МИНИСТЕРСТВО НАУКИ И ВЫСШЕГО ОБРАЗОВАНИЯ РОССИЙСКОЙ ФЕДЕРАЦИИ,
МИНИСТЕРСТВО НАУКИ, ВЫСШЕГО ОБРАЗОВАНИЯ И ИННОВАЦИЙ
КЫРГЫЗСКОЙ РЕСПУБЛИКИ

МОО ВО Кыргызско-Российский Славянский университет
имени первого Президента Российской Федерации Б.Н. Ельцина

УТВЕРЖДАЮ
декан факультета

_____

_____ 2025 г.

ДЕКАНАТ МЕДИЦИНСКОГО ФАКУЛЬТЕТА

ПРОФЕССИОНАЛЬНЫЙ ЦИКЛ
Урология

рабочая программа дисциплины (модуля)

Закреплена за кафедрой	**Урологии**
Учебный план	310501_24_2 лд ин.plx Специальность 560001 - КР Лечебное дело (для иностранных студентов)
Квалификация	**врач**
Форма обучения	**очная**
Общая трудоемкость	**2 ЗЕТ**

Часов по учебному плану	72	Виды контроля в семестрах:
в том числе:		зачет с оценкой 6
аудиторные занятия	40	
самостоятельная работа	31,7	

Программу составил(и):

д.м.н., профессор, зав. кафедрой урологии КРСУ, Чернецова Галина Степановна ;к.м.н., доцент кафедры урологии КРСУ, Алимов Чыныбек Байышевич

Рецензент(ы):

д.м.н., профессор, зав. кафедры общей и факультетской хирургии, Осмонов Талгат Абдуллаевич ;д.м.н., зав. отделения общей урологии НГМЦ, Садырбеков Нурбек Женишбекович

Рабочая программа дисциплины

разработана в соответствии с ФГОС 3++:

Федеральный государственный образовательный стандарт высшего образования - специалитет по специальности 31.05.01 Лечебное дело (приказ Минобрнауки России от 12.08.2020 г. № 988)

составлена на основании учебного плана:

Специальность 31.05.01. - РФ, 560001 - КР Лечебное дело

утвержденного учёным советом вуза от ____ _____протокол № _____

Рабочая программа одобрена на заседании кафедры

Протокол от _ _____ 2025 г. № __

Срок действия программы: 2014-2020 уч.г.

Зав. кафедрой д.м.н., проф. Чернецова Г.С.

1. ЦЕЛИ ОСВОЕНИЯ ДИСЦИПЛИНЫ	
1.1	To teach students the basics of urology in various nosological forms, as well as to teach a sufficient amount of practical skills necessary for the examination and treatment of urological patients, using modern methods of diagnosis and treatment.

2. МЕСТО ДИСЦИПЛИНЫ В СТРУКТУРЕ ООП	
Цикл (раздел) ООП:	Б1.О.03
2.1	**Требования к предварительной подготовке обучающегося:**
2.1.1	Anatomy
2.1.2	Educational practice in obtaining primary professional skills, including primary skills and skills of research activities (General care of surgical patients)
2.1.3	Latin language
2.1.4	Histology, embryology, cytology
2.1.5	Microbiology, virology
2.1.6	Biochemistry
2.1.7	Topographic Anatomy and Operative Surgery
2.1.8	Pharmacology
2.1.9	Propedeutics of internal diseases
2.1.10	general surgery
2.1.11	Radiotherapy
2.1.12	Pathophysiology, clinical pathophysiology
2.2	**Дисциплины и практики, для которых освоение данной дисциплины (модуля) необходимо как предшествующее:**
2.2.1	Hospital therapy
2.2.2	Hospital surgery
2.2.3	Hospital Surgery, Pediatric Surgery
2.2.4	Faculty Therapy
2.2.5	Hospital therapy, endocrinology
2.2.6	obstetrics and gynecology
2.2.7	Anesthesiology, resuscitation, intensive care

3. КОМПЕТЕНЦИИ ОБУЧАЮЩЕГОСЯ, ФОРМИРУЕМЫЕ В РЕЗУЛЬТАТЕ ОСВОЕНИЯ ДИСЦИПЛИНЫ (МОДУЛЯ)

