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

Kyrgyz-Russian Slavic University
named after the first President of the Russian Federation B.N. Yeltsin

I APPROVE
Director
(job title)
Avtonomov S.P.
(full name)
04.11.2026

Assistant doctor therapeutic profile

working program disciplines (modules)

Pinned for department **Therapies**

Training plan 310501_26_1 ld in. plx
560001 General Medicine (For international students)

Qualification **doctor**
Form training **full-time**

General labor intensity **3 Z**
Hours By educational plan 90
in that number :
classroom classes 0
independent Job 90

Types control in semesters :
pass with a grade of 7

Distribution of course hours by semester

Semester (<Course> .< Semester in the course>)	7 (4.1)		Total	
Weeks				
View classes	UP	RP	UP	RP
Myself . work	90	90	90	90
Total	90	90	90	90

Program compiled by:
Candidate of Medical Sciences, Associate Professor , Dzhailobaeva K.A.; Candidate of Medical Sciences, Associate Professor , Radzhapova Z.T. _____

Reviewer (s):

Doctor of Medical Sciences, Professor, Head of the Department of Propaedeutics of Internal Diseases with a Course in Endocrinology and Occupational Diseases of the I.K. Akhunbaev Kazan State Medical Academy, A.G. Polupanov. _____

Agreed by the ROP:

Working program disciplines
Assistant doctor therapeutic profile

developed in accordance with Federal State Educational Standard 3++:
Federal State Educational Standard of Higher Education - Specialist in the specialty 560001 General Medicine (For foreign students) (Order of the Ministry of Education and Science of Russia dated No.)

compiled on the basis of the curriculum:

560001 General Medicine (For international students)

approved by the Academic Council of the University on June 26, 2026, protocol No. 11.

The work program was approved at the meeting _____

Protocol No. 1 dated August 26, 2026
The program is valid from the 2025 to 2030 academic year .
Head of the department: Sabirov Ibrahim Samizhonovich

Approval of the RPD for implementation in the next academic year

Chairman of the UMS
_____2026

The work program was reviewed, discussed and approved for
execution in the 2026-2027 academic year at a department meeting

Protocol dated _____2026 No. _
Head of Department

Approval of the RPD for implementation in the next academic year

Chairman of the UMS
_____2027

The work program was reviewed, discussed and approved for
execution in the 2027-2028 academic year at a department meeting

Protocol dated _____2027 No. _
Head of Department

Approval of the RPD for implementation in the next academic year

Chairman of the UMS
_____2028

The work program was reviewed, discussed and approved for
execution in the 2028-2029 academic year at a department meeting

Protocol dated _____2028 No. _
Head of Department

Approval of the RPD for implementation in the next academic year

Chairman of the UMS
_____2029

The work program was reviewed, discussed and approved for
execution in the 2029-2030 academic year at a department meeting

Protocol dated _____2029 No. _
Head of Department

1. OBJECTIVES OF LEARNING THE DISCIPLINE	
1.1	The purpose of industrial practice is to consolidate and deepen theoretical training, practical skills, acquire skills in the use of medical equipment and instruments, experience of independent professional activity as an assistant to a hospital physician, through direct participation in the activities of the hospital, as well as the development of practical knowledge and skills necessary for work in the professional field.

2. PLACE OF DISCIPLINE IN THE STRUCTURE OF THE OOP	
OOP cycle (section):	B2.B
2.1	**Requirements for preliminary preparation of the student:**
2.1.1	Pathological anatomy
2.1.2	Pathophysiology, clinical pathophysiology
2.1.3	Propaedeutics of internal diseases
2.1.4	Pharmacology
2.1.5	Faculty therapy
2.1.6	Hygiene
2.1.7	Epidemiology
2.1.8	Radiation diagnostics
2.1.9	Basics of emergency care
2.1.10	Pathological anatomy
2.1.11	Pathophysiology, clinical pathophysiology
2.1.12	Industrial practice to acquire professional skills and experience in professional activities (Assistant to a procedural nurse)
2.1.13	Propaedeutics of internal diseases
2.1.14	Pharmacoepidemiology
2.1.15	Biochemistry
2.1.16	Bioethics
2.1.17	Kyrgyz language in medicine
2.1.18	Normal physiology
2.1.19	Physiology Workshop
2.1.20	Histology, embryology, cytology
2.1.21	Immunology
2.1.22	Medical law
2.1.23	Anatomy
2.1.24	Biology
2.1.25	Psychology and Pedagogy
2.1.26	Russian language and speech culture in medicine
2.1.27	Nursing
2.1.28	Educational practice for acquiring primary professional skills and abilities, including primary skills and abilities in scientific research activities. (General care of medical patients)
2.2	**Disciplines and practices for which mastery of this discipline (module) is necessary as a prerequisite:**
2.2.1	Hospital therapy
2.2.2	Clinical practice (Assistant physician of an outpatient clinic)
2.2.3	Research work
2.2.4	Outpatient therapy
2.2.5	Oncology, radiation therapy
2.2.6	Anesthesiology, resuscitation, intensive care
2.2.7	Preparing for and passing the state exam
2.2.8	Clinical pharmacology
2.2.9	Standards of diagnosis and treatment
2.2.10	Family medicine

