



***ICM Standard Equipment List for
Competency-Based Skills Training
in Midwifery Schools***

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Acronyms/Abbreviations

AIDS	Acquired Immune Deficiency Syndrome
ARVs	Anti Retroviral Drugs
BP	Blood Pressure
CAC	Comprehensive Abortion Care
CG	Childbirth Graphics
CMA	Country Midwife Advisor
HIV	Human Immunodeficiency Virus
ICM	International Confederation of Midwives
ICMA	International Country Midwife Advisor
IEC	Information, Education and Communication
IMA	International Midwife Advisor
IMP	Investing in Midwives Programme
IUD	Intrauterine Contraceptive Device
LAM	Lactational Amenorrhoea Method
LMP	Last Menstrual Period
MDGs	Millennium Development Goals
MNCH	Maternal, Newborn and Child Health
MTHF	Maternal Health Thematic Fund
MVA	Manual Vacuum Aspirator (aspiration)
PAC	Post Abortion Care
RMA	Regional Midwife Advisor
STI	Sexually Transmitted Infection
TB	Tuberculosis
TLMs	Teaching and Learning Materials
UN	United Nations
UNFPA	United Nations Population Fund
USAID	United States Agency for International Development
W-CAC	Woman Centered Abortion Care
WHO	World Health Organization
W-PAC	Woman Centered Post Abortion Care

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Foreword

I am delighted to introduce the *ICM Standard Competency-Based Equipment List for Basic Skills Training in Midwifery Schools*. This standardised list of equipment, teaching, and learning materials has been developed by a team of regulators, educators, midwife practitioners, and development partners within the Africa region, as part of the ICM/UNFPA joint programme “Investing in Midwives and others with midwifery skills to accelerate progress towards MDG 5”.

The goal was to develop the document as a reference for ‘programme’ countries in their efforts to upgrade and/or equip the skills laboratories in midwifery schools. I believe they have succeeded and urge all midwifery training institutions and other maternal, newborn and child health (MNCH)-related organisations to use this reference in the development of midwifery faculty and improvements in clinical sites.

The document is yet another contribution to ICM’s vision, “...a world where every childbearing woman has access to a midwife's care for herself and her newborn”. I sincerely thank all those who have given generously of their time, knowledge and experience, so that, together, we can improve the lives of childbearing women, their babies and their families.

Frances Day-Stirk

President

International Confederation of Midwives

ICM Standard ICM Competency-Based Equipment List for Basic Skills Training in Midwifery Schools

Background

The Investing in Midwives (IMP) and others with Midwifery Skills Initiative was formally launched in March 2009 with a mandate to strengthen midwifery education, regulation and associations towards improvements in maternal and newborn health. IMP works through national health systems in under-resourced settings in Africa, Asia, Latin America and the Caribbean to increase midwifery capacity to integrate the full continuum of maternal health care in national health systems. The focus of the programme is on planning and scaling up midwifery and other mid-level providers in response to the World Health Assembly call for a decade of action for Human Resources for Health in 2006 to improve on health indices especially MDG 5. Currently the IMP is being implemented in 12 African and 6 Asian countries including Benin, Burkina Faso, Burundi, Chad, Cote d'Ivoire, Ethiopia, Ghana, Madagascar, Uganda, Zambia, Djibouti, North Sudan, South Sudan, Afghanistan, Bangladesh, Nepal, India and Pakistan. There are expressions of interest for expansion to include other countries in Africa and Asia such as Liberia, Malawi, Nigeria, Sierra Leone, Cameroon and the Democratic Republic of Congo due to their poor maternal health indices.

The envisaged outcome of the IMP is an improved working environment within countries where an increased number of appropriately educated midwives and others with midwifery skills function at all levels including policy making to accelerate progress towards MDGs 4 & 5 at country and regional levels. It is in pursuance of this outcome and also to contribute towards ICM's vision of a world where every childbearing woman has access to a midwife's care for herself and her newborn that the IMP set out to conduct country needs assessment of midwifery to inform strategic planning in over 12 countries. Lack of teaching-learning materials was one major finding of the assessments and this necessitated that the ICM generate a standardised compendium of models, equipment and teaching aides to inform UNFPA offices in the programme countries in their bid to purchase teaching-learning materials to improve on the teaching of practical skills among student midwives.

Note to the User

This document has been developed as a standard reference guide to inform programme countries and midwifery-related programmes on the basic set of models, equipment, consumables, reference books and learning materials (TLMs) for midwifery education and training. These resources are required for building the competencies of student midwives to the level of proficiency needed to graduate from country-accredited educational institutions for licensure and registration to practice midwifery.

The contents of this document has been set out in four parts: 1) a composite list of all models, equipment, logistics, consumables and TLMs needed to set up a Skills Laboratory for midwifery practical training; 2) a resource and specification list for selected resources, and 3) a composite set of materials organised into teaching/learning packages. The content of these three lists is then reflected in 4) a final comparison of the seven ICM (2010) approved essential competencies for

basic midwifery practice, with the resources that would be necessary within competency-based midwifery education programmes that cite the ICM competencies as expected learning outcomes.

According to the ICM (2011) definition, a midwife is: “A person who has successfully completed a midwifery education programme that is duly recognized in the country where it is located and that is based on the ICM *Essential Competencies for Basic Midwifery Practice* and the framework of the ICM *Global Standards for Midwifery Education*; who has acquired the requisite qualifications to be registered and/or legally licensed to practice midwifery and use the title ‘midwife’; and who demonstrates competency in the practice of midwifery.” It is therefore important and facilitative that the TLMs are presented by competencies to aid the assembling of materials for students’ practical training. ICM is confident that users will find this document very useful to midwifery pre-service improvements. One area of possible need to the user which has not been provided in detail is the actual specification per each item. Where possible we have indicated the product manufacturers or distributor to enable you link up for current specifications.