В результате освоения дисциплины обучающийся должен

3.1	**Знать:**
3.1.1	normal anatomy and normal physiology of the urinary system (PC-6);
3.1.2	clinical symptoms and syndromes of main urological diseases (urolithiasis, acute and chronic pyelonephritis, acute and chronic perinephritis, acute and chronic cystitis, tumors of the kidneys, ureter, bladder, prostate gland, the main deontological aspects of the doctor-patient-family relationship, especially the relationship with colleagues, nurses and hospital attendants (PC-2);
3.1.3	benign prostatic hyperplasia, injuries of the kidneys, ureters and bladder) (PC-5, PC-6);
3.1.4	principles of writing an academic history of the urological patient taking into account the survey (PC-5);
3.1.5	the relationship of the clinical picture of the disease with pathological and pathophysiological changes in the urinary system (PC-6, PC-9);pathogenetically substantiated methods of diagnosis and treatment of major urological diseases
3.1.6	(urolithiasis, nonspecific inflammatory diseases of the urinary system, BPH, prostate cancer,
3.1.7	CRP, bladder tumor, testicular tumor, injury to the kidneys, ureters, bladder) (PC-6);
3.1.8	indications and contraindications for the rehabilitation treatment of urological patients, as well as the basic principles of preventive measures for the main urological diseases in both adults and adolescent patients (PC-2);
3.1.9	classification of urolithiasis, acute and chronic nonspecific diseases of the kidneys, bladder, classification of tumors of the kidneys, ureters, bladder, prostate, BPH, injuries of the kidneys, ureters, bladder (PC-6).
3.2	**Уметь:**
3.2.1	correctly collect and interpret complaints and anamnesis of the disease in a patient with urological diseases (PC-5),
3.2.2	palpate the kidneys, check the symptom of fluttering, palpate the projection of the lower ureter, bladder with the definition of the main palpatory signs of urological diseases (PC-5);palpate the prostate gland with the definition of the main palpatory signs of prostate disease (PC-5);

3.2.3	conduct pathophysiological analysis of clinical symptoms of major urological diseases (PC-6);
3.2.4	to substantiate pathogenetically justified clinical, laboratory, X-ray, and ultrasound methods for diagnosing major urological diseases and draw up a plan for the examination of this category of patients (PC-6);
3.2.5	to substantiate pathogenetically justified methods of treatment of major urological diseases and draw up a treatment plan for this category of patients (PC-9)
3.2.6	develop a system of preventive measures aimed at the correction of pathophysiological disorders, helping to reduce the recurrence of urological diseases in different age groups of patients (PC-6);
3.2.7	organize the collection of urine, blood for clinical, biochemical and immunological studies (PC-5);
3.3	**Владеть:**
3.3.1	interpretation of clinical, laboratory and instrumental methods for diagnosing diseases of the kidneys, ureters, bladder and prostate gland (PC-5, PC-6);
3.3.2	an algorithm for diagnosing a patient with signs of urological diseases, based on the analysis of symptoms, the dynamics of their development, objective examination data, laboratory-instrumental, radiological, and morphological examination methods (PC-5, PC-6, PC-8);
3.3.3	the algorithm of therapeutic measures aimed at eliminating the main pathogenetic disorders in patients with urological diseases in different age groups, with a clinical picture of the disease (PC-6).

4. СТРУКТУРА И СОДЕРЖАНИЕ ДИСЦИПЛИНЫ (МОДУЛЯ)

Код занятия	Наименование разделов и тем /вид занятия/	Семестр / Курс	Часов	Компетен-ции	Литература	Инте ракт.	Пр. подг.	Примечание
	Раздел 1. Section 1. Semiotics urological diseases and methods survey. Inflammatory diseases of the urinary system							
1.1	Nonspecific inflammatory diseases of the upper divisions genitourinary system. / Lek / /Лек/	6	2					
1.2	Introduction to the clinic. Semiotics and major lesion syndromes urinary organs and urination /Пр/	6	4					
1.3	Introduction to the clinic. Semiotics and major lesion syndromes urinary organs and urination /Etc/ /Ср/	6	3					
1.4	Laboratory, instrumental and x-ray methods research. /Пр/	6	4			3		
1.5	Laboratory, instrumental and x-ray methods research. /Ср/	6	3					
1.6	Nonspecific inflammatory lower diseases genitourinary system. / Lek / /Лек/	6	2					
1.7	Nonspecific inflammatory lower diseases genitourinary system. /Пр/	6	4					
1.8	Anomalies of development of the upper divisions genitourinary system. / Lek / /Лек/	6	2					
1.9	Specific inflammatory genitourinary diseases Systems. Module 1. /Пр/	6	4					

