

Annexure X


Maharashtra University of Health Sciences, Nashik
Inspection Committee Report for Academic Year 2023 - 2024
Webinar / Workshop/ CME/ Activities/ Preform in Last One Year.

Faculty : Nursing

Name of the College / Institute:- Oyster College of Nursing, Aurangabad

No. of Webinars Arranged, Guest Lectures & CME/ Workshops (Publish details on college website)

Sr. No	Details of Webinar / Workshop/ CME/ Activities/ Perform
1	Aids Day Activity with the theme: "Equalize" on 01/12/2022
2	MUHS Online Workshop: "Conduct of Inspection and Teaching and Learning Evaluation" on 11/01/2023
3	International Conference : Emerging Competencies in Midwifery & Neonatal practices : The Nursing Perspective 11-12/01/2023
4.	One day National level Workshop on "Nurturing potential Talents Through Competitive Exams on 18/01/2023
5	Journal Club Programme is organized for faculty twice in a month
6	Women's Day Celebration on 08/03/2023
7	One week National Faculty Development Program on Transformation of Nursing Education through innovative Teaching Strategies
8	Global Hand Washing Day 15 th October,2023
9	Tree Plantation In honor of celebrating Birthday of Respected LT. Gen.MADHURI KANITKAR
10	MUHS Foundation Day 10 th June,2023
11	Bhavya Maha Arogya Shibir, Sambhaginagar. On 13/08/2023 to 14/08/2023
12	International YOGA Day on 21 st June,2023
13	Mental Health Day Program 10 th October,2023


Dean/ Principal Stamp & Signature
PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.

OYSTER COLLEGE OF NURSING, AURANGABAD

**REPORT ON MUHS ONLINE WORKSHOP: "CONDUCT OF
INSPECTION AND TEACHING AND LEARNING EVALUATION"**

Date : 11.01.2023

Time: 11.00 am to 01.00 pm and 03.00 pm to 04.00 pm

Venue: Online Workshop , MUHS


Oyster College of Nursing participated in the Online Workshop organized by MUHS, Nashik on 11.01.2023. Total 2 faculty participated in the workshop.

1. Mrs. Vaibhavi M. Duraphe
2. Mr. Shubham Sonkamble

- Topics:** 1) Conduct of Inspection & Teaching and Learning Evaluation
2) Conduct of Inspection & LIC Proforma- Part 1 for Nursing Colleges

The programme started by welcoming of dignitaries of MUHS and College faculties. Honorable Vice Chancellor Lt. Gen. Dr. Madhuri Kanitkar , Honorable Pro Vice Chancellor Dr. Milind Nikhumbh , Registrar Dr. Rajendra Bangal were present for the Workshop along with other Departmental Heads of the MUHS. Dr. Sunil Titme , AP, PIMS, Loni and Dr. Mohammad Hussain, Vice Principal, Gokhale Education Society's College of Nursing, Nashik highlighted on the above topics. It was a good session.


PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.


PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.

Sir/Madam,

Please find attached login details regarding Conduct of Inspection & Teaching & Learning Evaluation for Affiliation of College Online Workshop for Allied Health Sciences Faculty with a request kindly attend workshop as per following schedule :

Reporting Time 1st Session: 10:45 AM and Reporting Time 2nd Session: 13:45 PM

MUHS Learning 3 is inviting you to a scheduled Zoom meeting.

**Topic: "Conduct of Inspection & Teaching and Learning Evaluation"
for Affiliation of Colleges.**

Time: Jan 11, 2023 11:00 AM Mumbai, Kolkata, New Delhi

Join Zoom Meeting

<https://us06web.zoom.us/j/89687657298?pwd=UGczVWQvdXdyZFJtOG1zQS83ZkQ3Zz09>

Meeting ID: 896 8765 7298

Passcode: 179685

MUHS NASHIK 5 is inviting you to a scheduled Zoom meeting.

Topic: Conduct of Inspection & LIC Proforma - Part 1 for Nursing Colleges.

Time: Jan 11, 2023 14:00 India

Join Zoom Meeting

<https://us02web.zoom.us/j/84104211745?pwd=U2VlbTdUejVYVVMbEZ1cjZKeUtLQT09>

Meeting ID: 841 0421 1745


Passcode: 948467

Thanking you in anticipation.

with regards,

Dy. Registrar
Academic Sec.(UG & PG)
MUHS, Nashik


PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.


PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.

REC



3. Incremental performance in Pass percentage of students

Year		Number of students appeared in the University examination (UG / PG) of all programs		Number of students Passed in University examination (UG/PG) of all programs		Pass Percentage	
		First Year	Final Year	First Year	Final Year	First Year	Final Year
Year 1	UG						
	PG						
Year 2	UG						
	PG						
Year 3	UG						
	PG						


Documents to be verified


- List of Programmes and the number of students appeared and passed in the final year examination
- Link for the annual report of examination results as placed before College Council/Governing body
- The result analysis performed by the institution duly attested by the Head of the Institution
- Trend analysis in graphical form

T. d.
PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.

Abdullah
PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.

• REC





MUHS

**MAHARASHTRA UNIVERSITY OF HEALTH
SCIENCES, NASHIK**

**LIC – FORMAT
EXAMINATION DEPARTMENT**

T. K.
PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.

Shophu
PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.