2.0 Standard ICM Competency-Based List for Basic Skills Training in Midwifery Schools

2.1 Composite Essential Teaching-Learning Materials

LIST ONE: Anatomical Models

1. Zoe or Mama Natalie Models
 - Non-Pregnant
 - Pregnant – simulator for 1st, 2nd and 3rd trimesters
 - Pelvic model
2. Childbirth simulator / NOELLE Maternal and neonatal birthing simulator
3. Condom model on base
4. IUD hand held model
5. Anatomic models for injections in arm, buttock and thigh) (May use soft doll or small piece of fruit)
6. Pregnant abdomen model (for palpation – if Zoe model is not available)
7. Breast (and breastfeeding) model
8. Bony pelvis (hard: landmarks identified)
9. Foetal skull (landmarks identified)
10. Foetal baby, umbilical cord and placenta for vacuum delivery
11. Uterus and placenta models
12. Cervical replicas (for IUD insertion)
13. Cervical dilation model (plastic)
14. Adult resuscitation doll/model
15. Newborn resuscitation doll/model
16. Foetus
17. Perineum cutting and suturing training simulator (or 6 inch sponge blocks)
18. Small ball (cricket, baseball, tennis) & socks for assessing dilatation of cervix

LIST TWO: Equipment

19. Implant insertion/removal kit
 - a) Trocar and cannulae
 - b) Scalpel and holder
 - c) Blade
 - d) Mosquito artery forceps (curved and straight)
 - e) Tweezers

Alternatively: Kit purchased from order@mariestopes.org.uk (contains small Rampley sponge holding forceps, cup/bowl (Gallipot), 2 curved mosquito forceps, scalpel handle #3)

20. IUD insertion kit
 - a) Tenaculum (atraumatic and/or single tooth)
 - b) Uterine Sound
 - c) Bi-valve vaginal speculum
 - d) Ring forceps
 - e) IUD drive tube
21. Light source (examination light or well lit room)

22. Adult weighing scale
23. Infant weighing scale
24. Adult blood pressure apparatus (including stethoscope)
25. Newborn blood pressure apparatus (*optional*)/stethoscope
26. Wall clock to reflect seconds
27. Reflex hammer
28. Pen light/small flashlight
29. Measuring tape
30. Tongue depressors
31. Thermometer
32. Vaginal speculums – various sizes
33. Receiving bowls (various sizes, for solutions and for collection of specimens)
34. Graduated measuring jug
35. IV administration stand/pole
36. Tourniquet
37. Foetoscope (foetal stethoscope)
38. Doptone (if available)
39. Cord scissors
40. Curved mayo scissors (5.5 in. or 14 cm.)
41. Large straight scissors
42. Ring forceps 9.5 in. or 24.2 cm. (sponge holding forceps-straight)
43. Kocher 140 mm. straight (for amniotomy) and/or amniotomy hook
44. Long dressing forceps
45. Needle holding forceps
46. Needle extender
47. Dissecting forceps/pickups (plain and rat-toothed)
48. Large haemostat (7 inch artery forceps)
49. Episiotomy kit (stainless steel container with some of the items on this list)
50. Delivery Kit (box/bag containing some of the items on this list)
51. Transport incubator (or box fitted as simulation)
52. Ambu bag (adult and paediatric) with masks
53. Suturing set (box/bag containing some of the items on this list)
54. Manual Vacuum Aspirator (MVA Plus)
55. Set of dilators (tapered dilators, such as Pratt or Denniston, are best)
56. Strainer for tissue inspection
57. Clear containers or basin/plastic buckets (for decontamination)
58. Bedpan with cover
59. Delivery bed (patient bed, or delivery table, with privacy screens)
60. Examination table with stirrups
61. Examination stool (adjustable height)
62. Equipment cart with wheels
63. Two chairs and tables
64. Running water and sink

65. Sterilization kit or autoclave
66. Dustbin
67. Microscope and supplies (*optional*)
68. Haemoglobinometer (*optional*)
69. Vacuum extractor (*optional*)

LIST THREE: Consumables

70. Family Planning Samples
 - a) Male and female condoms
 - b) Implant (e.g., Jadelle and Implanon; others as available in country)
 - c) Injectables (Hormonal: e.g., Depo Provera, Noristerat, Norigynon)
 - d) IUD (e.g., Copper T 380A, Mirena)
 - e) Pills (e.g., combined, progestin only – *may be simulated*)
71. Hand sanitizer
 - a) alcohol rub (may be prepared using glycerine-2mls and methylated spirit-100mls of 70-80%)
 - b) soap (liquid or cake)
72. Iodine/Aqueous solution of iodine (diluted) or other antiseptic solution
73. Lubricant – water soluble (e.g., silicone)
74. Swabs and/or wipes (various)
 - a) cotton wool swabs
 - b) gauze swabs
 - c) alcohol wipes
75. Tissue paper (facial/nasal/toilet)
76. Examination gloves (clean, sterile and HLD; both disposable and reusable)
77. Urine test kit for protein & glucose (or reagents for laboratory testing)
78. Test materials for haemoglobin
79. Cytology kits (per country specification for Pap smears)
80. Acetic acid reagent (for VIA)
81. Urethral catheter
82. Suction tube (adult and pediatric sizes)
83. Intravenous supplies
 - a) infusions (various volumes and types – *may be simulated*)
 - b) giving set
 - c) cannulae/catheters (various sizes)
 - d) adhesive tape/elastoplast
84. Identification bands (mother and baby)
85. Newborn supplies (e.g., clothing, caps, diaper)
86. Towels and bed linens
87. Examination gowns
88. Waterproof sheet (mackintosh)
89. Disposable towels/drapes (for sterile field)