1.10	Nonspecific inflammatory diseases of the genitourinary system. Specific inflammatory diseases of the genitourinary system. /Ср/	6	3					
	Раздел 2. Section 2. Urolithiasis. Injuries, tumors and anomalies urinary system.							
2.1	Anomalies of the lower divisions genitourinary system. / Lek / /Лек/	6	2					
2.2	Anomalies of the genitourinary system. /Пр/	6	4					
2.3	Anomalies of the genitourinary system. /Ср/	6	3					
2.4	Trauma to the genitourinary system. / Lek /Лек/	6	2					
2.5	Trauma to the genitourinary system. /Пр/	6	4					
2.6	Urolithiasis disease. / Lek / /Лек/	6	2					
2.7	Urolithiasis disease. /Пр/	6	4					
2.8	Trauma to the genitourinary system. Urolithiasis disease. /Ср/	6	3					
2.9	Tumors of the kidneys, ureters and bladder, urethra. / Lek / /Лек/	6	2					
2.10	Tumors of the kidneys, ureters and Bladder. Tumors of the prostate gland, organs of the scrotum, penis. /Пр/	6	4					
2.11	Tumors of the kidneys, ureters and Bladder. Tumors of the prostate gland, organs of the scrotum, penis. /Ср/	6	3					
2.12	Prostate adenoma. Prostate cancer. /Лек/	6	2					
2.13	Prostate adenoma. Prostate cancer. /Пр/	6	4					
2.14	Nephroptosis. Hydronephrosis. / Lek / /Лек/	6	2					
2.15	/ЗачётСОп/	6						

5. ФОНД ОЦЕНОЧНЫХ СРЕДСТВ

5.1. Контрольные вопросы и задания

Questions to test the level of learning KNOW:
1. The structure of urological medical institutions, especially the organization of their work, the interaction.
2. History of the formation and development of modern urology. Russian and Kyrgyz schools.
3. Anatomical and physiological features of the urogenital system.
4. Deontological aspects in urology.
5. Diagnostic and therapeutic goals of the main methods of instrumental examination of the urological patient.
6. Total and separate functional renal tests.
7. The role of cystoscopy in determining the source of bleeding at the time of hematuria, in identifying the causes of dysuria (stone, tumor, tuberculosis, etc.).
8. The value of ureteral catheterization as the final therapeutic benefit for relieving renal colic.
9. The value of bilateral catheterization of the renal pelvis to establish the type of anuria.
10. Meaning of catheterization of the renal pelvis for the treatment of acute gestational pyelonephritis.