3. STUDENT COMPETENCIES DEVELOPED AS A RESULT OF LEARNING THE DISCIPLINE (MODULE)

PC-15: Capable and ready to implement preventive measures to prevent infectious, parasitic and non-infectious diseases, monitor their effectiveness, promote a healthy lifestyle and educate the population on sanitary and hygienic issues.	
Know:	
	Knowledge of regulatory legal acts and documents governing the conduct of medical examinations, medical examinations, dispensary observation and preventive measures taking into account risk factors, health education work, rules for the formation of elements and the development of healthy lifestyle programs.
Skills:	
	Skilled in conducting public health education, developing and implementing healthy lifestyle programs, implementing preventative measures against infectious, parasitic, and non-communicable diseases, and monitoring their effectiveness. Provides routine follow-up care for patients diagnosed with chronic non-communicable diseases.
Expertise:	
	Proficient in public health education methods, development, and implementation of healthy lifestyle programs. Prescribes preventive measures for patients based on risk factors, in accordance with current medical care procedures, clinical guidelines (treatment protocols), and standards of care.

PC-9: Capable and ready to perform basic therapeutic measures for acute illnesses, conditions and exacerbations of chronic diseases that are not accompanied by a threat to the life of an adult patient and do not require emergency medical care in outpatient and inpatient settings.	
Know:	
	basic principles of providing medical care for acute illnesses, conditions, and exacerbations of chronic diseases that are not accompanied by a threat to the patient’s life and do not require emergency medical care;
Skills:	
	identify manifestations of acute diseases, conditions, signs of exacerbation of chronic diseases that are not accompanied by a threat to the patient's life
Expertise:	
	capable and ready to provide medical care in acute illnesses, conditions, exacerbation of chronic diseases that are not accompanied by a threat to the patient's life and do not require emergency medical care in outpatient and inpatient settings.

PC-8: Able and ready to use the algorithm of diagnostic measures to identify diseases, emergency and life-threatening conditions based on the results of clinical, laboratory and instrumental studies of organs, systems and the body as a whole to establish a diagnosis (primary, concomitant, complications) taking into account the ICD.	
Know:	
	- Etiology, pathogenesis, clinical picture of the main diseases with various nosological forms. - The main types and methods of treatment of patients with various nosological forms. - Methods of management and treatment of patients with various nosological forms in outpatient and day hospital settings.
Skills:	
	- Correctly identify this disease. - To compare different types and methods of treatment of patients with different nosological forms, to develop a treatment plan for diseases. - Manage and treat patients in outpatient and day hospital settings.
Expertise:	
	- Skills in analyzing various types of treatment for patients with various nosological forms. - Methods of searching for and comparing different methods of treating patients with different nosological forms. day hospital settings.

PC-5: Capable and ready to work with medical equipment and medical instruments used in working with patients, and to apply the capabilities of modern information technologies to solve professional problems.	
Know:	
	knows the principles of working with medical and technical equipment used in working with patients, knows how to obtain information from various sources
Skills:	

	work with information in global computer networks, apply the capabilities of modern information technologies to solve professional problems
Expertise:	
	able to work with medical and technical equipment used in working with patients, be proficient in computer technology, and obtain information from various sources niks,