90. Cord clamps (disposable)
91. Safety box for sharps
92. Cotton or woollen blankets/sheets – for mother and baby
93. Expired sutures selected for demonstration (NOTE: should be the correct size and type (absorbable) e.g. chromic 2-0)
94. Syringes (various sizes)
95. Needles (various sizes)
96. Mucus extractor
97. Personal protection equipment
 - a) goggles
 - b) aprons/gowns – plastic
 - c) rubber or paper boots (*optional*)
98. Blood sample bottles
99. Wound dressings
100. Decontaminant (chlorine based) solution (0.5% chlorine)

LIST FOUR: MEDICINES/INJECTABLES

(As allowed per country-based Essential Drug List)

For teaching purposes only an empty package or vial is needed, labelled in the dosages in which the drug is supplied in country (for purpose of dosage calculations rather than drug administration)

101. Anti-anxiety medication or other light sedation
102. Analgesia medication (e.g., acetaminophen, ibuprofen, pethidine)
103. Uterotonics (i.e., oxytocin, ergometrine, syntometrine, misoprostol)
104. Mifepristone (*optional*)
105. Broad-spectrum antibiotics
106. Tetanus toxoid
107. Antimalarials
108. Haematimics
109. Antihypertensives and anticonvulsants (e.g., MgSO₄, diazepam)
110. Local anaesthetics (e.g. xylocaine, lignocaine)
111. Infant eye medications (e.g., silver nitrate, tetracycline)
112. Infant medications (e.g., vaccines, Vitamin K)

LIST FIVE: LEARNING MATERIALS

Charts/Visual Depictions/Country Based Forms

113. Female reproductive anatomy
114. Male reproductive anatomy
115. Normal changes of pregnancy
116. Prenatal discomforts
117. Foetal development

118. Stages of labour
119. Cervical dilation and foetal descent
120. Mechanisms of birth (vertex & breech)
121. Malpresentations
122. Episiotomy
 - a) How to perform an episiotomy
 - b) How to anaesthetise the perineum for episiotomy and repair of tears
 - c) Different types of episiotomy
123. Perineal and cervical tears (technique for repair)
124. Adolescent growth and development (e.g., Tanner stages)
125. Newborn resuscitation protocol
126. Adult resuscitation protocol
127. Charts or video on infection prevention procedures
128. Charts/posters on national referral systems and appropriate referral form (local)
129. Midwives code of conduct
130. Women's rights (society and health care system responsibilities)
131. Contraceptive methods (e.g., FP Global Handbook for Providers-USAID/WHO/Johns Hopkins University)
132. Family planning flip chart
133. Lactational Amenorrhoea Method (LAM)
134. Standard days method beads
135. Gestational age calculator (pregnancy wheel)
136. Maternal health records book/antenatal card/file (consistent with local practice)
137. Partograph (WHO: Need for country decision on version of partograph to use)
138. Country based client records/forms
 - a) antenatal records
 - b) intra-partum care records
 - c) family planning client forms/ folder/cards
 - d) resuscitation record forms

Books/Manuals/Videos

139. National FP protocol (local production)
140. Global Handbook on FP
141. Balanced Counselling Strategy Cue cards (Population Council/Frontiers)
142. CDs or documentary on local cultures and tradition (WHO/World Education)
143. Job aides on alarm and transport for emergency care
144. Country-based algorithm depicting how to access emergency transport
145. Country-based algorithm on direct and indirect causes of maternal and neonatal mortality and morbidity
146. WHO IMPAC materials
147. Manual removal of placenta
148. Management of shoulder dystocia
149. Bimanual compression of the uterus

150. Aortic compression
151. Breastfeeding/latching on
152. Woman Centered Abortion Care (W-CAC) and/or Woman Centered Post Abortion Care (W-PAC) manual (Contact Ipas)
153. Medical Abortion Training Curricula and IEC resources for providers and women (Contact Ipas) *(optional/additional)*

2.2 Selected Items with Suggested Specifications for Your Information

Item Description	Company Models	Item number	Comments
Intramuscular injection arm strap-on	Nasco	SB38728U	There are much simpler models without lights available for less http://www.labdepotinc.com http://www.nextag.com/ www.global-technologies.net
Newborn doll	Childbirth graphics (CG)	TP53715 (male brown) TP53718 (male African) TP53716 (female brown) TP53717 (female African)	www.childbirthgraphics.com
Fetal model with placenta	CG	TP79814 soft fetal model TP79897: soft placenta Alternatively: TP53955 – cloth pelvic model set which includes soft pelvis, soft doll with fontanels and soft placenta	The soft model that comes with placenta, is lightweight and has fontanels Nasco has the doll and placenta that normally comes with the childbirth simulator
Resuscitation Manikin, Baby	CG	TP84369: resuscitation doll TP:84368 (replacement shields)	Advanced high-tech model may not be suited to Africa
Resuscitation Manikin, Baby	Laerdal	050002: Baby Anne resuscitation doll 050100: Airways 050202: faces	

Item Description	Company Models	Item number	Comments
		Or 050012: 4-pack resuscitation dolls	
Mama Natalie pregnant and non pregnant models	Laerdal	Basic Model Cat. No. LGH – 340-00033 LGH – 340 – 00133 Complete Model Cat No. LGH 340 – 00233	
Charts		SB25037U: Anatomical systems chart set	Sets of 10 charts containing each of the systems could be purchased for Training Institutions. Check Adam Rouilly Company as well
Digestive system	Nasco	SB25038U: Anatomical organs/structures set	
Reproductive system			
Renal system			
Musculoskeletal			
Nervous			
Respiratory			
Cardiovascular			
Anatomy of the breast			
	CG	TP90718: Birth anatomy chart set	
Stages of childbirth			
Labour/birthing positions	CG	TP90673: positions for labour and birth TP90811: squatting	Recommend both poster for squatting position as well as positions for labouring out of bed
States of pregnancy	CG	TP90648: growing uterus set	
Menstrual Cycle	CG	TP90819: menstrual cycle	
Documentaries (DVD/video)			
IM injections for vaccinations			
CPR			
Processes of pregnancy			
Delivery process			
Essential newborn care			

Item Description	Company Models	Item number	Comments
Infection control	JHPIEGO Engender Health	SKU 277 CD/DVDs free of charge	EngenderHealth and JHPIEGO have videos on these. Contact them for discussion and possible supply as development partners
<i>Credit: Community-based Health Planning and Services Technical Assistance Project (CHPS-TA), Ghana</i>			

3.0. Composite Teaching/Learning Packages

This list is exemplary. Resources should be added or amended as relevant to the country situation.

