration of the muscles, ligaments, and other structures of the pelvic floor in a manikin
- Identification and palpation of the bones, sutures, fontanels of the fetal skull in a manikin
- Simulation and perform of a normal birth in a manikin
- Monitoring and demonstration of the presentation, position, lie and descent of the fetus inside the pelvic canal
- Recognition of dilation and elimination of the cervix through vaginal examination in a model
- Simulation of episiotomy and suturing to a manikin
- Completion of a portogram for monitoring and predicting the course of childbirth
- Recognition of uterine involution in a manikin

(please see

ANNEX II: COURSE SYLLABI, syllabus MID600 on page 37 and MID605 on page 41).

2.5 The programme should make use in an explicit way of the midwifery simulation technologies (Victoria birth simulator), for laboratory learning of midwifery skills in high-risk situations and emergencies in midwifery (e.g., breech birth) which rare in real life are which situations and students may not experience in the clinical setting.

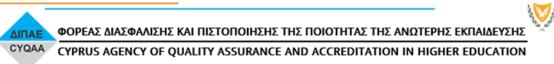
We agree with the EEC's comment. We also believe that incorporating laboratory/practical application of the courses enhance students' learning experience through skills acquisition, and it could further ignite their interest.

Indeed, there are high-risk situations and emergencies that students often do not encounter in the clinical area, and simulation technology covers this gap. The corresponding courses provide opportunities for the use of the simulator with simulation hours as shown in the course syllabi. Specifically, 13 hours of laboratory work per semester have been included in the course MID645 Labor Birth Complication Postpartum Complications and Midwifery care, as follows:

Birth Simulation in the Victoria simulator. This includes evidence-based scenarios designed to help the students maximize learning through outcome-focused simulated clinical patient encounters. These scenarios include:

- Amniotic Fluid Embolism
- Breech Vaginal Delivery

Choose an item.





 Placental Abruption 	ገ
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- Postpartum Haemorrhage
- Preeclampsia
- Prolapsed Cord
- Shoulder Dystocia

(please see

ANNEX II: COURSE SYLLABI, MID645 on page 57).

2.6 The programme should appraised by and include the views of important stakeholders nationally (e.g., midwives, pregnant women, breastfeeding women, NGOs) to ensure it meets the learning needs of the profession comprehensive way.

This remark by the EEC is quite important. Please see our response to comment/topic item 1.7 as it specifies the quality assurance Program Evaluation Review (PER) and involvement of external stakeholders in the Midwifery M.Sc. Additionally, to the information provided in topic 1.7, we have already embarked on communication with additional external bodies (e.g. Pancyprian Breastfeeding Association "Gift of Life", Midwifery Association Filotokos - Birth Forward). Cooperation with professional midwives and obstetricians is an important addition to the educational part of the Midwifery M.Sc. program. This will ensure that the learning needs of trained midwives are met with the ultimate goal of meeting the requirements at both national and European level based on the existing guidelines.



3. Teaching staff (ESG 1.5)

Areas of improvement and recommendations by EEC	Actions Taken by the Institution	For official use Only
3.1. Academic staff to be supported to undertake a teaching qualification and / or Fellowship of the Higher Education Academy to improve the standing of their teaching profile.	Qualifications for academic ranking are commensurate to international standards; these qualifications are specifically described in the EUC Charter (please see EUC charter, p. 71, here). In addition, EUC has developed a Faculty Professional Development program which holds the prestigious Advance Higher Education membership logo to which the Committee refers since September 2021. Members of our Faculty started already their Fellowship application, as suggested by the EEC. In more specific, at European University Cyprus,	use offing
	we consider Academic staff professional development not to be an optional or occasional activity. We believe that that regular participation in professional development activities should be an expectation for all. We consider that professional development and learning promote continuous, career-long growth based upon not only the trial and error of experience, but also theory, research, and professional collaboration with colleagues. The understanding of instructional concepts and teaching processes can be expanded and deepened via professional development. Hence, we consider that 'good' teaching in tertiary education is not just a "you have it, or you don't" skill, nor is it an automatic companion of terminal, disciplinary degrees. It is an action, process, and way of thinking and as such it constitutes serious, complex intellectual work. It thus requires regular reflection and exposure to new ideas and information that are inherently a part of good professional development activities. It is not, however, remedial or something only for those having problems, but should be an integral part of all academic staff's efforts to become more effective in the classroom. Further, any professional development activities connect instructors across disciplines and career stages, serving to create a pedagogical community within	Choose an item.





opportunities to learn about learning, about teaching, about students, and about themselves. EUC has therefore established three (3) academic staff professional development schemes organized, offered, evaluated and revised by the Office of the Vice Rector of Academic Affairs.

In addition, the University through its Faculty Development Program (offered by the C.I.Q.A. Development Standing Committee) organizes and delivers various seminars on a semester basis on issues pertaining to teaching and learning, and research in higher education which emerge through feedback and needs identified by academic staff, as well as in the context of current needs and developments such as those brought by the pandemic. Seminars provided during the current academic year have aimed to support staff both in their teaching, particularly in the extreme circumstances brought by the current pandemic, as well as their research through the offering of various seminars on teaching and learning in online environments as well as on research ethics. Seminars planned for the next academic year will involve the offering, as usual, of both compulsory and optional seminars. Compulsory seminars are addressed to newly hired staff (both full-time and part-time) and optional are addressed to all staff who are strongly encouraged to attend and, as previous experience has shown, in fact do so for there is an established University culture that values continuous education and professional development.

The Digital Enhanced Learning (D.e.L.) intervention project is a pedagogical project aiming digital teaching and integrate approaches into all its campus-based programs of study. As part of this initiative, instructors are trained and coached by a specialised group of Faculty to introduce innovative pedagogical approaches using the Universities' Learning Management System (LMS) platform (Blackboard Learn Ultra) to organise assignments, projectbased work, group work, constant communication between students and instructors, synchronous and asynchronous activities (including chats, forums, wikis, online guizzes, journals, etc). The



D.e.L. Ad-Hoc Committee organises around once per month colloquia where instructors meet, discuss and share experiences on disciplinespecific approaches.

Further, following a recent decision by the University's Quality Assurance Committee and the University Rectorate (17.2.2021) in an effort to better address more program- and discipline specific needs in the various scientific fields, Schools and Departments are to organize and offer on a semester basis in-house professional development seminars catered to their needs so as to support the creation of a learning and research community within their Departments and Schools through the exchange of best practices, as well as recent scientific developments in their respective fields (an example of such activity, is the organization of a seminar to explore best practices for online interactive activities during online teaching in light of (post) Covid -19).

3.2. Develop a recruitment strategy for midwives with potential to develop an academic career in order to support the ongoing development of the MSc in midwifery programme (currently the one part-time midwife is not sustainable long-term).

We thank the EEC for this recommendation, as it represents a continuous challenge for the program. From our conversations with the EEC and communication with other similar programs, we understand this to be a global issue also affecting other M.Sc. in Midwifery programs. The EUC Midwifery program is in alignment and constant communication with the Pancyprian Nursing and Midwifery Association, as well as with the Cyprus Nursing and Midwifery Council in order to follow their requirements and our graduates to fulfill all the criteria that will enable them to register as professional midwives after the conclusion of their studies.

As a program the immediate action plans includes:

- Participation of the program faculty members in additional research programs at a local level and involvement of the students in order to promote the program;
- b. The members of the Department are currently involved in a joint European Nursing in Midwifery Research programs and in the field of Health Sciences in general;
- c. Members of the Nursing Program take advantage of all opportunities to participate in

Choose an item.





activities that promote and validate the offer of graduates to the Society at local and European level (such as participation in local and national conferences, member in a management Committee Member of the Cost Action CA18138 Research Network in Peripartum Depression Disorder).

Finally, the Department of Health Sciences provides incentives for qualified M.Sc. graduates to undergo Ph.D. studies at EUC or elsewhere so that they eventually follow an academic career. This will increase the pool of available applicants for Midwifery faculty positions, an international issue also affecting other M.Sc. in Midwifery programs.

4. Student admission, progression, recognition and certification (ESG 1.4)

Areas of improvement and recommendations by EEC	Actions Taken by the Institution	For official use Only
4.1 To ensure the programme module descriptors are complete and comprehensive, the EEC recommends that the supplementary modules are embedded as pre-requisite modules to those modules taken subsequently	In full agreement to the EEC recommendation, and as specified in responses in 2.1, the compulsory courses MID600 Anatomy, Physiology of Pregnancy, Midwifery Care During Pregnancy, Childbirth Education, MID605 Normal Labor, Midwifery Care during the Postpartum Period, MID610 Neonatology, Neonatal Care, Newborn Nutrition and Feeding, Breastfeeding have been included in the modified curriculum as compulsory courses (please see ANNEX I: COURSE DISTRIBUTION on page 31 and	Choose an item.
4.2 Student progression requires careful monitoring and advocacy at the clinical level.	The course of learning and skill acquisition in the clinical field is monitored by the Coordinator of Clinical Practice Mr. Vrakas Christos and clinical trainers. The Coordinator of Clinical Practice and the clinical trainers evaluate the students' skills to ensure that they are commensurate with those required by the Midwives' Register and in accordance with the European Directive requirements. The clinical coordinator monitors the students in every ward they are settled and observe if the goals and learning outcomes of each clinical exercise are met. More specifically, the students use their textbook to mark the level that they succeeded each necessary clinical competency in Midwifery.	Choose an item.
	The clinical training of midwifery student is under appropriate guidance and supervision by a registered midwife/mentor and clinical coordinator under documented practice which is presented at the end of their clinical exercise to the clinical coordinator in order to be marked and conclude the clinical practice evaluation and at the end to submit this textbook will all the below information about their clinical exercise that will gain during the years of study in order to be able to register as professional midwifes in Cyprus Nursing and	





-		
	Midwifes Association and become a qualified professionals	
	Specifically, each student must fulfill the following:	
	 Assessment – Abdominal Examination and care of 100 pregnant women (prenatal period). Supervision and intrapartum care of 40 women. Conduct by the student of at least 40 deliveries with cephalic presentation; where this number cannot be reached owing to the lack of available women in labor, it may be reduced to a minimum of 30, provided that the student assists with 20 further deliveries. This assistance can be done after the 30 labors. Active participation in breech deliveries. Where this is not possible because of lack of breech deliveries, practice may be in a simulated situation. Performance of episiotomy and initiation into suturing. Initiation shall include theoretical instruction and clinical practice. The practice of suturing includes suturing of the wound following an episiotomy and a simple perineal laceration. This may be in a simulated situation if absolutely necessary. Supervision and care of 40 women at risk in pregnancy, or labor or post-natal period. Supervision and care (including examination) of at least 100 post-natal women and 100 healthy new-born infants. Observation and care of 10 newborns requiring special care, including those born pre-term, post-term, underweight or ill. Care of women with pathological conditions in the fields of gynecology and obstetrics. Initiation into care in the field of medicine and surgery. Initiation shall include theoretical instruction and clinical practice. Midwifery logbook have been included in the clinical practice outlines (please see ANNEX IV: 	
	MIDWIFERY LOGBOOK on page 95).	
4.3. A module pass mark of	Course outlines contain specific	Choose an
70% could be reviewed in line with pass marks for	instructions, resource guidance, rubrics for grading, assigned grade value for activities, and timeline (please see	item.



other international MSc		
courses	ANNEX II: COURSE SYLLABI, syllabi MID 600 on page 37, MID605 on page 41, MID610 on page 46, MID635 on page 50, MID 645 on page 57)	
	Students prepare and deliver their work, aiming to accumulate at least 70% of the total points (including the final examination) to successfully succeed in a graduate course. The assessment rubric for pass/fail of graduate courses according to EUC regulations appears in Table 3 (please see ANNEX I: COURSE DISTRIBUTION, on page 31, Table 3: The assessment rubric for pass/fail of graduate courses according to EUC regulations appears).	
4.4 To advance student mobility, trans-institution exchanges and international elective placements (e.g., 1-week) self-organised by students (albeit supervised and approved by Department staff) should be further considered	European University Cyprus strongly encourages the exchange of students with other educational institutions with the aim of giving them the opportunity to collaborate and gain experience from other Primary Health Centres throughout the European Union though the Erasmus mobility scheme. Moreover, taking into consideration the several difficulties that our post-graduate students have cause of the fact that at the same time are working while they are studying every time that we suggested them to participate in an exchange student's mobility they refer to this difficulty. In the future we hope that this problem will be overcome and more students will express the interest for more exchanges and international mobility. In addition, we would like to mention that we have established agreements with other Universities abroad, through the Erasmus mobility programs, and take advantage of our existing contacts with other universities in Europe in order to facilitate the mobility of students in this program, especially for the implementation of their clinical practices.	Choose an item.
4.5 Unique and innovative midwifery student prizes and/or support for midwifery conference attendance could be considered.	Students are motivated and encouraged to participate in nursing obstetrics workshops, the annual conference of CYNMA, as well as workshops organized by the University and other Higher Education institutions in Cyprus. This effort will be bolstered and sustained by their active participation in local and international presentations of works and postgraduate theses.	Choose an item.





Participation in conferences supports the development of their presentation skills, as well as increased birthing experiences opportunities for future collaborations and exchanges through networking with other health professionals.

To increase student experiences in presenting research and learning from peers, the Department of Health Sciences has instituted a yearly Interdisciplinary Research Colloquium. The first Colloquium is planned for October 2022: students will help participate in the hybrid colloquium organization and implementation.

Moreover, two of our program graduates took prizes from the Cyprus Nurses and Midwifes Association.

Finally, an allocated amount is included in the School budget for every academic year for Midwifery students to participate in conferences.



5. Learning resources and student support (ESG 1.6)

(ESG 1.6)		
Areas of improvement and recommendations by EEC	Actions Taken by the Institution	For official use Only
5.1 Resources should be readily accessible to students and wide-ranging including midwifery simulation technologies (Victoria birth simulator, birth model sets).	The proposal of the Committee for the access of students to simulation technologies (Victoria birth simulator, birth model sets) finds us in full agreement. Simulated experiences are a means for student familiarization with new technology. Simulated experiences also provide opportunities for and acquisition of skills in cases that are rarely encountered in the clinical area.	
	For better practice and education of students, we have introduced the use of the Victoria simulator in the laboratories of the following for (4) courses MID600- Anatomy, Physiology of Pregnancy, Midwifery Care During Pregnancy, Childbirth Education, MID605- Normal Labor and Birth, Midwifery Care during the Postpartum Period, MID610-Neonatology, Neonatal Nursing Care, Newborn Nutrition and Feeding, Breastfeeding, and MID645- Labor and Birth Complications, Postpartum Complications and Midwifery care (please also refer to our responses in items 2.4 and 2.5.)	Choose an item.
	In all these four (4) courses above, 13 hours of lab work have been included in each one. The aim of these hours is to relate lab work to the theory that the courses cover in order to minimize the gap among theory and practice and increase the readiness of the students to follow the goals and the needs.	
	In addition, in order to increase the availability and the access of the students to the simulation technologies that our university has, we also provide the opportunity to them to access the simulator throughout the semester at hours determined by the Department of Health Sciences. More specifically for the time allocation in these experiences (please see	
	ANNEX II: COURSE SYLLABI, syllabus MID600 on page 37, syllabus MID605 on page 41, syllabus MID635 on page 50 and syllabus MID645 on page 57).	

6. Additional for doctoral programmes (ALL ESG)

N/A

Areas of improvement and recommendations by EEC	Actions Taken by the Institution	For official use Only
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7. Eligibility (Joint programme) (ALL ESG)

N/A

Areas of improvement and recommendations by EEC	Actions Taken by the Institution	For official use Only
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text.		item.

B. Conclusions and final remarks

Conclusions and final	Actions Taken by the Institution	For official
remarks by EEC	Actions Taken by the Institution	use Only
The EEC would like to thank the staff at EUC for their warm welcome during the accreditation site visit. The EEC has noted strengths and positives in respect of the MSc in Midwifery programme. The EEC also notes areas for improvement and recommendations to be taken on board. Specifically, the following:	The program information has been reviewed and modified based on the EEC recommendations. All updated program information will be available on the University's website immediately upon the CY.Q.A.A.'s approval.	Choose an item.
The programme information that is publicly available on the University website needs to be reviewed and amended so that it aligns with the information provided in the application document		
The supplementary modules should be embedded in the programme as pre-requisite modules and delivered in a logical sequence in line with a Spiral Curriculum	The former supplementary modules have now been integrated into the program as compulsory courses. They have been arranged in a logical order according to the Spiral Curriculum for better understanding of the concepts provided. Specifically, please see our responses in items 1.2, 2.1 and 4.1	Choose an item.
Consideration can be given to the involvement of other important stakeholders in the content and design of the programme (e.g., clinical midwives from student placement areas of practice, or women and their families as recipients of midwifery care).	Important stakeholders, such as professional associations (PASYNM) and midwives from the Clinical field have been participating in the design, implementation, and review of the M.Sc. in Midwifery program. Please see our responses in items 1.7 and 2.6 for more specific information. In these responses we have detailed how we intensify the participation of women and family as recipients of midwifery care.	Choose an item.
The learning outcomes of the three practical training modules (MID 625, 640 and 655) are the same (according to the application document provided to the	The learning outcomes of the clinical practice Syllabi (MID 625, 640 and 655) have been modified and differentiated in order to reflect the expected gradual acquisition of skills in Midwifery Science. Please see more details in response 2.2	Choose an item.