11. X-ray anatomy of the urinary system.
12. Sequence of X-ray examination for suspected kidney and bladder disease.
13. Diagnostic possibilities of review urography and radiopaque research methods.
14.Ultrasonic methods for examining the organs of the urogenital system and their diagnostic capabilities.
15. Development of urogenital system
16. Anomalies of the renal vessels
17. Kidney anomalies
18. Anomalies of the ureters
19. Anomalies of the bladder
20. Anomalies of the urethra
21. Anomalies of the male genital organs
22. Methods of diagnosis of abnormal development of the kidneys and ureters.
23. Indications for emergency urography, cystography and ascending ureteropyelography with suspected abnormal development of the kidneys and ureters.
24. Complications of anomalies of the kidneys and ureters.
25. Indications for surgical treatment of patients with abnormalities of the kidneys and ureters, the optimal age for surgical intervention.
26.Nonfungatory inflammatory diseases of the urinary organs.
27. Acute pyelonephritis etiopathogenesis, clinic, diagnosis. Treatment.
28. Chronic pyelonephritis etiopathogenesis, clinic, diagnosis. Treatment.
29. Bacteremic (endotoxic) shock, etiopathogenesis, clinic, diagnosis. Treatment.
31. Pyelonephritis in pregnancy etiopathogenesis, clinic, diagnosis. Treatment.
32.Pionephrosis etiopathogenesis, clinic, diagnosis. Treatment.
33.Paranephritis etiopathogenesis, clinic, diagnosis. Treatment.
34.Zabperitoneal fibrosis
35. Cystitis etiopathogenesis, clinic, diagnosis. Treatment.
36. Urethritis etiopathogenesis, clinic, diagnosis. Treatment.
37. Prostatitis etiopathogenesis, clinic, diagnosis. Treatment.
38. Orchitis, epididymitis, etiopathogenesis, clinic, diagnosis. Treatment.
39. Classification of kidney tuberculosis.
40. Features of the clinical symptomatology of tuberculosis of the urogenital system.
41. Principles of laboratory diagnosis of urogenital tuberculosis.
42. The sequence of X-ray examination and radiological signs of urogenital tuberculosis.
43. Indications for conservative and surgical treatment of urogenital tuberculosis.
44. Principles of follow-up of patients with tuberculosis of the organs of the urogenital system.
45. Bladder injury
46. Urethra trauma
47. Stricture and obliteration of the urethra
48.Trauma of the scrotum and its organs
49.Trauma of the prostate gland and seminal vesicles
50.Trauma of the penis
51. Crush syndrome (Crush-syndrom)
52.Homogeneous body of the bladder and urethra
53. Urinary fistula in women
54. Factors contributing to stone formation in the kidneys and the classification of urinary stones.
55.Clinical signs of urolithiasis.
56. Methods of diagnosis of urolithiasis.
57. Complications of urolithiasis.
58. Methods for relieving renal colic.
59. Indications for conservative treatment and its methods (diet therapy, drug treatment, instrumental, litholysis).
60. Features of the clinic, diagnosis and treatment of bladder stones.
61. Clinical symptomatology of kidney adenocarcinoma:
a) renal symptoms
b) extrarenal symptoms.
62. Principle differences in the diagnosis and treatment of renal parenchyma cancer and pelvis cancer.
63.Clinical manifestations of bladder tumors.
64. Features of instrumental and X-ray diagnosis of bladder tumors.
65. Types of operational benefits for bladder tumors.
66. Principles of combined therapy of tumors of the bladder.
67. Measures aimed at early detection of disease recurrence.
68. Clinical manifestations of adenoma and prostate cancer.
69. Identification of the stages of adenoma.
70. Complications of adenoma and prostate cancer.
71. Diagnosis of adenoma.
72. Treatment of adenoma depending on the stage of the disease.
73. Assistance with acute urinary retention.
74. Features of diagnosis (prostate biopsy) and treatment of prostate cancer (estrogen therapy, castration).

Questions to check the level to be able to:
1. Perform catheterization of the bladder on the phantom with various types of catheters.
2. Perform catheterization of the bladder with a sick rubber catheter.
3. Interpret

5.2. Темы курсовых работ (проектов)

The curriculum does not provide for writing coursework for the discipline

5.3. Фонд оценочных средств

1.Test: Appendix 1
2. Situational tasks: Appendix 2
3. Report with presentation
The student chooses the topic of the report.
1. Symptoms and syndromes of urological diseases. Modern methods of examination of urological patients.
2. X-ray methods of research in urology (radiopaque substances and methods of their introduction).
3. Laboratory methods for examining urine.
4. Anomalies of the number of kidneys. Unilateral aplasia of the kidney. Doubling the kidney. Additional kidney.
5. Anomalies of the location of the kidneys. Lumbar, iliac, pelvic, thoracic dystopia of the kidney.
6. Anomalies of the relationship. Horseshoe, galeteobrazny, S and L shaped kidney.
7. Anomalies of structure. Multikistosis. Polycystic. A simple kidney cyst.
8. Anomalies of the pelvis and ureter. Doubling the pelvis and ureter.
9. Bladder-ureteral reflux. Etiology, diagnosis, treatment.