3.1. History taking and client communication

Records (as relevant to the focus of client/patient care needs)
Table and chairs
Register
Patient's folder with requisite forms

3.2. Physical examination

Gloves
Examination table/bed (with footstool stool or steps)
Stool (wooden/plastic /steel adjustable on castors)
Dressing gown and cover sheets
Screen
BP apparatus (sphygmomanometer and stethoscope)
Thermometer
Reflex hammer
Disposable tongue depressor
Light source/examination light or flash light
Weighing scale
Cotton swabs
Gauze
Wall clock with seconds hand
Speculum (for some applications)
Sharps containers
0.5% chlorine solution and receptacle for decontamination
Dust bin

3.3. Laboratory investigations (optional)

Microscope
Reagents
Tourniquet
Cuvette
Microscope slides
Laboratory forms
Cotton wool swab
Hand sanitizers/disinfectants
Slide containers

Cold storage (or simulation - to preserve specimens)
Gloves
Adhesive tape
Haemoglobin measurement device (e.g., Haemacue)

3.4. Health education and counselling

Table and chairs
Wall charts – relevant to the topic: *for example:*
Normal changes of pregnancy
Prenatal discomforts
Nutritional requirements (mother, newborn, infant)
Foetal growth and development

3.5 Family Planning

3.5.1. General Resources

Wall Charts

Female reproductive anatomy
Male reproductive anatomy
Contraceptive methods

Flip Chart & Markers

3.5.2. Methods/Options Counselling

Package 3.1.

Family planning samples
Condoms
Implant
Injectables/Hormonal
IUD
OC pills (variety of packaging)

3.5.3. Condom Demonstration

Penis model on base
Condoms
Tissue
Waste bin
Hand washing facilities or hand rub (May be locally produced by midwife) or soap

3.5.4. Implant Insertion

Anatomic model – female arm
Implants

Equipment for insertion (can be ordered as a kit from: orders@mariestopes.org.uk)

Contains:

- Small Rampley sponge holding forceps
- Bowl/basis
- 2x curved mosquito forceps
- Scalpel handle #4

Waste disposal bin

Hand washing facilities or hand rub or soap

Gloves: clean (for simulation) or sterile (for use with clients)

3.5.5. *IUD Insertion*

Anatomic Models

Pelvis (Zoe or similar)

Cervix & Uterus

Equipment for insertion

Tenaculum

Ring Forceps

Uterine Sound

IUD in Drive Tube

Cotton swabs

Waste bin

Hand washing facilities or hand rub

Gloves: clean (for simulation) or sterile (for use with clients)

3.5.6. *Injectables*

Anatomic model (e.g., arm, orange or grapefruit)

Depo Provera (simulated)

18-20 gauge needles

3cc syringe

3.6. **Antenatal Care**

3.6.1. *Models and Resources*

Pelvic model (Zoe with Landmarks)

Bony pelvis

Small ball with socks

Breast model

Non-Pregnant Abdomen (Alternatively students can demonstrate on each other)

Wall Charts & Job Aids on:

Normal changes of pregnancy

Prenatal Discomforts

Foetal growth and development

Danger signs (High risk conditions and when to contact the midwife)

Chart on comfort measures during labour
Basic food groups
Chart with positioning of the placenta in the uterus

3.6.2. *History taking*

Package 3.1

Antenatal care records (Consistent with local clinical practice)

Gestational Age Calculator (Gestational Wheel)

3.6.3. *Physical examination*

Package 3.2.

Measuring tape

Vagina Speculums – Various sizes

Lubricant – water soluble

Sterile vaginal swabs

Fetoscope or doppler (if available)

Wall clock with second hand

Cotton swabs in bowl/basis

Examination gloves

Urine testing kit for protein and sugar

Urine specimen bottles

HIV testing kit (*per country protocol*)

Personal protection equipment (waterproof apron)

Operating/examination/disposal towels

Syringes and needles

Ultrasound (optional: *if available*)

Referral forms for laboratory tests

3.6.4. *Nutrition education*

Demonstration bottles/trays filled with a variety of nutritious foods for client education on foods to eat during pregnancy

3.6.5. *Medications used in the antepartum period (simulations)*

Haematenics

Tetanus Toxoid

Vitamins

Life saving medications: (e.g. antimalarials, antibiotics, anticonvulsants, anti-hypertensives and anti-retrovirals)

3.7. **Intrapartum Care**

3.7.1. *Models and resources*

Pregnant abdomen (Zoe or Similar)

Cervical dilatation
 Third trimester fetal model
 Bony pelvis (Landmarks Identified)
 Foetal skull (Landmarks Identified)
 Adult resuscitation model
 Wall Charts/Job Aids on:
 Stages of labour
 Cervical dilation and foetal descent
 Mechanisms of birth (vertex & breech)
 Malpresentations
 Uterine Involution
 Chart on descent of foetal head
 Chart on positioning for delivery
 Bimanual compression of the uterus
 Shoulder dystocia
 Aortic compression
 Newborn resuscitation protocol
 Episiotomy repair
 Repair of perineal and cervical tears
 Types of common stitches/knot tying sequence

3.7.2. History taking

Package 3.1.

3.7.3. Physical examination

Package 3.2.