EEC). These should be explicitly specified and differentiated based on acquiring increasing practical skills.	The course syllabi indicating these changes are found in ANNEX II: COURSE SYLLABI on page 36.	
The EEC recommends the Department to consider a student cohort intake every two years (or at a minimum an annual cohort intake) for the viability and sustainability of the practical component of the programme	The EEC committee recommendation for admitting one annual cohort intake of Midwifery students has been adopted; we thank the EEC for the valuable guidance.	Choose an item.
Academic staff to be supported to undertake a teaching qualification and / or Fellowship of the Higher Education Academy to improve the standing of their teaching profile	Qualifications for academic ranking are commensurate to international standards; these qualifications are specifically described in the EUC Charter (please see EUC Charter, p. 71, here). EUC has developed a Faculty Professional Development program which holds the prestigious Advance Higher Education membership logo to which the Committee refers since September 2021. Members of our Faculty started already their Fellowship application, as suggested by the EEC. European University Cyprus offers on an annual basis a comprehensive pedagogical induction package for new full and part-time faculty. For further information please see response 3.1.	
Develop a recruitment strategy for midwives with potential to develop an academic career in order to support the ongoing development of the MSc in Midwifery programme (currently the one part-time midwife is not sustainable long-term).	We thank the EEC for this comment, as it represents a continuous challenge for program. From our conversations with the EEC and communication with other programs we understand this to be a global issue with other M.Sc. in Midwifery programs. The EUC Midwifery program is in constant communication with PASYNM to identify and recruit qualified and interested midwives to enrich students' development.	

We sincerely thank the EEC for the positive feedback and its constructive recommendations. As described in the previous sections of the report, we focused on addressing each of the EEC's recommendations.

Moreover, we would like to say that we found the EEC's candid discussions a constructive learning process. We all believe this review was a positive experience, and we were provided with critical input on moving forward effectively. We have thoroughly reviewed the findings, strengths, and areas of improvement indicated by the EEC following its review and attempted to respond to each item precisely and succinctly. By embracing the EEC's comments and suggestions, we are convinced that our program will effectively ensure its students' learning outcomes.

In closing, we are grateful to the EEC for their candid discussions and the insightful comments and suggestions for our program.

C. Higher Education Institution academic representatives

Name	Position	Signature
Prof. Stavroulla Andrea Apostolidou	Program Coordinator	Stavroula Andrea-Apostolidou
Dr. Chryssoula Thodi	Chairperson, Department of Health Sciences	Chryssoula Thodi
Dr. Panagiotis Papageorgis	Dean, School of Sciences	Panagiotis Papageorgis

Date: 11.7.2022

ANNEX I: COURSE DISTRIBUTION

TABLE 1: Structure of the Program of Study

DEGREE REQUIREMENTS	ECTS			
All students pursuing the "Midwifery (M.Sc.)" program must complete the following requirements:				
Compulsory Courses				
Clinical Training	30			
Master Thesis, OR Two Elective Courses	20			
Total Requirements	120			

^{*} After graduating from the Master's program and completing the Master's Degree in "Midwifery" (having completed the Midwifery Practices totaling 1750 hours), they meet the criteria for enrollment at the Nursing and Midwifery Council - Midwives Registry and will this be able to obtain a training license of the Midwifery profession.





TABLE 2: Course Distribution Per Semester

A/A	Course Type	Course Name	Course Code	Periods per week	Period duration	Number of weeks/ Academic semester	Total periods/ Academic semester	Number of ECTS
		1 st Seme	ester (30 EC	TS)				
1.	Compulsory	Anatomy, Physiology of Pregnancy, Midwifery Care During Pregnancy, Childbirth Education	MID600	5	50	14	70	10
2.	Compulsory	Normal Labor, Midwifery Care During the Postpartum Period	MID605	5	50	14	70	10
3.	Compulsory	Neonatology, Neonatal Care, Newborn Nutrition and Feeding, Breastfeeding	MID610	5	50	14	70	10
		2 nd Semo	ester (30 EC	CTS)				
4.	Compulsory	Special Problems, High Risk Pregnancy and Midwifery Care	MID635	3	50	14	42	10
5.	Compulsory	Sociology and Reproductive Psychology	MID650	3	50	14	42	10
6.	Compulsory	Practical Exercise of Midwifery I	MID625				580	10

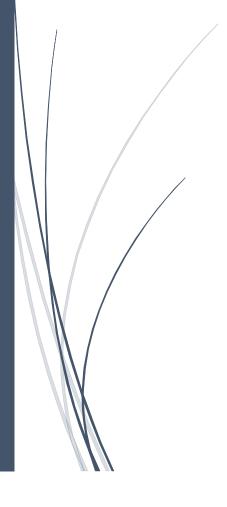


	3 rd Semester (30 ECTS)							
7.	Compulsory	Labor and Birth Complications, Postpartum Complications and Midwifery Care	MID645	3	50	14	42	10
8.	Compulsory	Methodology Research and Biostatistics	NUR600	3	50	14	42	10
9.	Compulsory	Practical Exercise of Midwifery II	MID640				580	10
		4 th Seme	ster (30 ECT	S)				
10.	Compulsory	Practical Exercise of Midwifery III	MID655				590	10
		(1) of the following two options belo Elective courses (20 ECTS)	ow:					
11.	Elective	Master Thesis	MID690		50	12	300	20
OR								
12.	Elective	Elective Course*		3	50	14	42	10
13.	Elective	Elective Course*		3	50	14	42	10

*Electi	*Elective Courses							
1.	Elective	Gynecology and reproduction and assisted reproductive technology (ART)" and Health Promotion	MID665	3	50	14	42	10
2.	Elective	Evidenced Based Clinical Midwifery Practice	MID675	3	50	14	42	10
3.	Elective	Community Midwifery, Cross-cultural Midwifery	MID670	3	50	14	42	10
4.	Elective	Midwifery Care Units' Management, Midwives' Professional Development	MID680	3	50	14	42	10

TABLE 3: The assessment rubric for pass/fail of graduate courses according to EUC regulations appears

Grade	Ranking	Credits	Percentage
Α	Outstanding	4.0	90 and above
B+	Very good	3.5	85-89
В	Good	3.0	80-84
C+	Satisfactory	2.5	75-79
С	Pass	2.0	70-74
F	Fail	0	



ANNEX II: COURSE SYLLABI

COURSE DESCRIPTION

A/A	Courses			
1.	MID600- Anatomy, Physiology of Pregnancy, Midwifery Care During Pregnancy, Childbirth Education			
2.	MID605- Normal Labor, Midwifery Care during the Postpartum Period	41		
3.	MID610 - Neonatology, Neonatal Care, Newborn Nutrition and Feeding, Breastfeeding	46		
4.	MID635- Special Problems, High Risk Pregnancy and Midwifery Care	50		
5.	MID625- Practical Exercise of Midwifery I	53		
6.	MID645- Labor and Birth Complications, Postpartum Complications and Midwifery care	57		
7.	NUR600- Methodology Research and Biostatistics	61		
8.	MID640- Practical Exercise of Midwifery II	64		
9.	MID655- Practical Exercise of Midwifery III	68		
Elect	ive Courses			
10.	MID665- Gynecology and reproduction and assisted reproductive technology (ART)" and Health Promotion	72		
11.	MID675- Evidenced Based Clinical Midwifery Practice	75		
12.	MID670- Community Midwifery, Cross-cultural Midwifery	78		
13.	MID680 Midwifery Care Units' Management, Midwives' Professional Development	81		









ΦΟΡΕΑΣ ΔΙΑΣΦΑΛΙΣΗΣ ΚΑΙ ΠΙΣΤΟΠΟΙΗΣΗΣ ΤΗΣ ΠΟΙΟΤΗΤΑΣ ΤΗΣ ΑΝΩΤΕΡΗΣ ΕΚΠΑΙΔΕΥΣΗΣ CYQAA CYPRUS AGENCY OF QUALITY ASSURANCE AND ACCREDITATION IN HIGHER EDUCATION



Course Title	Anatomy, Physiology of Pregnancy, Midwifery Care During Pregnancy, Childbirth Education				
Course Code	MID600				
Course Type	Compulso	ory			
Level	Master (2	nd Cycle)			
Year / Semester	1 st year ,	1 st Semester			
Teacher's Name	Christos \	/rakas			
ECTS	10	Lectures / week	4 hours/14 weeks	Laboratories / week	1 hours/14 weeks
Course Purpose and Objectives	The objective of this course is to educate students in the fundamental principles and theories that are developed in the context of the Midwifery care. In addition, it aims to provide them with the skills and adequate knowledge about the anatomy and physiology of the female reproductive system, genetics, conception and fetal development, fetal skull, bony pelvis and pelvic floor, physiology and biochemistry of pregnancy, antenatal care and preparation for parenthood.				
Learning Outcomes	Upon successful completion of this course students should be able to: Theory: Present and explain the fundamental principles of Midwifery Recognize and explain the structures, functions and physiology of the female reproductive system Explain the basic principles of genetics and describe the human genome Recognize organs and structures arising from the primordial germ layers Describe the process of fertilization, development, structure and functions of the placenta Analyze the composition and functions of amniotic fluid Present and explain the significant changes in the development and fetal growth Describe and explain the expected changes in anatomy, biochemistry and physiology during pregnancy Determine the maternal hormones produced during pregnancy, their organ-targets and explain their most important effects on pregnancy Explain and differentiate the positive, presumptive and the probable				





	 Describe the diagnosis process and determine the Estimated Date of Birth (EDB) (Estimated Date of Delivery (EDD)) Describe the comprehensive health history to be taken at the first prenatal visit of the pregnant woman Evaluate and plan based on priorities the needs of the pregnant woman and the family Set goals of care, plan, provide and re-evaluate the midwifery care provided and its outcomes Explain and give examples of nutritional sources that provide the necessary nutrients for optimal nutrition of the mother during pregnancy Promote the health of the pregnant woman and strengthen the family Collaborate effectively with the midwifery team Explain the role of the father in pregnancy Design, apply and evaluate parenting preparation programs Organize practical interventions during antenatal care Laboratory skills Recognize the anatomical structure of the breast Calculate the estimated date of delivery Perform abdominal palpation on a manikin to determine the presentation and lie of the fetus (Leopold maneuvers) Locate the most appropriate site for the auscultation of the fetal heart rate depending on gestational age and fetal presentation 		
Prerequisites	None	Co-requisites	None
Course Content	Theory		
Course Content	 Theory Introduction to the physiology and biochemistry of pregnancy and Prenatal Midwifery care. Midwifery and medical model of care. External female genitals Internal female genitals Physiology of the female reproductive system Male genital system. Physiology of the male reproductive system Genetics, conception, fetal development and growth Types of bony pelvis, characteristics, obstetric measurements, comparison Pelvic floor: muscles, ligaments, other structures. Fetal skull: bones, sutures, fontanels, diameters. The bladder Breast anatomy Conceptual framework Tests and signs of pregnancy Physiological, biochemical and anatomical changes of pregnancy in the female reproductive, cardiovascular, respiratory, and renal system Basic metabolic rate, integumentary, nervous system, gastrointestinal and endocrine system 		





 Diagnosis of pregnancy Estimation of the date of delivery First visit to the antenatal care clinic, prenatal interview, physical examination, laboratory tests Adaptation of mother, father and siblings Parenting preparation programs Plan of birth- birthplace options Prenatal midwifery care management Nutrition of mother and fetus
 Laboratory exercises: 13 hours in total Manikins and simulators use, as well as, educational videos, so that, students fully understand the basic concepts of the unit taught. Students will be able to apply techniques and acquire the appropriate skills, as appropriate. Diagnosis of pregnancy, calculation of the estimated date of delivery, planning of antenatal care of pregnant woman Measurement of the height of the fundus of the uterus in a manikin and determination of gestational age Perform abdominal palpation on a manikin to determine the presentation and lie of the fetus (Leopold maneuvers) Determination and demonstration in a manikin of the most appropriate site for the auscultation of the fetal heart rate depending on the gestational age and the presentation of the fetus
Face-to- face
 Lowdermilk D. L., Cashion M.C., Perry S.E., Alden K.R. and Ellen Olshansky E. (2021). Φροντίδα Μητρότητας και Υγείας των Γυναικών (Επιμέλεια: Άννα Δελτσίδου, Γιαννούλα Κύρκου), 12^η έκδοση, Εκδόσεις Λαγός Δημήτριος, Αθήνα Lowdermilk D. L., Cashion M.C., Perry S.E., Alden K.R. and Ellen Olshansky E. (2020). Maternity and Women's Health Care, 12th Edition, St Louis: Mosby Lowdermilk D. L., Perry S.E., Cashion M.C., Alden K.R. (2015). Maternity and Women's Health Care. 11th ed. St Louis: Mosby Marshall J.E., Raynor M.D. (2014). Myles Textbook for Midwives 16th Edition, Churchill Livingstone Johnson, R. & Taylor, W. (2011) Skills for Midwifery Practice. 3rd ed., Edinburgh: Churchill Livingstone Tharpe N.L., Farley C.L., Jordan R.G. (2016) Clinical Practice Guidelines for Midwifery & Women's Health 5th Edition, Burlington: Jones & Bartlett Learning Cunningham F.G., Leveno K.J., Bloom S.L., Dashe J.S., Hoffman B.H., Casey B.M., Spong C.Y. (2018). Williams Obstetrics, 25th Edition, USA: McGraw-Hill Education







	 Perry S.E., Hockenberry M.J., Lowdermilk D.L., Wilson D., Alden K.R., Cashion M.C. (2017). Maternal Child Nursing Care 6th Edition, St Louis: Mosby 				
Assessment	Examinations:	50%			
	Assignment: (8.000 words, without including in the word count the abstract, references and cover page)	40%			
	Class Participation and Attendance	10%			
	Total:	100%			
Language	Greek				





Course Title	Normal Labor and birth, Midwifery Care during the Postpartum Period			
Course Code	MID605			
Course Type	Compulsory			
Level	Master (2 nd Cycle)			
Year / Semester	1 st year ,1 st Semester			
Teacher's Name	Christos Vrakas			
ECTS	10 Lectures / 4 hours/14 Laboratories 1 hours/14 weeks weeks / week			
Course Purpose and Objectives	The objective of this course is the deepening in physiology and the development of skills in the management and care of a woman during normal labor and birth. It includes the acquisition of the skills for the normal birth according to the International Confederation of Midwives, WHO birth management recommendations and the evidenced based normal birth management, birth pain relief, the use of the partogram and of related technology during labor and birth when is needed. In addition, it aims to provide basic knowledge about anatomic and physiologic changes during the postpartum period, the characteristics of uterine involution and the interventions required to provide quality midwifery care.			
Learning Outcomes	 Upon successful completion of this course students should be able to: Theory Recognize and explain the anatomy of the bony pelvis and pelvic floor and recognize the physiologic diameters of the pelvic inlet, mid-pelvis (cavity) and outlet Describe and explain the factors that affect the process of normal childbirth Describe and explain the mechanism of normal birth Explain the signs of labor onset Describe the non-pharmacologic strategies of pain management Analyze the types of analgesia and anaesthesia used during labor and birth and describe the midwifery interventions for the woman receiving analgesia Interpret the baseline fetal heart rate and identify the signs of non reassuring fetal heart rate patterns Schedule midwifery interventions based on priorities of the childbearing woman at the admission, during the first, second, third and fourth stage of labor Describe the changes in anatomy and physiology during the puerperium Define and explain the characteristics of uterine involution and of 			



CYPRUS AGENCY OF QUALITY ASSURANCE AND ACCREDITATION IN HIGHER EDUCATION



•	Plan, provide and re-evaluate the midwifery care provided and its
	outcomes during the postpartum period
•	Describe the discharge instructions and the home care during the
	puerperium
•	Empower the family and explain the role of the father during birth

Laboratory

and puerperium

- Know and locate the bony parts of the pelvis, the characteristics, the levels and diameters of the pelvis
- Recognize the external and internal female genitals
- Recognize and palpate the muscles, ligaments and other structures of the pelvic floor
- Describe and palpate the fetal skull: bones, sutures, fontanels, diameters.
- Describe and explain the mechanism of normal childbirth
- Monitor a normal birth simulation in the Victoria birth simulator
- Perform normal childbirth in a manikin
- Interpret the basic fetal heart rate and identify the signs of the disturbing forms of the fetal heart rate.
- Interpret the partogram and predict the course of labor
- Identify and explain the characteristics of the uterine involution and of lochia

	lochia			
Prerequisites	None	Co-requisites	MID600	
Course Content	 Conceptual definition Types of bony pelvish Pelvic floor: musclesh Fetal skull: bones, sh Fetal assessment. Not Auscultation Cardiotocography. Internal Monitoring, Bradycardia, Periody Accelerations, Decensor Admission of a child mechanism of labor extension, restitution vaginal examination care path of the low labor The role of the midwoish pain (methods of pain (methods of pain (methods of pain childbirth, Pressure) 	s, characteristics, meases, ligaments, other structures, fontanels, diameteristics of lormal characteristics of Electronic Fetal Monitor Baseline Fetal Heart Radic and Episodic Changelerations bearing woman, onset of (engagement, descent, and external rotation, and recording, first stages and external manager in during labor. Non-pharmacteristics of the pain manager in during labor in during labor.	urements, comparison stures. eters. f fetal heart rate Intermittent ring, External Monitoring, ate, Variability, Tachycardia, as in Fetal Heart Rate, of labor, stages of labor, flexion, internal rotation, expulsion), partogram, ge of labor management, n during the first stage of	



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• Second stage of labor management -pain management, supportive care from the midwife, woman's responses during the second stage of labor.
Positions of the woman during labor.
• Pelvic anatomy, episiotomy and perineal reconstruction. Care path of the
low risk childbearing woman during the second stage of labor. Supportive
care by the midwife. Midwives' and women's empowering.

- Third Stage of Labor
- Placental Separation and Expulsion
- WHO suggestions for the normal labor, the role of the father during labor and postpartum period.
- Postpartum anatomic and physiologic changes.
- The characteristics of the uterine involution, contractions, vagina and perineum, lochia
- Midwifery care of a woman during the postpartum period.

Laboratory exercises: 13 hours in total

Manikins and simulators use, as well as, educational videos, so that, students fully understand the basic concepts of the unit taught. Students will be able to apply techniques and acquire the appropriate skills, as appropriate.

