РЕЦЕНЗИЯ

на рабочую программу дисциплины «Госпитальная терапия»

по специальности 560001-«Лечебное дело»

Рабочая программа по госпитальной терапии играет важную роль в подготовке будущих врачей, формируя у студентов глубокие знания и навыки диагностики, лечения и профилактики заболеваний, которые требуют стационарного лечения. Ниже представлен анализ содержания программы, её методической организации, актуальности и практической значимости.

Общее содержание и структура программы

Программа охватывает широкий спектр заболеваний, требующих госпитализации, включая заболевания сердечно-сосудистой, дыхательной, пищеварительной, мочевыделительной систем, а также эндокринные и инфекционные патологии. Также в программе отражены вопросы ведения пациентов с онкологическими и ревматологическими заболеваниями. Все эти аспекты являются ключевыми в обучении врачей, так как госпитальная терапия предполагает работу с более сложными и тяжёлыми случаями.

Структура программы выстроена логично, начинается с основ стационарной диагностики и лечения, после чего обучающиеся переходят к более сложным клиническим задачам. Особое внимание уделяется междисциплинарному подходу, что важно для госпитальной медицины, где часто встречаются коморбидные состояния, требующие координации работы специалистов разных профилей.

Актуальность программы

Программа по госпитальной терапии должна быть тесно связана с актуальными клиническими рекомендациями, поскольку в стационаре часто применяются новейшие технологии и методы лечения. В данном аспекте, программа, которую я рецензирую, охватывает современные методы диагностики, такие как высокотехнологичная визуализация (КТ, МРТ), эндоскопические процедуры, а также актуальные фармакологические и хирургические подходы

Однако, как и в случае с другими терапевтическими программами, важно, чтобы содержание постоянно обновлялось в соответствии с международными стандартами (например, рекомендациями ВОЗ или Европейских обществ по кардиологии, пульмонологии и т.д.). Важно убедиться, что студенты ознакомлены с новейшими исследованиями и клиническими рекомендациями, чтобы при выходе на практику они могли эффективно применять их на практике.

Методическая организация

Практическая составляющая программы является её сильной стороной. Госпитальная терапия требует от студентов навыков работы в условиях стационара, а также взаимодействия с пациентами, находящимися в тяжёлом состоянии. Программа включает клинические стажировки, где студенты участвуют в диагностике и лечении реальных пациентов, что помогает укрепить их клиническое мышление и развить навыки принятия решений.

Однако, по мнению некоторых студентов и преподавателей, программа могла бы быть усилена за счёт большего количества практических занятий, особенно в виде работы в симуляционных центрах, где можно безопасно отрабатывать сложные случаи и экстренные состояния. Включение симуляций или ролевых игр в учебный процесс позволяет студентам более уверенно действовать в реальных клинических ситуациях.

Преподавание и контроль знаний

РЕЦЕНЗИЯ

на рабочую программу дисциплины « Госпитальная терапия»

по специальности 560001-«Лечебное дело»

Рабочая программа по госпитальной терапии является ключевым элементом подготовки студентов медицинских вузов, формируя фундаментальные знания и навыки по диагностике, лечению и профилактике заболеваний, требующих стационарного лечения. В данной рецензии рассмотрены основные аспекты программы, включая её актуальность, структуру, методическую организацию и практическую значимость.

Содержание и структура программы

Программа охватывает широкий спектр внутренних заболеваний, которые требуют госпитализации пациентов, таких как сердечно-сосудистые, лёгочные, гастроэнтерологические, эндокринные и инфекционные патологии. Структура программы логически выстроена: начинается с базовых принципов диагностики и терапии, после чего студентам предлагается углублённое изучение специфики отдельных заболеваний, требующих комплексного стационарного лечения.

Важным достоинством является акцент на междисциплинарном подходе в госпитальной терапии. В рамках программы студенты знакомятся с особенностями ведения пациентов с коморбидными состояниями, что позволяет интегрировать знания из различных медицинских областей.

Актуальность программы

Программа по госпитальной терапии должна быть максимально актуальна, чтобы соответствовать требованиям современной медицины. В данном аспекте программа охватывает современные аспекты диагностики и лечения, однако важно, чтобы она регулярно обновлялась на основе рекомендаций международных и национальных медицинских организаций (например, ВОЗ, Европейских). Включение новейших достижений, таких как персонализированная медицина и новые подходы к лечению хронических заболеваний, делает программу более современной и востребованной.

Методическая организация

Практическая составляющая программы — её ключевая сила. Студенты получают возможность отрабатывать навыки работы в симуляционном центре, используя симуляторов и тренажёров для отработки экстренных ситуаций и сложных клинических случаев, это повышает уровень подготовки студентов. Такой подход помогает развивать не только теоретические знания, но и уверенность в действиях в условиях реальной клинической практики.

Преподавание и контроль знаний

Программа включает разнообразные формы контроля знаний: от тестов и зачетов до клинических разборов и устных экзаменов. Это позволяет объективно оценивать как теоретические, так и практические знания студентов. Оценка на основе реальных кейсов или моделируемых клинических ситуаций может стать полезным дополнением к существующей системе экзаменов.