Pregnant Anatomic model

Foetal stethoscope

3.7.4 Pelvic examination

Selected resources from Package 3.2

Pelvic model

Vagina speculums – various sizes

Lubricant – water soluble

Sterile examination gloves (May simulate with non-sterile gloves)

3.7.5 Laboratory investigations

Package 3.3.

3.7.6. Monitoring of labour and conduct of delivery

Forms and records

Partograph (consistent with locally adopted WHO version)

Nationally Approved standardised referral forms

Personal protection equipment

Goggles

Aprons/gowns - plastic

Equipment and supplies for intrapartum and immediate postpartum care of the mother

Intravenous supplies

Swabs/Alcohol wipes

Selection of syringes and needles

Cannula fixing dressings and tapes

Mayo scissors

Ring forceps (3)

Artery forceps (7 1/2 in.) /Large hemostats (3)

Kochers forceps or amniotomy hook

Tourniquet

Catheter (Foleys) size 14-16cm

Sharps container

Plastic graduated measuring jug

Episiotomy, perineal laceration & repair set

(Ideally one set each per student)

Absorbable suture commonly available locally, e.g., chromic catgut 2-0

Semi curved surgical scissors

Adhesive bandages

Needle driver/holder

10cc Syringe

18 gauge needle

Pick-Ups (plain dissecting Forceps)

Sterile sanitary pad

3.7.7. *Medications used in the intrapartum period (simulations)*

Local anaesthetic (e.g., xylocaine/ lidocaine 1%)

Analgesic (e.g., Pethidine)

Oxytocin or alternative uterotonic, according to country protocol

Misoprostol

Dextrose 5%

Normal saline 0.9%

Ringer's Lactate solution

3.7.8. *Equipment and supplies for immediate care of the newborn*

Plastic cord clamp/string

Mucus extractor

Paediatric ID band

Infant weighing scale

Table with flat and accessible working surface

Infant blanket (thermoregulation)
Infant warmer, heating pads, hot water bottles (thermoregulation)
Towels (for warming and stimulation)

3.8. Postpartum Care

3.8.1. Models and resources

Charts on health education
Family planning method
Attachment of baby to breast
Nutrition
Hand washing

3.8.2. History taking

Selected resources from Package 3.1.

3.8.3. Physical examination

Selected resources from Package 3.2.

3.8.4 Counseling and health education

Selected resources from Package 3.3 and 3.4.

3.8.5. Medications used in the postpartum period (simulations)

Haematinics (for anaemia)
Antibiotics
Anti Retrovirals drugs (ARVs for HIV positive mothers)
Analgesics
Antipyretics

3.8.6. Provision of MVA Services

MVA kit (see competency 7 list)

3.9 Immediate Newborn and Infant Care

3.9.1. Models and resources

Full term baby doll with sutures
Resuscitation doll
Doll (for teaching baby bath)
Wall charts
APGAR score
Gestational Age
Examination of the baby
Immunization schedule
Resuscitation

How to position baby to breastfeed

3.9.2. *Infant Resuscitation*

Newborn resuscitation model
Cloth or baby blanket to wrap model
Suction apparatus
Self-inflating bag (newborn)
Resuscitation bag and mask (term and premature sizes)
Oxygen source with flow meter (may simulate)
Clock
Transport incubator and hot water bottle

3.9.3. *Assessment of the Newborn*

Newborn doll
Cloth or baby blanket to wrap doll
Baby weigh scale
Thermometer
Infant stethoscope
Newborn record

3.9.4. *Eye Care*

Cotton swabs
Medication (simulation)
Silver nitrate 1%
Polyvidone iodine 2.5% solution
Tetracycline eye ointment

3.9.5. *Infant Immunization*

Needles
Syringes
Cotton balls
Antiseptic solution
Simulated tissue (e.g., firm foam rubber) for injection
Vials of vaccine (simulated)
Immunization record

3.9.6. *Well Baby Care*

Baby weighing scale
Rectal thermometer
Measuring tape or other calibrated measuring device
Infant stethoscope
Wall clock with second's hand
Clothing/cap/diaper

Baby Immunization record book

3.10 Abortion-Related Care

3.10.1 Models and Resources

Selected resources from Package 3.6.1

3.10.2 Equipment and supplies

Vaginal speculum

22 or 23 gauge needle and 10mls syringe for paracervical block

Intravenous equipment and supplies

MVA kit (can obtain from IPAS as MVA Plus (reusable)

Silicone for lubricating the syringe

Set of dilators (tapered dilator, such as Pratt or Denniston, are the best)

Sponge holding forceps-straight

Ring Forceps 9.5 in or 24.2 cm

Long dressing forceps

Tenaculum (atraumatic and/ or single tooth)

Uterine sound

Mosquito artery forceps (curved and straight)

Large curved haemostat-7in (artery forceps)

Strong light source or big flash light

Bowls (various sizes)

Container and strainer for tissue inspection

4.0. Skills Laboratory Equipment List per each ICM Essential Competency for Midwifery Schools

4.1. Skills Laboratory Equipment List per each ICM Essential Competency for Midwifery Schools

ESSENTIAL COMPETENCIES FOR BASIC MIDWIFERY PRACTICE (2010)	COMPETENCY STATEMENT AND REQUIRED SKILLS	REQUIRED TEACHING AND LEARNING MATERIALS
COMPETENCY # 1: COMPETENCY IN SOCIAL, EPIDEMIOLOGIC AND CULTURAL CONTEXT OF MATERNAL AND NEWBORN CARE	Midwives have the requisite knowledge and skills from obstetrics, neonatology, the social sciences, public health and ethics that form the basis of high quality, culturally relevant, appropriate care for women, newborns, and childbearing families.	Teaching and Learning Packages
	<p><u>Skills and/or abilities</u></p> <p>Basic</p> <ul style="list-style-type: none"> • engage in health education discussions with and for women and their families • use appropriate communication and listening skills across all domains of competency • assemble, use and maintain equipment and supplies appropriate to setting of practice • record and interpret relevant findings for services provided across all domains of competency, including what was done and what needs follow-up • comply with all local reporting regulations for birth and death registration • take a leadership role in the practice arena based on professional beliefs and values <p>Additional</p> <p>The midwife has the skills and/or ability to....</p>	<p>Variety of health education materials (from Section 2.1, List 5)</p> <p>Such materials may be accessible from the Directorate in charge of MNCH, Population related organisations, Health Education or Promotion Units of the Ministry of Health</p>