As a result of mastering the discipline, the student must

3.1	**Know:**
3.1.1	Ethical foundations of modern medical legislation
3.1.2	Moral and ethical standards, rules and principles of professional medical conduct.
3.1.3	Duties, rights, place of a doctor in society, patient rights
3.1.4	Etiology, pathogenesis and preventive measures, modern classification, clinical picture, features of the course and possible complications of the most common diseases of internal organs occurring in a typical form; diagnostic methods, diagnostic capabilities of methods of direct examination of the patient of the therapeutic profile.
3.1.5	Preventive measures aimed at strengthening public health; methods of health education work
3.1.6	Modern methods of clinical, laboratory, and instrumental examination of patients (including endoscopic, radiological, and ultrasound diagnostics)
3.1.7	Structural and functional foundations of diseases and pathological processes, causes, basic mechanisms of development and outcomes of pathological processes, dysfunctions of organs and systems.
3.1.8	Diagnostic criteria for various diseases of internal organs; basic diagnostic measures in emergency and life-threatening conditions.
3.1.9	Treatment methods for diseases of internal organs and indications for their use; basic therapeutic measures for the most common diseases of internal organs and conditions in adults and adolescents that can cause severe complications or death (acute blood loss, respiratory failure, cardiac arrest, coma, shock), methods for their immediate elimination, anti-shock measures
3.1.10	Methods of treatment of diseases of internal organs and indications for their use, indications for planned hospitalization of patients.
3.1.11	Clinical and pharmacological characteristics of the main groups of drugs and the rational choice of specific drugs in the treatment of diseases of internal organs and emergency conditions
3.1.12	Methods of health education work
3.1.13	Key regulatory and technical documents on public health protection, procedures for maintaining standard medical documentation in medical organizations, modern classifications of diseases
3.2	**Skills:**
3.2.1	Protect the civil rights of doctors and patients.
3.2.2	Build and maintain working relationships with other team members
3.2.3	Protect the civil rights of doctors and patients.
3.2.4	Collect anamnesis, interview the patient and/or his/her relatives; conduct a physical examination (inspection, palpation, auscultation, blood pressure measurement, determination of arterial pulse properties, etc.); assess the patient's condition to decide on the need for medical care; conduct a primary examination of systems and organs: respiratory, cardiovascular, digestive, urinary, blood; complete the medical history, write prescriptions.
3.2.5	Promote a healthy lifestyle; conduct activities for primary and secondary prevention of the most common therapeutic diseases.
3.2.6	Outline the scope of additional research in accordance with the disease prognosis to clarify the diagnosis and obtain a reliable result.
3.2.7	Interpret the results of the most common methods of functional diagnostics and clinical-immunological examination used to identify pathologies of the blood, heart and blood vessels, lungs, kidneys, liver and other organs and systems
3.2.8	Establish a preliminary diagnosis - synthesize patient information to determine the pathology and its causes; formulate a clinical diagnosis taking into account the ICD-10 revision and modern clinical classifications; perform basic diagnostic measures to identify urgent and life-threatening conditions
3.2.9	Develop a treatment plan taking into account the progression of the disease; provide first aid in emergency and life-threatening conditions, conduct intensive care; carry out anti-shock measures; carry out resuscitation measures in the event of clinical death.

3.2.10	Formulate indications for the chosen method of treating internal organ diseases, taking into account etiotropic and pathogenetic agents; substantiate the principles of pathogenetic therapy for the most common diseases.
3.2.11	To justify pharmacotherapy for a specific patient under the main pathological syndromes and emergency conditions; determine the route of administration, regimen, and dosage of medications; and evaluate the effectiveness and safety of the treatment.
3.2.12	Promote a healthy lifestyle; conduct activities for primary and secondary prevention of the most common diseases requiring therapeutic treatment
3.2.13	Complete medical records and other medical documents in accordance with accepted standards and protocols.
3.3	**Expertise:**
3.3.1	Skills of moral and ethical argumentation, skills of informing patients and their relatives in accordance with the requirements of the rules of "informed consent"
3.3.2	Principles of medical deontology and medical ethics
3.3.3	Principles of medical deontology and medical ethics
3.3.4	Methods of general clinical examination of patients; skills in proper medical documentation
3.3.5	Skills in health education work among patients of therapeutic departments and the general population
3.3.6	Interpretation of the results of laboratory and instrumental diagnostic methods (electrocardiography, spirography, thermometry, hematological parameters, etc.).
3.3.7	Interpretation of the results of functional diagnostic methods and clinical and immunological examination of patients.
3.3.8	Skills in establishing a comprehensive clinical diagnosis (primary, secondary, complications); an algorithm for establishing a preliminary diagnosis with subsequent referral of the patient to the appropriate specialist.
3.3.9	Skills in prescribing medications for diseases of internal organs and pathological conditions; skills in providing first aid in emergency and life-threatening conditions.
3.3.10	Skills in prescribing adequate therapeutic treatment to patients in accordance with the diagnosis.
3.3.11	Skills in the use of drugs in the treatment, rehabilitation and prevention of diseases of internal organs and pathological conditions.
3.3.12	Proper maintenance of medical records