Практическая значимость

Программа по госпитальной терапии является основополагающей для подготовки студентов к работе в условиях стационара. Практическая направленность обучения позволяет студентам не только усвоить теоретические знания, но и применить их на практике, что крайне важно для будущих врачей. В стационарных условиях студенты учатся анализировать сложные клинические случаи, принимать решения и взаимодействовать с пациентами, что формирует у них комплексный подход к лечению.

Заключение

Рабочая программа по госпитальной терапии качественная и актуальная для подготовки будущих врачей. Она обеспечивает студентов необходимыми знаниями и навыками для работы в стационаре и успешно сочетает теоретическую и практическую части.

Рецензент, к.м.н., доцент Аттокурова Г.Н. _____ Аттокурова Г.Н.,

29 августа 2024 года.

MINISTRY OF SCIENCE, HIGHER EDUCATION AND INNOVATION OF THE KYRGYZ REPUBLIC

Osh International Medical University.

Department of Clinical Disciplines

(Syllabus)

Specialty	General Medicine	**Code of course**	560001 GM
language of instruction	English	**Discipline**	Hospital therapy
Academic year	2025 - 2026	**Number of credits**	5
Teacher	Sadykova G. ZH.	**Semestr**	9
E-Mail	g_sadykova@oimu.kg sadykovagulkumar@gmail.com	**Schedule according to the "ebilim "**	Monday
Consultations (time/aud)	OshOIMU (08:00-17:00)	**Place of work**	008
Form of education (full-time/part-time/evening)	full-time	**Course type: (mandatory/elective)**	mandatory

Head of the department c.m.s.: Abdimomunova B. T. _____
(signature)

GEP Genaral medicine: Tursunova V. D. _____
(signature)

1. Purpose and objectives of the discipline

- Study of the etiology, pathogenesis, clinical and instrumental-laboratory manifestations of rare diseases of the digestive system, urination, blood, endocrine system, connective tissue and syndromes associated with urgent, critical conditions;
- demonstrate the skills and abilities of objective examination, modern diagnostics and therapeutic approaches for rare internal diseases.

2. Learning outcomes (RO) and student competencies formed in the course of studying the discipline "Hospital therapy"

- In the course of mastering the discipline, the student will achieve the following **learning outcomes (RO)** and will have the appropriate **competencies:**
- In the course of mastering the discipline, the student will achieve the following learning outcomes:

Know and understand:

- ➢ etiology, pathogenesis, and prevention measures for the most rare cases
- ➢ diseases; modern classification of diseases;
- ➢ clinical picture, features of the course and possible complications of rare diseases that occur in a typical and atypical form in different age groups;
- ➢ diagnostic methods, diagnostic capabilities of methods of direct examination of a patient with a therapeutic profile, modern methods of clinical and laboratory instrumental examination of patients (including endoscopic, X-ray and ultrasound diagnostics);
- ➢ criteria for the diagnosis of various diseases; treatment methods and indications for their use;
- ➢ clinical and pharmacological characteristics of the main groups of medicines and rational choice of specific medicines in the treatment of major pathological syndromes of diseases and urgent conditions in patients, including the basics of anti-doping legislation;

Be able to:

- ➢ make a preliminary diagnosis based on complaints, medical history and objective examination of the patient;
- ➢ make a plan for laboratory and instrumental examination to confirm the intended diagnosis and interpret the results obtained;
- ➢ formulate a detailed clinical diagnosis based on the current classification of diseases.
- ➢ make a detailed diagnosis for a specific patient, namely, the etiology, mechanism of development of the disease, complications;
- ➢ substantiate the clinical diagnosis of a particular patient with an assessment of the results of the examination and identify diagnostic criteria;
- ➢ prescribe adequate individual therapy;
- ➢ determine the prognosis of the disease in a particular patient;
- ➢ determine preventive measures and expertise of working capacity;
- ➢ recognize the clinical manifestations of emergency conditions in the above-mentioned diseases of the internal respiratory and circulatory organs.

Own:

- ➢ methods of general clinical examination;
- ➢ interpretation of the results of laboratory and instrumental diagnostic methods;
- ➢ algorithm of detailed clinical diagnosis; algorithm for making a preliminary diagnosis with subsequent referral of the patient to the appropriate specialist;
- ➢ the main medical diagnostic and therapeutic measures for the provision of first aid in emergency and life-threatening conditions.

Code Roop	Competence OP	Wording RO discipline (B)
PO5– Able to the assessment of morphofunctional, physiological States and pathological processes and to apply research methods patients adults and children for solving professional problems	**PC-2 – able and willing to carry out and interpret the survey, physical examination, clinical examination, the results of modern laboratory and instrumental studies, write medical records of outpatient and inpatient adult and child;**	**Rod-1:** able and willing t medical history, physical examination, laboratory and instrumen examination results, and medical record of an outpatient and inpat
-RO7 – Knows how to apply basic knowledge in the field of diagnostic activities to solve professional problems	**of PK-11**-with astock and ready to diagnosis on the basis of biochemical and clinical studies with the flow of pathology of organs, systems and the whole organism	**Genus-2:** willing and able to compare pathological symptoms and syndromes diagnostic pathology of the internal organs, to make the differential diagnosis, the diagnosis of the ICD-10.
	PC-13- is able to identify patients at the main pathological symptoms and syndromes of diseases, using knowledge of the fundamentals of biomedical and clinical disciplines, taking into account the course of the pathology in organs, body systems in General, to analyze the patterns of functioning of organs and systems in various diseases and pathological processes, to use the algorithm of diagnosis (primary, associated complications) based on ICD-10, perform basic diagnostic measures to identify urgent and life-threatening conditions;	
RO8 – Able to apply basic knowledge in the field of therapeutic activities to solve professional problems	**of PK-15** -able to assign patients adequate treatment according to diagnosis; **PK-16** - able to provide first aid to the adult population and children in case of urgent and life-threatening conditions, send patients to the hospital in a planned and urgent manner;	**ROd-3**: able and ready to recommend and conduct treatment of rare diseases of internal organs.