- Observation and demonstration of the bony pelvis structures, pelvic inlet, mid pelvis, pelvic outlet and pelvic diameters
- Observation and demonstration of the muscles, ligaments and other structures of the pelvic floor in a manikin
- Identification and palpation of the bones, sutures, fontanels of the fetal skull in a manikin

Simulation and perform of a normal birth in a manikin

Monitoring and demonstration of the presentation, position, lie and descent of the fetus inside the pelvic canal

Recognition of dilation and elimination of the cervix through vaginal examination in a model

Simulation of episiotomy and suturing to a manikin

Completion of a portogram for monitoring and predicting the course of childbirth

Recognition of uterine involution in a manikin

Teaching Methodology	Face-to- face
Bibliography	 Marshall J.E., Raynor M.D. (2014). Myles Textbook for Midwives 16th Edition, Churchill Livingstone Johnson, R. & Taylor, W. (2011) Skills for Midwifery Practice. 3rd ed., Edinburgh: Churchill Livingstone Tharpe N.L., Farley C.L., Jordan R.G. (2016) Clinical Practice Guidelines for Midwifery & Women's Health 5th Edition, Burlington:







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- Cunningham F.G., Leveno K.J., Bloom S.L., Dashe J.S., Hoffman B.H., Casey B.M., Spong C.Y. (2018). Williams Obstetrics, 25th Edition, USA: McGraw-Hill Education
- Perry S.E., Hockenberry M.J., Lowdermilk D.L., Wilson D., Alden K.R., Cashion M.C. (2017). Maternal Child Nursing Care 6th Edition, St Louis: Mosby
- Simpson K.R., Creehan, P.A. (2013). AWHONN's Perinatal Nursing Fourth Edition, Fourth edition, Philadelphia: Lippincott Williams & Wilkins
- Lowdermilk D. L., Cashion M.C., Perry S.E., Alden K.R. and Ellen Olshansky E. (2021). Φροντίδα Μητρότητας και Υγείας των Γυναικών (Επιμέλεια: Άννα Δελτσίδου, Γιαννούλα Κύρκου), 12^η έκδοση, Εκδόσεις Λαγός Δημήτριος, Αθήνα
- Lowdermilk D. L., Cashion M.C., Perry S.E., Alden K.R. and Ellen Olshansky E. (2020). Maternity and Women's Health Care, 12th Edition, St Louis: Mosby
- Women's Health Care. 11th ed. St Louis: Mosby
- Ricci S. (2016). Essentials of Maternity, Newborn, and Women's Health Nursing, Philadelphia: Lippincott Williams & Wilkins
- O'Meara A. (2018). Maternity, Newborn, and Women's Health Nursing. A Case-Based Approach, Philadelphia: Lippincott Williams & Wilkins
- Silbert-Flagg J., Pillitteri A. (2017). Maternal and Child Health Nursing. Care of the Childbearing and Childrearing Family, Philadelphia: Lippincott Williams & Wilkins
- London M.L., Ladewig P.W., Davidson M., Ball J.
 W., Bindler R.C., Cowen K. (2016). Maternal & Child Nursing Care, 5th Edition, UK: Pearson
- Davidson M., London M.L., Ladewig P.W. (2019). Olds' Maternal-Newborn Nursing & Women's Health Across the Lifespan, 11th Edition, UK: Pearson
- Forrest E. (2019). Midwifery at a Glance, 1st Edition, Oxford: Wiley-Blackwell
- Murray S.S. & McKinney E.S. (2018). Foundations of Maternal-Newborn and Women's Health Nursing, 7th Edition, Philadelphia: Saunders Elsevier
- Blackburn S. (2018). Maternal, Fetal, & Neonatal Physiology, 5th Edition, A Clinical Perspective, Philadelphia: Saunders Elsevier







Assessment	Exam:	50%	
	Assignment: (8.000 words, without including in the word count the abstract, references and cover page)	40%	
	Class Participation and Attendance	10%	
	Total:	100%	
Language	Greek		





Course Title	Neonatology, Neonatal Nursing Care, Newborn Nutrition and Feeding, Breastfeeding				
Course Code	MID610				
Course Type	Compulsory				
Level	Master (2 nd (Cycle)			
Year / Semester	1 st year ,1 st	Semester			
Teacher's Name	To be annou	ınced			
ECTS	10	Lectures / week	4 hours/14 weeks	Laboratories / week	1 hours/14 weeks
Course Purpose and Objectives	The objective of this course is to educate students for issues related to the physiology and pathology of the newborn in order to provide a qualitative and safe care to the low and high risk newborns				
Learning Outcomes	Theory Describe a during chile Describe the Explain the Evaluate au Organize au Describe the Describe and convuuinary trace Metabolic disorders - Describe aproblems. Organize au Newborn (and care for Design and newborns jaundice	physiology and pathology of the newborn in order to provide a qualitative and safe care to the low and high risk newborns Upon successful completion of this course students should be able to: Theory Describe and assess a low risk newborn and identify the injures occurring during childbirth and congenital anomalies Describe the immediate and daily care of a low risk newborn Explain the assessment of a high risk newborn Evaluate and list the signs of perinatal asphyxia Organize and implement the newborn resuscitation Describe the pathophysiology of the respiratory distress syndrome (RDS) Describe neonatal jaundice – abnormal jaundice, neurological problems and convulsions Congenital cardiac defects, neonatal sepsis – Congenital and perinatal infections (TORCH – HIV), renal diseases – urinary tract infections Metabolic disorders, endocrine system disorders, neonatal hematologic disorders – neonatal hemorrhagic disease Describe and organize the nursing care for newborns with surgical problems. Organize and implement care high risk newborn care- Low birth Weight Newborn (LBW) - small for date newborn, preterm newborn, management and care for a LBW newborn Design and implement care for newborns with acquired problems – newborns of diabetic mothers, newborns with infections, newborns with			





	 Describe the care of a newborn with genetic anomalies (Down syndrome, metabolic disorders). Explain the breastfeeding – Anatomy/ Physiology/ lactation-lactogenesis Suggest ways to promote breastfeeding and implement the ten steps to successful breastfeeding. Nutrient contents of breast milk. Breastfeeding Recognize and explain the benefits for the newborn, mother and society Present and list the barriers for successful breastfeeding. Describe the breastfeeding technique. 			
	Laboratory skills			
	 Describe the immediate and daily care of a low risk neonate Describe and perform a clinical assessment of a low risk newborn and identify childbirth injuries and congenital anomalies Assess and list the signs of perinatal asphyxia Organize and implement neonatal resuscitation Organize and implement care of a high risk neonate Describe the breastfeeding technique 			
Prerequisites	None	Co-requisites	MID605	
Course Content	 None			





	Newborn care with genetic anomalies (Down syndrome, metabolic disorders).			
	 Nutrition and feeding of a newborn. Breastfeeding – Anatomy/ Physiology/ lactation-lactogenesis, breastfeeding onset – ten steps successful breastfeeding. Nutrient contents of breast milk. Breastfeeding – Benefits for the newborn-mother- society. Barriers to successful breastfeeding. 			
	Barriers to successful breastreeding.			
	Laboratory exercises: 13 hours in total Manikins and simulators use, as well as, educational videos, so that, students be able to totally understand the basic concepts of the unit taught. Students will be able to apply techniques and acquire the appropriate skills.			
	 Simulation of the immediate and daily care of a low risk neonate Simulation of a newborn clinical assessment and identification of childbirth injuries and congenital malformations 			
	 Assessment and enumeration of the perinatal asphyxia signs Simulation and neonatal resuscitation performance 			
	Organization of a high risk newborn care			
Topobing	Description of the breastfeeding technique Face-to- face			
Teaching Methodology	race-to-tace			
Bibliography				
	 Davidson M., London M.L., Ladewig P.W. (2019). Olds' Maternal- Newborn Nursing & Women's Health Across the Lifespan, 11th Edition, UK: Pearson 			
	Forrest E. (2019). Midwifery at a Glance, 1st Edition, Oxford: Wiley-Blackwell			
	Carlson B.M. (2019). Human Embryology and Developmental Biology, 6th Edition, Philadelphia: Saunders Elsevier			
	 Murray S.S. & McKinney E.S. (2018). Foundations of Maternal- Newborn and Women's Health Nursing, 7th Edition, Philadelphia: Saunders Elsevier 			
	Blackburn S. (2018). Maternal, Fetal, & Neonatal Physiology, 5th Edition, A Clinical Perspective, Philadelphia: Saunders Elsevier			
	• Lowdermilk D. L., Cashion M.C., Perry S.E., Alden K.R. and Ellen Olshansky Ε. (2021). Φροντίδα Μητρότητας και Υγείας των Γυναικών (Επιμέλεια: Άννα Δελτσίδου, Γιαννούλα Κύρκου), 12 ^η έκδοση, Εκδόσεις Λαγός Δημήτριος, Αθήνα			
	 Lowdermilk D. L., Cashion M.C., Perry S.E., Alden K.R. and Ellen Olshansky E. (2020). Maternity and Women's Health Care, 12th Edition, St Louis: Mosby 			
	 Lowdermilk D. L., Perry S.E., Cashion M.C., Alden K.R. (2015). Maternity and Women's Health Care. 11th ed. St Louis: Mosby 			







	 Marshall J.E., Raynor M.D. (2014). Edition, Churchill Livingstone Johnson, R. & Taylor, W. (2011) Sk Edinburgh: Churchill Livingstone Tharpe N.L., Farley C.L., Jordan R.G. Guidelines for Midwifery & Wome Jones & Bartlett Learning Cunningham F.G., Leveno K.J., Bloc Casey B.M., Spong C.Y. (2018). Will McGraw-Hill Education Perry S.E., Hockenberry M.J., Lowd Cashion M.C. (2017). Maternal Child Mosby Simpson K.R., Creehan, P.A. Nursing Fourth Edition, Fourth edition & Wilkins Ricci S. (2016). Essentials of Matern Nursing, Philadelphia: Lippincott Will 	xills for Midwife G. (2016) n's Health 5th om S.L., Dashe liams Obstetric dermilk D.L., W I Nursing Care (2013). AW on, Philadelphia	Clinical Practice Edition, Burlington: a J.S., Hoffman B.H., as, 25th Edition, USA: Clison D., Alden K.R., 6th Edition, St Louis: CHONN's Perinatal as: Lippincott Williams and Women's Health
Assessment	Exam:	50%	
	Assignment: (8.000 words, without including in the word count the abstract, references and cover page)	40%	
	Class Participation and Attendance	10%	
	Total:	100%	
Language	Greek		



ΦΟΡΕΑΣ ΔΙΑΣΦΑΛΙΣΗΣ ΚΑΙ ΠΙΣΤΟΠΟΙΗΣΗΣ ΤΗΣ ΠΟΙΟΤΗΤΑΣ ΤΗΣ ΑΝΩΤΕΡΗΣ ΕΚΠΑΙΔΕΥΣΗΣ CYQAA CYPRUS AGENCY OF QUALITY ASSURANCE AND ACCREDITATION IN HIGHER EDUCATION



Course Title	Special Problems, High Risk Pregnancy and Midwifery Care			
Course Code	MID635			
Course Type	Compulsory			
Level	Master (2 nd Cycle)			
Year / Semester	1 st year / 2 nd semester			
Teacher's Name	Dr. Anna Deltsidou			
ECTS	10 Lectures / 3 Hours/14 Laboratories None week / week / week			
Course Purpose and Objectives	The objective of this course is to educate students on issues related to the management of pathological conditions in midwifery, which either pre-exist or appear during pregnancy and burden the health of the mother and / or the fetus /newborn. Includes management and care of women with diabetes, heart disease, anemia, TORCH infections, HIV, substance abuse, Rh incompatibility, preeclampsia, eclampsia, Respiratory, endocrine (thyroid), autoimmune disorders, CNS and UTI disorders, pulmonary embolism, deep vein thrombosis, disseminated intravascular coagulation (DIC), HELLP syndrome, placenta previa, placental abruption, twin pregnancy			
Learning Outcomes	 Upon successful completion of this course students should be able to: Explore biophysical, psychosocial, sociodemographic, and environmental influences on high-risk pregnancy. Examine risk factors identified through history, physical examination, and diagnostic techniques. Differentiate among gestational hypertension, preeclampsia, and chronic hypertension. Describe appropriate actions during and after an eclamptic seizure. Differentiate among causes of early pregnancy bleeding, including miscarriage, ectopic pregnancy, cervical insufficiency, and hydatidiform mole. Discuss signs and symptoms, possible complications, and management of miscarriage, ectopic pregnancy, cervical insufficiency, and hydatidiform mole. Compare and contrast placenta previa and placental abruption in relation to signs and symptoms, complications, and management. Discuss the diagnosis and management of disseminated intravascular coagulation Differentiate the types of diabetes mellitus and their respective risk factors in pregnancy. Compare insulin requirements during pregnancy, postpartum, and with lactation. 			



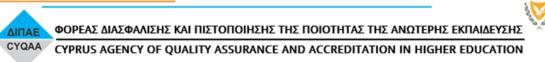


	 Identify maternal and fetal risks or complications associated with diabetes in pregnancy. Develop a plan of care for the pregnant woman with pregestational or gestational diabetes. Explain the effects of hyperemesis gravidarum on maternal and fetal well-being. Discuss management of the woman with hyperemesis gravidarum. Explain the effects of thyroid disorders on pregnancy. Compare the management of a pregnant woman with hyperthyroidism with one who has hypothyroidism. Describe the management of selected cardiovascular disorders in pregnant women. Discuss anemia during pregnancy. Explain the care of pregnant women with pulmonary disorders. Identify the effects of neurologic disorders on pregnancy. Describe the care of women whose pregnancies are complicated by autoimmune disorders. Differentiate signs and symptoms and management of urinary tract infections during pregnancy. Describe mental health disorders occurring in the perinatal period, including mood disorders, anxiety disorders, posttraumatic stress disorder, and bipolar disorder. Evaluate the role of the midwife in caring for women with mental health disorders during pregnancy and the postpartum period. Examine substance abuse during pregnancy, including prevalence, barriers to treatment, legal considerations, and commonly abused drugs. Explain the usefulness of technology (e.g. cardiotocography) for assessing fetal well-being predominantly in high-risk pregnancies 			
Prerequisites	MID600, MID605 Co-requisites None			
Course	High Risk Pregnancy Assessment			
Content	Assessment of Risk Factors			
	Prenatal Testing			
	Biophysical AssessmentBiochemical Assessment			
	Antepartum Assessment Using Electronic Fetal Monitoring			
	Hypertensive Disorders (Significance and Incidence, Classification,			
	Chronic Hypertensive Disorders, Preeclampsia, Eclampsia, HELLP			
	Syndrome, Treatment) • Bleeding Disorders			
	Early pregnancy bleeding (spontaneous, induced abortion, cervical)			
	insufficiency, molar pregnancy, ectopic pregnancy)			
	 Late pregnancy bleeding (Placenta previa, Premature Placental Abruption, Cord Insertion and Placental Variations, Coagulation Disorders in 			
	Pregnancy, disseminated intravascular coagulation (DIC))			
	Pregestational Diabetes Mellitus and Pregnancy Gestational Diabetes Mellitus (Screening for Gestational Diabetes)			
	 Gestational Diabetes Mellitus (Screening for Gestational Diabetes, maternal risks, fetal risks, antenatal Care 			
	, ,			





Tagahing	 Hyperemesis gravidarum Thyroid Disorders Cardiovascular Disorders (Congenital Heart Diseases, Acquired Heart Diseases) Other Pathological Conditions in Pregnancy Respiratory, endocrine (thyroid), autoimmune disorders, CNS disorders (epilepsy), urinary tract diseases, anemias and pregnancy (Iron deficiency anemia, Folic Acid Deficiency Anemia, Sickle cell disease, thalassemia). 		
Teaching Methodology	Face-to- face		
Bibliography	 Lowdermilk D. L., Cashion M.C., Perry S.E., Alden K.R. and Ellen Olshansky E. (2021). Φροντίδα Μητρότητας και Υγείας των Γυναικών (Επιμέλεια: Άννα Δελτσίδου, Γιαννούλα Κύρκου), 12" έκδοση, Εκδόσεις Λαγός Δημήτριος, Αθήνα Lowdermilk D. L., Cashion M.C., Perry S.E., Alden K.R. and Ellen Olshansky E. (2020). Maternity and Women's Health Care, 12th Edition, St Louis: Mosby O'Meara A. (2018). Maternity, Newborn, and Women's Health Nursing. A Case-Based Approach, Philadelphia: Lippincott Williams & Wilkins Silbert-Flagg J., Pillitteri A. (2017). Maternal and Child Health Nursing. Care of the Childbearing and Childrearing Family, Philadelphia: Lippincott Williams & Wilkins London M.L., Ladewig P.W., Davidson M., Ball J. W., Bindler R.C., Cowen K. (2016). Maternal & Child Nursing Care, 5th Edition, UK: Pearson Davidson M., London M.L., Ladewig P.W. (2019). Olds' Maternal-Newborn Nursing & Women's Health Across the Lifespan, 11th Edition, UK: Pearson Forrest E. (2019). Midwifery at a Glance, 1st Edition, Oxford: Wiley-Blackwell Murray S.S. & McKinney E.S. (2018). Foundations of Maternal-Newborn and Women's Health Nursing, 7th Edition, Philadelphia: Saunders Elsevier Blackburn S. (2018). Maternal, Fetal, & Neonatal Physiology, 5th 		
Assessment		50%	
, 1000001110111	Exams		
	Assignments (8.000 words, without including in the word count the abstract, references and cover page)	40%	
	Class Participation and Attendance	10%	
	Total	100%	
Language	Greek		





Course Title	Practical Exercise of Midwifery I				
Course Code	MID625				
Course Type	Compulsory				
Level	Master (2 nd Cy	rcle)			
Year / Semester	1 st year /2 st so	emester			
Teacher's Name	Mr Christos Vr	akas			
ECTS	10	Lectures / week	N/A	Laboratories / week	574 hours in clinical placement
Course Purpose and Objectives	To enable the student to put theory into practice with documented clinical practice (through clinical case studies) and to acquire specialized knowledge, skills, abilities and attitudes to safely provide individualized and holistic care to the pregnant woman, fetus, women in labour, the newborn and to the woman during puerperium. The program aims at a high level of clinical competence through scientifically / research-based midwifery practice, the development of competent midwives in accordance with the legislation and international standards of midwifery education and practice of the International Confederation of Midwives and the European Directive 2005/36				
Learning Outcomes	The purpose of the clinical placement is to develop and cultivate the appropriate abilities and skills of students for the implementation of the principles of midwifery in clinical practice. Upon successful completion of the clinical practice the student will be able to • Provide a preparation program for the parental role, with information regarding pregnancy, childbirth, puerperium, newborn care and family empowerment • Work independently, to provide advanced and safe midwifery care to women in reproductive years, before conception, during pregnancy, childbirth and puerperium including the newborn care. • Provide research based information on reproductive and sexual health				
	education		adolescend		ve and sexual health se, including infertility,