4. STRUCTURE AND CONTENT OF THE DISCIPLINE (MODULE)

Lesson code	Name of sections and topics /type of lesson/	Semester / Course	Hours	Competent-tions	Literature	Interact.	Pr. prep.	Note
	Section 1. Therapy							
1.1	Pneumonia. /Wed/	7	2		L1.1L2.1 E1 E2 E3 E4 E5 E6			
1.2	Chronic bronchitis. Chronic obstructive pulmonary disease. Bronchial asthma. /Wed/	7	4		L1.1L2.1 E1 E2 E3 E4 E5 E6			
1.3	Atherosclerosis. IHD: Angina /Med/	7	4		L1.1L2.1 E1 E2 E3 E4 E5 E6			
1.4	IHD. Myocardial infarction. /Wed/	7	8		L1.1L2.1 E1 E2 E3 E4 E5 E6			
1.5	Hypertension. SAG /Wed/	7	8		L2.1 E1 E2 E3 E4 E5 E6			
1.6	Rheumatic fever. Mitral valve defects . Aortic valve defects. Infective endocarditis. /Wed/	7	8		L1.1L2.1 E1 E2 E3 E4 E5 E6			
1.7	Congenital heart disease: patent ductus arteriosus, atrial septal defect, ventricular septal defect,	7	8		L1.1L2.1 E1 E2 E3 E4 E5 E6			
1.8	Infectious myocarditis. Chronic heart failure. /Wed/	7	8		L1.1L2.1 E1 E2 E3 E4 E5 E6			

1.9	Rheumatoid arthritis. SLE. /Wed/	7	6		L1.1L2.1 E1 E2 E3 E4 E5 E6			
1.10	Gout. Osteoarthrosis. /Wed/	7	4		L1.1L2.1 E1 E2 E3 E4 E5 E6			
1.11	Chronic gastritis. Peptic ulcer of the stomach and duodenum	7	4		L1.1L2.1 E1 E2 E3 E4 E5 E6			
1.12	Chronic cholecystitis. Biliary dyskinesia . /Wed/	7	2		L1.1L2.1 E1 E2 E3 E4 E5 E6			
1.13	Chronic hepatitis. Liver cirrhosis. /Wed/	7	6		L1.1 E1 E2 E3 E4 E5 E6			
1.14	Acute glomerulonephritis. Chronic glomerulonephritis. /Wed/	7	2		L1.1L2.1 E1 E2 E3 E4 E5 E6			
1.15	Chronic pyelonephritis /Wed/	7	6		L1.1L2.1 E1 E2 E3 E4 E5 E6			
1.16	Iron deficiency anemia. B12 deficiency anemia /Wed/	7	3		L1.1L2.1 E1 E2 E3 E4 E5 E6			
1.17	Participation in the final scientific student conference at the end of the internship /Wed/	7	4		L1.1L2.1 E1 E2 E3 E4 E5 E6			
1.18	Preparation for the final standings /Wed/	7	3		E2			

5. ASSESSMENT TOOLS FUND

5.1. Test questions and tasks

Questions to check your level of KNOWLEDGE:
The list of control questions for the differential test is in APPENDIX No. 5.
A list of typical tasks for testing the level of proficiency in ABILITY and MASTERY is in APPENDIX No. 2

EXAMPLE OF AN INTERIM CONTROL TICKET:
1. Question about therapy

5.2. Topics of coursework (projects)

Not provided

5.3. Assessment Fund

SECTION "THERAPY"
PATIENT CARE.
1. Each student receives a ward to supervise (4-5 patients), for which patients with medical diseases are selected.
2. The curator conducts a daily survey and examination of each patient according to the attached scheme, becomes familiar with the results of available laboratory tests and images, and proposes a treatment plan.
Curation scheme:
1. Passport section.
Last name, first name, patronymic ..... Age ..... Nationality .....
Marital status ..... Education ..... Occupation ..... Place of work..... Home address ..... Time of admission ..... Diagnosis on admission .....
2. Complaints. Complaints related to the illness that caused hospitalization are described first , followed by other complaints.
3. Medical history. Onset of illness, progression, past treatment, the patient's perceived causes, and reasons for hospitalization.
4. Life history. Past illnesses. Family history. For women - gynecological history.
5. Objective data. Constitution. Characteristics of the patient's general condition.
6. Analysis of images and laboratory tests.
7. Evaluation of treatment tactics
NIGHT DUTY REPORT. The student must fill out a night duty diary (for the building and for