	Dublin descriptors of	the 1st generation Results of training in the discipline "hospital therapy"	Competencies
	Expression Judgment Expression Competencies	can collect anamnesis and interpret laboratory and instrumental data to make judgments based on clinical data, as well as scientific considerations.	Systemic

	communic ation тивные skills	Can communicate information, ideas, problems , and solutions to patients, relatives, colleagues, the scientific community, and the general public.	**Communication**
	Skills Academic abilityучебе	Ready to study independently continue training in the framework of NME/NPR (continuing medical education/continuing professional development)	**System requirements**

3. Course Prerequisites

"At the entrance" in accordance with the curriculum, the study of the subject "Hospital therapy"is carried out in the VIII- IX semesters.

The basic knowledge required for studying the discipline is formed in the cycle of the following previous disciplines:

- normal anatomy
- pathological anatomy
- normal physiology
- pathological physiology
- pharmacology
- internal diseases 1,2
- surgical diseases 1,2

4. Post-course requests

"On the way out" lays the foundation for students to study the following future clinical disciplines:

- obstetrics and gynecology
- family medicine
- clinical pharmacology
- and other clinical disciplines.

5. Calendar and thematic plan of the discipline by types of classes with indication of the week, topic

5.1.1 *Lectures*

#	Name of sections and topics	Hours	Used ones Educational technologies used	Forms of control
1.	Differential diagnosis in dyspeptic syndrome. Functional dyspepsia, chronic gastritis, GERD, peptic ulcer of the stomach and duodenum 12, stable angina	**pectoris of LV 2**	, MS,	Differential

2.	diagnosis and medical tactics in emergency conditions in nephrology (nephrotic crisis, acute renal failure).	**2**	LVZ, LRCS, MS	**T**
3.	Differential diagnosis in chronic kidney disease.	**2**	LVZ,MS	**T**
4.	Differential diagnosis and treatment of hypochromic, hyperchromic and normochromic anemia.	**2**	LVZ,LRCS, MS	**T**
5.	Differential diagnosis and treatment of hemorrhagic syndrome.	**2**	LVZ, MS, video	**T**
6.	Acute leukemias. Differential diagnosis and treatment	**of 2**	LVD, LRCS,MS	**T**
7.	and Chronic leukemias. Differential diagnosis and treatment of HDL	**2**	, MS,	**T**
8.	conditions in diabetes mellitus (coma)	**2**	LVH, LRCS,MS	**T**
9.	Diabetes mellitus: chronic complications.	**2**	LVZ, MS	**T**
10.	Thyroiditis.Hypo and hyperparathyroidism	**2**	LVZ, MS	**T**
11.	Addison's Disease., pheochromocytoma	**2**	LVZ, MS, video clip	**T**
12.	Itsengo-Cushing's disease and syndrome	**2**	LVZ, MS	**T**
13.	Diabetes insipidus. Acromegaly, hyperprolactinemia, pituitary insufficiency syndrome	**2**	LVZ, MS	**T**
14.	Differential diagnosis for systemic scleroderma and dermatopolymiositis clinic, diagnosis, treatment	**of 2**	LVZ, LRCS, MS	**T**
15.	Differential diagnosis, differentiated treatment and prevention for systemic vasculitis: Nodular periarteritis, Goodpasture syndrome, Wegener's granulomatosis.	**2**	LVZ, MS	**T**

5.2*Practice*

#	**Name of sections and topics**	**Hours**	**Used ones Educational technologies used**	**Forms of control**
1.	Differential diagnosis of dyspeptic syndrome (functional dyspepsia, chronic gastritis,GERD)	**2**	TBL, ILIM	**SZ**
2.	Differential diagnosis and treatment of hepatomegaly splenomegaly and ascites(chronic hepatitis B, C, D and non-alcoholic fatty liver disease, hepatocellular carcinoma and blood diseases).	**2**	CBL	**UO, T**
3.	Differential diagnosis of gastrointestinal bleeding from the	**2**	MS,ILIM	**UO, SZ**