OYSTER COLLEGE OF NURSING, AURANGABAD
REPORT ON AID'S DAY CELEBRATION

Date : 01.12.2022

Time: 02.00 pm

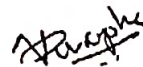
Venue: Kamalnayan Bajaj Nursing College

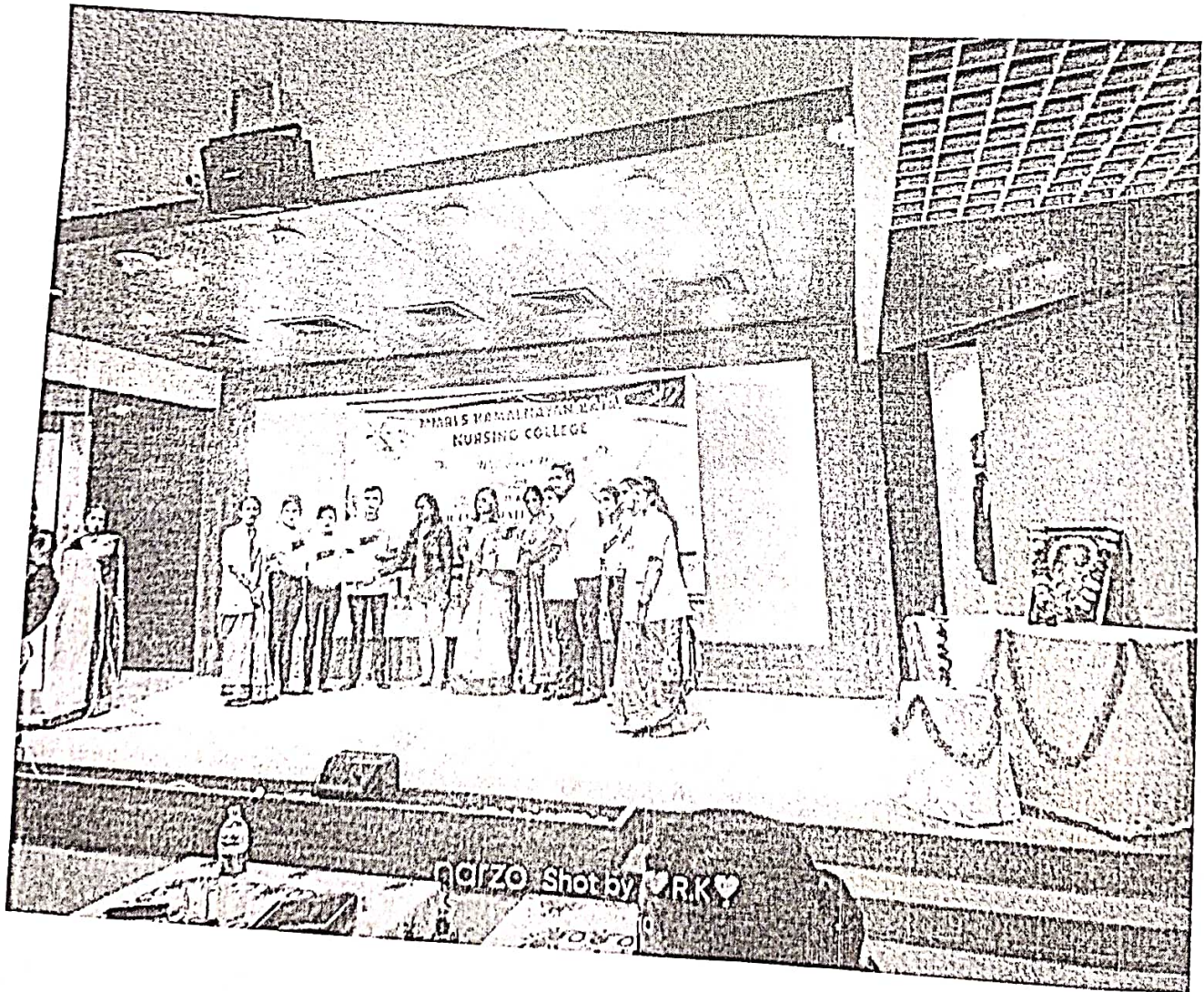
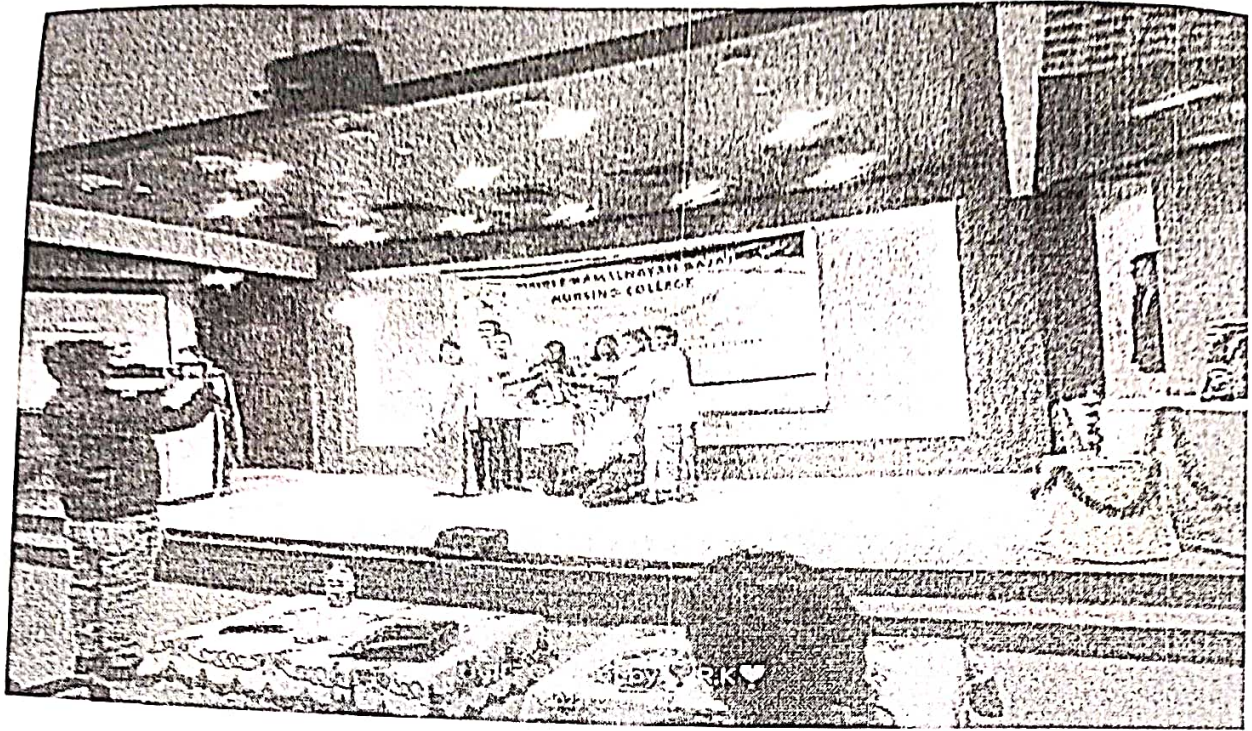
Oyster College of Nursing participated in the Intercollegiate Mime Competition organized by Kamalnayan Bajaj Nursing College, Aurangabad on the occasion of AID's Day celebration. Total 7 students participated in the competition.

1. Pranay Madhukar Shejwal
2. Rajesh Parmanand Jadhav
3. Rajashri Machindra Kharate
4. Komal Zanak Bachhire
5. Divya Deepak Mahagade
6. Megha Krishnadev Pandey
7. Sudhanshu Gautam Khillare

The theme on this day was "Equalize". The student alongwith with two faculty Ms. Shubhangi Sonkamble and Ms. Priyanka Dabhade represented the College. The College got IInd prize in the Competetion. It was a very happy moment. Students also felt motivated for the same.


PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.


PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.



T. d.
PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.

Shruti
PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.



T. K.
PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.

K. R. R.
PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.

OYSTER COLLEGE OF NURSING, AURANGABAD
REPORT ON WORKSHOP ON "NURTURING POTENTIAL
TALENTS THROUGH COMPETITIVE EXAMS"

Date: 18.01.2023

Time: 09:00 am To 05:00 pm

Venue: Government Institute of Forensic Science, Aurangabad.

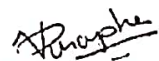
Oyster College of Nursing participated in the One day National level Workshop on "Nurturing Potential Talents Through Competitive Exams" on 18/01/23.

Total 8 students participated in the National Level Workshop.

1. Pranay Madhukar Shejwal
2. Rajesh Parmanand Jadhav
3. Rajashri Machindra Kharate
4. Komal Zanak Bachhire
5. Divya Deepak Mahagade
6. Megha Krishnadev Pandey
7. Sudhanshu Gautam Khillare
8. Dnyaneshwar Subhash Nalawade

The theme "Nurturing potential Talents Through Competitive Exams." The students along with with faculty Ms.Varsha Kamalakar Bawaskar represented the College. It was a very happy moment. Having an urge in learning as well attaining the National level workshop had a great experience. Refreshment and Lunch were provided .Students also felt motivated for the same. Mr.Sudhanshu Gautama Khillare had given the feedback for the workshop.


PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.


PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.



T. K.
PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.

Thrope
PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.



सत्यमेव जयते

**Government Institute of Forensic Science
Aurangabad**

(Nipatniranjannagar, Caves Road, Aurangabad -431004)

**Competitive Exam Centre (CEC)
and Equal Opportunity Centre (EOC)**

In collaboration with

**Pre-IAS Training Centre, Aurangabad
Organizes**

**One Day National Level Workshop
on**

**"Nurturing Potential Talents
Through Competitive Exams"**

18 January 2023

Dr. Uthas Patil

Director
Govt. Institute of Forensic Science
Aurangabad

Dr. Vasant Shedge

Director
Pre-IAS Training Centre
Aurangabad

Dr. Shobha Bawiskar

Coordinator & Cooperation
Govt. Institute of Forensic Science
Aurangabad

Mr. Rahul Bharati

Coordinator, Equal Opportunity Centre (EOC)
Govt. Institute of Forensic Science
Aurangabad

T. K.
**PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.**

Shaphe
**PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.**



GPS Map Camera



Aurangabad, Maharashtra, India

W868-XGO Government Institute of Forensic Science

Aurangabad Dr. Babasaheb Ambedkar Marathwada

University Campus, Aurangabad, Maharashtra 431004, India

Lat 19.912366°

Long 75.316489°

18/01/23 04:42 PM GMT +05:30

T. K.
PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.

Atinopu
PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.

OYSTER COLLEGE OF NURSING, AURANGABAD

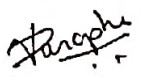
REPORT JOURNAL CLUB

Title : Human papillomavirus vaccine for children and adolescents
Date of event : 03.02.2022
Time : 11:30 am to 12.30 pm
Resource Person : Mrs. Vaibhavi M Duraphe , Vice-Principal,
Dept. of Child Health Nursing
Beneficiaries : 10 Faculty Members

Oyster College of Nursing organized a Journal club presentation on 05.01.2023, topic on "Human papillomavirus vaccine for children and adolescents". The presentation started at 11.30 am. The gathering was welcomed.