resuscitation) according to the instructions given in APPENDIX___
THEORETICAL ASSIGNMENT. List of questions:
1. Questioning a patient with respiratory diseases
2. Questioning a patient with cardiovascular diseases
3. Questioning a patient with gastrointestinal diseases
4. Questioning a patient with rheumatological diseases
5. Questioning a patient with kidney disease
6. Examination of a patient with respiratory diseases
7. Examination of a patient with cardiovascular diseases
8. Auscultation of the heart
9. Examination of a patient with diseases of the digestive system
10. Examination of a patient with rheumatological diseases
11. Examination of a patient with kidney disease
12. Justification of the preliminary diagnosis
13. Justification of the patient examination plan
14. Interpretation of a complete blood count
15. Interpretation of general urine analysis
16. Interpretation of general urine analysis
17. Interpretation of the Nechiporenko test results
18. Interpretation of Zimnitsky test results
19. Interpretation of the analysis of biochemical parameters
20. Interpretation of serum electrolyte analysis results
21. Interpretation of radiographs
22. ECG interpretation
23. Justification of clinical diagnosis
24. Issues of prevention of internal organ diseases
25. Providing assistance during an asthma attack
26. Providing assistance during an attack of angina pectoris
27. Providing assistance in case of myocardial infarction
28. Providing assistance in case of pulmonary edema
29. Providing assistance during an attack of cardiac asthma
30. Providing assistance in case of cardiogenic shock
31. Providing assistance in case of anaphylactic shock
PRESENTATION. Topics of assignments for the conference:
1. Angina attack, clinical features, diagnostics, assistance
2. Tactics of providing first aid to patients with AMI at the pre-hospital stage.
3. Coronary heart disease. Sudden cardiac death.
4. Hypertensive crises.
5. Attack of bronchial asthma.
6. Asthmatic status.

SECTION "OBBYMTERY"
The list of questions for the theoretical interview is in APPENDIX No. 1.

PATIENT CARE.
1. Every day a student is assigned a ward to supervise (3-5 patients).
2. Using the supervised patients as an example, the student must do the following:
1) Get acquainted with the topic;
2) Establish a trusting relationship;
3) Collect complaints. Complaints related to the patient's condition are described;
4) Collect the patient’s medical history (onset, course of the process, past treatment, reasons for hospita lization);
5) Collect a life history (past illnesses, family history);
6) Conduct an examination and survey of the patient; Objective data. Constitution. Characteristics of the patient's general condition.
7) Describe the clinical status;
8) Analyze laboratory and instrumental data of the study;
9) Make a preliminary diagnosis;
10) Conduct a differential diagnosis;
11) Make a clinical diagnosis;
12) Determine the tactics of the proposed treatment;
13) Write a diary of the stage or discharge summary in the educational medical history;
14) Briefly summarize the etiology, pathogenesis, clinical presentation and treatment.
15) Fill out the practice diary.

NIGHT DUTY REPORT. Each student is required to complete two night shifts. Afterward, they complete a report in their practice diary on the procedures performed during their night shift.

5.4. List of types of assessment tools
SECTION "THERAPY" Theoretical task Patient care Night duty report Patient care diary Presentation Differentiated assessment based on test questions. Completing the internship diary. Rating scales for all types of assessment tools are in the APPENDIX___

6. EDUCATIONAL, METHODOLOGICAL AND INFORMATIONAL SUPPORT OF THE DISCIPLINE (MODULE)

6.1. Recommended literature

6.1.1. Primary Literature

	Authors, compilers	Title	Publisher, year
L1.1	N.A.Mukhin, V.S.Moiseev, A.I.Martynov	Internal Medicine: Internal Medicine, 2nd edition + CD in two volumes	2011

6.1.2. Further reading

	Authors, compilers	Title	Publisher, year
L2.1	Moiseev V.S., Kobalava Zh.D.,	Internal Medicine with the Fundamentals of Evidence-Based Medicine and Clinical Pharmacology: Internal Medicine with the Fundamentals of	GOETAR 2011