	Identify and prioritize the real or potential problems of women and families with a high risk pregnancy, the factors that cause or contribute to these problems and to express them in the form of midwifery diagnoses.			
	Examine, provide advanced midwifery care and monitor the mother and newborn during the postpartum period, providing the mother with newborn care counseling in order to empower her and to ensure the best possible development and well being of her child.			
	 Appreciate the necessi professional development 	•	of lifelong learning for personal and	
	Apply principles and counselling, research,		ng, effective communication and administration.	
Prerequisites	MID600, MID605	Co-requisites	None	
Course Content	Clinical practice in the folion Perinatal Care Clinic: 216 Prenatal care and child we Postpartum Ward (Care of	hours elfare centers :70 h		
			elop and cultivate the appropriate idwifery in real working conditions.	
	Taking a health history in the first visit.			
	Examination, evaluation and planning of the pregnant woman's visits based on the pregnant woman's needs.			
	Planning, provision, reevaluation of the midwifery care provided to the pregnant woman and its results.			
	Description of proper nutrition and description of the nutrients required for optimal nutrition of the mother during pregnancy. Advice on hygiene, exercise, sexual activity of the pregnant woman.			
	Promoting the health of the pregnant woman and strengthening the family			
	Advice to pregnant women regarding the treatment of the symptoms of the first trimester of pregnancy. E.g. hyperemesis gravidarum, morning sickness etc.			
	Recognition of abnormal conditions in early pregnancy such as albuminuria.			
	Cooperation with the	midwifery team.		
	Preparation programs	s for parenthood ar	nd autonomous participation.	
		<u> </u>		







	 Examination of newborns after leaving the maternity hospital, weighing and other measurements (head and abdomen circumference, length, etc.) and comparison with normal growth curves.
	Vaccination where required (eg against hepatitis B)
	Informing parents about issues of promoting the health of the newborn.
	Maternity care after childbirth (mobilization, bath, etc.)
	Recognition of the need for proper postpartum monitoring.
	Identification of signs and treatment of postpartum hemorrhage.
	Abdominal palpation and recognition of uterine involution after childbirth.
	Informing and supporting the postpartum woman about breastfeeding.
	Daily care of the newborn (bath, feeding, care of the umbilical cord).
	Recognition of abnormal conditions in the newborn and use safely the means of treatment (eg jaundice and phototherapy).
Teaching Methodology	574 hours in clinical placement
Bibliography	 Lowdermilk D. L., Cashion M.C., Perry S.E., Alden K.R. and Ellen Olshansky E. (2021). Φροντίδα Μητρότητας και Υγείας των Γυναικών (Επιμέλεια: Άννα Δελτσίδου, Γιαννούλα Κύρκου), 12^η έκδοση, Εκδόσεις Λαγός Δημήτριος, Αθήνα Lowdermilk D. L., Cashion M.C., Perry S.E., Alden K.R. and Ellen Olshansky E. (2020). Maternity and Women's Health Care, 12th Edition, St Louis: Mosby Marshall J.E., Raynor M.D. (2014). Myles Textbook for Midwives 16th Edition, Churchill Livingstone Johnson, R. & Taylor, W. (2011) Skills for Midwifery Practice. 3rd ed., Edinburgh: Churchill Livingstone Tharpe N.L., Farley C.L., Jordan R.G. (2016) Clinical Practice Guidelines for Midwifery & Women's Health 5th Edition, Burlington: Jones & Bartlett Learning Murray S.S. & McKinney E.S. (2018). Foundations of Maternal-Newborn and Women's Health Nursing, 7th Edition, Philadelphia: Saunders Elsevier Blackburn S. (2018). Maternal, Fetal, & Neonatal Physiology, 5th Edition, A Clinical Perspective, Philadelphia: Saunders Elsevier







Assessment	Continuous assessment	50%	
	in the Clinical Setting		
	Assignments (8.000 words, without including in the word count the abstract, references and cover page)	50%	
	Total	100%	
Language	Greek		



ΦΟΡΕΑΣ ΔΙΑΣΦΑΛΙΣΗΣ ΚΑΙ ΠΙΣΤΟΠΟΙΗΣΗΣ ΤΗΣ ΠΟΙΟΤΗΤΑΣ ΤΗΣ ΑΝΩΤΕΡΗΣ ΕΚΠΑΙΔΕΥΣΗΣ CYQAA CYPRUS AGENCY OF QUALITY ASSURANCE AND ACCREDITATION IN HIGHER EDUCATION





Course Title	Labor and Birth Complications, Postpartum Complications and Midwifery care			
Course Code	MID645			
Course Type	Compulsory			
Level	Master (2 nd Cycle)			
Year / Semester	2 nd year / 3 rd semester			
Teacher's Name	Dr Anna Deltsidou			
ECTS	10 Lectures / 2 Hours/14 Laboratories / Weeks / week 1 Hour/14 Weeks			
Course Purpose and Objectives	The objective of this course is to educate students for issues related on issues related to the management of pathological conditions in childbirth and postpartum. It includes management and care of women experiencing preterm labor, induction of labor, abnormal fetal presentation, shoulder dystocia, perineal lacerations, cesarean section and postterm pregnancy. It includes, also, the management and care of postpartum women experiencing hemorrhage, hemorrhagic (hypovolemic) shock, puerperal infection, thromboembolic disease and emotional disorders during the postpartum period.			
Learning Outcomes	 Upon successful completion of this course students should be able to: Determine the factors for a preterm labor and birth Analyse the current interventions for a preterm labor and birth Explain the interventions of induction and progress of labor and birth Describe the prevention, management and care of abnormal presentations and emergency situations during labor and birth Perform a childbirth safely and effectively in various types of abnormal presentations Discuss the indications and conditions for the use of forceps- assisted birth and vacuum- assisted birth Report the risk factors for dystocia and list the methods that enhance dystocia Discuss the ways of prevention and management of dystocia. Explain the usefulness of technology (e.g. cardiotocography) for uterine activity assessment and fetal heart rate in high-risk labor Explain the causes of caesarean birth and describe the midwifery care of postpartum women after a cesarean birth Classify the perineal lacerations and justify 3rd and 4th degree lacerations. Perform in a manikin the reconstruction techniques and discuss the 			





	complications of perineal lacerations Describe the care of a woman with postterm pregnancy Puerperium (postpartum period) Identify the causes, signs, symptoms and management of postpartum haemorrhage Describe the midwifery care of the woman with postpartum haemorrhage Differentiate the causes of postpartum infection Describe the care of a woman with postpartum infection Describe the aetiology, incidence, signs and symptoms of thromboembolic diseases in the postpartum period, the management and midwifery care Explain the emotional disorders during the postpartum period			
Prerequisites	MID600, MID605	Co-requisites	None	
Content	birth, Predictin Cervical Lengt Prevention, Ea Prelabor Ruptur Chorioamnionitis Postterm Pregna Dysfunctional la labor Patterns, Causes, Abnoposition, Abno Obstetric proce Transformation Operative Vagin Birth) Caesarean birth Postpartum Con Postpartum Con Postpartum her factors, Uterin	g spontaneous preterm h, Fetal Fibronectin Tes arly recognition and diag e of membranes ancy, labor and birth (m bor (Dystocia) (Abnorm precipitous labor, altera ormalities, Cephalopel rmal fetal Presentation, dures (version, Extern h, Induction of Labor, An al Birth (forceps-assiste h (Indications, elective th, Unplanned Caesare er Caesarean ogy (eg cardiotocograp nd of the uterine activity encies (Meconium- Sta apsed umbilical cord, Un nplications morrhage (definition, e atony, Placental con ematomas, Uterine inve ock (Idiopathic Thromb	naternal and fetal risks) nal Uterine Activity, Abnormal ations in Pelvic Structure, Fetal vic disproportion, abnormal multifetal pregnancy) nal cephalic version, Internal mniotomy) ed birth and vacuum- Assisted Caesarean birth, Scheduled an birth) phy) for the systematic fetal	
		,	cidence and Etiology, Clinical	





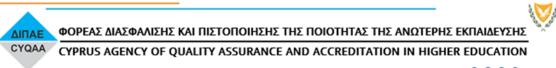


Infections, Assessment, Interventions) • Mental Health Disorders and Substance Abuse (Perinatal Mental Health Disorders, mood Disorders, Postpartum Depression, Screening for postpartum Depression, Postpartum Psychosis Laboratory: 13 hours in total Birth Simulation in the Victoria simulator. This includes evidence-based scenarios designed to help the students maximize learning through outcome-focused simulated clinical patient encounters. These scenarios includes:
 Amniotic Fluid Embolism Breech Vaginal Delivery Placental Abruption Postpartum Hemorrhage Preeclampsia Prolapsed Cord Shoulder Dystocia
Face-to- face
 Lowdermilk D. L., Perry S.E., Cashion M.C., Alden K.R. (2015). Maternity and Women's Health Care. 11th ed. St Louis: Mosby Marshall J.E., Raynor M.D. (2014). Myles Textbook for Midwives 16th Edition, Churchill Livingstone Johnson, R. & Taylor, W. (2011) Skills for Midwifery Practice. 3rd ed., Edinburgh: Churchill Livingstone Tharpe N.L., Farley C.L., Jordan R.G. (2016) Clinical Practice Guidelines for Midwifery & Women's Health 5th Edition, Burlington: Jones & Bartlett Learning Cunningham F.G., Leveno K.J., Bloom S.L., Dashe J.S., Hoffman B.H., Casey B.M., Spong C.Y. (2018). Williams Obstetrics, 25th Edition, USA: McGraw-Hill Education Perry S.E., Hockenberry M.J., Lowdermilk D.L., Wilson D., Alden K.R., Cashion M.C. (2017). Maternal Child Nursing Care 6th Edition, St Louis: Mosby Simpson K.R., Creehan, P.A. (2013). AWHONN's Perinatal Nursing Fourth Edition, Fourth edition, Philadelphia: Lippincott Williams & Wilkins Ricci S. (2016). Essentials of Maternity, Newborn, and Women's Health Nursing, Philadelphia: Lippincott Williams & Wilkins Davidson M., London M.L., Ladewig P.W. (2019). Olds' Maternal-Newborn Nursing & Women's Health Across the Lifespan, 11th Edition, UK: Pearson Forrest E. (2019). Midwifery at a Glance, 1st Edition, Oxford: Wiley-Blackwell



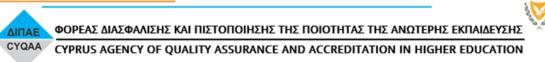


	 Murray S.S. & McKinney E.S. (2 Newborn and Women's He Philadelphia: Saunders Elsevier Blackburn S. (2018). Maternal, Fe Edition, A Clinical Perspective, F 	ealth Nurs etal, & Neon	ing, 7th Edition, atal Physiology, 5th
Assessment	Exams	50%	
	Assignments (8.000 words, without including in the word count the abstract, references and cover page)	40%	
	Class Participation and attendance	10%	
	Total	100%	
Language	Greek		





Course Title	Methodology Research and Biostatistics				
Course Code	NUR600	NUR600			
Course Type	Compulso	ory			
Level	Master (2	end Cycle)			
Year / Semester	1 st Year/1	st semester			
Teacher's Name	Dr Konsta	antinos Giannako	u		
ECTS	10	Lectures / week	2 hours/14 weeks	Laboratories / week	1 hour/14 weeks
Course Purpose and Objectives	The purpose of this course is to provide students a deeper understanding of the basic concepts, skills and methods used in epidemiological research. The main goal of the course is to provide students with a thorough understanding of the qualitative, quantitative, and mixed methods that can be adopted during research. Students will also gain skills in formulating a research question, searching for relevant literature in established databases, and critically analyzing research articles. The course also aims to introduce students to the basic concepts of biostatistics (e.g., variable and data, population and sample, sample estimation and population parameter, etc.) as well as analytical procedures (e.g., confidence intervals, hypothesis testing and parametric and non-parametric statistical tests, etc.). The statistical methods will be applied to various datasets, including basic science, clinical, epidemiological, etc., using statistical software (particularly				
Learning Outcomes	 clinical, epidemiological, etc., using statistical software (particularly SPSS). Upon successful completion of the course, students will be able to: Apply the principles and concepts of epidemiology as a discipline in the study of population health Calculate, apply, and interpret epidemiological measures Examine the different types of bias in epidemiological studies and examine how they can lead to misleading findings and the methods to avoid them Analyze the design features and uses of epidemiological studies (experimental and observational), their advantages and advantages Discuss the ethical issues that arise during the design and execution of a research and the ways to deal with them 				



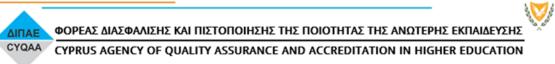


	 Analyze the basic steps of designing a research protocol Examine the methods of systematic review, ways of analysis and interpretation of the results of such studies Implement a systematic and detailed search of the literature for the identification of epidemiological studies Critically evaluate epidemiological studies and determines their use based on scientific evidence Properly prepares data and performs numerical and graphical data summarization methods Select and apply appropriate statistical methods for single-variable and bi-variable data analysis with continuous and categorical data Select and apply multivariate statistical analysis Use SPSS and other statistical software as tools necessary for research Critically evaluate the statistical methodology used in epidemiological studies and interpret the results tables and diagrams presented in these studies 		
Prerequisites	None Co-requisites None		
Course Content	 Description: Introduction to epidemiology and the basic epidemiological concepts Epidemiological measures (e.g., measures of frequency, measures of effect, etc.) Introduction to research and description of research types (qualitative, quantitative, mixed methods) Types of studies: ecological studies, cross-sectional studies, case-control studies, cohort studies, clinical trials Research protocol and sampling methods Data collection tools (questionnaires, interviews, etc.): tool development, reliability, and validity of measurements Internal and external validity Ethical issues in research Introductory concepts in biostatistics and data types Descriptive Statistics: description of data in frequency tables, charts, and numerical summary measures Inferential statistics: single-variable and bi-variable data analysis with continuous and categorical data Linear models and regression models 		
Teaching Methodology	Face- to- face		
Bibliography	Webb P and Bain C. Essential Epidemiology. An Introduction to Students and Health Professionals 2nd Edition. Cambridge University Press, Cambridge,		





	 Bowers D., Fundamental concepts in biostatistics. Thomas, J.R., Nelson, J.K. & Silverman, S.J. Research Methods in Physical Activity, 6th edition, Human Kinetics, Champaign, Illinois, USA. ISBN-13: 9780736089395; e-book: 9781450400374 Introduction to health professionals. Greek editing - Nikos Middleton. Medical Publications Paschalidis, Athens. Galanis P, Sparos L. Epidemiology Manual. Medical Publications BETA, Christiana Darviri. Methodology of research in the field of health, Medical publications Paschalidis, Athens, Greece. ISBN-13: 9789603999157
Assessment	Exams: 60% Assignments: 30% Class Participation and Attendance: 10%
Language	Greek





Course Title	Practical Exercise of Midwifery II				
Course Code	MID640	MID640			
Course Type	Compulsory	Compulsory			
Level	Master (2 nd Cycl	e)			
Year / Semester	2nd year / 3rd semester				
Teacher's Name	Mr Christos Vrakas				
ECTS	Lectures / week N/A Laboratories / week 494 hours in the clinical setting				
Course Purpose and objectives	To enable the student to put theory into practice with documented clinical practice (through clinical case studies) and to acquire specialized knowledge, skills, abilities and attitudes to safely provide individualized and holistic care to the pregnant woman, fetus, the childbearing woman, the newborn and to the woman during puerperium. The program aims at a high level of clinical competence through scientifically / research-based midwifery practice, the development of competent midwives in accordance with the legislation and international standards of midwifery education and practice of the International Confederation of Midwives and the European Directive 2005/36				

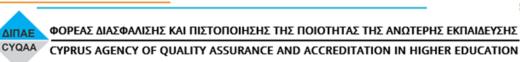




Learning Outcomes	The purpose of the clinical placement is to develop and cultivate the appropriate abilities and skills of students for the implementation of the principles of midwife in clinical practice.			
	Upon successful completion of the clinical practice the student will be able to:			
	Monitor a normal pregnancy and perform tests necessary to diagnose and monitor the progress of a normal pregnancy.			
	Evaluate and advise on diagnosis of a high-risk		ninations for the earliest possible	
	 Implement with safety, by the doctor. 	professionalism and	quality the treatment prescribed	
	Implement the relevant conduct.	legislation, midwifery	ethics and professional	
	Examine and provide advanced midwifery care to the newborn taking the necessary initiatives in case of need and performs immediate resuscitation where needed.			
	Document and record a the necessary files in co		uments for each case and keeps tronic form.	
	Cultivate a sense of cool	operation with other I	nealth care professionals.	
Prerequisites	MID600, MID605	Co-requisites	None	
Course	Clinical Practice in the follow	ving wards:		
Content	Ultrasound Department - 70	hours		
	Gynecological Ward - 105 hours			
	Surgery Theatres (Obstetrics	s and gynecology su	geries) - 70 hours	
	High Risk Pregnancy Depart	ment - 144 hours		
	Neonatal Intensive Care Uni	t (NICU) - 105 hours		
	During their placement, the students develop and cultivate the appropriate abilities and skills to implement the principles of midwifery in real working conditions.			
	Familiarity with the use of ultrasound			
	 Identification of the physiology and pathology of the fetus using ultrasound imaging 			
		about whether intervention is required (eg Amniocentesis, CVS (chorionic		

Use of computer programs used to record measurements during the 1st,

2nd and 3rd trimester ultrasound.