ESSENTIAL COMPETENCIES FOR BASIC MIDWIFERY PRACTICE (2010)	COMPETENCY STATEMENT AND REQUIRED SKILLS	REQUIRED TEACHING AND LEARNING MATERIALS
	<ul style="list-style-type: none"> assume administration and management tasks and activities, including quality and human resource management, appropriate for level of health facility and midwifery scope of practice take a leadership role in policy arenas 	Teaching and Learning Packages
COMPETENCY # 2: COMPETENCY IN PRE-PREGNANCY CARE AND FAMILY PLANNING	Midwives provide high quality, culturally sensitive health education and services to all in the community in order to promote healthy family life, planned pregnancies and positive parenting.	
	<p><u>Skills and/or abilities</u></p> <p>Basic</p> <ul style="list-style-type: none"> take a comprehensive health and obstetric, gynaecologic and reproductive health history engage the woman and her family in preconception counselling, based on the individual situation, needs and interests perform a physical examination, including clinical breast examination, focused on the presenting condition of the woman order and/or perform and interpret common laboratory tests (e.g., haematocrit, urinalysis dip-stick for proteinuria) request and/or perform and interpret selected screening tests such as screening for TB, HIV, STIs provide care, support and referral or treatment for the HIV positive woman and HIV counselling and testing for women who do not 	<p>History taking and client communications (3.1)</p> <p>Health education and counselling (3.4)</p> <p>Physical examination (3.2)</p> <p>Laboratory investigations (3.2)</p> <p>Health education and counselling (3.4)</p>

ESSENTIAL COMPETENCIES FOR BASIC MIDWIFERY PRACTICE (2010)	COMPETENCY STATEMENT AND REQUIRED SKILLS	REQUIRED TEACHING AND LEARNING MATERIALS
	know their status	Teaching and Learning Packages
	<ul style="list-style-type: none"> • prescribe, dispense, furnish or administer (however authorized to do so in the jurisdiction of practice) locally available and culturally acceptable methods of family planning • advise women about management of side effects and problems with use of family planning methods • prescribe, dispense, furnish or administer (however authorized to do so in the jurisdiction of practice) emergency contraception medications, in accord with local policies, protocols, law or regulation • provide commonly available methods of barrier, steroidal, mechanical, and chemical methods of family planning • take or order cervical cytology(Pap) test <p>Additional</p> <ul style="list-style-type: none"> • use the microscope to perform simple screening tests • insert and remove intrauterine contraceptive devices • insert and remove contraceptive implants • perform acetic acid visualization of the cervix and interpret the need for referral and treatment • perform colposcopy for cervical cancer screening and interpret the need for referral and treatment 	<p>Family Planning (3.5.1; 3.5.2; 3.5.3; 3.5.6)</p> <p>Laboratory investigations (3.3.)</p> <p>Family Planning (3.5.5)</p> <p>Family Planning (3.5.4)</p> <p>Laboratory investigations (3.3.)</p>

ESSENTIAL COMPETENCIES FOR BASIC MIDWIFERY PRACTICE (2010)	COMPETENCY STATEMENT AND REQUIRED SKILLS	REQUIRED TEACHING AND LEARNING MATERIALS
COMPETENCY # 3: COMPETENCY IN PROVISION OF CARE DURING PREGNANCY	Midwives provide high quality antenatal care to maximize the health during pregnancy and that includes early detection and treatment or referral of selected complications	
	<p><u>Skills and/or abilities</u></p> <p>Basic</p> <ul style="list-style-type: none"> • take an initial and ongoing history each antenatal visit • perform a physical examination and explain findings to the woman • take and assess maternal vital signs including temperature, blood pressure, pulse • assess maternal nutrition and its relationship to fetal growth; give appropriate advice on nutritional requirements of pregnancy and how to achieve them • perform a complete abdominal assessment including measuring fundal height, lie, position, and presentation • assess fetal growth using manual measurements • evaluate fetal growth, placental location, and amniotic fluid volume, using ultrasound visualization and measurement (if equipment is available for use) • listen to the foetal heart rate; palpate uterus for foetal activity and interpret findings • monitor foetal heart rate with Doppler (if available) • perform a pelvic examination, including sizing the uterus, if indicated and when appropriate, during the course of pregnancy 	<p>History taking (3.6.2)</p> <p>Physical examination (3.6.3)</p> <p>Nutrition education (3.6.4)</p> <p>Antenatal care (3.6.1)</p> <p>Physical examination (3.6.3)</p> <p>Pelvic examination (3.7.4)</p>

ESSENTIAL COMPETENCIES FOR BASIC MIDWIFERY PRACTICE (2010)	COMPETENCY STATEMENT AND REQUIRED SKILLS	REQUIRED TEACHING AND LEARNING MATERIALS
	<ul style="list-style-type: none"> • perform clinical pelvimetry [evaluation of bony pelvis] to determine the adequacy of the bony structures • calculate the estimated date of birth • Provide health education to adolescents, women and families about normal pregnancy progression, danger signs and symptoms, and when and how to contact the midwife • teach and/or demonstrate measures to decrease common discomforts of pregnancy • Provide guidance and basic preparation for labour, birth and parenting • identify variations from normal during the course of the pregnancy and institute appropriate first-line independent or collaborative management based upon evidence-based guidelines, local standards and available resources for: <ul style="list-style-type: none"> ○ low and or inadequate maternal nutrition ○ inadequate or excessive uterine growth, including suspected oligo- or polyhydramnios, molar pregnancy ○ elevated blood pressure, proteinuria, presence of significant oedema, severe frontal headaches, visual changes, epigastric pain associated with elevated blood pressure ○ vaginal bleeding 	<p>Teaching and Learning Packages</p> <p>Antenatal care (3.6.1) Models and resources (3.6.1)</p>