6.2. List of resources of the information and telecommunications network "Internet"

E1	Electronic library of KRSU	www.lib.krsu.kg
E2		
E3	Internet Medical Resources Directory	www.Consilium-medicum.com
E4	Practitioner	www.DITM.ru
E5	Consilium - medic	www.consilium-medicum.com
E6	The website of the Scientific Electronic Library of the Russian Federation contains information about publications in Russian medical journals, including full-text articles in the public	www.elibrary.ru

6.3. List of information and educational technologies

6.3.1 Competency-oriented educational technologies

6.3.1.1	Traditional educational technologies are reproductive-type classes, focused primarily on communicating knowledge and methods of action, transmitted to students in a ready-made form and intended for the reproductive assimilation and analysis of specific examples.
6.3.1.2	Innovative educational technologies – activities that develop systemic thinking and the ability to generate ideas when solving various creative problems.
6.3.1.3	Information educational technologies – independent use by students of computer equipment and Internet resources for independent work, as well as for familiarization with Internet sources, photo and video materials on the relevant section.

6.3.2 List of information reference systems and software

6.3.2.1	www.med.kg
6.3.2.2	http://www.athero.ru
6.3.2.3	www.cardiosite.ru
6.3.2.4	www.medmir.com
6.3.2.5	www.medscape.com
6.3.2.6	www.escardio.org
6.3.2.7	www.scsml.rssi.ru website of the State Central Scientific Medical Library
6.3.2.8	www.elibrary.ru The website of the scientific electronic library of the Russian Federation contains information about publications in Russian
6.3.2.9	http://www.consilium-medicum.com Consilium-medicum
6.3.2.10	http://www.DITM.ru Practicing physician

6.3.2.11	www.Consilium-medicum.com. Directory of medical resources on the Internet
6.3.2.12	www.lib.krsu.kg Electronic library of KRSU

7. LOGISTICS AND TECHNICAL SUPPORT OF THE DISCIPLINE (MODULE)	
7.1	The internship "Assistant Physician in a Therapeutic Hospital" is conducted at the National Center for Cardiology and Therapy, which has 10 departments: acute myocardial infarction, cardiac arrhythmia, hypertension, chronic heart failure , mountain medicine, pulmonology, rheumatology, nephrology, gastroenterology, and coronary heart disease. Three intensive care

8. METHODOLOGICAL INSTRUCTIONS FOR STUDENTS ON MASTERING THE DISCIPLINE (MODULE)

Technological map of industrial practice in APPENDIX_____

MODULAR CONTROL OF DISCIPLINE INCLUDES:
1. Current control: repetition of educational material on therapy, surgery and obstetrics and gynecology and completion of mandatory assignments for independent work
2. Boundary control: checking the completeness of knowledge and skills on the practical material as a whole.
3. Intermediate control - a completed documented part of the academic discipline (8th semester - credit with a grade) - a set of closely related credit modules

_____About the weeks and student distribution

BASIC REQUIREMENTS FOR CURRENT AND BOUNDARY CONTROLS (Methodological recommendations for students - interns in therapy)
PLACE OF THERAPEUTIC PRACTICE
CONTENTS OF THERAPEUTIC PRACTICE
Industrial practice for fourth-year students studying in the specialty “General Medicine” (040101) is carried out after the 7th and 8th semesters as an assistant to a hospital physician in the therapeutic departments for 2 weeks with a daily 6-hour work schedule.
Students are permitted to undertake industrial internships upon presentation of a health certificate confirming "admission to work in a healthcare facility," along with a gown, cap, mask, stethoscope, and work diary. During their internship, students must adhere to the rules of medical ethics and deontology when interacting with patients and hospital staff, and strictly adhere to the hospital's internal work regulations , occupational safety, and health regulations.
The student's workday begins with a morning medical conference, after which they conduct rounds of supervised patients (5-8 patients), completing diaries in the inpatient medical records, and, in consultation with the attending physician, preparing prescription sheets. They provide an initial description of admitted patients and prepare staged and discharge summaries. They monitor medical patients in the intensive care unit. They become familiar with the procedures for completing medical documentation in accordance with accepted standards, the procedure for issuing sick leave certificates, and the dispensing and storage of medications. They participate in instrumental and functional examinations of supervised patients and perform therapeutic and physiotherapeutic procedures. The head of the therapy department (basic practicum supervisor) conducts daily clinical reviews of the students' supervised patients in the form of a practical lesson in accordance with the practicum plan and in accordance with accepted procedures and standards for providing medical care to the public.
Together with the head of the department, the student participates in the selection of patients for inpatient treatment, as well as in consultations and boards of consultations with patients in other hospital departments. They accompany the patient during examinations or consultations at other medical institutions. They attend medical scientific, practical, and pathological conferences, and attend pathological examinations of deceased patients. They conduct public health education aimed at preventing internal diseases and promoting a healthy lifestyle (discussions with supervised patients in wards, issuing a health bulletin, etc.). They gain an understanding of the procedures for providing therapeutic care in the hospital (the number and specialization of therapeutic departments, intensive care units, pharmacy operations), as well as the procedure for admitting and discharging patients (sanitary treatment, filling out medical records, issuing sick leave certificates, etc.).
During their internship, students consolidate the knowledge, practical skills, and abilities they acquired during their studies . Independent work examining and treating patients with internal diseases under the guidance of their internship supervisors helps develop clinical judgment, principles of medical ethics, and medical ethics.
Completion of all the above-mentioned types of medical activities is recorded daily in the practical training diary. The base and university supervisors regularly monitor the diary's completion and the recording of the volume of procedures performed in the practical skills logbooks. Any practical training days missed by the student for valid reasons are made up within the timeframes assigned by the base and university supervisors.
At the end of the internship, the basic supervisor of the therapy internship gives the student a performance review, which indicates the volume and quality of the work done, the number of practical skills acquired, and characterizes

