



BSC IN MIDWIFERY

TEACHING: INTERNSHIP - 3RD YEAR

SSD: MEDS-24/C

Professors:

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PREREQUISITES

The mandatory prerequisites for the exam are:

- Having passed and recorded the exams for Internship 1 and 2, as they are prerequisites for taking the Internship 3 exam.
- Having completed 100% of the scheduled internship hours for the first year (570 hours), the second year (540 hours), and at least 75% of the total hours required for the third year (518 out of 690 hours), for a total of at least 1628 hours (570+540+518).
- Having obtained an average evaluation (taking into account all the assessments received during the year) of at least satisfactory.
- Presenting the initial and intermediate evaluations of the Delivery Room during the exam (in original or copy format).
- Actively assisting in at least 20 spontaneous deliveries (or 10 as long as there are at least 15 others marked as assisted deliveries in collaboration) and having correctly instrumented at least 7 cesarean sections, duly signed in the internship record to be presented during the exam. Moreover, it is strongly recommended that students have attended and passed all the exams included in their study plan.

It is also specified that students are required, as a prerequisite, to have acquired all the knowledge delivered throughout the entire 3-year course.

LEARNING OBJECTIVES

At the end of the internship, students will be able to describe and perform all nursing and midwifery practices applied to obstetric-gynecological-neonatal care, with particular attention to the care of women and the fetus/newborn during labor, delivery, postpartum, and puerperium. Additionally, they will have acquired adequate knowledge of the organization of care in the assigned units.

EXPECTED LEARNING OUTCOMES

The expected learning outcomes are consistent with the Bologna Process's instructions (or regulations) and the Directive 2005/36/EC. They are in the European Qualifications Framework (Dublin Descriptors) as follow.

At the end of the course, the student will be able to:

Knowledge and understanding

- Describe the nursing practices applied to obstetric-gynecological-neonatal care
- Describe the obstetric-gynecological-neonatal care practices necessary for monitoring

maternal-fetal and neonatal well-being, as well as for promoting and preventing health in gynecological women

- Describe the main obstetric emergencies/urgencies and the care to be provided for their correct management

Ability to apply knowledge and understanding

- Transfer theoretical knowledge of basic nursing and midwifery care to good clinical practices
- Apply theoretical knowledge to identify the areas of competence of oneself and other professionals
- Translate research findings into communication content appropriate to professional practice

Communication skills

- Understand the clinical and scientific terminology used in the written exam
- Present topics orally in an organized and coherent manner
- Use language that is appropriate and consistent with the subject matter
- Adopt culturally sensitive communication methods, taking into account the characteristics of the patients

Autonomy of judgment

- Manage complex clinical cases from a technical-scientific and communicative point of view, according to what has been learned
- Recognize the importance of in-depth knowledge of topics relevant to proper midwifery training
- Identify the importance of theoretical knowledge of the subject for the midwifery profession

Learning skills

- Activate independent pathways of in-depth study through the consultation of scientific literature and textbooks in obstetrics and gynecology

PROGRAM

1. LABOR AND DELIVERY (SPONTANEOUS DELIVERY AND CESAREAN SECTION)

- Admission of the woman to the delivery room
- Obstetric examination
- Execution, observation, and interpretation of CTG
- Use of pharmacological and non-pharmacological methods for pain management
- Management of women undergoing induction
- Completion of the partogram
- Preparation of materials for spontaneous delivery
- Assistance during spontaneous delivery: dilation phase
- Assistance during spontaneous delivery: expulsive phase
- Assistance during the third stage of labor
- Execution of an episiotomy, episiorrhaphy, and management of perineal tears
- Postpartum care
- Role of the midwife in the operating room
- Surgical instruments for Cesarean Section and related surgical times
- Obstetric care for trial of labor in women with a previous cesarean section (TOLAC and VBAC)
- Obstetric care during operative delivery (vacuum/forceps)
- Assistance with spontaneous abortion
- Assistance with voluntary termination of pregnancy (VTP)
- Instrumentation for uterine curettage (RCU)
- Twin pregnancy and delivery