	lower gastrointestinal tract: (colon cancer, ulcerative colitis, Crohn's disease, hemorrhoids) algorithm of emergency care.			
4.	Differential diagnosis and treatment of jaundice (hemolytic anemia and chronic hepatitis, liver cancer)	**2**	MS, PBL, RI	**T, UO**
5.	Differential diagnosis in choledocholithiasis and pancreatic head tumor, GI. Emergency care for biliary colic	**2**	D, RI	**T**
6.	Differential diagnosis for urinary syndrome, proteinuria, hematuria (chronic pyelonephritis, glomerulonephritis, urolithiasis.)	**2**	MS, mini-COF	**UO**
7.	Differential diagnosis for nephrotic syndrome (multiple myeloma and amyloidosis of the kidneys).	**2**	TBL, ILIM, CRB	**SZ,UO**
8.	Differential diagnosis and medical tactics in emergency conditions in nephrology (nephrotic crisis, acute renal failure).	**2**	CBL	**T, NW**
9.	Hemolytic anemia. Autoimmune hemolytic anemia. Hereditary microspherocytosis (Minkowski-Shoffar disease). Aplastic anamia. Differential diagnosis and treatment	**2**	TBL,D	**UO, NW**
10.	Differential diagnosis hemorrhagic diatheses (hemorrhagic vasculitis, immune thrombocytopenia. Hemophilia. Differential diagnosis of hemorrhagic diathesis.)	**2**	MS, PBL	**T, UO**
11.	Acute leukemias. Differential diagnosis	**of 2**	CRB, ILIM	**SZ**
12.	Chronic leukemias. Differential diagnosis	**of 2**	MS, mini-COF	**UO, T**
13.	Emergency conditions in diabetes mellitus (coma).	**2**	TBL ILIM, CRB	**SZ, UO**
14.	Diabetes mellitus: chronic complications	**2**	TBL	**, SZ**
15.	Thyroiditis. Hypo-hyperparathyroidism	**2**	RI, ILIM	**UO**
16.	Addison's disease., pheochromocytoma.	**2**	MS, PBL,	**NW**
17.	Itsengo –Cushing's disease and syndrome	**3**	MS, CRB	**UO**
18.	Diabetes insipidus. Acromegaly, hyperprolactinemia, pituitary insufficiency syndrome	**2**	CBL,D	**DW**

19.	Obesity. Nutrition for obesity	**2**	TBL, ILIM	**UO**
20.	Osteoporosis	**2**	CBL	**SZ, UO**
21.	Differential diagnosis for systemic scleroderma and dermatopolymiositis clinic, diagnosis, treatment	3	CRB	**T**
22.	Differential diagnosis, differentiated treatment and prevention with systemic vasculitis: Nodular periarteritis, Goodpasture syndrome, Wegener's granulomatosis.	**2**	MS,RI	**NW, UO**

5.3*IW*

№	Title of sections and topics	Hours	Forms of Control Forms
1.	Differential diagnosis and treatment of postoperative diseases of the stomach and biliary tract.	**5**	R, IB, T, CR, SZ
2.	Differential diagnosis of intestinal dyspepsia (Crohn 's disease, chronic pancreatitis, irritable bowel syndrome)	**5**	R, IB, T, CR, SZ
3.	Differential diagnosis of hypochromic, normochromic anemia	**5**	R, IB, T, CR, SZ
4.	Thalassemia. Sickle-peptide cell anemia	**5**	R, IB, T, CR, SZ
5.	DIC syndrome	**5**	R, IB, T, CR, SZ
6.	Agranulocytosis	**5**	R, IB, T, CR, SZ
7.	Leukemoid reaction	**5**	R, IB, T, CR, SZ
8.	Lymphogranulomatosis	**5**	R, IB, T, CR, SZ
9.	Differential diagnosis of hyperglycemia and glucosuria syndrome (type 1 and 2 diabetes mellitus). Clinic. Diagnostics. Treatment	**5**	P, IB, T, CR, SZ
10.	Differential diagnosis of thyrotoxicosis syndrome (Graves ' disease, subacute thyroiditis, drug-induced thyrotoxicosis). Management of patients. Indications for hospitalization. Thyrotoxic crisis.	**5**	P, IB, T, CR, SZ
11.	**Module I**		
12.	Differential diagnosis of hypothyroidism syndrome (primary and secondary hypothyroidism).	**5**	R, IB, T, CR, SZ
13.	Differential diagnosis of joint syndrome. Features of joint syndrome in gout, deforming osteoarthritis, and rheumatoid arthritis.	**5**	R, IB, T, CR, SZ
14.	Differential diagnosis and treatment of seronegative spondyloarthritis.ankylosing spondylitis, reactive arthritis, psoriatic arthritis, enteropathic arthropathies	**5**	P, IB, T, CR, SZ
15.	Differential diagnosis and treatment of systemic connective tissue diseases. Systemic lupus erythematosus. Sjogren's syndrome.	**5**	R, IB, T, KR, NW

	Antiphospholipid syndrome. Autoimmune thrombocytopenic purpura.		
16.	Medical history	**5**	

LVZ-lecture-visualization, LRCS-lecture with analysis of specific situations,
MS - method of "brainstorming", "D" - dispute, SZ-situational tasks, RI – role-playing game, T – test control, Pr-presentation, ILIM-interpretation of laboratory and instrumental research methods; UO - survey; CRB-clinical analysis of the patient; R-abstract; IB - medical history; CR - creative work.