- Practical exercise related to gynecological examinations.
- Recognition of pathology in terms of gynecology (ovarian cysts, uterine and cervical Cancer, uterine prolapse, reproductive system infections).
- Management of Ectopic Pregnancy / Miscarriage / Threatened / Incomplete
 / Complete / recurrent / induced Abortion / missed abortion
- Therapeutic Termination of Pregnancy
- Molar Pregnancy / Trophoblastic Disease
- Postpartum infection / fever during puerperium
- Female Reproductive Infections / Sexually Transmitted Diseases
- Technique for taking and evaluating Pap tests
- Contraceptive methods / IUD
- Design and administration of appropriate medication based on the treatment sheet.
- Preoperative and Postoperative care of women undergoing gynecological surgeries
- Cooperation with the surgical team.
- Recognition of abnormal conditions during pregnancy and their management. (preeclampsia, threatened pregnancy, 1st, 2nd, 3rd trimester bleeding, oligohydramnios, polydramnios, etc.)
- Familiarization and use of the external Cardiotocography.
- Counseling of the pregnant woman and her family related to the pathological condition of the pregnant woman.
- Administration of medication to the pregnant woman depending on the pathological condition with which the pregnancy is complicated.
- Care and feeding of premature newborn.
- Feeding in an intubated newborn
- Familiarity with respiratory support machines such as CPAP
- Newborn resuscitation in emergencies.
- Planning, providing care, re-evaluating the midwifery care provided to the pregnant woman.
- Description of proper nutrition and description of the nutrients required for optimal nutrition of the mother during pregnancy. Counseling for the hygiene, exercise, sexual activity of the pregnant woman.
- Promoting the health of the pregnant woman and strengthening the family
- Cooperation with the midwifery team





	Design of preparation programs for parenthood and autonomous participation.
Teaching Methodology	494 hours in the clinical setting
Bibliography	 Lowdermilk D. L., Perry S.E., Cashion M.C., Alden K.R. (2015). Maternity and Women's Health Care. 11th ed. St Louis: Mosby Johnson, R. & Taylor, W. (2011) Skills for Midwifery Practice. 3rd ed., Edinburgh: Churchill Livingstone Cunningham F.G., Leveno K.J., Bloom S.L., Dashe J.S., Hoffman B.H., Casey B.M., Spong C.Y. (2018). Williams Obstetrics, 25th Edition, USA: McGraw-Hill Education Perry S.E., Hockenberry M.J., Lowdermilk D.L., Wilson D., Alden K.R., Cashion M.C. (2017). Maternal Child Nursing Care 6th Edition, St Louis: Mosby Murray S.S. & McKinney E.S. (2018). Foundations of Maternal-Newborn and Women's Health Nursing, 7th Edition, Philadelphia: Saunders Elsevier Blackburn S. (2018). Maternal, Fetal, & Neonatal Physiology, 5th Edition, A Clinical Perspective, Philadelphia: Saunders Elsevier Blumenthal P. and Berek J. (2013). A Practical Guide to Office Gynecologic Procedures. Brancel M. (2017). Newborn Primary care Guidelines. 24th annual edition.
Assessment	Continuous assessment in the Clinical Setting Assignments: (8.000 words, without including in the word count the abstract, references and cover page) Total
Language	Greek





Course Title	Practical Exercise of Midwifery III				
Course Code	MID655	MID655			
Course Type	Compulsory				
Level	Master (2 nd Cy	rcle)			
Year / Semester	2 nd year /4 th s	2 nd year /4 th semester			
Teacher's Name	Mr Christos Vr	Mr Christos Vrakas			
ECTS	10 Lectures / Week N/A Laboratories / Week 462* hours				
Course Purpose and Objectives	practice (throuskills, abilities the pregnant volume during puerpe through scient competent mistandards of	igh clinical case and attitudes to woman, fetus, wrium. The progrifically / research	e studies) ar safely proving comen in laboram aims at ch-based micordance with ducation ar	nd to acquire spide individualize to the newborn out, the newborn a high level of dwifery practice the the legislation of practice of	documented clinical pecialized knowledge, ed and holistic care to orn and to the woman of clinical competence e, the development of on and international of the International 2005/36







Learning Outcomes	The purpose of the clinical placement is to develop and cultivate the appropriate abilities and skills of students for the implementation of the principles of midwifery in clinical practice.				
	Upon successful completion of the clinical practice the student will be able to:				
	Prioritize the midwifery interventions and develop a midwifery care plan to prevent, reduce or resolve the problems identified.				
	Evaluate the results of the midwifery care provided, redesign when necessary and document all midwifery interventions.				
	Evaluate, examine, monitor and provide advanced midwifery care to the childbearing woman and fetus during delivery using appropriate clinical and technical means.				
	 Manage and conduct autonomous normal births, including episiotomy, where necessary, and its suturing, and in emergency deliveries in breech presentation. 				
	Recognize warning signs of an abnormal or potentially abnormal condition in the woman in labour or in the fetus / newborn, calls for medical help and assists in medical intervention where appropriate.				
	Takes the necessary urgent measures in the absence of a doctor and especially the manually separation of the placenta that may be followed by a finger examination of the uterus.				
	Apply principles and skills of teaching, effective communication and counselling, research, management and administration.				
	Recognize the cultural differences of pregnant women, women in labour and postpartum mothers.				
	Document and record all the necessary documents for each case and keeps the necessary files in conventional and electronic form.				
	Implement the relevant legislation, midwifery ethics and professional conduct.				
Prerequisites	D600, MID605 Co-requisites None				





Course Content	Clinical practice in the Delivery Room - 462 hours				
	During their placement, the students develop and cultivate the appropriate abilities and skills to apply the principles of midwifery in real working conditions				
	Evaluation of the childbearing woman before and during childbirth.				
	Identification of signs of onset of labor.				
	Cooperation with the midwifery team.				
	Correct and timely completion of childbirth monitoring forms.				
	Learning of vaginal examination and recognition of dilation, effacement, quality and length of the cervix, station of the fetus presenting part, etc.				
	Administration of medication based on medical instructions.				
	Use of continuous cardiotocography during childbirth and recognition of abnormal or reassuring conditions (eg fetal distress, fetal tachycardia, uterine hypertonia).				
	Planning, evaluation and provision of appropriate care based on the needs of the woman in labour.				
	Autonomous management and performance of a low risk delivery.				
	 Episiotomy and perineal suturing when required. 				
	Placenta evaluation.				
	Management of abnormal conditions after childbirth (eg postpartum hemorrhage, uterine atony, etc.)				
	Neonatal evaluation and resuscitation if needed. Administration of vitamin K and instillation of eye drops for the prevention of gonococcal infection				
	Psychological support on woman in labour.				
Teaching Methodology	462 * in clinical placement				
	*The minimum hours required based on the European Guidelines. Students may have to complete more hours in order to complete all the necessary requirements of their clinical practice.				





Bibliography	 Lowdermilk D. L., Cashion M.C., Perry Olshansky E. (2021). Φροντίδα Μητρότ (Επιμέλεια: Άννα Δελτσίδου, Γιαννούλ Εκδόσεις Λαγός Δημήτριος, Αθήνα Lowdermilk D. L., Cashion M.C., Perry Olshansky E. (2020). Maternity and Wo Edition, St Louis: Mosby Marshall J.E., Raynor M.D. (2014). Myles Edition, Churchill Livingstone Johnson, R. & Taylor, W. (2011) Skills for Edinburgh: Churchill Livingstone Tharpe N.L., Farley C.L., Jordan R.G. (20 for Midwifery & Women's Health 5th Editi Learning Murray S.S. & McKinney E.S. (2018). For Newborn and Women's Health Nursing Saunders Elsevier Blackburn S. (2018). Maternal, Fetal, & Edition, A Clinical Perspective, Philade 	rητας και Υ α Κύρκου) S.E., Alder men's Hea s Textbook r Midwifery 016) Clinica on, Burling oundation g, 7th Editi	Υγείας των Γυναικών, 12 ^η έκδοση, n K.R. and Ellen alth Care, 12th for Midwives 16th Practice. 3rd ed., al Practice Guidelines ton: Jones & Bartlett s of Maternal-on, Philadelphia: Physiology, 5th
Assessment	Continuous assessment in the Clinical Setting	50%	
	Assignments (8.000 words, without including in the word count the abstract, references and cover page)	50%	
	Total	100%	
Language	Greek		



ΦΟΡΕΑΣ ΔΙΑΣΦΑΛΙΣΗΣ ΚΑΙ ΠΙΣΤΟΠΟΙΗΣΗΣ ΤΗΣ ΠΟΙΟΤΗΤΑΣ ΤΗΣ ΑΝΩΤΕΡΗΣ ΕΚΠΑΙΔΕΥΣΗΣ CYQAA CYPRUS AGENCY OF QUALITY ASSURANCE AND ACCREDITATION IN HIGHER EDUCATION



Course Title	Gynecology and reproduction and assisted reproductive technology (ART) and Health Promotion					
Course Code	MID665					
Course Type	Elective					
Level	Master (2 nd Cycle)					
Year / Semester	2 nd year / 4 th semester					
Teacher's Name	Dr Anna Deltsidou					
ECTS	10 Lectures / 3 Hours/14 Laboratories None Week / week					
Course Purpose and Objectives	The objective of this course is to educate students for issues related on women's reproductive and sexual health and on reproductive and sexual rights. The course includes topics for the women's and of couples' health promotion, family planning, prevention and detection of gynecologic problems, conditions and disorders such as: violence, female genital mutilation, STDs, menopause, climacteric, benign and malignant diseases, infertility, assisted reproductive technology, and health promotion of the Woman Across the Life Span.					
Learning Outcomes	 Upon successful completion of this course students are expected to be able to: Describe strategies for promoting of women's reproductive and sexual health Describe the care of women with genital mutilation Explain the types of abortions and describe the post abortion care of a woman. Analyse ways to prevent and treat the child and adolescent gynaecologic disorders. Describe ways to detect and deal with domestic and other forms of violence against women Organize educational programs on climacteric, menopause, family planning, contraception and osteoporosis in women Recognize the factors of female and male infertility Analyze the assisted reproductive techniques Present common health conditions of women, their detection, prevention and management (menstruation, PMS, infertility). Describe other common diseases of women, screening, prevention and treatment (gynaecological cancer, breast cancer). Explain the importance of health education and health promotion in Midwifery 					





	Identify and evaluate factors and practices that contribute to health promotion					
Prerequisites	None	Co-requisites	None			
Course Content	 Caring for Promote He Sexually T screening a Family Plant Right to a adolescent Female ger and other for Infertility, In male infertility Climacteric Diseases of Common I treatment) Structural Reproductive (gynecological greast Diseases of Conditions o	ealth and Prevent Disease ransmitted viral and back and diagnosis, management and gand Contraception. Other and safe termination gynecology. In a mutilation of the female reproductive the female reproductive health conditions of wo Abnormal uterine bleeding Abnormalities and New System, screening ical cancer).	the Life Span: The Need to cterial Infections (prevention, nt. Contraceptive methods on of pregnancy. Child and treatment of domestic violence omen. The death of the state of			
Teaching Methodology	Face-to- face					
Bibliography	Matern Edition Blackl Physic Philad Lowde Ellen Υγείας Γιαννο Δημήτ Lowde Ellen Care, Lowde Matern London W., Bir	nal-Newborn and Womn, Philadelphia: Saunder ourn S. (2018). Mater ology, 5th Edition, lelphia: Saunders Elsevie ermilk D. L., Cashion M.C. Olshansky E. (2021). Των Γυναικών (Επρύλα Κύρκου), 12 ^η έπριος, Αθήνα ermilk D. L., Cashion M.C. Olshansky E. (2020). Mater old Edition, St Louis: Material M.C. Cashion W.C. on M.C. Cashion, St., Cashity and Women's Health Community and Women's Health Community.	s Elsevier ernal, Fetal, & Neonatal A Clinical Perspective, er, Perry S.E., Alden K.R. and Φροντίδα Μητρότητας και ιμέλεια: Άννα Δελτσίδου, έκδοση, Εκδόσεις Λαγός, Perry S.E., Alden K.R. and ternity and Women's Health osby shion M.C., Alden K.R. (2015). care. 11th ed. St Louis: Mosby			







	Davidson M., London M.L., Ladewig P.W. (2019). Olds' Maternal-Newborn Nursing & Women's Health Across the Lifespan, 11th Edition, UK: Pearson					
Assessment	Final exam:	50%				
	Assignment: (8.000 words, without including in the word count the abstract, references and cover page)	40%				
	Class Participation and Attendance	10%				
	Total:	100%				
Language	Greek					





Course Title	Evidenced Based Clinical Midwifery Practice				
Course Code	MID675				
Course Type	Elective				
Level	Master (2 nd (Cycle)			
Year / Semester	2 nd year / 4 th	semester			
Teacher's Name	ТВА				
ECTS	10	Lectures / week	3 Hours/14 Weeks	Laboratories / week	None
Course Purpose and Objectives	Clinical Midv	vifery Practice		activation to ir	he Evidenced Based htroduce innovations
Learning Outcomes	 Upon successful completion of this course students should be able to: Give the definition of the Evidenced Based Clinical Midwifery Practice Determine the steps of the Evidenced Based Clinical Midwifery Practice Describe the steps of the Evidenced Based Clinical Midwifery Practice Explain the way of applying in practice of the Evidenced Based Clinical Midwifery Practice Analyse clinical guidelines: from development to applying Explain the benefits of the Evidenced Based Clinical Midwifery Practice Analyze the goals of the clinical guidelines Describe the role of the Development and Supervising Team Analyze the ways of collecting and analyzing of data Describe the ways of evaluation and protocol application 				
Prerequisites	None	Со	-requisites	None	
Course Content	 Definition of the Evidenced Based Clinical Midwifery Practice and its necessity for an effective care providing The steps of the Evidenced Based Clinical Midwifery Practice, First step and second step: Clinical thesis statement, relative evidence finding Third step: quantitative and qualitative critical thinking of the Evidence and decision-making The interests, the patient choices and the clinical critical thinking of the Evidenced Based Clinical Midwifery Practice Fourth and fifth step: Model and strategies use for the Evidenced Based Clinical Midwifery Practice Use of the Evidenced Based Clinical Midwifery Practice: instruments for enhancement of the Clinical Midwifery Practice 				





	 The next steps: production and dissemination of the evidence by conducting quantitative studies Production and dissemination of the evidence by conducting qualitative studies Production of results from programs coordination Writing an effective research project for funding and coordination programs Disseminating the evidence Culture development compatible with the Evidenced Based Clinical Midwifery Practice: Teaching the Evidenced Based Clinical Midwifery Practice, Vision development and motivation to incorporate the Evidenced Based Clinical Midwifery Practice in individual and organizational level. 							
Teaching Methodology	Face-to- face							
Bibliography	 Melnyk B.M., and Fineout-Overholt E. (2018). Evidence-Based Practice in Nursing & Healthcare: A Guide to Best Practice, 4th edition, Lippincott Williams & Wilkins Marshall J.E., Raynor M.D. (2014). Myles Textbook for Midwives 16th Edition, Edinburg: Churchill Livingstone Tharpe N.L., Farley C.L., Jordan R.G. (2016) Clinical Practice Guidelines for Midwifery & Women's Health 5th Edition, Burlington: Jones & Bartlett Learning Melnyk B.M., Fineout-Overholt E. (2014), Evidence-Based Practice in Nursing & Healthcare: A Guide to Best Practice, Second Edition, Philadelphia: Lippincott Williams & Wilkins Malloch K., Porter-O'Grady T. (2010). Introduction to Evidence-Based Practice in Nursing and Health. Jones and Bartlett Publishers Christenbery T.L. (2017). Evidence-Based Practice in Nursing. Foundations, Skills, and Roles, NY: Springer Publishing Company Dawes T., Davies P., and Gray A. (2005). Evidence-Based Practice: A Primer for Health Care Professionals (Evidence-Based Practice). Churchill Livingstone Publishers. Levin R., Feldman H. (2006). Teaching Evidence-Based Practice in Nursing: A Guide for Academic and Clinical Settings. Springer Publishing Company. McDaid C. (2000). Clinical Effectiveness and Evidence-based Nursing, Midwifery and Health Visiting: Barriers, Resources and Practical Implications. Publisher: NIPEC Malloch K., Porter-O'Grady T. (2006). Introduction to Evidence-Based Practice in Nursing and Health Care. Jones and Barlett Publishers. Hall H.R., Roussel L.A. (2020). Evidence-Based Practice: An Integrative Approach to Research, Administration, and Practice: An Integrative Approach to Research, Administration, and Practice; 3rd 							







Assessment	Examinations: Assignment: (8.000 words, without including in the word count the abstract, references and cover page) Class Participation and Attendance	50% 40% 10%	
	Total:	100%	
Language	Greek		



ΦΟΡΕΑΣ ΔΙΑΣΦΑΛΙΣΗΣ ΚΑΙ ΠΙΣΤΟΠΟΙΗΣΗΣ ΤΗΣ ΠΟΙΟΤΗΤΑΣ ΤΗΣ ΑΝΩΤΕΡΗΣ ΕΚΠΑΙΔΕΥΣΗΣ CYQAA CYPRUS AGENCY OF QUALITY ASSURANCE AND ACCREDITATION IN HIGHER EDUCATION





Course Title	Community Midwifery, Cross-cultural Midwifery				
Course Code	MID670				
Course Type	Elective				
Level	Master (2 nd C	Cycle)			
Year / Semester	2 nd year / 4 th	semester			
Teacher's Name		asiliou-Anna [
ECTS	10	Lectures / week	3 Hours/14 Weeks	Laboratories / week	None
Course Purpose and Objectives	Cross-Cultur	al Midwifery (issues related to the ment of the perinatal
Learning Outcomes	Cross-Cultural Midwifery Care focusing on the improvement of the perinatal care in the community Upon successful completion of this course students should be able to: • Analyze the methods of community assessment • Determine the health indicators of the community • Describe the care focused on the total population or on population groups • Discuss the role of the midwife in the community • List the strategies of the effective midwifery care in the community during the antenatal care • Explain the criteria for the low and high risk pregnancies • Describe ways of choice and referral of pregnant women in the hospital • Organize and perform home deliveries and deliveries in birth centers • Describe the immediate care for the mother and newborn • Report midwifery interventions concerning the care of the mother and newborn • Discuss the strategies for breastfeeding promotion • Organize and plan home visits during the postpartum period • Explain the Cross-cultural theories • Describe the Cross-cultural approaches in pregnancy • Explain the pain management during the labor in various cultures • Describe the cultural theories for the childbearing woman, the postpartum woman and the neonate				
Prerequisites	None	Co	-requisites		None
Course Content	Methods of community assessment Health indicators of the community				