The topic was presented by Mrs. Vaibhavi M Duraphe, Vice-Principal, Dept. of Child Health Nursing. HOD's and faculty members of all the department had actively participated in the presentation and they gained knowledge related to Human papillomavirus vaccine for children and adolescents and given the feedback as it was newer topic and useful for them. The number of beneficiaries was 10 faculty members. Finally Journal club came to an end by 12.30 pm.


PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.


PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.

Position Statement

Human papillomavirus vaccine for children and adolescents

Marina I. Salvadori

Canadian Paediatric Society, Infectious Diseases and Immunization Committee, Ottawa, Ontario

Correspondence: Canadian Paediatric Society, 100–2305 St Laurent Blvd, Ottawa, Ontario K1G 4J8. E-mail info@cps.ca, website www.cps.ca

All Canadian Paediatric Society position statements and practice points are reviewed regularly and revised as needed. Consult the Position Statements section of the CPS website www.cps.ca/en/documents for the most current version. Retired statements are removed from the website.

Abstract

Human papillomavirus (HPV) is known to cause genital warts, cervical cancer, penile cancer, anal cancer and oropharyngeal cancer. In North America, the lifetime cumulative incidence of HPV infection is estimated at more than 70% for all HPV types combined. A safe and effective vaccine against nine HPV types is available. HPV vaccine should be administered routinely to all girls and boys between the ages of 9 and 13 years of age. All youth who have not received the vaccine in a routine program should receive the vaccine in a 'catch-up' program. Physicians caring for children and youth should advocate for funding and implementation of universal HPV vaccine programs.

Keywords: HPV; Vaccine

Vaccines for the prevention of human papillomavirus (HPV) infection have been approved in Canada since 2006. Between 2007 and 2010, all provinces and territories implemented publicly funded routine HPV immunization programs for girls with quadrivalent vaccine (types 6, 11, 16 and 18). Programs are all administered by public health in school-based programs to children in specific grades ranging between grades 4 and 8, depending on the province or territory. Some provinces have implemented time-limited catch-up programs for older girls. In February 2010, the quadrivalent HPV vaccine (HPV-4) was approved for use in Canada for males 9 to 26 years of age. In January 2012, HPV-4 was recommended for routine use in boys by the National Advisory Committee on Immunization (1). By summer 2017, eight provinces had announced HPV programs that included males (up-to-date provincial/territorial vaccine schedules can be found at: <http://healthycanadians.gc.ca/healthy-living-vie-saine/immunization-immunisation/schedule-calendrier/infants-children-vaccination-enfants-nourissons-eng.php>). In 2015, a nonavalent (nine valent) HPV vaccine (HPV-9) was also authorized for use in Canada and, in 2016, the National Advisory Committee on Immunization published recommendations for its use. This position statement updates

previous Canadian Paediatric Society recommendations on the use of HPV vaccine in children and adolescents (2).

HPV INFECTION AND DISEASE

HPV is a double-stranded DNA virus. It has more than 100 types, of which approximately 40 can infect the human genital tract. HPV infections are transmitted sexually by direct epithelial-to-epithelial contact. Rarely, the virus is transmitted vertically to an infant exposed in the maternal genital tract. Exposure can lead to a rare but serious condition known as 'juvenile-onset recurrent respiratory papillomatosis'. Head and neck infections also occur in adults, mostly through oral genital contact. Clinical manifestations of HPV infection include asymptomatic infection (by far the most common), warts and malignancies. Persistent infection with a high-risk HPV type is the main cause of cervical cancer and also causes cancers of the vulva, vagina, penis, anus, mouth and oropharynx. Low-risk HPV types are associated with the development of nonmalignant cervical dysplasia and anal/genital warts.

The presence of HPV is necessary for the development of cervical cancer but infection must persist for years before lesions become malignant. In the prevaccine era, HPV 16 and HPV 18

were associated with about 70% of squamous cell carcinomas, 86% of adenocarcinoma of the cervix, 90% of anal carcinomas, and approximately 50% of penile cancers and 42.8% of vulvar cancers. The five additional types contained in the HPV-9 vaccine (31, 33, 45, 52 and 58) are estimated to cover an additional 15% to 20% of cervical cancers, 24% of vaginal cancers, 9% of penile and anal cancers, and 2.5% of vulvar cancers. In addition, at least 35% of oropharyngeal cancers are associated with HPV, the majority with HPV 16 and 18 (3). HPV types 6 and 11 are benign and cause 90% of genital warts.

In North America, the lifetime cumulative incidence of HPV infection with at least one serotype is estimated at more than 70%. Without vaccination, it is likely that most sexually active Canadians will have an HPV infection at some point in their lives. The highest prevalence is in young adults 20 to 24 years of age. Because HPV is not a nationally notifiable disease, is usually asymptomatic, and HPV diagnostics are neither widely available nor publicly funded, good epidemiological data are lacking. Canadian studies have reported incidence rates of genital warts between 127 to 154 per 100,000 in men and approximately 120 per 100,000 in women. In 2011, the cervical cancer incidence rate in Canada was estimated to be seven cases per 100,000. Annually in Canada there are approximately 1300 cervical cancer cases and 350 deaths. In 2005, incidences of oropharyngeal and oral cavity cancer among men were 0.54 per 100,000 and 5.2 per 100,000, respectively (4). Women who have sex with HPV-infected males are at higher risk for precancerous lesions and cervical cancer (5).

Risk factors for HPV infection include a higher lifetime number of sexual partners, previous other sexually transmitted infections, history of sexual abuse, early age of first sexual intercourse, a higher number of lifetime sexual partners, tobacco or marijuana use, immune suppression and human immunodeficiency virus (HIV) infection (4). HPV infection and anal warts and cancers are highly prominent among men who have sex with men (MSM), particularly if they are HIV-positive (6).

To be maximally effective in preventing long-term complications from HPV infection, vaccine must be administered before acquisition of infection. Because infection can occur with the onset of any sexual intercourse, it is important to vaccinate before first sexual relationship (7). Statistics Canada data from 2005 show 29% of 15- to 17-year-olds had first sexual intercourse; this number increased to 65% for 19-year-olds, with large regional variability (8).

There is evidence that girls who are offered or receive HPV vaccine are more likely to be sexually active than are girls not offered the vaccine. HPV vaccine status does not increase rates of other sexually transmitted infections, nor do vaccinated youths engage in earlier or riskier sexual behaviours (9).

HPV VACCINES

There are three approved HPV vaccines in Canada. The vaccine approved most recently is Gardasil 9, the nonavalent vaccine

against HPV types 6, 11, 16, 18, 31, 33, 45, 52 and 58, manufactured by Merck Canada (HPV-9). The quadrivalent vaccine (Gardasil or HPV-4) targets HPV 6, 11, 16 and 18. The bivalent (HPV-2) vaccine (Cervarix, manufactured by GlaxoSmithKline) targets HPV 16 and 18. All these vaccines are manufactured using recombinant technology, which produces noninfectious virus-like particles containing protein antigens for each type. HPV vaccines are highly effective in preventing HPV-type-related persistent infection. Because the vaccine prevents infection with the papillomavirus (a necessary first step in cancer development), the cellular dysplasia (intraepithelial neoplasia) that predates invasive cancer does not occur, effectively preventing the development of cancer. If vaccine is administered before exposure to the targeted HPV types, efficacy is close to 100% against type-specific cervical disease.

A randomized trial of HPV-4 vaccine in males demonstrated efficacy against target-type-associated external genital lesions, including genital warts, of 90.4%. Efficacy against persistent vaccine-type-related infection was 70% to 96%. A sub-population of MSM was analyzed and showed an efficacy of 77.5% (95% CI: 39.6 to 93.3) against HPV type 6-, 11-, 16- and 18-related anal intraepithelial neoplasia (10).

Australia introduced a universal publicly funded vaccination program for women 12 to 26 years old in 2007. National surveillance for genital warts conducted following this initiative demonstrated that with 65% of women vaccinated, there was a decline of 59% in the diagnosis rates of genital warts in women, accompanied by a 28% drop in diagnosis rates of genital warts in heterosexual men. There was, however, no decrease in genital warts observed in MSM. These data suggest that the vaccination of women may prevent transmission of HPV vaccine types to men (11). There are currently no studies that have directly demonstrated that HPV vaccination of men will prevent transmission of vaccine types to women. However, mathematical models predict that the addition of a routine male HPV program would prevent additional cases of genital warts and cervical cancer among women, based on assumptions about transmission of HPV from men to women (12).