10. Anomalies of the testes. Anorhizm, monorhizm, cryptorchism.
11. Acute pyelonephritis. Etiology, pathogenesis, clinic, diagnosis, treatment.
12. Acute pyelonephritis in pregnancy. Etiology, pathogenesis, clinic, diagnosis, treatment.
13. Chronic pyelonephritis. Etiology, pathogenesis, clinic, diagnosis, treatment.
14 Abscess kidney. Etiology, pathogenesis, clinic, diagnosis, treatment.
15. Perinephritis. Etiology, pathogenesis, clinic, diagnosis, treatment.
16. Hydronephrosis. Etiology, pathogenesis, clinic, diagnosis, treatment.
17. Nephroptosis. Etiology, pathogenesis, clinic, diagnosis, treatment.
18. Tuberculosis of the kidneys and urinary tract. Etiology, pathogenesis, clinic, diagnosis, treatment.
19. Cystitis Etiology, pathogenesis, clinic, diagnosis, treatment.
20. Prostatitis. Etiology, pathogenesis, clinic, diagnosis, treatment.
21. Hydrocele. Etiology, pathogenesis, clinic, diagnosis, treatment.
22. Varicocele. Etiology, pathogenesis, clinic, diagnosis, treatment.
23. Acute renal failure. Etiology, pathogenesis, clinic, diagnosis, treatment.
24. Chronic renal failure. Etiology, pathogenesis, clinic, diagnosis, treatment.
25. Traumatic kidney damage. Classification. Treatment.
26. Traumatic injuries of the ureter. Classification. Treatment.
27. Traumatic injuries of the bladder. Classification. Treatment.
28. Urolithiasis. Etiology, pathogenesis.
29. Stones of the kidneys and ureters. Clinic, diagnosis, treatment.
30. Benign prostatic hyperplasia. Etiology, pathogenesis, clinic, diagnosis, treatment.
31. Prostate cancer. Etiology, pathogenesis, clinic, diagnosis, treatment.
32. Kidney tumors. Classification. Etiology, pathogenesis.
33. Kidney cancer. Etiology, pathogenesis, clinic, diagnosis, treatment.
34. Bladder cancer. Etiology, pathogenesis, clinic, diagnosis, treatment.

Cure of the patient
1. Each student receives for curation of one patient with urological pathology.

2. The curator conducts a survey and examination of the patient according to the attached scheme, gets acquainted with the results of available laboratory tests and images, offers a treatment regimen.

Curation Scheme:
1. Passport part.
Surname, name, patronymic ..... age ..... nationality .....
marital status ..... education ..... profession ..... place of work ..... home
address ..... time of arrival .. .. diagnosis upon admission .....

2. Complaints. First, complaints related to the disease that caused the hospitalization are described, then other complaints.

UE: 31050150_14_56LD.plx page 11

3. Anamnesis of the disease. The onset of the disease, the course of the process, the treatment in the past, the reasons with which the patient relates his illness, the reasons for hospitalization.

4. Anamnesis of life. Diseases suffered in the past. Family history. The girls have a gynecological history.

5. Objective data. Constitution. Characteristics of the general condition of the patient.
6. Analysis of images and laboratory studies.
7. Participation in dressing procedures.
MEDICAL HISTORY
The student fills out a medical history according to the scheme below:
I. General information about the patient:
Ii. complaints:
Iii. history of the disease (anamnesis morbi).
Iv. history of life (anamnesis vitae).
V. objective research:
Vi. laboratory, additional research methods
VII. clinical diagnosis
Viii. substantiation of clinical diagnosis
Ix. differential diagnosis

X. etiology, pathogenesis
Xi. treatment
Xii. preoperative epicrisis
Xiii. operation protocol (scheme):
Xiv. a diary
Xv. epicrisis
Xvi. forecast
XVII. disease outcome