Discipline, meticulousness in work, diligence, and adherence to ethical principles. The administration of the medical institution will report any students
who violate the internal regulations of the medical institution to the university rector.
In the middle of the second week of the therapeutic practice section, a conference is held.

PRESENTATION PREPARATION GUIDELINES
The presentation is being prepared for the conference.
Multimedia presentations are independent student projects
designed to create visual information aids using the PowerPoint multimedia software. This type of work requires
students to coordinate their skills in collecting, organizing, and processing information, then presenting it
in electronic format as a collection of materials that briefly reflect the main points of the topic being studied. In other words, creating presentation materials
expands the methods and means of processing and presenting educational information and develops 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 defend it in class in the form of a report.
1. The topic of the presentation is chosen by the student from the proposed list of FOS and must be agreed upon with the teacher and correspond to the topic of the lesson.
2. Stages of presentation preparation
Drawing up a presentation plan (statement of the task; objectives of this work)
Think through each slide (at first, this can be done manually on paper), and it is important to answer the following
questions:
- How does the idea of this slide reveal the main idea of the entire presentation?
- What will be on the slide?
- What will be said?
- How will the transition to the next slide be made?
3. Creating a presentation using MS PowerPoint:
- It makes sense to be careful. Sloppily prepared slides (inconsistencies in fonts and spacing, typos,
typographical errors in formulas) raise suspicions that the student presenter
has taken a lax approach to the substantive issues.
- The title page is necessary to introduce you and the topic of your report to the audience.
- The number of slides is no more than 30.
- The optimal number of lines on a slide is from 6 to 11.
A common mistake is reading a slide verbatim. It's best to have detailed information
(definitions, formulas) written on the slide, and then use words to convey their meaning. Information on the slide can be
more formal and strictly presented than in speech.
- The optimal switching speed is one slide every 1–2 minutes.
- It is encouraged to use more drawings, pictures, formulas, graphs, and tables in your presentation.
Animation effects are also welcome.
- When explaining tables, it is necessary to say what the rows correspond to and what the columns correspond to.
- Introduce only those designations and concepts without which understanding the main ideas of the report is impossible.
- In a short speech, you can’t repeat the same idea, even in different words - time is precious.
Every sentence should have a purpose. Then the speech will be coherent and leave a good impression.
- There is no need to speak the last slide with conclusions in short presentations.
If a slide contains many equations, it is recommended to type it entirely in MS Word (otherwise, you will have to
manually place and align the equations on the slide). For this purpose, it is convenient to create a template—a blank slide with one large Word object
(Insert / Object / Microsoft Word Document). Adjust its dimensions once and then replicate it across the required number of slides.
It is recommended to change the primary font in the text and equations to Arial or a similar font; Times font looks poor
from a distance. Be sure to set the primary font size in MathType to the same as the primary font size in the text.
Never manually adjust the size of an equation by dragging it by its corner.
4. The student is obliged to prepare and present the report within the time strictly allotted by the teacher, and on time.
5. Instructions for speakers.
- report new information;
- use technical means;
- know and be well-versed in the topic of the entire presentation;
- be able to discuss and quickly answer questions;
- strictly adhere to the established time limits: speaker - 10 min.; discussion - 5 min.;
It is important to remember that a speech consists of three parts: introduction, main part and conclusion.
An introduction helps ensure the success of a presentation on any topic. It should contain:
- title of the presentation;
- communication of the main idea;
- a modern assessment of the subject of presentation;
- a brief list of the issues under consideration;
- a lively and interesting form of presentation;
The main part, in which the speaker must thoroughly explore the essence of the topic, is usually structured like
a report. The goal of the main part is to present sufficient data to engage the audience and
motivate them to read the material. The logical structure of the theoretical section should not be presented without
visual aids, audiovisual, and visual materials.
A conclusion is a clear, concise summary and summary that listeners always look forward to.