VACCINE SAFETY

As with all vaccines, the most common adverse events from HPV vaccines are pain at the site of vaccination (in 82% to 92% of cases), swelling (24% to 44%) or redness (24% to 48%) (4). In more than 94% of recipients, reactions are mild-to-moderate, resolve over a few days and do not prevent completion of the immunization schedule. Since licensing these vaccines, hundreds of millions of doses have been administered worldwide. Postlicensure safety surveillance data have remained consistent with prelicensure data (13). As with any vaccine, anaphylaxis after HPV vaccine can occur but such cases are rare (14,15). Syncope can occur after immunization and is most common among adolescents and young adults. To prevent syncope, observing HPV

vaccine recipients for 15 minutes after administering a dose is recommended. To date, there has been no published evidence to support any association between HPV vaccines and Guillain-Barré syndrome, autoimmune diseases, stroke, venous thromboembolism, acute disseminated encephalomyelitis, multiple sclerosis or any other serious health condition. Postmarketing surveillance has not shown a higher than expected number of deaths following HPV vaccine administration (15).

SPECIAL POPULATIONS

MSM are known to be at higher risk for infection with HPV 6, 11, 16 and 18 than are heterosexual males. Anal cancers and genital warts have a higher incidence among MSM. As teenagers become aware of and explore their sexual identities, same-sex encounters may not be unusual. Men who eventually identify as MSM may be reluctant to discuss their sexual practices with a health care provider, particularly at a young age. They may be worried about issues of confidentiality or judgment. For these reasons, the best strategy for protecting MSM against HPV-related diseases is a universal male vaccination program that does not depend on self-reporting to health care providers. Early receipt of HPV vaccine is expected to deliver maximal benefit to the MSM population.

Individuals infected with HIV are known to have a high burden of HPV-associated adverse outcomes. Genital warts are common and difficult to treat in this population. Anal cancers are particularly common in HIV-infected MSM. The HPV-4 vaccine was found to be safe and immunogenic in one small trial in HIV-infected boys and girls. Antibody titres to type 6 and 11 were lower than those observed in aged-matched HIV-uninfected children, but the clinical significance of this finding is not known (16).

HPV vaccines are not live and therefore can be administered to immunocompromised patients. Immune response has not been well studied in all of these populations, who may have suboptimal responses to the vaccine. Nonetheless, because immunocompromised patients are known to be at higher risk for adverse outcomes with HPV-related diseases, they should be offered the vaccine.

SCHEDULE

Original HPV vaccines were studied and administered on a three-dose schedule. There are data to demonstrate noninferiority of response in children 9 to 14 years of age given a two-dose schedule compared with 15- to 26-year-old women given a three-dose schedule (17,18). The two doses must be given at least 6 months apart. The efficacy and long-term effectiveness of such a two-dose schedule are not yet known. Immunocompromised children and children infected with HIV should receive three doses of HPV vaccine. There are no data on the two-dose schedule for individuals older than 15 years of age.

CHOICE OF VACCINE

When considering the health objectives of HPV vaccine, it seems prudent to ensure coverage for both genital warts and HPV-associated malignancies. HPV-9 covers 90% of genital warts and 85% to 90% of anogenital cancers. However, males proportionately derive less benefit from the additional serotypes in HPV-9 compared with females. The additional serotypes are expected to prevent 320 anogenital cancers annually in Canada (300 in females, 20 in males). Less than 1% of head and neck cancers are due to the additional types in HPV-9.

REIMMUNIZATION WITH HPV-9

While not recommended at a population level, individuals who have completed immunization with a different HPV vaccine may wish to take advantage of the added protection offered by the new types in HPV-9. The current recommended catch-up schedule requires administering the full HPV-9 vaccine series on an age-appropriate schedule.

RECOMMENDATIONS

1. HPV-9 vaccine should be administered routinely to all children at 9 to 13 years of age. To increase the likelihood that the vaccine will be administered before the onset of any sexual activity, the vaccine should be given as early as provincial/territorial programmatic issues allow.
2. HPV vaccine should be administered to all unimmunized females and males 13 years of age and older, as a 'catch-up program'. It is recommended that provinces and territories implement a 'once eligible, always eligible' policy, whereby children qualifying for publicly funded vaccines would still be eligible at a later date when they did not receive all the recommended age-appropriate doses.
3. A two-dose schedule for children 9 to 14 years of age is recommended. The two doses must be given at least 6 months apart.
4. Data regarding the immunogenicity and efficacy of HPV vaccine in immunocompromised individuals are currently lacking. However, based on expert opinion, such individuals should be offered the vaccine on a three-dose schedule.
5. HPV vaccine can be given simultaneously with all other vaccines provided to adolescents.
6. Physicians caring for children and youth should counsel patients and their parents about the HPV vaccine, and recommend HPV vaccine even when patients are not eligible for publicly funded coverage. Prescriptions for the HPV vaccines should be given and the vaccine should be administered to all individuals who choose to be vaccinated.
7. Physicians caring for children and youth should advocate for and support universal funding and implementation of HPV-9 vaccination programs for both sexes, in all provinces and territories.

8. Individuals may wish to be reimmunized with HPV-9, even if they are fully vaccinated with HPV-2 or HPV-4, to gain additional protection from the new HPV types in HPV-9 vaccine. The current schedule is two doses, administered at least 6 months apart for healthy children 9 to 14 years of age, and three doses for those aged 15 years and older.

Acknowledgements

This document was reviewed by the Adolescent Health and Communication Pediatrics Committees of the Canadian Paediatric Society.

References

1. Public Health Agency of Canada, National Advisory Committee on Immunization. Human Papillomavirus (HPV) Vaccines. Canada Communicable Disease Report January 2012;39(ACS-1). www.phac-aspc.gc.ca/publicat/ccdr/index-eng.php#footnote11 (Accessed August 14, 2017).
2. Canadian Paediatric Society, Infectious Diseases and Immunization Committee. Human papillomavirus vaccine for children and adolescents. Paediatr Child Health 2012;12(7):599-603.
3. Giuliano AR, Koutson CM, Stone KM, Markowitz LE, Giuliano AR. Prevalence of HPV infection among men: A systematic review of the literature. J Infect Dis 2006;193:561-57.
4. Public Health Agency of Canada, Canadian Immunization Guide: Part 4 – Active Immunization. Human Papillomavirus Vaccine (updated May 2017). www.phac-aspc.gc.ca/publicat/cig/p04-hpv-rph-eng.php#1 (Accessed August 14, 2017).
5. Koutson CM, A, Sardana S, Kumar A, Luthra UK. Role of male behavior in HPV infection among women with one lifetime sexual partner. Cancer 2007;111:1000-1007.
6. Markowitz LE, Ralston ML, Jay N. Prevalence and risk factors for human papillomavirus infection of the anal canal in human immunodeficiency virus (HIV)-negative homosexual men. J Infect Dis 1998;177(2):361-7.
7. Woldice LE, Brown DR, Bernstein DI, et al. Prevalence of human papillomavirus infection in young women receiving the first quadrivalent vaccine dose. Arch Pediatr Adolesc Med 2012;166(8):774-6.
8. Rotermann M. Article: Trends in teen sexual behaviour and condom use. Health Reports, Statistics Canada. Component of Catalogue no. 82-603-X. September, 2018. Ottawa, Ont.: Ministry of Industry. <http://www.statcan.gc.ca/pub/82-603-x/2008003/article/10664-eng.pdf> (Accessed August 14, 2017).
9. Kasting ML, Shapiro GK, Rosberger Z, Kahn JA, Zimet GD. Tempest in a teapot: A systematic review of HPV vaccination and risk compensation research. Hum Vaccin Immunother 2016;12(6):1435-50.
10. Palefsky JM, Giuliano AR, Goldstone S, et al. HPV vaccine against anal HPV infection and anal intraepithelial neoplasia. N Engl J Med 2011;365(17):1576-85.
11. Donovan B, Franklin N, Guy R, et al. Quadrivalent human papillomavirus vaccination and trends in genital warts in Australia: Analysis of national sentinel surveillance data. Lancet Infect Dis 2011;11(1):39-44.
12. WHO. Human papillomavirus vaccines: WHO position paper, May 2017; Grading of scientific evidence (males). Wkly Epidemiol Rec 2017;92(19):241-68.
13. Agorastos T, Chatzigeorgiou K, Brotherton JM, Garland SM. Safety of human papillomavirus (HPV) vaccines: A review of the international experience so far. Vaccine 2009;27(52):7270-81.
14. Brotherton JM, Gold MS, Kemp AS, et al. Anaphylaxis following quadrivalent human papillomavirus vaccination. CMAJ 2008;179(6):525-33.
15. Slade BA, Leidel L, Vellozzi C, et al. Postlicensure safety surveillance for quadrivalent human papillomavirus recombinant vaccine. JAMA 2009;302(7):750-7.
16. Giacomet V, Penagini F, Trabattini D, et al. Safety and immunogenicity of a quadrivalent human papillomavirus vaccine in HIV-infected and HIV-negative adolescents and young adults. Vaccine 2014;32(43):5657-61.
17. Dobson SR, McNeil S, Dionne M, et al. Immunogenicity of 2 doses of HPV vaccine in younger adolescents vs 3 doses in young women: A randomized clinical trial. JAMA 2013;309(17):1793-802.
18. Public Health Agency of Canada, National Advisory Committee on Immunization. Updated Recommendation on Human Papillomavirus (HPV) Vaccines: 9-valent HPV Vaccine 2-dose Immunization Schedule and the Use of HPV Vaccines in Immunocompromised Populations (May 2017). www.canada.ca/en/public-health/services/publications/healthy-living/updated-recommendations-human-papillomavirus-immunization-schedule-immunocompromised-populations.html (Accessed September 13, 2017).