- Breech presentation management
- Management of Intrauterine Fetal Death (IUFD)
- 2. EMERGENCIES/URGENT OBSTETRIC SITUATIONS
 - Obstetric care in the prenatal setting (obstetric pathology)
 - Preterm Premature Rupture of Membranes (PPROM), preterm labor
 - Pre-eclampsia, HELLP syndrome, placenta previa
 - Postpartum hemorrhage
 - Shoulder dystocia
 - Umbilical cord prolapse
 - Neonatal and maternal resuscitation
 - Reception of a woman who is a victim of violence
 - Clinical cases in Obstetric-Gynecological Emergency Department
- 3. PUERPERIUM/NEWBORN/BREASTFEEDING
 - Assistance during puerperium
 - Initial care of the newborn immediately after birth and during hospitalization
 - Primal health and breastfeeding
 - Infant and child choking management maneuvers
- 4. SCREENING AND COMMUNITY HEALTH
 - First and second-level HPV screening
 - Prenatal diagnosis
 - Key aspects in taking an obstetric history
 - Birth preparation courses
 - Contraceptive methods
- 5. REGULATIONS AND BASIC DEFINITIONS OF THE MIDWIFERY PROFESSION
 - Professional profile
 - Code of Ethics
 - Law 42/99
 - Law 194/78
 - Low-risk in midwifery
 - Birth settings

LEARNING METHODS

The learning process consists of 690 hours of practical-guided internship under the supervision of tutors employed by the host institution. Attendance at internship activities is mandatory for all students enrolled in the Degree Program in Midwifery and must be continuous throughout each individual internship experience and during the academic year. It is possible to be admitted to the exam after completing 100% of the internship scheduled for the first year (570 hours) and the second year (540 hours), and at least 75% of the total hours required for the third year (518 out of 690 hours), for a minimum total of 1628 hours (570+540+518).

ASSESSMENT METHODS

The Internship 3 exam consists of a written test and a practical oral exam. The written exam will serve as a selection criterion for admission to the oral exam: students who obtain a score of $\geq 18/30$ will be allowed to take the oral exam. The exam will be considered passed if the student achieves a grade of at least 18/30 in the oral exam.

The practical oral exam concerns obstetric-gynecological-neonatal care specific to the midwifery profession, through the discussion of a clinical case in the context of labor-delivery/obstetric triage and the administration of at least one other question on another area of interest related to the

midwifery profession, covering the above program. Students will be evaluated based on their clinical-assistive and scientific knowledge according to updated evidence, as well as their analytical and argumentative skills, their ability to assess and make decisions in clinical-assistive situations. The coherence of the applied logical process and the technical-scientific language used will be taken into account. Additionally, the evaluation of the internship experience expressed by clinical tutors will be considered: the final evaluation will account for one-quarter of the internship evaluations received by the students.

For the practical oral exam, the evaluation criteria will be: acquired knowledge, autonomy of judgment, communication skills, and learning abilities. The exam will be graded according to the following criteria:

< 18 - Insufficient	Fragmented and superficial knowledge of the contents, errors in applying concepts, poor presentation.
18-20	Sufficient but general knowledge of the contents, simple presentation, uncertainties in applying theoretical concepts.
21-23	Appropriate but not in-depth knowledge of the contents, partial ability to apply theoretical concepts, acceptable content presentation.
24-26	Appropriate content knowledge, reasonable ability to apply theoretical concepts, well-structured content presentation.
27-29	Precise and complete content knowledge, good ability to apply theoretical concepts, analytical and synthetic skills, confident and correct presentation.
30-30L	Very broad, complete, and in-depth content knowledge, well-established ability to apply theoretical concepts, excellent presentation skills, as well as excellent analytical, synthetic, and interdisciplinary connection abilities.

For the correspondence between the average evaluation expressed by the tutors and the score in thirtieths, refer to the following table:

AVERAGE OF EVALUATIONS OBTAINED DURING THE ACADEMIC YEAR	SCORE
SUFFICIENT	18-19
SUFFICIENT/FAIR	20-21
FAIR	22-23
FAIR/GOOD	24-25
GOOD	26-27
VERY GOOD	28-29
EXCELLENT	30-30L

The final exam grade will be calculated by taking a weighted average between the oral exam grade (three-quarters) and the grade corresponding to the average evaluation obtained from the Internship Evaluation Sheets (one-quarter).

SUPPORT ACTIVITIES

It is possible to request tutoring and/or further support from the teaching staff, as well as to

organize self-managed review sessions or peer tutoring in the simulation lab.

RECOMMENDED TEXTBOOKS AND BIBLIOGRAPHY

- “Trattando di Scienza ed Arte della Professionalità Ostetrica” Costantini W. Piccin. Ed. 2021.
- “Salute primale e allattamento”. Manuale aggiornato e basato sul modello formativo del corso 40 ore OMS-UNICEF.

It is recommended to refer to the bibliography and study materials gradually suggested by the Professors throughout the training program.