6. Educational, methodical and informational support of the discipline.

Main literature:

1. Pathologic basis of disease 10th edition Volume II. Robbins & Cotran
2. Davidson's Principles and Practice of Medicine 24rd Edition 2022
3. Harrisons PRICIPLES OF INTERNAL MEDICINE// Fauci, Braunwald, Kasper, Longo, Jameson, and Loscalzo//21st Edition Copyright 2022
4. Kaplan USMLE Step 2 CK Internal Medicine 2020 Lecture Notes 2
5. Medicine: Prep Manual for Undergraduates Aggarwal Praveen, George K. Mathew 6th Edition 2019
6. The 5 Minute Clinical Consult 2019 by Domino 27ed

Additional literature:

1. Differential Diagnosis of Common Complaints// Robert H. Seller, MD Andrew B. Symons, MD, MS// the 7th edition2016
2. The 5 Minute Clinical Consult// by Domino// 27ed 2019
3. Internal Medicine //Kaplan USMLE Step 2 CK // 2014 Lecture Notes
4. Clinical Aphorisms and Related Pathophysiology// by Wolters Kluwer Health// Copyright © 2016
5. Williams Textbook of Endocrinology// Shlomo Melmed MD, Kenneth S. Polonsky MD , Jean D. Wilson//10th ed
6. Endocrine secrets// Michael T.McDermott // 6th edition

Online resources:

1.https://www.cochranelibrary.com/
2.https://www.tripdatabase.com/
3.https://www.tandfonline.com/toc/ilal20/current
4.https://professional.diabetes.org/content-page/practice-guidelines-resources
5.https://ibooks.oshsu.kg/book/?lg=1&id_parent=50&id1=1832&id4=
6.https://ibooks.oshsu.kg/book/?lg=1&id_parent=50&id1=1881&id4=

7. Evaluation information

Rating (points)	**Letter system score**	**Digital equivalent**	**of the traditional system**
87-100	A	4.0	Excellent
80 – 86	B	3.33	Good
74 – 79	C	3.0	

68-73	D	2.33	Satisfactory
61-67	E	2.0	
31-60	FX	0	Unsatisfactory

8. Scoring policy.

List of mandatory minimum practical skills

A student can earn points for all types of classes.

1. **Map of the set of points for each current control.**
   Each current control is rated at 30 points.

   The points of each practical lesson within one module are the same and are determined by the number of practical lessons in the module.
   During the practical lesson, control questions, tests and situational tasks proposed in methodological developments for students are considered.

   Ticking control:
   Total TC points for each class
   ---------- :
   Number of classes

Map of the set of points for each current control 30 points from them:

Activity Student activity	Task title				Practical skills								
	Back-Test control or correct presentation of the material				Situational tasks, demonstration of practical skills and "justification of the clinical diagnosis"				Interpretation of laboratory and instrumental data				Total Points
	8				12				10				30
	"5" 8	"4" 6	"3" 4	"2" 2	"5" 12	"4" 10	"3" 8	"2" 2	"5" 10	"4" 8	"3" 6	"2" 2	

Assessment of students ' knowledge on level tasks

Level	Name of tasks	Number of tasks	Maximum score	Score on the " 5 "point system
1-level	Test or oral survey	4	8 point	"3"
2-level	Analysis, synthesis of visual material	2	10 point	"4"
3-level	Assessment, practical skills	2	12 point	"5"

At each lesson, the student is given 3-level tasks

- **level** 1 in the form of a test consisting of 4variants in each variant of 4 questions one question - 2 points, if the student correctly answered all 4 questions gets 8 points. Test questions should correspond to the role of "knows"
- **Level 2** Tasks consisting of 22 questions, interpretation of laboratory data, each with 5 points. Tasks correspond to the RO level of "Can do"
- **Level 3** tasks in the amount of 2, each with 6 points. Solving situational problems and interpreting clinical and laboratory indicators of all12 points. Tasks of this level are assigned to the RO level "Owns"

Criteria for evaluating current knowledge control

26-30pointss – "5" excellent
22-25 pointss – "4" good
18-20 pointss –"3" satisfactoryo
0-17 points - "2" is not satisfactory

The current control is made up of the sum of points fromthe stnth surveya,solving situational problems andinterpretation,and laboratory and instrumental data. Only 30 points.

Activity Student activity	**Practical skills**											
	Oral survey				**Solving situational problems "substantiation of clinical diagnosis"**				**Interpretation of laboratory and instrumental data**			
	8				**12**				**10**			
	"5" 8	"4" 6	"3" 4	"2" 2	"5" 12	"4" 10	"3" 6	"2" 2	"5" 10	"4" 8	"3" 4	"2" 2

Criteria for evaluating the oral response during the TC and RC:

8 points – "5"**excellent**
- for the depth and completeness of mastering the content of the educational material, in which the student easily navigates, for the ability to combine theoretical questions with practical ones, express and justify their judgments, correctly and logically state the answer

6 points – "4"**is good**
- the student has fully mastered the educational material, is guided in it, correctly presents the answer, but the content and form are inaccurate, correctly interprets laboratory and instrumental data

4 points –"3"**is satisfactoryo**- the student has mastered the knowledge and understanding of the main provisions of the educational material, but presents it incompletely, inconsistently, makes inaccuracies in the definition of understanding, in the application of knowledge, inaccuracies in the formulation of the clinical diagnosis and treatment are made

2 points - "2"**is not satisfactory**
- the student has fragmented and unsystematic knowledge of the educational material, does not know how to distinguish the main and secondary, makes mistakes in defining concepts, distorts their meaning, and presents the material randomly and not confidently.