ESSENTIAL COMPETENCIES FOR BASIC MIDWIFERY PRACTICE (2010)	COMPETENCY STATEMENT AND REQUIRED SKILLS	REQUIRED TEACHING AND LEARNING MATERIALS
	<ul style="list-style-type: none"> ○ multiple gestation, abnormal lie/malpresentation at term ○ intrauterine fetal death ○ rupture of membranes prior to term ○ HIV positive status and/or AIDS ○ hepatitis B and C positive ● prescribe, dispense, furnish or administer (however authorized to do so in the jurisdiction of practice) selected, life-saving drugs (e.g., antibiotics, anticonvulsants, anti-malarials, anti hypertensives, anti retrovirals) to women in need because of a presenting condition ● identify deviations from normal during the course of pregnancy and initiate the referral process for conditions that require higher levels of intervention 	<p>Teaching and Learning Packages</p> <p>Medications used in the antepartum period (3.6.5)</p> <p>Resources from 2.1, List 5</p>
COMPETENCY #4: COMPETENCY IN PROVISION OF CARE DURING LABOUR AND BIRTH	Midwives provide high quality, culturally sensitive care during labour, conduct a clean and safe birth and handle selected emergency situations to maximize the health of women and their newborns	
	<p><u>Skills and/or abilities</u></p> <p>Basic</p> <ul style="list-style-type: none"> ● take a specific history and maternal vital signs in labour ● perform a focused physical examination in labour ● perform a complete abdominal assessment for foetal position and descent 	<p>History taking (3.7.2)</p> <p>Physical examination (3.8.3)</p>

ESSENTIAL COMPETENCIES FOR BASIC MIDWIFERY PRACTICE (2010)	COMPETENCY STATEMENT AND REQUIRED SKILLS	REQUIRED TEACHING AND LEARNING MATERIALS
	<ul style="list-style-type: none"> time and assess the effectiveness of uterine contractions 	<p>Teaching and Learning Packages</p>
	<ul style="list-style-type: none"> perform a complete and accurate pelvic examination for dilation, descent, presenting part, position, status of membranes, and adequacy of pelvis for birth of baby vaginally monitor progress of labour using the Partograph or similar tool for recording provide physical and psychological support for woman and family and promote normal birth facilitate the presence of a support person during labour and birth provide adequate hydration, nutrition and non-pharmacological comfort measures during labour and birth provide pharmacologic therapies for pain relief during labour and birth provide for bladder care including performance of urinary catheterization when indicated promptly identify abnormal labour patterns and initiate appropriate and timely intervention and/or referral stimulate or augment uterine contractility, using non-pharmacologic agents administer local anaesthetic to the perineum when episiotomy is anticipated or perineal repair is required perform an episiotomy if needed 	<p>Pelvic examination (3.7.4)</p> <p>Monitoring of labour and conduct of delivery (3.7.6)</p> <p>Medications used in the intrapartum period (3.7.7)</p> <p>Monitoring of labour and conduct of delivery (3.7.6)</p> <p>Medications used in the intrapartum period (3.7.7)</p>

ESSENTIAL COMPETENCIES FOR BASIC MIDWIFERY PRACTICE (2010)	COMPETENCY STATEMENT AND REQUIRED SKILLS	REQUIRED TEACHING AND LEARNING MATERIALS
	<ul style="list-style-type: none"> • repair 1st and 2nd degree perineal or vaginal lacerations 	<p>Teaching and Learning Packages</p>
	<ul style="list-style-type: none"> • manage postpartum bleeding and haemorrhage, using appropriate techniques and uterotonic agents as indicated • prescribe, dispense, furnish or administer (however authorized to do so in the jurisdiction of practice) selected, life-saving drugs (e.g., antibiotics, anticonvulsants, antimalarials, antihypertensive, antiretroviral) to women in need because of a presenting condition • perform manual removal of placenta • perform internal bimanual compression of the uterus to control bleeding • perform aortic compression • identify and manage shock • insert intravenous line, draw blood for laboratory testing • arrange for and undertake timely referral and transfer of women with serious complications to a higher level health facility, taking appropriate drugs and equipment and arranging for a companion care giver on the journey, in order to continue giving emergency care as required • perform adult cardio-pulmonary resuscitation <p>Additional</p> <ul style="list-style-type: none"> • perform vacuum extraction • repair 3rd and 4th degree perineal and vaginal lacerations 	<p>Medications used in the intrapartum period (3.7.7)</p> <p>Resources from Section 2.1., List 5 Models from Section 2.1, List 1</p>

ESSENTIAL COMPETENCIES FOR BASIC MIDWIFERY PRACTICE (2010)	COMPETENCY STATEMENT AND REQUIRED SKILLS	REQUIRED TEACHING AND LEARNING MATERIALS
	<ul style="list-style-type: none"> identify and repair cervical lacerations 	Teaching and Learning Packages
COMPETENCY #5: COMPETENCY IN PROVISION OF CARE FOR WOMEN DURING THE POSPARTUM PERIOD	Midwives provide comprehensive, high quality, culturally sensitive postpartum care for women	
	<p><u>Skills and/or abilities</u></p> <p>Basic</p> <ul style="list-style-type: none"> Take a selective history, including details of pregnancy, labour and birth Perform a focused physical examination of the mother Provide information and support for women and/or their families who are bereaved (maternal death, stillbirth, pregnancy loss, neonatal death, congenital abnormalities) Assess for uterine involution and healing of lacerations and/or repairs Initiate and support uninterrupted [immediate and exclusive] breastfeeding Teach mothers how to express breast milk, and how to handle and store expressed breast milk Educate mother on care of self and infant after childbirth including signs and symptoms of impending complications, and community-based resources 	<p>History taking (3.8.2)</p> <p>Physical examination (3.8.3)</p> <p>Counselling and health education (3.8.4) Models and resources (3.8.1)</p>