CHILDREN'S DISEASES AND IMMUNIZATION COMMITTEE

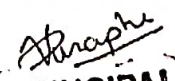
Members: Julie Barton-Forbes MD; Natalie A Bridger MD; Shalini Desai MD; Michael Forrester MD; Ruth Grimes MD (Board Representative); Charles Hui (past member); Nicole Le Saux MD (Chair); Timothy Mailman MD; Joan L Robinson MD (Past Chair); Michael D Smith MD (past member); Otto G Vanderkooi MD

Liaison: D Allen MBBS, Canadian Pediatric AIDS Research Group; Tobey Audcutt MD, Committee to Advise on Tropical Medicine and Travel (CATMAT), Public Health Agency of Canada; Carrie Byington MD, Committee on Infectious Diseases, American Academy of Pediatrics; Fahamia Koudra MD, College of Family Physicians of Canada; Rhonda Kropp BScN MPH, Public Health Agency of Canada; Lebel MD, IMPACT (Immunization Monitoring Program, ACTIVE); Jane McDonald MD, Association of Medical Microbiologists and Infectious Disease Canada; Dorothy L Moore MD, National Advisory Committee on Immunization (NACI)

Co-Chair: E MacDonald MD

President: Marina I Salvadori MD

T. 
PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.


PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.

OYSTER COLLEGE OF NURSING, AURANGABAD
REPORT ON TREE PLANTATION


Date: 15TH OCTOBER, 2023

Time: 10:00am to 11:00am

Venue: Seminar Hall, Oyster College Nursing, Aurangabad.

The Oyster College Nursing, Aurangabad. Organizes the tree Plantation. In honor of celebrating birthday of Respected LT.GEN.MADHURI KANITKAR.PVSM, AVSM, VSM(Retd). VICE CHANCELLOR MUHS, NASHIK. The event was held in the Seminar Hall, Oyster College Nursing, Aurangabad. The Program started by the welcome address by Ms. Priyanka Dabhade Tutor. The tree plantation done with all the students with the photo session. The program ended by vote of thanks given by Mr. Akash B, Tutor. Program ended with National Anthem.




PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD,



SAES's Oyster College of nursing, Aurangabad.
Organizes,


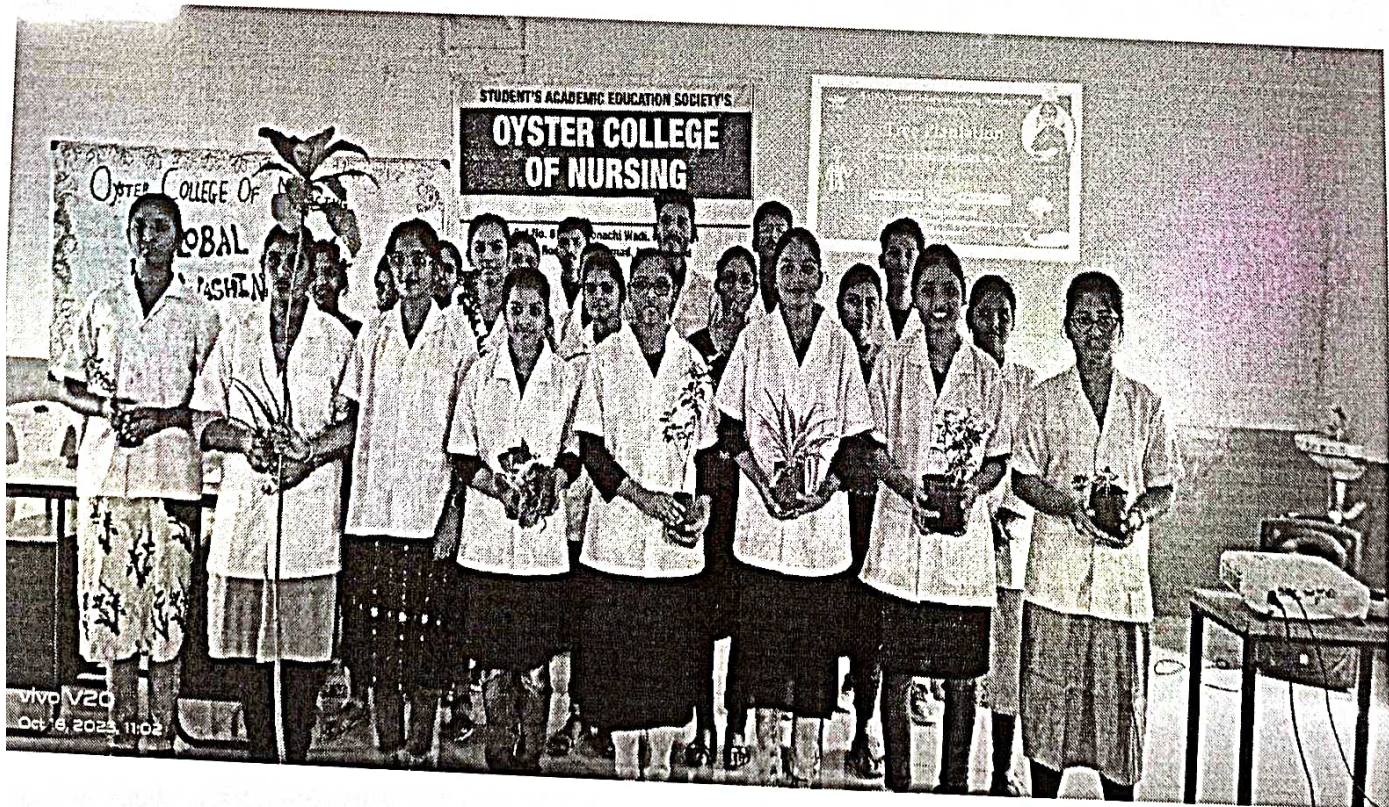
Tree Plantation

In honour of celebrating birthday of
Respected LT.GEN MADHURI KANITKAR
PVSM, AVSM, VSM (Retd)
VICE CHANCELLOR MUHS NASHIK

Date-15/oct/2023 **VENUE** **Time-10am-11am**

OYSTER NURSING COLLEGE
GUT NO.613, NAGONICHIWADI, GOLATGAON, KARMAD-JALNA ROAD
DIST.-AURANGABAD.

[Signature]
PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.