Criteria for evaluating the solution of situational problems:

Student activity	score

Student correctly solves the situational problem, interpreting the results of additional survey methods	12points - "5"**excellent**
Student admits some inaccuracies in solving the situational problem and interpreting the results of additional survey methods	10points – "4"**good**
Student interprets only some answers to the situational problem and interpreting the results of additional survey methods survey	**6** results 6points – "3"**satisfactorythe**
The student does not know how to solve a situational problem and evaluate the results of additional survey methods	**2** points - " 2 "**not satisfactory**

Criteria for evaluating the interpretation of clinical and laboratory parameters:

Student activity	score
Student correctly interprets the results of additional survey methods	10 points– "5"**excellent**
Student gives an incomplete answer when interpreting the results of additional survey methods	8 points – " 4 "**good**
Student gives a incomplete answer with errors when interpreting the results of additional survey methods	4 points –"3"**satisfactory**
Student is not able to evaluate the results of additional survey methods	**2** points - "2"**is not satisfactory**

2. Map of scoring points for foreign control

Score card for RC (practice points).+ektsii points+SRS points): 3

- 30 points for **a practical lesson during** the RC.,
- 30 points per lek.,
- 30 points for the SRS , then we sum and divide by three, i.e. we find the arithmetic average sum

$$\text{For example: RC} = \frac{\text{Lec(30b)} + \text{Prac (30b)} + \text{SRS (30b)}}{3} = 30\text{b}$$

A) A card for collecting points for a lecture during the border control

Lecture evaluation criteria:

Activity Student activity	**Tests for lectures**				**Total scores**
	10 tests				
	Correct answer				**30**
	" 5 " 20 (100%)	«4» 15 (80)	«3» 10(70%)	"2" 2 (Less than 60%)	

	Practical skills

Activity Student activity	Oral survey				Solving situational problems "substantiation of clinical diagnosis"				Interpretation of laboratory and instrumental data			
	8				12				10			
	"5"	"4"	"3"	"2"	"5"	"4"	"3"	"2"	"5"	"4"	"3"	"2"
	8	6	4	2	12	10	6	2	10	8	4	2

C). Map of the set of points of the border control-estimated at 30 points, evaluation criteria as in the TC

Control **during border control** takes place in two stages:

1. oral interview
2. practical skills (situational tasks and interpretation of laboratory and instrumental data);

C). Map of the set of SRS points-evaluated during the practical lesson and during the border control

A) Assessment of students ' independent work.

Independent work of students, which is provided on the topic along with classroom work. is evaluated during the current control in the corresponding practical lesson.

The level of assimilation of topics that are submitted only for independent work is evaluated at the boundary control.

B) Assessment of individual work (tasks) of the student.

Students can submit tasks on the module topic in the form of:

1. Solving situational problems
2. Tests
3. Making crosswords

This can be an IIRC or an IIRC:

4. Preparation of a review of scientific literature (abstract);
5. Preparation of illustrative material on the topics covered (multimedia presentation, a set of tables, diagrams, drawings, etc.);
6. Conducting scientific research within the framework of a student scientific circle
7. Publication of scientific reports, reports at scientific conferences, etc.;
8. Participation in Olympiads.

Points for individual tasks are awarded to the student only if they are successfully completed and defended (prizes at the corresponding competitions). The number of points that are awarded for individual work is added to the sum of the points of the border control and lecture and the arithmetic average is displayed.

Activity Student activity	Practical skills											
	Oral questioning				Solving situational problems				Reading and interpreting research			
	30				30				30			
	"5"	"4"	"3"	"2"	"5"	"4"	"3"	"2"	"5"	"4"	"3"	"2"
	30	25	20	2	30	25	20	2	30	25	20	2

Activity Student's	Research papers and presentations, scientific reports, creative works	Tests	Hospital duty and writing an academic medical history	Total Points

activity	30				30				30				30
	"5" 30	"4" 25	"3" 20	"2" 2	"5" 30 (100%)	«4» 25 (80%)	"3" 20 (70%)	"2" 2 (less than 60%)	"5" 30	"4" 25	"3" 20	"2" 2	

SRS EVALUATION CRITERIA:

Criteria for evaluating the solution of situational problems or interpretation of clinical and laboratory indicators:

Student activity	score
Student correctly solves a situational problem, correctly interprets the results of additional survey methods	26-30-30points - "5" excellent
Student admits some inaccuracies in solving a situational problem and interpreting the results of additional survey methods	22-25points - " 4 " good
Student interprets only some answers to a situational problem and interpretation of the results of additional survey methods	18-20points - "3" satisfactory
The student is not able to solve a situational problem and evaluate the results of additional survey methods	0-17 points - "2" not satisfactory

Criteria for evaluating a student's performance during academic duty

Student activity	score
Student correctly diagnoses the supervised patient prescribes clinical and instrumental research methods, correctly prescribes treatment	**26-30-30** points - "5"**excellent**
Student admits some inaccuracies in the diagnosis, appointment of clinical and additional diagnostic methods, treatment	**22-25** points – "4"**good**
Student admits errors in the diagnosis, appointment of clinical and additional diagnostic methods, treatment diagnosis, appointment of clinical and additional diagnostic methods, treatment	**18-20** points - "3"**satisfactory**
The student was not on duty or makes gross mistakes in making the diagnosis, does not know how to prescribe clinical and instrumental diagnostic methods, treatment	**of 0-17** points - " 2 "**is not satisfactory**