REQUIREMENTS FOR COMPLETING THE THERAPY PRACTICE DIARY
Completing the diary begins with a description of the practice site: hospital name, its specialty, bed capacity, full name of the head physician and his/her deputies. Department characteristics: staffing level, staffing percentage, full name of the department head, length of service,
category, department profile, compliance with sanitary standards and anti-epidemic measures. Equipment of the department or hospital with treatment and diagnostic equipment, sanitary and hygienic condition of the department and kitchen, availability of dietary tables and their characteristics.
After this, a daily description of the work completed during the day (the workday's content) is produced in a clear , concise form, item by item, with each item on a new line. For example:
1. Attended the morning conference (indicate the most interesting clinical cases, complications very briefly).
2. Received patients for supervision: list their names, indicate their full diagnosis and age.
3. Made a round of the ward with the attending physician (full name, doctor's experience).
4. Filled out the medical history of a newly admitted patient.
5. Participated as an assistant or was present at the following operations and manipulations (name, patient diagnosis).
6. Performed the following manipulations: examination, palpation, percussion, auscultation, blood pressure measurement, calculation of respiratory rate and heart rate in
a patient diagnosed with ……, pharmacodynamics of drug administration, etc.
7. Participated in or was present at a diagnostic examination (ECG, echocardiography, ultrasound of internal organs, respiratory function test, X-ray room)……
8. Conducted a conversation, read a lecture (where, number of listeners).
9. Discharged the patient: wrote an epidemiological report.
Student's signature:
Signature of the head of practice or head of department:
(The diary is signed daily before leaving work, on the 2nd day entries are kept similar to this one).
A digital report is compiled based on daily work logs, as per regulations, but may be expanded if incomplete. The diary concludes with a character reference signed by the physician, the department head, and the hospital's chief physician. It is certified with the hospital seal.

DIARY OF THE NIGHT DUTY IN THE THERAPEUTIC DEPARTMENT.
The diary is filled out according to the following scheme:
1. Name of the department
2. Full names of patients supervised during night shifts. Diagnosis, reasons for call, and measures provided during the shift.

CARE OF A THERAPEUTIC PATIENT
The patient must be monitored according to the scheme specified in paragraph 5.3.
In the process of patient care, the student must master the following practical skills:
1. Collect and evaluate the patient's medical history and illness.
2. Collect a genealogical history and determine hereditary predisposition.
3. Conduct a physical examination of the patient and evaluate the obtained data (heart rate, respiratory rate, blood pressure, etc.)
4. Evaluate clinical test data:
- blood (general analysis, hemosyndrome - clotting time, bleeding time, platelet count; for sugar; serum content, troponin, bilirubin, ALT, AST; electrolyte concentration; protein and protein fraction content; uric acid and creatinine content; blood test for ASL-O, CRP; serum iron;
- urine (general analysis, according to Nechiporenko, for sterility - bacteriuria, uroleukocytogram; creatinine clearance - Reberg test)
5. Assess the standard glucose tolerance test;
7. Evaluate the analysis of the coprological study;
8. Assess the data of the X-ray examination of the chest and skeletal system.
9. Assess the results of fibrogastroscopy;
10. Assess the Zimnitsky test, know the technique of collecting urine;
11. Diagnose, draw up and implement a plan for treatment, rehabilitation, and prevention of therapeutic diseases;
22. Provide emergency care in the following conditions:
attack of bronchial asthma, hypertensive crises, sudden cardiac death, pulmonary edema, cardiac asthma, attack of angina pectoris, gouty attack, hepatic colic