T. d.
PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.

OYSTER COLLEGE OF NURSING, AURANGABAD
REPORT ON MAHA AROGYA SHIBIR

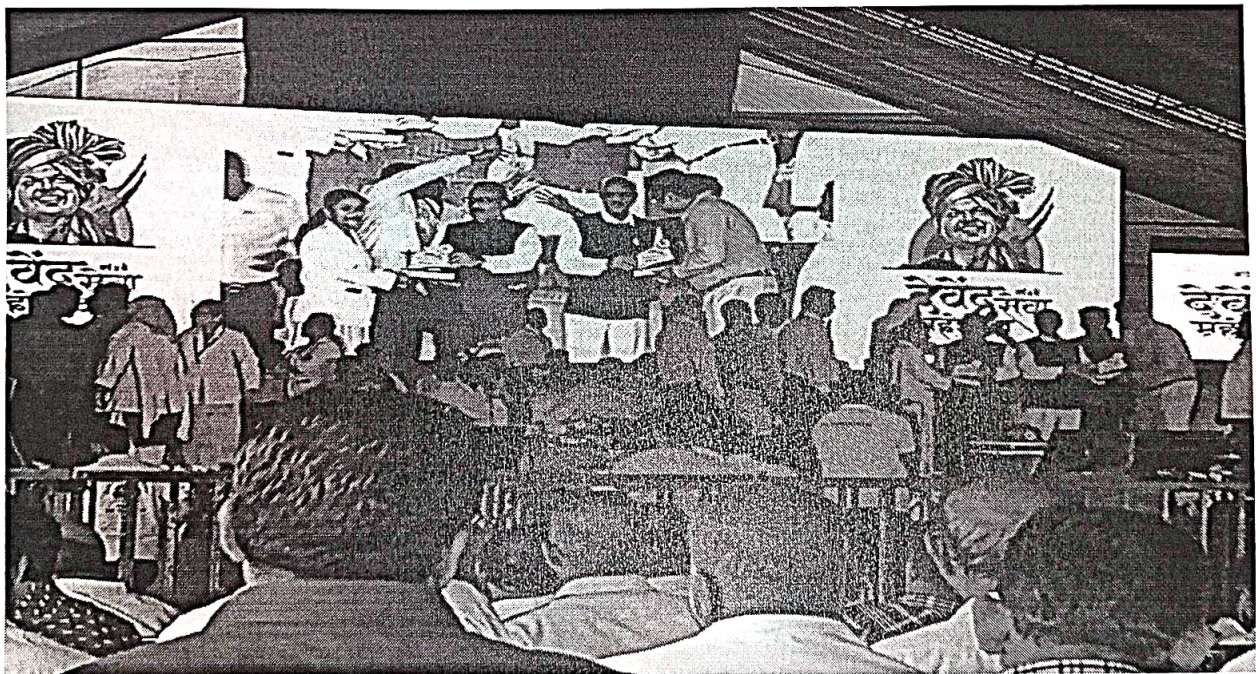
Date: 13th and 14th August, 2023

Time: 08:00am to 05:00pm

Venue: Ayodyanagar Maidan, Aurangabad.

The students of Third year BSc Nursing along with the faculty Ms Varsha K.B and Mr. Shubham S. Has been participated initiative in the Maha Arogya Shibir for Two day on 13th August, 2023 to 14th August, 2023 from 8:00am to 05:00 pm..The Students has a great exposure during these two days of Health Camp were more than 3Lakh of online registration done. The health camp was been done on the birthday of Deputy Chief Minister Devendre Fadnvis Maharashtra. The Health Camp was been done by various Health system professionals such as Medicine department camp, surgical department camp, Physiotherapy Department camp, Ayurvedic Department. The students has live demonstrating Exposure during a short period of Maha Arogya Shibir. As the memento of Maha Arogya Shibir was been given by Atul Save MLA Chatrapati Sambhajinagar & Dr. Bhagwat Karad Minister of State for Finance Govt. of India. Miss. Varsha Bawaskar Associate Professor Received the memento. The Program ended with National Anthem.


PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.




PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.


OYSTER COLLEGE OF NURSING, AURANGABAD
REPORT ON MUHS FOUNDATION DAY

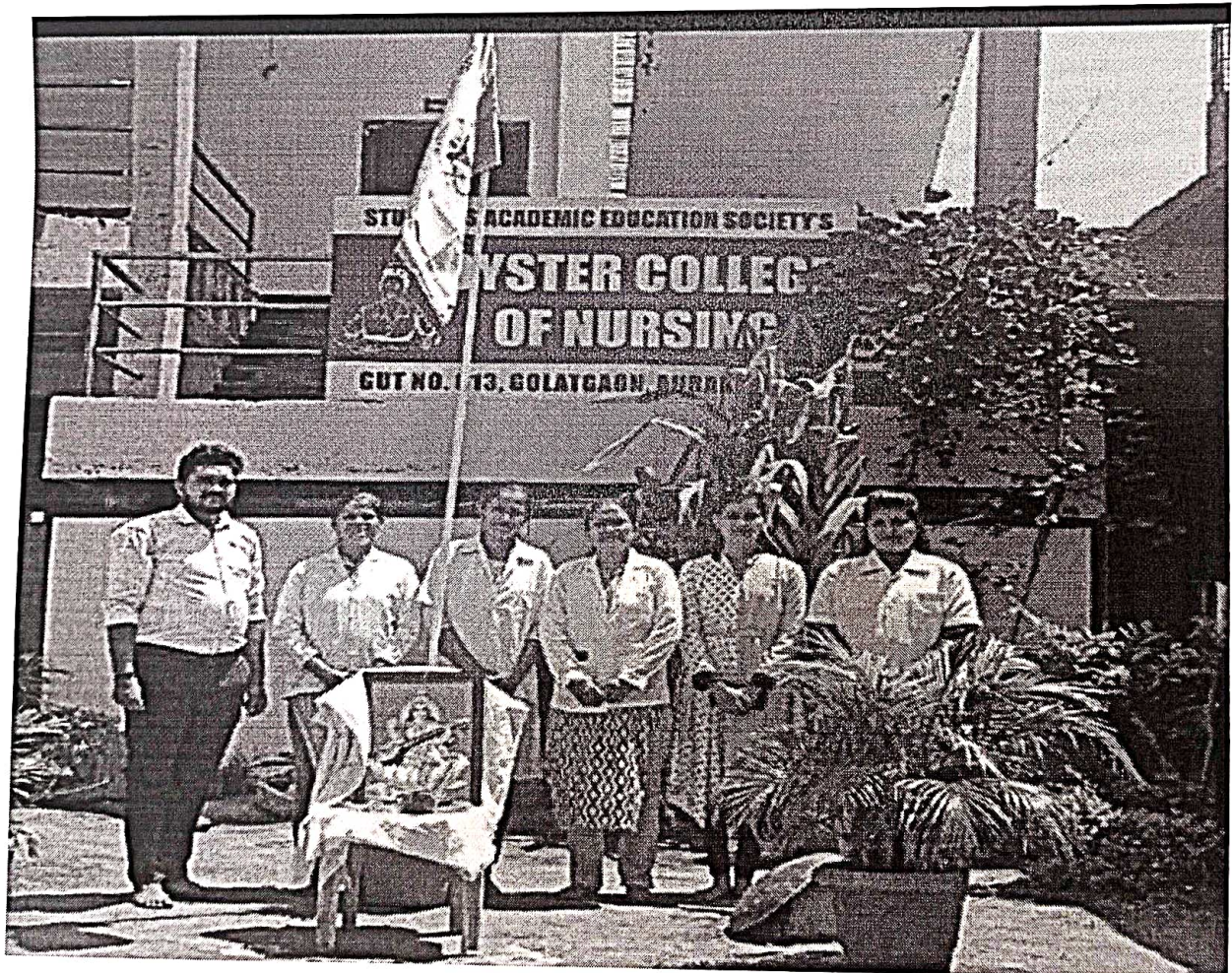
Date: 10TH JUNE, 2023

Time: 10:00am to 11:00am

Venue: Seminar Hall, Oyster College Nursing, Aurangabad.

The Oyster College Nursing, Aurangabad. Organizes the MUHS Foundation Day on 10th June 2023. on the account of 25th foundation day of MUHS Nashik we have Hosted the MUHS Flag in the presence of Teaching & Non-Teaching Staff & Students attended this Program arranged in the college. The event was held in the Seminar Hall, Oyster College Nursing, Aurangabad. The Program started by the welcome address by Ms. Priyanka Dabhade Tutor. The students & teachers sang the MUHS Anthem song & Speech given by the Vice Principal Mrs. Vaibhavi Duraphe mam. The program ended by vote of thanks given by Ms. Shubhangi Sonkambale, Tutor. Program ended with National Anthem & the refreshment.


PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.