	 Care focused on the total population or on population groups Role of the midwife in the community Strategies of the effective midwifery care during the antenatal care in the community setting Criteria for the low and high risk pregnancies Ways of choice and referral of pregnant women in the hospital Perform home deliveries and deliveries in birth centers Immediate care of the mother and neonate Midwifery interventions concerning the care of the mother and neonate Strategies for breastfeeding promotion Home visits during the postpartum period Cross-cultural theories Cross-cultural communication in Midwifery Cultural approaches in pregnancy Cultural theories for the childbearing woman, the postpartum woman and the neonate 					
Teaching Methodology	Face-to- face					
Bibliography	 Lowdermilk D. L., Perry S.E., Cashion M.C., Alden K.R. (2015). Maternity and Women's Health Care. 11th ed. St Louis: Mosby Marshall J.E., Raynor M.D. (2014). Myles Textbook for Midwives 16th Edition, Churchill Livingstone Johnson, R. & Taylor, W. (2011) Skills for Midwifery Practice. 3rd ed., Edinburgh: Churchill Livingstone Perry S.E., Hockenberry M.J., Lowdermilk D.L., Wilson D., Alden K.R., Cashion M.C. (2017). Maternal Child Nursing Care 6th Edition, St Louis: Mosby Simpson K.R., Creehan, P.A. (2013). AWHONN's Perinatal Nursing Fourth Edition, Fourth edition, Philadelphia: Lippincott Williams & Wilkins Ricci S. (2016). Essentials of Maternity, Newborn, and Women's Health Nursing, Philadelphia: Lippincott Williams & Wilkins O'Meara A. (2018). Maternity, Newborn, and Women's Health Nursing. A Case-Based Approach, Philadelphia: Lippincott Williams & Wilkins Silbert-Flagg J., Pillitteri A. (2017). Maternal and Child Health Nursing. Care of the Childbearing and Childrearing Family, Philadelphia: Lippincott Williams & Wilkins London M.L., Ladewig P.W., Davidson M., Ball J. W., Bindler R.C., Cowen K. (2016). Maternal & Child Nursing Care, 5th Edition, UK: Pearson Davidson M., London M.L., Ladewig P.W. (2019). Olds' Maternal-Newborn Nursing & Women's Health Across the Lifespan, 11th Edition, UK: Pearson Forrest E. (2019). Midwifery at a Glance, 1st Edition, Oxford: Wiley-Blackwell 					





	 Murray S.S. & McKinney E.S. (2018). Foundations of Maternal-Newborn and Women's Health Nursing, 7th Edition, Philadelphia: Saunders Elsevier Blackburn S. (2018). Maternal, Fetal, & Neonatal Physiology, 5th Edition, A Clinical Perspective, Philadelphia: Saunders Elsevier 						
Assessment	Examinations:	50%					
	Assignment: (8.000 words, without including in the word count the abstract, references and cover page)	40%					
	Class Participation and Attendance						
	Total: 100%						
Language	Greek						



ΦΟΡΕΑΣ ΔΙΑΣΦΑΛΙΣΗΣ ΚΑΙ ΠΙΣΤΟΠΟΙΗΣΗΣ ΤΗΣ ΠΟΙΟΤΗΤΑΣ ΤΗΣ ΑΝΩΤΕΡΗΣ ΕΚΠΑΙΔΕΥΣΗΣ CYQAA CYPRUS AGENCY OF QUALITY ASSURANCE AND ACCREDITATION IN HIGHER EDUCATION



Course Title	Midwifery Care Units' Management, Midwives' Professional Development					
Course Code	MID680					
Course Type	Elective					
Level	Master (2 nd (Cycle)				
Year / Semester	2 nd year / 4 th	semester				
Teacher's Name	Maria Prodro	omou				
ECTS	10	Lectures / week	3 Hours/14 Weeks	Laboratories / week	None	
Course Purpose and Objectives	the Midwifer them with the	y Care Units ne adequate i	and for the present	oreparation of ore	the management of executives providing ation knowledge and ad public sector.	
Learning Outcomes	 Explain t Describe Explain t Leadersh Analyze Care ser Describe Units Plan the Describe Organiza Identify a Care Ser Suggest and Heal Describe 	 Describe and analyze the Basic Functions of Management Explain the Management as a Process of Decision-making and as a Leadership Analyze the Fundamentals and the Management Model of Health Care services Describe the Functions of the Management in the Midwifery Care Units Plan the needs for Human Resources in the Midwifery Care Units 				
Prerequisites	None Co-requisites None					
Course Content	 The concept of an organization management The basic functions of management The management as a process of decision-making and as a leadership The fundamentals and the management model of health care services The functions of management in a health care services organization Management and human resources of a health care services 					







	organization • Fundamentals of economic management of health care organizations— and particularly of hospitals • Health and marketplace of health care services • Health insurance and health care services • Organization and funding of health care services and health care system • Organization of health care system in Greece and in Cyprus • The expenses for the health care services					
Teaching Methodology	Face-to- face					
Bibliography	 Zimmerman D. L., Osborn-Harrison D.G. (2016). Person-Focused Health Care Management: A Foundational Guide for Health Care Managers, NY: Springer Publishing Company Henwood S. (2014). Practical Leadership in Nursing and Health Care: A Multi-Professional Approach, London: Routledge Taylor & Francis Group Gray M. (2014). Practical Skills for Mentoring in Healthcare: A Guide for Busy Practitioners, Red Globe Press Silbert-Flagg J., Pillitteri A. (2017). Maternal and Child Health Nursing. Care of the Childbearing and Childrearing Family, Philadelphia: Lippincott Williams & Wilkins London M.L., Ladewig P.W., Davidson M., Ball J. W., Bindler R.C., Cowen K. (2016). Maternal & Child Nursing Care, 5th Edition, UK: Pearson Davidson M., London M.L., Ladewig P.W. (2019). Olds' Maternal-Newborn Nursing & Women's Health Across the Lifespan, 11th Edition, UK: Pearson 					
Assessment	Examinations:	50%				
	Assignment: (8.000 words, without including in the word count the abstract, references and cover page) 40%					
	Class Participation and Attendance 10% Total: 100%					
Language	Greek					

ANNEX III: CLINICAL PRACTICE

Course Title	Practical Exercise of Midwifery I					
Course Code	MID625	MID625				
Course Type	Compulsory					
Level	Master (2 nd Cy	cle)				
Year / Semester	1 st year /2 nd s	emester				
Teacher's Name	Mr Christos Vr	akas				
ECTS	10	Lectures / week	574 hours	Laboratories / week	None	
Course Purpose and Objectives	To enable the student to put theory into practice with documented clinical practice (through clinical case studies) and to acquire specialized knowledge, skills, abilities and attitudes to safely provide individualized and holistic care to the pregnant woman, fetus, women in labour, the newborn and to the woman during puerperium. The program aims at a high level of clinical competence through scientifically / research-based midwifery practice, the development of competent midwives in accordance with the legislation and international standards of midwifery education and practice of the International Confederation of Midwives and the European Directive 2005/36					
Learning Outcomes	The purpose of the clinical placement is to develop and cultivate the appropriate abilities and skills of students for the implementation of the principles of midwifery in clinical practice. Upon successful completion of the clinical practice the student will be able to Provide a preparation program for the parental role, with information regarding pregnancy, childbirth, puerperium, newborn care and family					
	 Apply adv years, bef including t Provide re education 	ent vanced and sa ore conception the newborn cases	afe midwife n, during pro are. information adolescend	ry care to wo egnancy, child on reproducti	omen in reproductive lbirth and puerperium ve and sexual health se, including infertility,	





	 Identify and prioritize the real or potential problems of women and families with a high risk pregnancy, the factors that cause or contribute to these problems and to express them in the form of midwifery diagnoses. Examine, provide advanced midwifery care and monitor the mother and newborn during the postpartum period, providing the mother with newborn care counseling in order to empower her and to ensure the best possible development and well being of her child. Appreciate the necessity and usefulness of lifelong learning for personal and professional development. Apply principles and skills of teaching, effective communication and counselling, research, management and administration. 				
Prerequisites	MID600, MID605	es	None		
Course Content	Clinical practice in the following ward Perinatal Care Clinic: 216 hours Prenatal care and child welfare center Postpartum Ward (Care of Mothers a	rs :70 hours			
	During their placement, the studer abilities and skills to apply the princip	•	• • • •		
	Taking a health history in the first	st visit.			
	Examination, evaluation and pla on the pregnant woman's needs		pregnant woman's visits based		
	Planning, provision, reevaluation of the midwifery care provided to the pregnant woman and its results.				
	Description of proper nutrition and description of the nutrients required for optimal nutrition of the mother during pregnancy. Advice on hygiene, exercise, sexual activity of the pregnant woman.				
	Promoting the health of the pregnant woman and strengthening the family				
	Advice to pregnant women regarding the treatment of the symptoms of the first trimester of pregnancy. E.g. hyperemesis gravidarum, morning sickness etc.				
	Recognition of abnormal conditions in early pregnancy such as albuminuria.				
	Cooperation with the midwifery team.				
	Preparation programs for parenthood and autonomous participation.				





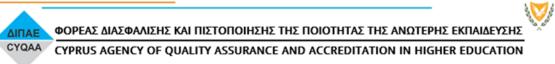
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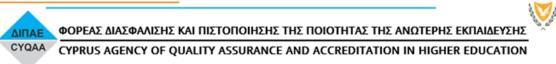


Assessment			
	Continuous assessment in the Clinical Setting	50%	
	Assignments(8.000 words, without including in the word count the abstract, references and cover page)	50%	
	Total	100%	
Language	Greek		





Course Title	Practical Exercise of Midwifery II				
Course Code	MID640				
Course Type	Compulsory				
Level	Master (2 nd C	ycle)			
Year / Semester	2 nd year / 3 rd semester				
Teacher's Name	Mr Christos Vrakas				
ECTS	Lectures / week 494 hours Laboratories / week None				
Course Purpose and bjectives	To enable the student to put theory into practice with documented clinical practice (through clinical case studies) and to acquire specialized knowledge, skills, abilities and attitudes to safely provide individualized and holistic care to the pregnant woman, fetus, the childbearing woman, the newborn and to the woman during puerperium. The program aims at a high level of clinical competence through scientifically / research-based midwifery practice, the development of competent midwives in accordance with the legislation and international standards of midwifery education and practice of the International Confederation of Midwives and the European Directive 2005/36				





Learning Outcomes	The purpose of the clinical placement is to develop and cultivate the appropriate abilities and skills of students for the implementation of the principles of midwifery in clinical practice. Upon successful completion of the clinical practice the student will be able to: Examine the normal pregnancy and perform tests necessary to diagnose and monitor the progress of a normal pregnancy. Evaluate and advise on the necessary examinations for the earliest possible diagnosis of a high-risk pregnancy. Implement with safety, professionalism and quality the treatment prescribed by the doctor. Implement the relevant legislation, midwifery ethics and professional conduct. Examine and provide advanced midwifery care to the newborn taking the necessary initiatives in case of need and performs immediate resuscitation where needed. Record all the necessary documents for each case and keeps the necessary files in conventional and electronic form.				
	Create a sense of co	Create a sense of cooperation with other health care professionals.			
Prerequisites	MID600, MID605	Co-requisites	None		
Course Content	Clinical Practice in the following wards: Ultrasound Department - 70 hours Gynecological Ward - 105 hours Surgery Theatres (Obstetrics and gynecology surgeries) - 70 hours High Risk Pregnancy Department - 144 hours Neonatal Intensive Care Unit (NICU) - 105 hours During their placement, the students develop and cultivate the apprabilities and skills to implement the principles of midwifery in real conditions. • Familiarity with the use of ultrasound • Identification of the physiology and pathology of the fetus using ultrasound imaging • Recognize pathological signs in the mother or fetus and make decabout whether intervention is required (eg Amniocentesis, CVS (civillus sampling)		p and cultivate the appropriate es of midwifery in real working logy of the fetus using		





- Use of computer programs used to record measurements during the 1st, 2nd and 3rd trimester ultrasound.
- Practical exercise related to gynecological examinations.
- Recognition of pathology in terms of gynecology (ovarian cysts, uterine and cervical Cancer, uterine prolapse, reproductive system infections).
- Management of Ectopic Pregnancy / Miscarriage / Threatened / Incomplete / Complete / recurrent / induced Abortion / missed abortion
- Therapeutic Termination of Pregnancy
- Molar Pregnancy / Trophoblastic Disease
- Postpartum infection / fever during puerperium
- Female Reproductive Infections / Sexually Transmitted Diseases
- Technique for taking and evaluating Pap tests
- Contraceptive methods / IUD
- Design and administration of appropriate medication based on the treatment sheet.
- Preoperative and Postoperative care of women undergoing gynecological surgeries
- Cooperation with the surgical team.
- Recognition of abnormal conditions during pregnancy and their management. (preeclampsia, threatened pregnancy, 1st, 2nd, 3rd trimester bleeding, oligohydramnios, polydramnios, etc.)
- Familiarization and use of the external Cardiotocography.
- Counseling of the pregnant woman and her family related to the pathological condition of the pregnant woman.
- Administration of medication to the pregnant woman depending on the pathological condition with which the pregnancy is complicated.
- Care and feeding of premature newborn.
- Feeding in an intubated newborn
- Familiarity with respiratory support machines such as CPAP
- Newborn resuscitation in emergencies.
- Planning, providing care, re-evaluating the midwifery care provided to the pregnant woman.
- Description of proper nutrition and description of the nutrients required for optimal nutrition of the mother during pregnancy. Counseling for the hygiene, exercise, sexual activity of the pregnant woman.
- Promoting the health of the pregnant woman and strengthening the family







	Cooperation with the midwifery team
	Design of preparation programs for parenthood and autonomous participation.
Teaching Methodology	494 hours in the clinical setting
Bibliography	 Netter's Μαιευτική και Γυναικολογία 2^η έκδοση (06/2019) Ευστράτιος Α. Ασημακόπουλος – Κλινική Υπερηχογραφία στη Μαιευτική και Γυναικολογία(2022) Αλέξανδρος Σωτηριάδης – Μαιευτική και Γυναικολογική Υπερηχογραφία (2022) Murray S.S. & McKinney E.S. (2018). Foundations of Maternal-Newborn and Women's Health Nursing, 7th Edition, Philadelphia: Saunders Elsevier Brancel M. (2017). Newborn Primary care Guidelines. 24th annual edition. Blackburn S. (2018). Maternal, Fetal, & Neonatal Physiology, 5th Edition, A Clinical Perspective, Philadelphia: Saunders Elsevier Brancel M. (2017). Newborn Primary care Guidelines. 24th annual edition.
Assessment	Continuous assessment in the Clinical Setting Assignments(8.000 words, without including in the word count the abstract, references and cover page) Total
Language	Greek





Course Title	Practical Exercise of Midwifery III					
Course Code	MID655	MID655				
Course Type	Compulsory	Compulsory				
Level	Master (2 nd Cy	rcle)				
Year / Semester	2 nd year /4 th semester					
Teacher's Name	Mr Christos Vrakas					
ECTS	10	Lectures / week N/A Laboratories / week 462* hours				
Course Purpose and Objectives	To enable the student to put theory into practice with documented clinical practice (through clinical case studies) and to acquire specialized knowledge, skills, abilities and attitudes to safely provide individualized and holistic care to the pregnant woman, fetus, women in labour, the newborn and to the woman during puerperium. The program aims at a high level of clinical competence through scientifically / research-based midwifery practice, the development of competent midwives in accordance with the legislation and international standards of midwifery education and practice of the International Confederation of Midwives and the European Directive 2005/36					



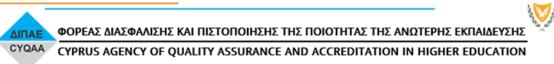


Learning Outcomes	The purpose of the clinical placement is to develop and cultivate the appropriate abilities and skills of students for the implementation of the principles of midwifery in clinical practice.				
	Upon successful completion of the clinical practice the student will be able to:				
	Prioritize the midwifery interventions and develop a midwifery care plan to prevent, reduce or resolve the problems identified.				
	Evaluate the results of the midwifery care provided, redesign when necessary and document all midwifery interventions.				
	Evaluate, examine, monitor and provide advanced midwifery care to the childbearing woman and fetus during delivery using appropriate clinical and technical means.				
	 Manage and conduct autonomous normal births, including episiotomy, where necessary, and its suturing, and in emergency deliveries in breech presentation. 				
	Recognize warning signs of an abnormal or potentially abnormal condition in the woman in labour or in the fetus / newborn, calls for medical help and assists in medical intervention where appropriate.				
	Takes the necessary urgent measures in the absence of a doctor and especially the manually separation of the placenta that may be followed by a finger examination of the uterus.				
	Apply principles and skills of teaching, effective communication and counselling, research, management and administration.				
	Recognize the cultural differences of pregnant women, women in labour and postpartum mothers.				
	Document and record all the necessary documents for each case and keeps the necessary files in conventional and electronic form.				
	Implement the relevant legislation, midwifery ethics and professional conduct.				
Prerequisites	MID600, MID605 Co-requisites None				





Course Content	Clinical practice in the Delivery Room - 462 hours	
	During their placement, the students develop and cultivate the appropriate abilities and skills to apply the principles of midwifery in real working conditions.	
	Evaluation of the childbearing woman before and during childbirth.	
	Identification of signs of onset of labor.	
	Cooperation with the midwifery team.	
	Correct and timely completion of childbirth monitoring forms.	
	Learning of vaginal examination and recognition of dilation, effacement, quality and length of the cervix, station of the fetus presenting part, etc.	
	Administration of medication based on medical instructions.	
	Use of continuous cardiotocography during childbirth and recognition of abnormal or reassuring conditions (eg fetal distress, fetal tachycardia, uterine hypertonia).	
	Planning, evaluation and provision of appropriate care based on the needs of the woman in labour.	
	Autonomous management and performance of a low risk delivery.	
	Episiotomy and perineal suturing when required.	
	Placenta evaluation.	
	Management of abnormal conditions after childbirth (eg postpartum hemorrhage, uterine atony, etc.)	
	Neonatal evaluation and resuscitation if needed. Administration of vitamin K and instillation of eye drops for the prevention of gonococcal infection	
	Psychological support on woman in labour.	
Teaching Methodology	462 * in clinical placement	
	*The minimum hours required based on the European Guidelines. Student may have to complete more hours in order to complete all the necessary requirements of their clinical practice.	