Criteria for evaluating *multimedia presentation*

Student activity	score
The student was able to interest the audience, fully mastered the educational material, met the rules, the performance met the standards of literary speech (set of tables, diagrams, drawings, etc.);	**26-30** points " 5 "**excellent**
Presentation made, fully mastered the educational material, but the content and form has inaccuracies, the student was able to interest the audience, but he did not meet the rules	**22-25** points " 4 "**well**
, the presentation was made, the student met the rules, the student mastered the knowledge and understanding of the main provisions of the educational material, but presents it incompletely, inconsistently, makes inaccuracies in the definition and he could not interest the audience	**18-20**points" 3 " satisfactorily.**satisfied**

Crossword puzzle evaluation criteria:

Student activity	score
correspondence of the content to the topic, competent formulation of questions, crossword completed without errors, work submitted for control in time	**26-30** points – " 5 "**excellent**
crossword completed without errors, minor inaccuracies in the wording of questions, sufficient information	**22-25** points –" 4 "**well**
corresponds to the content of the topic, significant inaccuracies were made in the formulation of questions, insufficient information	**18-20** points -"3"**is satisfactory**
not fully correspond to the content of the topic, but insufficient information	**0-17** points - "2"**is not satisfactory**
in total	only 30

Evaluation criteria abstract

Thereferral must meet the following requirements:

- The material must be printed for at least 15 pages
- Correct design of the title page (write the subject of the abstract, last name, first name, name of the educational institution.)
- In preparing the abstract, it is necessary to use materials from modern publications no older than 5 years and new clinical standards.
- Correct preparation of the abstract plan in accordance with the topic
- The content of the abstract should correspond to the topic.
- Correct design of the abstract title
- The list of references should include the author, the name of the source, the place of publication, the year of publication, the name of the publisher, and the pages used. compliance of the content with the topic; depth of study of the material; completeness of the use of sources; compliance of the abstract design with the requirements.

Abstract evaluation criteria

Student activity	score
The student has fully mastered the material, correctly designed the title page and title, the content of the abstract corresponds to the topic, is available, the list of references is drawn up with the author, source name, place of publication, year of publication, publisher name, pages used.	**26-30** points - " 5 "**excellent**

Student has fully mastered the material, correctly designed title page and title, the content of the abstract corresponds to the topic, there is a list of references drawn up with the author, but the year of publication is older than 5 years.	**22-25**points - " 4 "**well**
the student did not fully master the material, correctly designed the title page and title, the list of references was not fully indicated.	**18-20** points – "3"**satisfactory**
student did not fully master the material, there are inaccuracies in the design of the title page and title, did not specify the list of references.	**0-17** points - "2"**is not satisfactory**

Student activity	
preparation of the academic medical history according to the requirements	**26-30-30**points - "5"**excellent**
In the academic medical history, the student admits some inaccuracies in the formulation of a detailed clinical diagnosis, examination plan, interpretation of laboratory and instrumental indicators, treatment.	**22-25**points – " 4 "**well**
The patient's medical history is drawn up with errors, written in illegible handwriting, inaccuracies are made in the formulation of a detailed clinical diagnosis, the examination plan, the student interprets only some results of additional examination methods, mistakes are made in the treatment.	**18-20**points – "3"**satisfactory**
And the disease is written in illegible handwriting, with gross errors (a detailed clinical diagnosis is not made or justified, the examination plan is not correctly assigned, data from additional examination methods are interpreted, treatment is incorrectly written).	**0-17** points - "2"**is not satisfactory**

Criteria for evaluating the academic medical history

Criteria for evaluating the blank test control of the lecture and SRS:

Score	Percentage	Score
10	100%	5
9	90%	5
8	80%	4
7	70%	3
6	60%	2
5	50%	2
4	40%	2
3	30%	2
2	20%	2
1	10%	2
0	0%	2

3. **Module Score Card:**

- **Module1 (30b) total points:**

  Current control (TC1) +RC1 points

  2

- **Module 2 (30b) total points:**
  Current control (TC2) +RC2 points

  2

4. **Final control-exam.** It is conducted at the end of the semester in the form of computer testing. It gets up to 40 points maximum in the final control.

The number of tests depends on the number of credits. For 1 credit, from 70 to 100 test questions.
Assessment of students ' knowledge is carried out according to the 100-point system as follows.
The grade for the discipline is set as the sum of the grades for the modules that the discipline is structured into (60 points), and from the grades during the final control - exam (40 points).

Criteria for evaluating the final (intermediate) knowledge control in the form of computer testing

The final lesson (test knowledge in several sections) is allowed
students who are not in arrears for the semester and have scored at least -31 points for current ratings and foreign controls in the semester .If the student's knowledge is rated "unsatisfactory", then he is not allowed to participate in the final lesson.
Assessment of intermediate certification in the form of a computer exam

Rating (points)	**Letter system score**	**Digital equivalent**	**to traditional system**
8score 8 7-100 – 100	A	4.0	Excellent
80 – 880-8 6	B	3.33	Good
74 – 79	74-79 C	3.0 68	
-73	D	2.33	Satisfactory
61 – 67	61-67 E	2.0	
31-60	FX	0	Unsatisfactory
0 - 0-30	F	0	

Final control is carried out upon completion of the study of all topics of the academic discipline. Students who have attended all classroom training sessions (practical exercises, lectures) provided for in the curriculum and have scored no less than the minimum number of

points during the study of the module are allowed to participate in the final control не меньшую минимального количества .