ESSENTIAL COMPETENCIES FOR BASIC MIDWIFERY PRACTICE (2010)	COMPETENCY STATEMENT AND REQUIRED SKILLS	REQUIRED TEACHING AND LEARNING MATERIALS
	<ul style="list-style-type: none"> • Educate a woman and her family on sexuality and family planning following childbirth provide appropriate and timely first-line treatment for any complications detected during the postpartum examination (e.g., anaemia, haematoma maternal infection), and refer for further management as necessary • Provide emergency treatment of late post-partum haemorrhage, and refer if necessary <p>Additional</p> <ul style="list-style-type: none"> • Perform manual vacuum aspiration of the uterus for emergency treatment of late post-partum haemorrhage 	<p>Teaching and Learning Packages</p> <p>Family planning (3.5.2)</p> <p>Medications used in the postpartum period (3.8.5)</p> <p>Provision of MVA services (3.10.2)</p>
<p>COMPETENCY# 6: COMPETENCY IN POSTNATAL CARE OF THE NEWBORN</p>	<p>Midwives provide high quality, comprehensive care for the essentially healthy infant from birth to two months of age.</p>	
	<p><u>Skills and/or abilities</u></p> <ul style="list-style-type: none"> • Basic • Provide immediate care to the newborn, including cord clamping and cutting, drying, clearing airways, and ensuring that breathing is established • Assess the immediate condition of the newborn (e.g., APGAR scoring or other assessment method) 	

ESSENTIAL COMPETENCIES FOR BASIC MIDWIFERY PRACTICE (2010)	COMPETENCY STATEMENT AND REQUIRED SKILLS	REQUIRED TEACHING AND LEARNING MATERIALS
	<ul style="list-style-type: none"> Promote and maintain normal newborn body temperature through covering (blanket, cap), environmental control, and promotion of skin-to-skin contact 	Teaching and Learning Packages Models and resources (3.9.1)
	<ul style="list-style-type: none"> Begin emergency measures for respiratory distress (newborn resuscitation), hypothermia, hypoglycaemia Give appropriate care including kangaroo mother care to the low birth weight baby, and arrange for referral if potentially serious complications arise, or very low birth weight Perform a screening physical examination of the newborn for conditions incompatible with life Perform a gestational age assessment Provide routine care of the newborn, in accord with local guidelines and protocols (e.g., identification, eye care, screening tests, administration of vitamin k, birth registration) Position infant to initiate breast feeding as soon as possible after birth and support exclusive breastfeeding Transfer the at-risk newborn to emergency care facility when available Educate parents about danger signs in the newborn and when to bring infant for care Educate parents about normal growth and development of the infant and young child, and how to provide for day-to-day needs of the normal child Assist parents to access community resources available 	Infant resuscitation (3.9.2) Assessment of the newborn (3.9.3) Models and resources (3.9.1) Well baby care (3.9.6) Eye care (3.9.4) Infant immunization (3.9.5) Resources from Section 2.1, List 5

ESSENTIAL COMPETENCIES FOR BASIC MIDWIFERY PRACTICE (2010)	COMPETENCY STATEMENT AND REQUIRED SKILLS	REQUIRED TEACHING AND LEARNING MATERIALS
	<p>to the family</p> <ul style="list-style-type: none"> Support parents during grieving process for loss of pregnancy, stillbirth, congenital birth defects or neonatal death 	<p>Teaching and Learning Packages</p>
	<ul style="list-style-type: none"> Support parents during transport/transfer of newborn or during times of separation from infant (e.g., NICU admission) Support and educate parents who have given birth to multiple babies (e.g., twins, triplets) about special needs and community resources Provide appropriate care for baby born to an HIV positive mother (e.g. Administration of ARV and appropriate feeding) 	<p>Models and resources (3.9.1)</p>
<p>COMPETENCY #7: COMPETENCY IN FACILITATION OF ABORTION-RELATED CARE</p>	<p>Midwives provide a range of individualised, culturally sensitive abortion-related care services for women requiring or experiencing pregnancy termination or loss that are congruent with applicable laws and regulations and in accord with national protocols</p>	
	<p><u>Skills and/or abilities</u></p> <p>Basic</p> <ul style="list-style-type: none"> Assess gestational period through query about LMP, bimanual examination and/or urine pregnancy testing Inform women who are considering abortion about available services for those keeping the pregnancy and for those proceeding with abortion, methods for obtaining abortion, and to support women in their choice Take a clinical and social history to identify contraindications to medication or aspiration abortion 	<p>Models and resources (3.10.1)</p>

ESSENTIAL COMPETENCIES FOR BASIC MIDWIFERY PRACTICE (2010)	COMPETENCY STATEMENT AND REQUIRED SKILLS	REQUIRED TEACHING AND LEARNING MATERIALS
	<ul style="list-style-type: none"> Educate and advise women (and family members, where appropriate), on sexuality and family planning post abortion 	<p>Teaching and Learning Packages</p>
	<ul style="list-style-type: none"> Provide family planning services concurrently as an integral component of abortion-related services Assess for uterine involution; treat or refer as appropriate Educate mother on care of self, including rest and nutrition and on how to identify complications such as haemorrhage Identify indicators of abortion-related complications (including uterine perforation); treat or refer for treatment as appropriate <p>Additional</p> <ul style="list-style-type: none"> prescribe, dispense, furnish or administer drugs (however authorised to do so in the jurisdiction of practice) in dosages appropriate to induce medication abortion perform manual vacuum aspiration of the uterus up to 12 completed weeks of pregnancy 	