5.4. Перечень видов оценочных средств

1.Test
2. Situational task
3.History of the disease
4. Report with presentation

6. УЧЕБНО-МЕТОДИЧЕСКОЕ И ИНФОРМАЦИОННОЕ ОБЕСПЕЧЕНИЕ ДИСЦИПЛИНЫ (МОДУЛЯ)	
6.1. Рекомендуемая литература	
6.3. Перечень информационных и образовательных технологий	
6.3.1 Компетентностно-ориентированные образовательные технологии	
6.3.1.1	Traditional educational technologies - lectures, seminars, focused primarily on the communication of knowledge and methods of action transmitted to students in finished form and intended for reproducing the assimilation and analysis of specific samples. Practical exercises are most often conducted directly on the basis of the Republican Scientific Center of Urology with the obligatory visit and examination of patients and their supervision. Work in the dressing room and operating room with the teacher. Joint conferences with surgical specialists (general surgeons, angiosurgery, angiographers, endoscopists, anesthesiologists and resuscitators) with multimedia presentations, presentations, demonstration of patients.
6.3.1.2	6.3.1.2 Innovative educational technologies are occupations that shape systems thinking and the ability to generate ideas when solving various creative tasks. These include classes in a simulated simulation center. Also practical exercises, during which the brainstorming technique is used, discussion.
6.3.1.3	6.3.1.3 Information and educational technologies - independent use by a student of computer equipment and Internet resources to perform practical knowledge and independent work, as well as to familiarize themselves with Internet sources, photo and video materials in the relevant section. Preparation of lecturers - presentations. Work with training and testing programs. Computer equipment in all classrooms with an updated set of training and monitoring programs (including MS Office: Word, Excel, PowerPoint, etc.).
6.3.2 Перечень информационных справочных систем и программного обеспечения	
6.3.2.1	Electronic library of KRSU www.lib.krsu.kg.
6.3.2.2	Electronic library system "ZNANIUM.COM"
6.3.2.3	Student Consultant. Electronic Library of Medical University - www.studmedlib.ru
6.3.2.4	electronic library system IPRBOOKS - www.iprbookshop.ru

7. МАТЕРИАЛЬНО-ТЕХНИЧЕСКОЕ ОБЕСПЕЧЕНИЕ ДИСЦИПЛИНЫ (МОДУЛЯ)	
7.1	Theoretical preparation of a study program in urology is carried out on the basis of the NG MoH KR in the Republican Scientific Center of Urology (RNTSU), as well as in the lecture hall of the clinic named after Akhunbaeva.

7.2	Simulation center (Alamedin corpus), equipped with robotic mockups - simulators, modern equipment, electronic equipment phantoms, simulators, interactive and medical equipment, tools and consumables.
7.3	RSCU - receiving department, ultrasound study, laboratory, x-ray room
7.4	RSCU - Department of General Urology
7.5	RSCU - Department of Andrology
7.6	RSCU - Department of Urolithiasis
7.7	RSCU - endovidiosurgery department
7.8	RSCU - operational and resuscitation units
7.9	RSCU - Department of lithotripsy (distance)
7.10	The center is equipped with a special instrumental base (dressing and examination rooms, cystoscopic room, negatoscopes, transurethral resectoscope, laparoscopic stand, stand for ureteroranoscopy, urological instrumentation, sets of urethral bouges, operating tool kit)
7.11	Presentation of lectures in all sections of the discipline (PowerPoint)
7.12	Educational films, prepared at the department of Ph.D., Professor G. Chernetsova
7.13	Computer classes (the corpus of L. Tolstoy. Aud. 4/12, 4/15) with Internet access for independent work, acquaintance with an Internet source, video materials.

8. МЕТОДИЧЕСКИЕ УКАЗАНИЯ ДЛЯ ОБУЧАЮЩИХСЯ ПО ОСВОЕНИЮ ДИСЦИПЛИНЫ (МОДУЛЯ)

Technological map of the discipline in Appendix 4

MODULAR CONTROL ON DISCIPLINE INCLUDES:

1. Current control: learning material at the classroom (lectures, practical, including attendance and activity) and the implementation of mandatory tasks for independent work
2. Boundary control: checking the completeness of knowledge and skills on the module material as a whole. The implementation of modular control tasks is carried out in writing and is a mandatory component of modular control.
3. Intermediate control - a completed documented part of the discipline (8 semester - credit) - a set of closely related to each other credit modules.

The attendance of students at the intermediate control is required

BASIC REQUIREMENTS FOR INTERMEDIATE CONTROL

At the turnout, students are required to have a credit book. The teacher is entitled to credit.
without questioning, those students who scored more than 60 points for current and boundary controls. On intermediate control the student must, correctly answer the theoretical questions of the ticket - (know) and correctly perform the situational task (be able to own). During the intermediate control, the teacher sums up the patient's supervision students during the semester.
Evaluation of intermediate control:

- min 20 points - Questions to test the level of learning KNOW (if the student correctly formulates basic concepts when answering the questions asked)
- 20-25 points - Tasks for checking the level of learning to BE ABLE to and BE ABLE (if a student correctly formulates the essence of the problem specified in the ticket and gives recommendations on how to solve it)
- 25-30 points - Tasks to test the level of training to be able to and own (in case of full implementation of the control task)

II BASIC REQUIREMENTS FOR CURRENT CONTROL.
I. When building a practical lesson, teachers adhere to the following general indicative plan:

1) The organizational stage of the lesson (time - up to 2%): a) roll call; b) home assignment for the next topic;
c) the motivation of the topic of this practical lesson;
d) familiarizing students with the objectives and lesson plan;

2) Control and correction of the initial level of knowledge (time - up to 20%):
a) variants of test control level I and III;
b) correction by the teacher of theoretical knowledge of students;
3) The stage of demonstration by the teacher of practical skills and / or thematic patients (time - up to 15%);
4) The stage of independent work of students at the bedside (time - up to 45%);

5) The final stage of the lesson (time - up to 18%):
a) the final final control of the formed practical skills and abilities in the analysis of patients, surveyed by students
b) the final final control of the formed theoretical knowledge and skills, including through the decision situational clinical tasks;

c) summing up the results of the practical lesson (characterization by the teacher of the fulfillment by students of all the goals of the lesson and individual assessment of knowledge and skills)

III. RECOMMENDATIONS FOR THE ORGANIZATION OF THE STUDENT'S INDEPENDENT WORK

1. Tips for planning and organizing the time required to study the discipline. It is recommended to organize the time required for studying the discipline as follows: Study the lecture outline on the same day, after the lecture - 10-15 minutes.

Study lecture notes the day before the next lecture - 10-15 minutes. The study of theoretical material on textbooks and notes - 1 hour per week. Preparation for the practical lesson - 2 hours.

Just a week - 4 hours 30 minutes.

2. Description of the sequence of student actions
To understand the material and its qualitative assimilation, the following sequence of actions is recommended:
After listening to the lecture and completing the training sessions, when preparing for the next day's classes, you must first review and think about the text of the lecture you have heard today (10-15 minutes).

When preparing for the next day lecture, you need to look at the text of the previous lecture, think about what the subject of the next lecture can be (10-15 minutes).

During the week, select the time (1-hour) to work with the recommended literature in the library.

In preparation for the next day's practical exercises, you must first read the basic concepts and approaches

on homework. When performing an exercise or a task, you must first understand what is required in the task, what theoretical material you need to use, and outline a plan for solving the problem.

3. Recommendations on the use of materials of educational and methodical complex. It is recommended to use the guidelines for the course and the text of the lectures of the teacher.

4. Recommendations for working with literature.
The theoretical material of the course becomes more understandable when, in addition to listening to a lecture and studying abstract, studied and books. It is easier to master the course by sticking to one textbook and outline. It is recommended, except "Learning" the material, to achieve a state of understanding of the studied subject of the discipline. For this purpose it is recommended after
study the next paragraph to perform a few simple exercises on this topic. It is also very helpful.
mentally ask yourself the following questions (and try to answer them): what is this paragraph about ?, what new concepts introduced, what is their meaning? what will it give in practice ?.
5. Tips on preparing for the intermediate and intermediate controls.

In addition to the study of lecture notes, you must use the textbook. In addition to "memorizing" the material, it is very important to achieve a state of understanding of the studied subjects of the discipline. To this end, it is recommended, after studying the next paragraph, to perform several exercises on this topic. In addition, it is very useful to mentally ask yourself the following questions (and try to answer them): what is this paragraph about ?, what new concepts have been introduced, what is their meaning? What will it give in practice ?. In preparation for the intermediate control, it is necessary to study the theory: the definitions of all concepts and approaches to assessing the state of understanding of the material and independently solve several typical problems from each topic. When solving problems, it is always necessary to be able to qualitatively interpret the outcome of the decision.

6. Instructions on the organization of work on homework. When doing homework, you must first read the basic concepts and approaches on the subject of the task. When performing an exercise or a task, you first need to understand what is required in the task, what theoretical material to use, draw up a plan for solving the problem, and then proceed to the calculations and make a qualitative conclusion.

7. When preparing for intermediate and intermediate controls, it is necessary to study the theory: the definitions of all concepts and approaches to assessing the state of understanding of the material and independently perform several typical tasks.
8. Development of the missed classes.

Control over the student's mastery of the discipline's curriculum material is systematically carried out by the department's teacher and is reflected in the teacher's journal and in points. A student who has received an unsatisfactory assessment of the current material is required to prepare this section and answer on it to the teacher at the individual interview.

A lecture that was missed without valid reasons must be worked out by oral questioning by a lecturer or preparing an essay based on the materials of a lecture that was missed within a month from the day of the pass. Practicing practical exercises.