A student who has missed classes (practical exercises, lectures) for a valid reason is allowed to eliminate academic debt within 2 weeks following the omission. For students who have missed training sessions without valid reasons, the decision on their completion is made individually by the dean's office of the faculty, and penalty points are awarded (-1 point for 1 skipping classes or lectures).

Checklist for evaluating TC, RC, and all types of SRS:

Question number	Score in points			
	Answer complete	Answer incomplete	Answer incomplete / with errors	Answer incorrect
1	26-30	22-25	18-20	0
2	26-30	22-25	18-20	0
3	26-30	22-25	18-20	0
Total: 30 points				

9. **Course Policy:**

The organization of the educational process is carried out on the basis of a credit-modular system according to the requirements , using a modular rating system for evaluating student performance using the AVN information system.

Requirements:

a) Mandatory attendance of classes;
b) Activity during lectures and practical classes;
c) Preparation for classes, homework and SRS.

Not allowed:

a) Being late and leaving classes;
b) Using cell phones during classes;
c) Late delivery of tasks.

CHECKLIST FOR THE DISCIPLINE INTERNAL DISEASES

FULL NAME _____ **Date** _____ **Group** _____ – –

PC/No.	**Professional competencies**	Yes	No
PC-2	is able and ready to conduct and interpret a survey, physical examination, clinical examination, the results of modern laboratory and instrumental studies, write a medical record of outpatient and inpatient patients of adults and children;		

PC-11	Theis equipped and ready to make a diagnosis based on the results of biochemical and clinical studies, taking into account The		
PC-13	is able to identify the main pathological symptoms and syndromes of diseases in patients, using knowledge of the basics of medical, biological and clinical disciplines, taking into account the course of pathology in organs, systems of the body as a whole, analyze the regularities of the functioning of organs and systems in various diseases and pathological processes, use algorithm for making a diagnosis (main, concomitant, complications), taking into account ICD-10, perform basic diagnostic measures to identify urgent and life-threatening conditions;		
PK-15	is able to prescribe adequate treatment to patients in accordance with the diagnosis		
PK-16	is able to provide first aid to the adult population and children in case of urgent and life-threatening conditions. life conditions, send patients to hospital in a planned and urgent manner;		
1.2			
.	Knows the etiology, pathogenesis and prevention measures редко of rare diseases; modern classification of diseases;		
3.	Knows the clinical picture, features of the course and possible complications of rare diseases that occur in a typical form in different age groups;		
4.	Knows diagnostic methods, diagnostic capabilities of methods of direct examination of a patient with a therapeutic profile		
5.	Knows the criteria for the diagnosis of various diseases; treatment methods and indications for their use;		
6.	Knows how to make a preliminary diagnosis based on complaints, anamnesis and objective examination of the patient;		
7.	Knows how to make a detailed diagnosis for a specific patient, namely, the etiology, mechanism of development of the disease, complications;		
8.	Knows how to prescribe adequate individual therapy;		
9.	Knows how to determine the prognosis of the disease in a particular patient;		
10.	Knows and is able to determine preventive measures and expertise of working capacity;		
11.	Knows modern methods of clinical, laboratory instrumental examination of patients		
12.	Interprets the results of instrumental and laboratory examinations		
13.	Forms the final diagnosis		
14.	Will make a clinical diagnosis and justify		
it 15.	Prescribe adequate treatment		
16.	Explain possible complications		
17.	Describe the mechanism of action and side effects of prescribed medications		
18.	Explain the prognosis and prevention		
19.	Proficient in emergency care		

20.	Defines referral criteria for hospitalization		
Total			
Teacher			

CHECKLIST FOR SOLVING A SITUATIONAL PROBLEM

FULL NAME _____ **Date** _____ **Group** _____

Professional competencies	**Yes**	**no**
1. May explain anamnesis		
2. Can explain physical problems		
3. Justifies the reverently diagnosis		
4. Assign a survey plan		
Interprets the results of survey		
6.Perform a differential diagnosis		
7. Will make a clinical diagnosis and justify		
8. Prescribe treatment		
9. Describe the mechanism of action and side effects of prescribed medications		
10. About by a snit prognosis and prevention of		
Total		
teacher's full name		

List of mandatory minimum practical skills

List of practical skills for direct examination patient at diagnosis

1. Questioning the patient (complaints, anamnesis morbi, anamnesis vitae)
2. Analysis of outpatient medical history, extracts from medical records, generalization of survey data and results of analysis of medical documentation, formation of a conclusion
3. General examination, examination of the skin, skin appendages, subcutaneous tissue
4. Definition of constitutional types, degree of fatness
5. Palpation of the lymph nodes
6. Detection of edema
7. Chest examination (static and dynamic). Determination of chest excursion in normal and pathological conditions
8. Palpation of the chest to determine soreness, resistance, and vocal tremor
9. Comparative lung percussion
10. Topographic percussion of the lungs
11. Lung auscultation in normal and pathological conditions
12. Study of bronchophonies
13. Examination of the heart and large vessels
14. Determination of apical shock, systolic and diastolic tremors
15. Percussion of relative dullness of the heart
16. Percussion of absolute dullness of the heart
17. Auscultation of heart tones