T. h.
PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.


OYSTER COLLEGE OF NURSING, AURANGABAD
REPORT ON INTERNATIONAL YOGA DAY

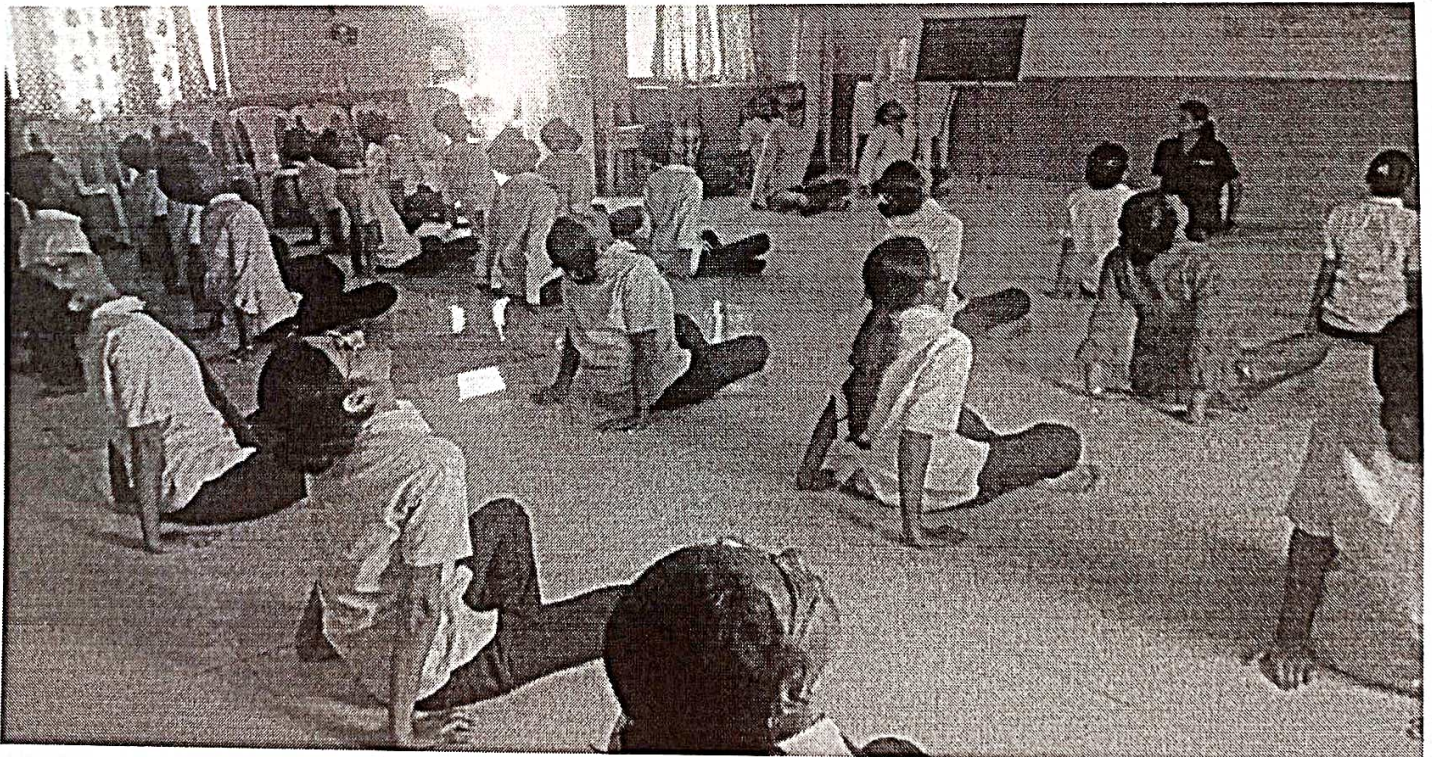
Date: 10TH JUNE, 2023

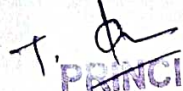
Time: 10:00am to 11:00am

Venue: Seminar Hall, Oyster College Nursing, Aurangabad.

The Oyster College Nursing, Aurangabad. Organizes the International Yoga Day on 10th June 2023 from 09:00am to 11:00pm. The yoga Teacher Dr Karishma Bhandwalkar was been welcome by Ms. Varsha Bawaskar Associate Professor, OCON with Flowers. The event was held in the Seminar Hall, Oyster College Nursing, Aurangabad. The Program was proceeded with yoga sessions for students & Teachers. The program ended by vote of thanks given by Ms. Sarika Wadekar, Lecturer. Program ended with National Anthem.


PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.



T. 
PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.

OYSTER COLLEGE OF NURSING, AURANGABAD
REPORT ON WORLD MENTAL HEALTH DAY CELEBRATION

Date : 15.10.2023

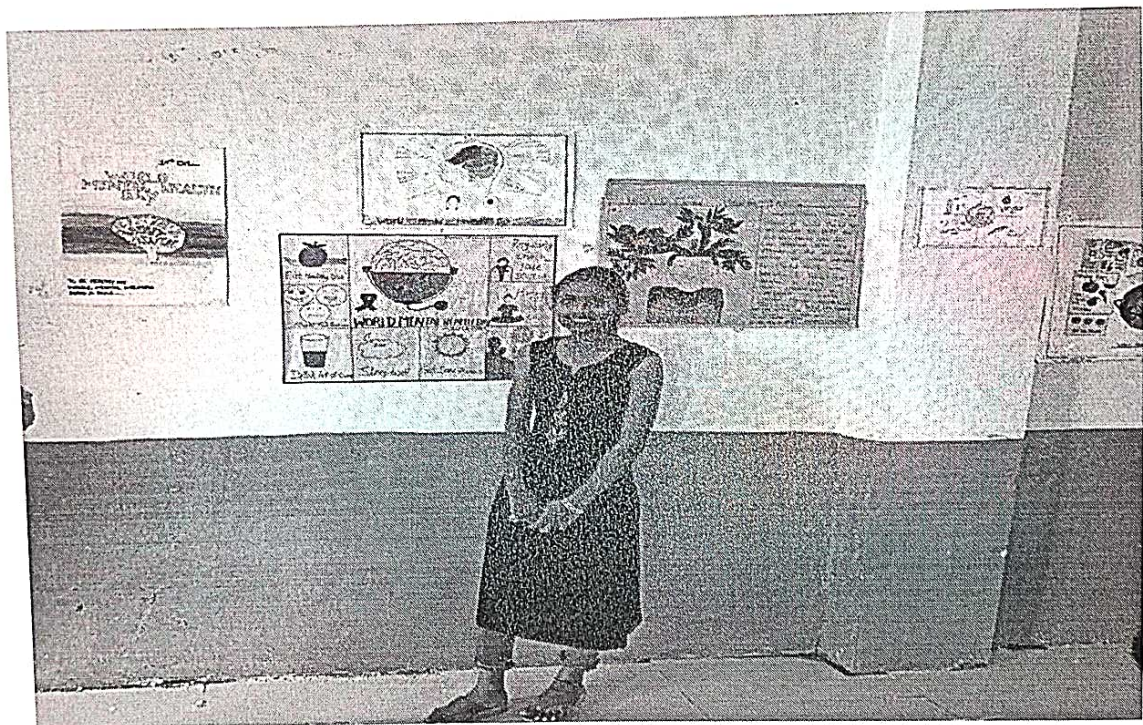
Time: 02.00 pm

Venue: Conference Hall, Oyster College Of Nursing.

MENTAL HEALTH IS A UNIVERSAL HUMAN RIGHT

Oyster Nursing College celebrated the World Mental Health Day, On 15th October 2023 to create awareness about Importance of Mental Health among youngsters & to prevent Mental Illness. The program started with speech by miss. Pournima Lecturer HOD (Dept of Psychiatric Nursing) about mental health & mental health Hygiene among students. The program Proceeded with the Poster Competition By the B.Sc.Nursing Semester -I students. Mr Shubham S (Administrative Officer) Oyster College of Nursing & other faculties evaluate the poster presentation. Mrs. Varsha B Announced the name of the Winners in the Poster Competition. The program is ended with vote of thanks.


PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.




OYSTER COLLEGE OF NURSING, AURANGABAD
REPORT ON NATIONAL FACULTY DEVELOPMENT PROGRAM

Date: 25TH APRIL TO 1ST MAY, 2023

Time: 10:00am to 05:00pm

Venue: Online.