-Each class, missed by a student without a valid reason, is worked out on a mandatory basis. Developments are carried out according to the schedule of the department, agreed with the dean's office.
- Missed classes must be completed within 10 days from the day of the pass. Missed by a student without good reason, seminars are

practiced no more than one lesson per day. Missed classes for a good reason (due to illness, omissions with the permission of the dean's office) are worked out according to thematic material without hours.
-Student who has not completed a pass in a timely manner is allowed to the next classes

RECOMMENDATIONS FOR PREPARING PRESENTATIONS (abstract)

Multimedia presentations are a type of independent work of students to create visual information.
manuals made with the help of multimedia computer program PowerPoint. This type of work requires
coordination of student skills in collecting, organizing, processing information, processing it in the form of a collection
materials, briefly reflecting the main issues of the studied topic, in electronic form. That is, the creation of material
presentations expands methods and means of processing and presenting educational information, forms students
computer skills.
Presentation materials are prepared by the student in the form of slides using Microsoft PowerPoint.
Requirement for students to prepare a presentation and protect it in class as a report.

1. The theme of the presentation is chosen by the student from the proposed list and must be agreed with the teacher and correspond to the topic of the lesson.
2. Stages of presentation preparation
Drawing up a presentation plan (problem statement; goals of this work)
Thinking through each slide (at first you can do it manually on paper), while it is important to answer the following questions:
- How does the idea of this slide reveal the main idea of the whole presentation?
What will be on the slide?
What will be said?
- How will the transition to the next slide be made?
3. Making a presentation using MS PowerPoint:
-It makes sense to be careful. The slovenly made slides (inconsistency in the fonts and indents, typographical errors, typographical errors in the formulas) arouse suspicion that the student - speaker also approached thoughtful questions carelessly.
-The title page is needed to introduce you to the audience and the topic of your report.
- Number of slides no more than 30.
- The optimal number of lines on a slide is from 6 to 11.
-A common mistake - read the slide verbatim. Best of all, if the slide will be written detailed information (definitions, formulas), and the words will tell their meaningful meaning. The information on the slide may be more formal and strictly stated than in speech.
- Optimum switching speed - one slide in 1-2 minutes.
-It is more welcome in the presentation to use more figures, pictures, formulas, graphs, tables. You can use animation effects.
-When explaining the tables, it is necessary to say what the rows correspond to, and what the columns correspond to.
- Enter only those designations and concepts, without which the understanding of the main ideas of the report is impossible.
- In a short speech, you cannot repeat the same thought, even if in other words - time is precious.
- Any phrase should be said for some reason. Then the performance will be solid and will leave a good impression.
-The last slide with conclusions in short presentations is not necessary to pronounce.
-If there are a lot of formulas on the slide, it is recommended to type it completely in MS Word (otherwise the formulas must be placed and aligned on the slide manually). For this, it is convenient to make a blank - an empty slide with one large Word-object "Insert / Object / Microsoft Word Document", pick up its size once and multiply it by the required number of slides.
It is recommended to change the main font in the text and formulas to Arial or similar; Times font looks bad from afar. Be sure to set the main font size in MathType to the main font size in the text. Never level the size of the formula by hand, pulling it out of the corner.

4. The student is obliged to prepare and make a report in a strictly allotted time by the teacher, and in time.
5. Instructions to speakers.
-subscribe new information;
-use technical equipment;
-Know and be well-versed in the subject of the entire presentation;
- be able to discuss and quickly answer questions;
- clearly fulfill the established regulations: speaker - 10 min .; discussion - 5 min .;
It must be remembered that the speech consists of three parts: introduction, main part and conclusion.
Introduction helps to ensure the success of performances on any topic. Entry must contain:
- presentation title;
- message of the main idea;
-modern assessment of the subject matter;
- a brief listing of issues under consideration;
-Live interesting form of presentation;

The main part, in which the speaker has to deeply reveal the essence of the topic touched upon, is usually based on the principle of a report. The task of the main part is to provide enough data so that the audience will be interested in the topic and want to get acquainted with the materials. At the same time, the logical structure of the theoretical block should not be given without visual aids, audio - visual and visual materials. The conclusion is a clear, clear summary and brief conclusions that listeners are always waiting for.