Bibliography	 Lowdermilk D. L., Cashion M.C., F Ellen Olshansky E. (2021). Φροντι Γυναικών (Επιμέλεια: Άννα Δελτσί έκδοση, Εκδόσεις Λαγός Δημήτρια McDonald S, Johnson G,. – Maye Φροντίδα. Πρίν, κατά τη διάρκεια και μ Oxorn-Foote – Τοκετός και Γέννηα Lowdermilk D. L., Cashion M.C., F Ellen Olshansky E. (2020). Matern 12th Edition, St Louis: Mosby Murray S.S. & McKinney E.S. (2020). Newborn and Women's Health Nu Saunders Elsevier Blackburn S. (2018). Maternal, Fe Edition, A Clinical Perspective, Ph 	ίδα Μητρά ίδου, Γιαν ός, Αθήνα 's Περιγεν μετά τον το ση, 6 ^η έκδο Perry S.E. hity and Wallshing, 7th tal, & Nec	νητική Μαιευτική νούλα Κύρκου), 12 ^η νητική Μαιευτική νοκετό. (2022) ση. (2019) Alden K.R. and vomen's Health Care, dations of Maternal-Edition, Philadelphia:
Assessment	Continuous assessment in the Clinical Setting	50%	
	Assignments(8.000 words, without including in the word count the abstract, references and cover page)	50%	
	Total	100%	
Language	Greek		

ANNEX IV: MIDWIFERY LOGBOOK



SCHOOL OF SCIENCES – DEPARTMENT OF HEALTH SCIENCES POSTGRATUADE PROGRAM IN MIDWIFERY STUDENT BOOK FOR CLINICAL TRAINING

STUDENT NAME/SURNAME:
REGISTRATION NUMBER:
STARTING DATE OF CLINICAL TRAINING:
COMPLETION DATE OF CLINICAL TRAINING:

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COURSE TITLE	ΠΡΑΚΤΙΚΗ ΑΣΚΗΣΗ – ΜΑΙΕΥΤΙΚΗΣ Ι, ΙΙ, ΙΙΙ
COURSE CODE	MID625, MID640, MID655
COURSE TYPE	COMPULSARY
LEVEL	MASTER (2 ND Cycle)
YEAR OF STUDY	1
YEAR/SEMESTER	MID625: 1° year / 1° semester MID640: 1° year / 2° semester MID655 : 2° year / 3° semester
ECTS:	30

AIM:

• To develop student's ability to apply theory in practice through clinical training in order to acquire the specific knowledge, skills/competencies and attitudes to safely provide personalized and holistic care to the pregnant woman and the fetus the antenatal period, during labour and to the woman and the newborn the postnatal period. The program aims at a high level of clinical competence through scientific / research evidenced based midwifery practice, and at the development of competent midwives according to the legislation and the international standards of midwifery education and training, as approved by the International Confederation of Midwives.

TEACHING METHOD:

CLINICAL TRAINING IN ALL SETTINGS RELATED TO THE CARE OF MOTHER AND NEWBORN DURING ANTENATAL PERIOD, LABOUR AND POSTNATAL PERIOD:

- ANTENATAL CARE CLINIC
- MATERNAL AND CHILD WELFARE CENTRES
- POSTNATAL MATERNITY WARD FOR WOMAN AND NEWBORN CARE
- ULTRASOUND, ANTENATAL AND FETAL MEDICINE DEPARTMENT
- GYNECOLOGY DEPARTMENT AND GYNECOLOGY OUTPATIENT DEPARTMENT
- GYNECOLOGY AND OBSTETRICS SURGERY WARD
- HIGH RISK PREGNANCY DEPARTMENT
- NEWBORN INTENSIVE CARE UNIT (NICU)
- LABOUR WARD

ANTENATAL CARE CLINIC

The application of theory to practice of the specialized midwife to the provision of qualitative midwifery care to the pregnant woman.

- History taking during 1st antenatal care visit Λήψη ιστορικού 1^{ης} επίσκεψης.
 Examination, assessment and scheduling of antenatal visits based on individualized needs of the pregnant woman.
- Scheduling, provision, evaluation and the results of the provided midwifery care to the woman.
- Description of proper nutrition and description of required nutrients for optimal nutrition of the woman during pregnancy. Counseling on the hygiene, exercise and sexual activity during pregnancy.
- Promotion of pregnant woman health and empowerment of the family.
- Cooperation with midwifery team.

- Planning and preparation of classes for the preparation of parenthood and self-participation.
- PRACTICAL EXAMINATION IN THE EVALUATION OF PREGNANT WOMAN.

MATERNAL AND CHILD WELFARE CENTRES

The application of theory to practice of the specialized midwife to the provision of qualitative midwifery care to the newborn and infant.

- Monitor the growth rate of infants
- Tips for mothers who have feeding problems with their infants and breast feeding problems.
- Information on infant vaccination schemes and involvement in the process, storage, maintenance and administration.
- Parents' information and support on the issues concerning their infants' care

POSTNATAL MATERNITY WARD FOR WOMAN AND NEWBORN CARE

The application of theory to practice of the specialized midwife to the provision of qualitative midwifery care to the woman in puerperium.

- Environment preparation.
- Welcome and assessment of postnatal woman.
- Prioritization, planning and implementation of midwifery interventions for the care of postnatal woman.
- Re evaluation and emotional disorders of postnatal woman.
- Establishment of breast feeding.
- Newborn assessment, examination by paediatrician and daily care.
- PRACTICAL EVALUATION IN ORGANIZATION AND MANAGEMENT OF MATERNITY WARD.

ULTRASOUND DEPARTMENT, ANTENATAL AND FETAL MEDICINE

- Observation of pregnant woman ultrasound during 1st, 2nd and 3rd trimester of pregnancy.
- Observation of history taking of pregnant woman and counselling before invasive procedures and Λήψη ιστορικού εγκύου πριν από επεμβατικό προγεννητικό έλεγχο,
- Participation in the process of invasive procedures: Chorion villus sampling and amniocentesis.

GYNAECOLOGICAL WARD AND GYNAECOLOGICAL OUT PARIENT DEPARTMENT

The student has the opportunity to participate in problem management regarding early pregnancy and gynaecological problems/situations as:

- Ectopic pregnancy/abortion (missed/complete/incomplete/threatered/spontaneous/recurrent).
- Therapeutic termination or medically indicated abortion.

- Hydatidiform mole / Gestational trophoblastic disease.
- Postpartum infection / pyrexia.
- Infections of the female system /sexually transmitted diseases.
- Pap sampling technique.
- Methods of contraception/ / intrauterine contraceptive device (ICD)/ coil. prescription of medicines.

GYNECOLOGICAL AND MATERNITY SURGERY WARD

- Familiarity with operating rooms
- Cooporetion with the surgical team
- Intervention and treatment of complications during surgery
- Getting to know the surgical instruments used in gynecological procedures
- Infections of the female system /sexually transmitted diseases.

MATERNITY WARD FOR HIGH RISK PREGNANCIES

The application of theory to practice of the specialized midwife to the provision of qualitative midwifery care to the pregnant woman.

- Admission of pregnant woman to maternity ward.
- Implementation of Midwifery Process: midwifery history taking, assessment, diagnosis and prioritization of midwifery interventions.
- Developing appropriate midwifery care plan.
- Implementation of midwifery care plan.
- Evaluation of actions outcomes,
- Re-planning of midwifery care if needed.
- Written documentation.
- Examination by obstetrician/gynaecologist.

NEWBORN INTENSIVE CARE UNIT

The application of theory to practice of the specialized midwife to the provision of qualitative midwifery care to the newborn.

- Admission of newborn.
- Implementation of Nursing Process. Εφαρμογή της Νοσηλευτικής Διεργασίας,
- Prioritization of nursing interventions.
- Developing care plan.
- Implementation of care plan.
- Evaluation of actions outcomes,
- Re-planning of care if needed.

- Written documentation.
- Newborn examination by neonatologist and laboratory investigations/test.
- · Parenthood teaching.

LABOUR WARD

- Admission of woman in labour.
- History taking.
- Measurement of vital signs.
- Abdominal palpation/examination.
- Vaginal examination.
- CTG (Cardiotocograpy) monitoring of pregnant woman.
- Recording the findings.
- Midwifery care during the 1st, 2nd, 3rd and 4th stage of labour
- Assessment and prioritization of woman needs during intrapartum period and implementation of midwifery interventions.
- Pain management strategies in labour
- Fetal assessment.
- Assessment of the labour progress and use of the partogram.
- Recording of findings.
- Recognition of 2nd stage of labour
- · Conduct of normal labour.
- Planning of intrapartum midwifery care in case of abnormal presentation.
- Assistance in the use of forceps or vacuum delivery.
- Identification of risk factors for dystocia and emergencies in obstetrics, and ways for their prevention and management.
- Participation and assistance to the obstetrician for the performance of caesarian section.
- Postnatal midwifery care after caesarian section delivery.
- Classification of 3rd and 4th degree tears.
- Management of 3rd stage of labour.
- Midwifery care in the 4th stage of labour.
- PRACTICAL EVALUATION DURING INTRAPARTUM CARE AND POSSIBLE CONDUCT OF LABOUR.

PROPOSED LITERATURE:

- Lowedermilk,D.L., Perry,S. (1999) Maternity Nursing. St Louis: Mosby. Μετάφραση: Λυκερίδου,A. & Δελτσίδου,A.
- World Health Organization 'Safe Motherhood Resource List' lists all WHO publications on Safe Motherhood – all free of charge. WHO, Geneva
- Καρπάθιος, Σ.Ε. (1999) Βασική Μαιευτική και Περιγεννητική Ιατρική. 2η εκδ., Αθήνα: Εκδ. ΒΗΤΑ
- Fraser, D. & Cooper, M. (2009) Myles' Textbook for Midwives. 15th ed. Edinburgh: Churchill Livingstone

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- Καραχάλιος, Γ.Ν. (2003) Μαιευτική & Γυναικολογική Νοσηλευτική Φροντίδα. Σειρά: Πρότυπα Άσκησης Ειδικής Νοσηλευτικής Φροντίδας. Αθήνα: Εκδόσεις ΕΛΛΗΝ
- Καραχάλιος, Γ.Ν. & Μαστρογιάννης, Δ. (2006) Μαιευτική & Γυναικολογική Νοσηλευτική. Σειρά:
 Εκπαιδευτική Πιστοποίηση στη Νοσηλευτική. Αθήνα: Εκδόσεις ΕΛΛΗΝ
- Νικολαΐδης, Π. (2009) Το Υπερηχογράφημα στη Μαιευτική και Γυναικολογία. 1η έκδ., Αθήνα: Ιατρικές εκδόσεις Λαγός.

NECESSARY CLINICAL COMPETENCIES IN MIDWIFERY ACCORDING TO NURSING AND MIDWIFERY LAWS OF 2003-2012.

The clinical training of midwifery student is to be dispensed under appropriate guidance and supervision by a registered midwife / mentor under documented practice:

- 1. Assessment Abdominal Examination and care of 100 pregnant women (prenatal period).
- 2. Supervision and intrapartum care of 40 women.
- 3. Conduct by the student of at least 40 deliveries with cephalic presentation; where this number cannot be reached owing to the lack of available women in labour, it may be reduced to a minimum of 30, provided that the student assists with 20 further deliveries. This assistance can be done after the 30 labours.
- 4. Active participation in breech deliveries. Where this is not possible because of lack of breech deliveries, practice may be in a simulated situation.
- 5. Performance of episiotomy and initiation into suturing. Initiation shall include theoretical instruction and clinical practice. The practice of suturing includes suturing of the wound following an episiotomy and a simple perineal laceration. This may be in a simulated situation if absolutely necessary.
- 6. Supervision and care of 40 women at risk in pregnancy, or labour or post- natal period.
- 7. Supervision and care (including examination) of at least 100 post-natal women and 100 healthy new-born infants.
- 8. Observation and care of 10 newborns requiring special care, including those born pre-term, post-term, underweight or ill.
- 9. Care of women with pathological conditions in the fields of gynaecology and obstetrics.
- 10. Initiation into care in the field of medicine and surgery. Initiation shall include theoretical instruction and clinical practice.

	1. ASSESSMENT – ABDOMINAL EXAMINATION AND CARE OF 100 PREGNANT WOMEN										
No.	GRAVITA	AGE	L.M.P.	E.D.D	В/Р	URINE	WEIGHT	PREGNANT WOMANS [,] NAME AND FILE NUMBER	WEEK OF PREGNANC Y		
DATE	WEEK OF PREGNANCY ACCORDING TO SIZE OF THE UTERUS	FUNDAL HEIGHT	FETAL PRESENTATION	FETAL POSITION	PRESENTING PART STATION	F.H.R.	OBSERVATION S	INSTRUCTIONS	SIGNATURE		
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		1.	. ASSESSMENT	- ABDOMINAL EXA	MINATION AND C	ARE OF 100 P	REGNANT WOMEN	<u> </u>	T		
No.	GRAVITA	AGE	L.M.P.	E.D.D	B/P	URINE	WEIGHT	PREGNANT WOMANS' NAME AND FILE NUMBER	WEEK OF PREGNANO Y		
DATE	WEEK OF PREGNANCY	FUNDAL HEIGHT	FETAL PRESENTATION	FETAL POSITION	PRESENTING PART STATION	F.H.R.	OBSERVATION S	INSTRUCTIONS	SIGNATUR		





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No.	GRAVITA	AGE	L.M.P.	E.D.D	B/P	URINE	WEIGHT	PREGNANT WOMANS' NAME AND FILE NUMBER	WEEK OF PREGNANCY
DATE	WEEK OF PREGNANCY ACCORDING TO SIZE OF THE UTERUS	FUNDAL HEIGHT	FETAL PRESENTATION	FETAL POSITION	PRESENTING PART STATION	F.H.R.	OBSERVATIONS	INSTRUCTIONS	SIGNATURE
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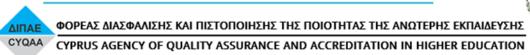
	1. ASSESSMENT – ABDOMINAL EXAMINATION AND CARE OF 100 PREGNANT WOMEN										
No.	GRAVITA	AGE	L.M.P.	E.D.D	В/Р	URINE	WEIGHT	PREGNANT WOMANS' NAME AND FILE NUMBER	WEEK OF PREGNANCY		
DATE	WEEK OF PREGNANCY ACCORDING TO SIZE OF THE UTERUS	FUNDAL HEIGHT	FETAL PRESENTATION	FETAL POSITION	PRESENTING PART STATION	F.H.R.	OBSERVATIONS	INSTRUCTIONS	SIGNATURE		
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			1. ASSESSMENT	- ABDOMINAL E	XAMINATION AND	CARE OF	100 PREGNANT WOMEN		
No.	GRAVITA	AGE	L.M.P.	E.D.D	B/P	URINE	WEIGHT	PREGNANT WOMANS' NAME AND FILE NUMBER	WEEK OF PREGNANCY
DATE	WEEK OF PREGNANCY ACCORDING TO SIZE OF THE UTERUS	FUNDAL HEIGHT	FETAL PRESENTATION	FETAL POSITION	PRESENTING PART STATION	F.H.R.	OBSERVATIONS	INSTRUCTIONS	SIGNATURE
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			1. ASSESSMENT	- ABDOMINAL E	XAMINATION AND	CARE OF	100 PREGNANT WOMEN		
No.	GRAVITA	AGE	L.M.P.	E.D.D	B/P	URINE	WEIGHT	PREGNANT WOMANS' NAME AND FILE NUMBER	WEEK OF PREGNANCY
DATE	WEEK OF PREGNANCY ACCORDING TO SIZE OF THE UTERUS	FUNDAL HEIGHT	FETAL PRESENTATION	FETAL POSITION	PRESENTING PART STATION	F.H.R.	OBSERVATIONS	INSTRUCTIONS	SIGNATURE
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	1		1. ASSESSMENT	- ABDOMINAL E	XAMINATION AND	CARE OF 1	100 PREGNANT WOMEN		
No.	GRAVITA	AGE	L.M.P.	E.D.D	B/P	URINE	WEIGHT	PREGNANT WOMANS' NAME AND FILE NUMBER	WEEK OF PREGNANCY
DATE	WEEK OF PREGNANCY ACCORDING TO SIZE OF THE UTERUS	FUNDAL HEIGHT	FETAL PRESENTATION	FETAL POSITION	PRESENTING PART STATION	F.H.R.	OBSERVATIONS	INSTRUCTIONS	SIGNATURE
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1. ASSESSMENT – ABDOMINAL EXAMINATION AND CARE OF 100 PREGNANT WOMEN												
No.	GRAVITA	AGE	L.M.P.	E.D.D	B/P	URINE	WEIGHT	PREGNANT WOMANS' NAME AND FILE NUMBER	WEEK OF PREGNANCY			
DATE	WEEK OF PREGNANCY ACCORDING TO SIZE OF THE UTERUS	FUNDAL HEIGHT	FETAL PRESENTATION	FETAL POSITION	PRESENTING PART STATION	F.H.R.	OBSERVATIONS	INSTRUCTIONS	SIGNATURE			
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			1. ASSESSMENT	– ABDOMINAL E	XAMINATION AN	D CARE OF	 100 PREGNANT WOME	<u> </u> :N	
No.	GRAVITA	AGE	L.M.P.	E.D.D	B/P	URINE	WEIGHT	PREGNANT WOMANS' NAME AND FILE NUMBER	WEEK OF PREGNANCY
DATE	WEEK OF PREGNANCY ACCORDING TO SIZE OF THE UTERUS	FUNDAL HEIGHT	FETAL PRESENTATION	FETAL POSITION	PRESENTING PART STATION	F.H.R.	OBSERVATIONS	INSTRUCTIONS	SIGNATURE
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			1.ASSESSMENT - A	BDOMINAL EXA	MINATION AND C	ARE OF 100	PREGNANT WOMEN		
No.	GRAVITA	AGE	L.M.P.	E.D.D	B/P	URINE	WEIGHT	PREGNANT WOMANS' NAME AND FILE NUMBER	WEEK OF PREGNANCY
DATE	WEEK OF PREGNANCY ACCORDING TO SIZE OF THE UTERUS	FUNDAL HEIGHT	FETAL PRESENTATION	FETAL POSITION	PRESENTING PART STATION	F.H.R.	OBSERVATIONS	INSTRUCTIONS	SIGNATURE
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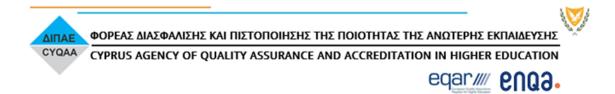
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		2.	Sup	ervision and	d care	of 100 he	ealthy no	ew-born	infants				
No.	MOTHERS' NAME AND FILE NUMBER	DATE OF LABOUR.	SEX	BIRTHDWEIG HT		UPERVISION				GHT		COMMENTS	MIDWIVE'S SIGNATURE
					EYES	UMBILIC US	FEEDIN G	1 ST DAY	2 ND DAY	3 RD DAY	DAY OF DISCHA RGE		
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		2. S	upervi	sion and	care o	f 100 hea	althy ne	w-born i	nfants				
No.	MOTHERS' NAME AND FILE NUMBER	DATE OF LABOUR.	SEX	BIRTHD WEIGHT	DAILY S	UPERVISION	1 & CARE		WEI	GHT		COMME NTS	MIDWIVE'S SIGNATURE
		LABOUN		WEIGHT	EYES	UMBILIC US	FEEDIN G	1 ST DAY	2 ND DAY	3 RD DAY	DAY OF DISCHA RGE	NIG	OIONATORE
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		2. S	upervi	sion and	care of	100 hea	Ithy nev	v-born iı	nfants				
No.	MOTHERS' NAME AND FILE NUMBER	DATE OF LABOUR.	SEX	BIRTHD WEIGHT	DAILY S	UPERVISION	& CARE		WEI	GHT		COMME NTS	MIDWIVE'S SIGNATURE
		LABOUN		WEIGHT	EYES	UMBILIC US	FEEDIN G	1 ST DAY	2 ND DAY		DAY OF DISCHA RGE	MIG	OIGHATORE
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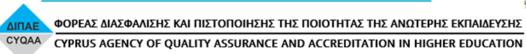