Miss. Varsha K B Associate Professor, Oyster College Nursing, Aurangabad has participated as a Delegate in One-week National Faculty Development Program on **“Transformation of Nursing Education Through Innovative teaching strategies”** Organized by Ved Nursing Training Institute Panipat Haryana in collaboration with Glorious International Nursing Research and Academic Foundation. The Pretest & Inauguration was held on 25th April 2023 at 10:45 am & Program was proceed with total 13 sessions, scientific Paper Presentation, Post-Test and FDP ended with validatory sessions.


PRINCIPAL
OYSTER COLLEGE OF NURSING,
AURANGABAD,



VED NURSING COLLEGE,
VED NURSING TRAINING INSTITUTE,
PANIPAT, HARYANA

GLORIOUS INTERNATIONAL NURSING
RESEARCH AND ACADEMIC (GINRA)
FOUNDATION



Certificate

of Participation

This is to certify that,

Varsha Kamalakar Bawaskar

Oyster College of Nursing
Sambhaji Nagar.

has participated as a Delegate
in *One Week National Faculty Development Program*
on

**"Transformation of Nursing Education through Innovative
Teaching Strategies"**

Organized by
Ved Nursing College, Ved Nursing Training Institute, Baroli, Panipat, Haryana
In collaboration with
Glorious International Nursing Research and Academic (GINRA) Foundation

Held between 25th April – 1st May, 2023.



Chairman
Dr. Pankaj Mutneja
Ved Nursing Training Institute,
Ved Nursing College, Baroli, Panipat, Haryana

Convenor
Dr. Ravindra H N
Executive Director
GINRA Foundation

Convenor
Prof. Nidhi Sharma
Vice Principal
Ved Nursing Training Institute,
Ved Nursing College Baroli, Panipat, Haryana

PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.


OYSTER COLLEGE OF NURSING, AURANGABAD
REPORT ON GLOBAL HAND WASHINGDAY

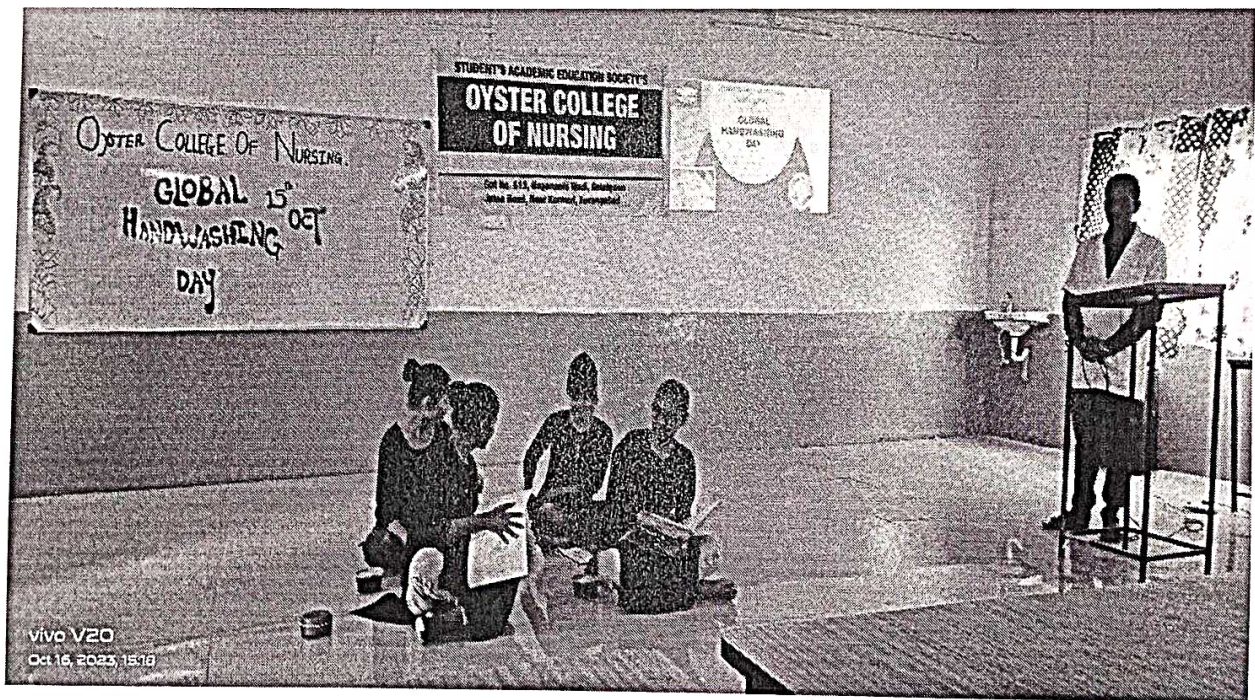
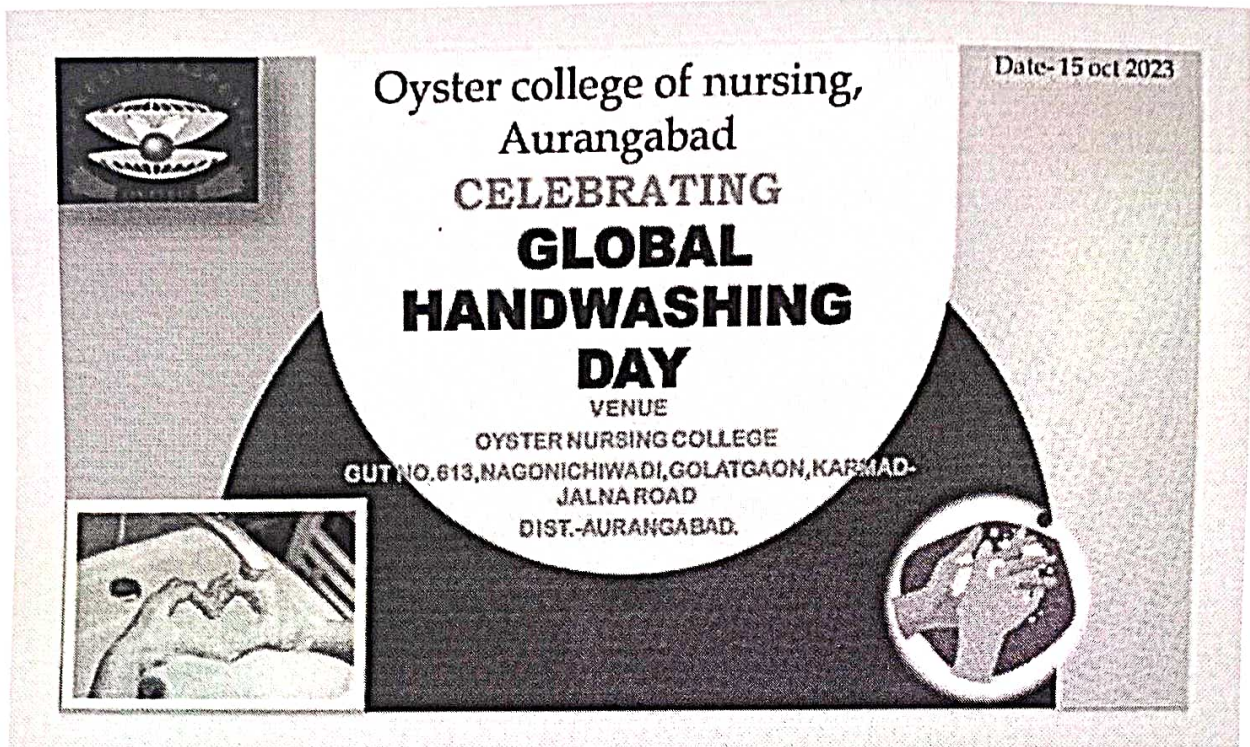
Date: 15TH OCTOBER, 2023

Time: 02:00pm to 03:00pm

Venue: Seminar Hall, Oyster College Nursing, Aurangabad.

The students of BSc Nursing Semester organized GLOBAL HAND WASHING DAY. The event was held on Seminar Hall, Oyster College Nursing, Aurangabad. The program started by the welcome address by Ms. The students facilitated the faculty by giving flower. The speech given by student Mr. Sugriv Munde. The drama on hand washing done by the students group. The Hand Washing procedure demonstrated by student MS, Snehal Gerje. The program ended by vote of thanks given by student Mr. Abhishek Patole, The Program ended with National Anthem.


PRINCIPAL
OYSTER COLLEGE OF NURSING
AURANGABAD.



T. K.
OYSTER COLLEGE OF NURSING
AURANGABAD.