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		2. S	upervi	sion and	care o	f 100 hea	Ithy nev	v-born iı	nfants				
No.	MOTHERS' NAME AND FILE NUMBER	DATE OF LABOUR.	SEX	BIRTHD WEIGHT	DAILY S	UPERVISION	& CARE		WEI	GHT		COMME NTS	MIDWIVE'S SIGNATURE
					EYES	UMBILIC US	FEEDIN G	1 ST DAY	2 ND DAY	3 RD DAY	DAY OF DISCHA RGE		
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		2. S	upervi	sion and	care o	f 100 hea	althy nev	w-born i	nfants				
No.	MOTHERS' NAME AND FILE NUMBER	DATE OF	SEX	BIRTHD WEIGH	DAIL	' SUPERVI CARE	SION &		WEI	GHT		COMME NTS	MIDWIVE'S SIGNATURE
	NOMBER	LABOU R.		T	EYES	UMBILI CUS	FEEDIN G	1 ST DAY	2 ND DAY	3 RD DAY	DAY OF DISCHA RGE		
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	3. S	upervisio	n and c	are of 100	post pa	rtum won	nen			I/L/B:IN	VOLUTION/L	OCHIA/BRE	AST
No.	MOTHERS' NAME AND FILE NUMBER	DATE AND T NEWBORN:											
					DAILY	SUPERVISIO		DAY			COMMENT S	DATE OF DISCHARG E	MIDWIVE' S SIGNATU RE
		PROBLEM	1 ^s	T DAY	ISCHARGE								
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	3. S	Supervisio	n and c	are of 100) post pa	rtum wo	men		I/L/B:IN	IVOLUTION/	LOCHIA/BR	EAST
No.	MOTHERS' NAME AND FILE NUMBER	DATE AND T NEWBORN:	_									
						COMMENT S	DATE OF DISCHARG E	MIDWIVE' S SIGNATU RE				
		PROBLEM	1 ST	DAY	DISCHARGE							
			I/L/B	PROBLE M	PROBLEM]						



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	3. \$	Supervisio	n and ca	are of 100	post pa	rtum wor	nen			I/L/E	3:INVOLUT	ION/LOC	HIA/BREA ST		
No.	MOTHERS' NAME AND FILE NUMBER	DATE AND T NEWBORN:	_												
					DAILY S	UPERVISION .	& CARE					DATE	MIDWIVE'S		
		PROBLEM	1 ST	DAY	2 ND	DAY	3 RD	DAY	DAY OF DI	SCHARGE	15 DISCH				
			I/L/B	PROBLE M	I/L/B	PROBLE M	I/L/B	PROBLE M	I/L/B	PROBLE M		ARGE			
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	3. 9	Supervisio	on and	care of 100	post pa	rtum wor	nen			I/L/E	3:INVOLUT	ION/LOC	HIA/BREA ST
No.	MOTHERS' NAME AND FILE NUMBER	DATE AND T NEWBORN:											
					DAILY S	UPERVISION	& CARE				00141451	DATE	MIDWIVE'S
		PROBLEM	1	ST DAY	2 ND	DAY	3 RD	DAY	DAY OF D	SCHARGE	COMMEN TS	OF DISCH	SIGNATURE
			I/L/B	PROBLE M	I/L/B	PROBLE M	I/L/B	PROBLE M	I/L/B	PROBLE M		ARGE	
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	3. St	upervisior	and car	e of 100	post part	tum wom	en			I/L/E	B:INVOLUTIO	N/LOCHIA/	BREA ST
No.	MOTHERS' NAME AND FILE NUMBER	DATE AND T NEWBORN:											
					DAILY S	UPERVISION	& CARE				COMMENTS	DATE OF	MIDWIVE' S
		PROBLEM	1 ST	DAY	2 ND	DAY	3 RD	DAY	DAY OF DI	SCHARGE	COMMENTS	DISCHAR GE	SIGNATU
			I/L/B	PROBLE M	I/L/B	PROBLE M	I/L/B	PROBLE M	I/L/B	PROBLE M			RE
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	3. S	upervisior	and ca	re of 100	post part	tum wom	en			I/L/E	3:INVOLUTIO	N/LOCHIA/	BREA ST
No.	MOTHERS' NAME AND FILE NUMBER	DATE AND T NEWBORN:											
						UPERVISION					COMMENTS	DATE OF DISCHAR	MIDWIVE' S
		PROBLEM	1 ^s	DAY	2 ND	DAY	3 RD	DAY	DAY OF D	ISCHARGE	COMMENTS	GE	SIGNATU
			I/L/B	PROBLE M	I/L/B	PROBLE M	I/L/B	PROBLE M	I/L/B	PROBLE M			RE
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	3.	Supervisio	on and c	are of 100	post pa	rtum won	nen			I/L/E	3:INVOLUT	ION/LOC	HIA/BREA ST
No.	MOTHERS' NAME AND FILE NUMBER	DATE AND T NEWBORN:											
					DAILY S	UPERVISION	& CARE					DATE	MIDWIVE'S
		PROBLEM	1 ST	DAY	2 ND	DAY	3 RD	DAY	DAY OF DIS	CHARGE	COMMEN TS	OF DISCH	SIGNATURE
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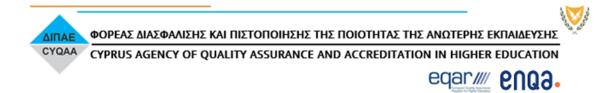
	3.	NUMBER NEWBORN: SEX/WEIGHT DAILY SUPERVISION & CARE PROBLEM 1 ST DAY 2 ND DAY 3 RD DAY DAY OF DISCHARGE													
No.	MOTHERS' NAME AND FILE NUMBER									•					
					DAILY S	UPERVISION (& CARE				1	DATE	MIDWIVE'S		
		PROBLEM	1 ^s	T DAY	2 ND	DAY	3 RD	DAY	DAY OF DI	SCHARGE	COMMEN TS	OF DISCH	SIGNATURE		
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	3.	Supervision	n and c	are of 100	post pa	rtum wor	men			I/L/E	/B:INVOLUTION/LOCHIA/BREA ST		
No.	MOTHERS' NAME AND FILE NUMBER	DATE AND T NEWBORN:	YPE OF LA SEX/WEIGH	BOUR: IT									
					DAILY S	UPERVISION	& CARE				COMMEN	DATE	MIDWIVE'S
		PROBLEM	1 ^s	^T DAY	2 ND DAY		3 RD	DAY	DAY OF DIS	SCHARGE	COMMEN TS	OF DISCH	SIGNATURE
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	3.	Supervisio	on and c	are of 100	post pa	rtum wor	nen			I/L/E	:INVOLUTION/LOCHIA/BREA ST		
No.	MOTHERS' NAME AND FILE NUMBER	DATE AND T NEWBORN:											
					DAILY S	UPERVISION	& CARE					DATE	MIDWIVE'S
		PROBLEM	1 ^{S1}	DAY	2 ND	DAY	3 RD	DAY	DAY OF DIS	CHARGE	COMMEN TS	OF DISCH	SIGNATURI
			I/L/B	PROBLE M	I/L/B	PROBLE M	I/L/B	PROBLE M	I/L/B	PROBLE M] "	ARGE	
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No.	GRAVIDA	AGE	L.M.P.	E.D.D.	B/P	URINE	WEIGHT	NAME AND FILE NUMBER	WEEK OF
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4. Supervision and care of 20 women at risk in pregnancy, or labour	•
(e.g.breech presentation, vaccum delivery, forceps, Caeserian section etc))

No.	GRAVIDA	AGE	L.M.P.	E.D.D.	В/Р	URINE	WEIGHT	NAME AND FILE NUMBER	WEEK OF PREGNANCY
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No.	MOTHERS' NAME AND FILE	DATE OF LABOUR.	OF SEX	ng those b BIRTHD WEIGHT	REPOR		ROBLEM		UPERVISION	•	DAY OF DISCHARGE COMMENT S/ OBSERVATIONS	MIDWIVE'S SIGNATURE
	NUMBER				1 ST DAY	2 ND DAY	3 RD DAY	1 ST DAY	2 ND DAY	3 RD DAY		
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	6. OBSERVATION OF 10 NORMAL DELIVERIES												
No.	NAME AND FILE NUMBER - GRAVITA	ABDOMINAL PALPATION/ EXAMINATION	METHOD OF INDUCTION OF LABOUR	VAGINAL EXAMINATION	RUPTURED OF MEMBR. SPONTANEOUS/ ARTIFICIAL	TIME OF FULL DILATATION	LABOUR DATE & TIME, SEX, WEIGHT	POSTPARTUM PERIOD & EVALUATION OF HAEMORRHAGE, METHOD OF PLACENTA DELIVERY, APGAR	MIDWIVE'S SIGNATURE				
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	7. SUPERVISION AND INTRAPARTUM CARE OF 40 WOMEN											
No.	NAME AND FILE NUMBER - GRAVITA	ABDOMINAL PALPATION/ EXAMINATION	METHOD OF INDUCTION OF LABOUR	VAGINAL EXAMINATION	RUPTURED OF MEMBR. SPONTANEOUS/ ARTIFICIAL	TIME OF FULL DILATATION	LABOUR DATE & TIME, SEX, WEIGHT	POSTPARTUM PERIOD & EVALUATION OF HAEMORRHAGE, METHOD OF PLACENTA DELIVERY, APGAR	MIDWIVE'S SIGNATURE			
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			7. SUPER	VISION AND INT	RAPARTUM CARI	E OF 40 WOME	N		
No.	NAME AND FILE NUMBER - GRAVITA	ABDOMINAL PALPATION/ EXAMINATION	METHOD OF INDUCTION OF LABOUR	VAGINAL EXAMINATION	RUPTURED OF MEMBR. SPONTANEOUS/ ARTIFICIAL	TIME OF FULL DILATATION	LABOUR DATE & TIME, SEX, WEIGHT	POSTPARTUM PERIOD & EVALUATION OF HAEMORRHAGE, METHOD OF PLACENTA DELIVERY, APGAR	MIDWIVE'S SIGNATURE
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No.	NAME AND FILE NUMBER - GRAVITA	ABDOMINAL PALPATION/ EXAMINATION	METHOD OF INDUCTION OF LABOUR	VAGINAL EXAMINATION	RUPTURED OF MEMBR. SPONTANEOUS/ ARTIFICIAL	TIME OF FULL DILATATION	LABOUR DATE & TIME, SEX, WEIGHT	POSTPARTUM PERIOD & EVALUATION OF HAEMORRHAGE, METHOD OF PLACENTA	MIDWIVE'S SIGNATURE
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7. SUPERVISION AND INTRAPARTUM CARE OF 40 WOMEN											
No.	NAME AND FILE NUMBER - GRAVITA	ABDOMINAL PALPATION/ EXAMINATION	METHOD OF INDUCTION OF LABOUR	VAGINAL EXAMINATION	RUPTURED OF MEMBR. SPONTANEOUS/ ARTIFICIAL	TIME OF FULL DILATATION	LABOUR DATE & TIME, SEX, WEIGHT	POSTPARTUM PERIOD & EVALUATION OF HAEMORRHAGE, METHOD OF PLACENTA DELIVERY, APGAR	MIDWIVE'S SIGNATURE		



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			8. RECO	RD AND PE	RFORMANCE C	F 10 VAGINAL	EXAMINATION DURI	NG LABO	UR		
No.	NAME AND FILE NUMBER	Observations ON GENITALIA	PELVIC FLOOR	FETAL POSITION	PRESENTING PART & STATION	STATE OF MEMBRANES/ AMNIOTIC FLUID	CERVICALDILATATION	STATE OF CERVIX	ASSESSMENT OF SUTURES & FONTANELLES	FURTHER OBSERVATIONS	MIDWI VE'S SIGNA TURE
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				9. CARE AN	ID CONDU	CT OF 40 NC	RMAL DELIVERIES	S			
No.	NAME AND FILE NUMBER - AGE	GRAVITA	METHOD OF INDUCTION OF LABOUR	VAGINAL EXAMINATION PRESENT.POSITION	RUPTU MEI SPONTA	RED OF MBR. ANEOUS/ FICIAL.	TIME OF DILATATION	LABOUR DATE & TIME, SEX, WEIGHT	POSTPARTUM & EVALUATI HAEMORRH METHOD OF PL DELIVERY, A	ON OF IAGE, .ACENTA	MIDWIVE'S NAME/SURN AME SIGNATURE
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				9. CARE AND O	CONDUCT OF 40 NOR	MAL DELIVERIES			
No.	NAME AND FILE NUMBER - AGE	GRAVITA	METHOD OF INDUCTION OF LABOUR	VAGINAL EXAMINATION PRESENT.POSITION	RUPTURED OF MEMBR. SPONTANEOUS/ ARTIFICIAL.	TIME OF DILATATION	LABOUR DATE & TIME, SEX, WEIGHT	POSTPARTUM PERIOD & EVALUATION OF HAEMORRHAGE, METHOD OF PLACENTA DELIVERY, APGAR	MIDWIVE'S NAME/SURNAME SIGNATURE
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				9. CARE AND	CONDUCT OF 40 NO	RMAL DELIVERIE	S		
No.	NAME AND FILE NUMBER - AGE	GRAVITA	METHOD OF INDUCTION OF LABOUR	VAGINAL EXAMINATION PRESENT.POSITION	RUPTURED OF MEMBR. SPONTANEOUS/ ARTIFICIAL.	TIME OF DILATATION	LABOUR DATE & TIME, SEX, WEIGHT	POSTPARTUM PERIOD & EVALUATION OF HAEMORRHAGE, METHOD OF PLACENTA DELIVERY, APGAR	MIDWIVE'S NAME/SURNAME SIGNATURE
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	I			9. CARE AND	CONDUCT OF 40 NO	RMAL DELIVERIE	S		
No.	NAME AND FILE NUMBER - AGE	GRAVITA	METHOD OF INDUCTION OF LABOUR	VAGINAL EXAMINATION PRESENT.POSITION	RUPTURED OF MEMBR. SPONTANEOUS/ ARTIFICIAL.	TIME OF DILATATION	LABOUR DATE & TIME, SEX, WEIGHT	POSTPARTUM PERIOD & EVALUATION OF HAEMORRHAGE, METHOD OF PLACENTA DELIVERY, APGAR	MIDWIVE'S NAME/SURNAME SIGNATURE
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10. PERFORMANCE AND SUTURING OF EPISIOTOMY FILE NAME AGE **GRAVIDA** ASSESSMENT OF **DIFFUSION OF** TYPE OF MIDWIVE'S No. PERINEUM/ ANAESHTETIC/QUANTIT **EPISIOTOMY/SUTURING NUMBER SIGNATURE INDICATION OF** Y OF MEDICATION **COMMENTS / FURTHER EPISIOTOMY OBSERVATIONS** 1 2 3 4 5 6 7 8 9 10

NAME AND SIGNATURE OF ASSESSOR:	

DATE	
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	MIDWIVES' SIGNATURES					
No	NAME AND SURNAME	SIGNATURE	INITIALS	HOSPITAL	SETTING	

	MIDWIVES' SIGNATURES					
No	NAME AND SURNAME	SIGNATURE	INITIALS	HOSPITAL	SETTING	

	MIDWIVES' SIGNATURES					
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	PRIVATE SECTOR MIDWIVES' SIGNATURES					
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PRIVATE SECTOR MIDWIVES' SIGNATURES					
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ANNEX V: PROGRAM EVALUATION REVIEW

