MINISTRY OF SCIENCE, HIGHER EDUCATION AND INNOVATIONS KYRGYZ REPUBLIC

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

APPROVED BY
Director
(position)
Abilova S.S.
(full name)
04.11. 2026

Surgical Practice
(Physician Assistant)

work program of the discipline (module)

Assigned to the department **Hospital Surgery named after Kh. S. Bebezov**

Syllabus 310501_26_1 ld in.plx
Specialty 31.05.01. - RF, 560001 - KR General Medicine
(for international students)

Qualification **physician-physician**

Form of study **full-time**

Total labor intensity **3 ZET**

Hours according to the curriculum 108
including:
classroom activities 0
independent work 36

Types of control in semesters:
pass with a grade of 8

Distribution of course hours by semester

Semester (<Course>.<Semester in the course>)	8 (4.2)		Total	
Weeks				
Type of activity	UP	RP	UP	RP
Contact work during the theoretical training period	72	72	72	72
Contact work	72	72	72	72
The work itself	36	36	36	36
Total	108	108	108	108

The program was compiled by:

Candidate of Medical Sciences, Associate Professor, Umetaliev T.M.; Candidate of Medical Sciences, Associate Professor, Dvumarov A.A.

Reviewer(s):

Candidate of Medical Sciences, Head of the Department of Surgery, Secondary School of Medicine, Ermekov T.A. _____

Work program of the discipline

developed in accordance with Federal State Educational Standard 3++:

Federal State Educational Standard of Higher Education - Specialist Degree in Specialty 31.05.01
General Medicine (Order of the Ministry of Education and Science of Russia dated August 12, 2020, No. 988)

compiled on the basis of the curriculum:

Specialty 31.05.01. - RF, 560001 - KR General Medicine
(for international students)

approved by the Academic Council of the University dated ____ _____protocol No. _____

The work program was approved at the department meeting

Minutes of August 25, 2021 No. 1
The program is valid from the 2025 to 2029 academic year.
Head of the Department Umetaliev Tilek Maratovich

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 the Department Umetaliev Tilek Maratovich

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 the Department Umetaliev Tilek Maratovich

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 the Department Umetaliev Tilek Maratovich

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 the Department Umetaliev Tilek Maratovich

1. OBJECTIVES OF LEARNING THE DISCIPLINE	
1.1	The purpose of industrial practice in the surgical profile 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

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	Introductory practice (General care of medical patients)
2.1.2	Russian language and culture of speech
2.1.3	Psychology of communication
2.1.4	Fundamentals of scientific research
2.1.5	Introductory practice (General care of surgical patients)
2.1.6	Latin
2.1.7	Biology
2.1.8	Anti-corruption culture and legal awareness
2.1.9	Anatomy
2.1.10	Histology, embryology, cytology
2.1.11	Life safety
2.1.12	Topographic anatomy and operative surgery
2.1.13	Industrial practice to acquire professional skills and experience in professional activities in the positions of mid-level medical personnel (Assistant Ward Nurse)
2.1.14	Physiology Workshop
2.1.15	Normal physiology
2.1.16	Microbiology, virology
2.1.17	Medical informatics
2.1.18	Kyrgyz language and literature
2.1.19	Bioethics
2.1.20	Biochemistry
2.1.21	Practice in emergency medical procedures (Basics of emergency care)
2.1.22	Pharmacology
2.1.23	Propaedeutics of internal diseases
2.1.24	Industrial practice to acquire professional skills and experience in professional activities in the positions of mid-level medical personnel (Assistant procedural nurse)
2.1.25	Pathophysiology, clinical pathophysiology
2.1.26	Pathopsychology
2.1.27	Pathological anatomy
2.1.28	General surgery
2.1.29	Radiation diagnostics
2.1.30	Immunology
2.1.31	Hygiene
2.1.32	Endocrinology
2.1.33	Dentistry
2.1.34	Therapeutic practice (Physician Assistant)
2.1.35	Dermatovenereology
2.1.36	Epidemiology
2.1.37	Faculty surgery
2.1.38	Faculty therapy
2.1.39	Urology
2.1.40	Psychiatry, medical psychology
2.1.41	Occupational diseases
2.1.42	Obstetrics and Gynecology Practice (Physician Assistant)

2.1.43	Public health and healthcare, health economics
2.1.44	Neurology, medical genetics, neurosurgery
2.1.45	Obstetrics
2.2	**Disciplines and practices for which mastery of this discipline (module) is necessary as a prerequisite:**
2.2.1	Obstetrics
2.2.2	Neurology, medical genetics, neurosurgery
2.2.3	Public health and healthcare, health economics
2.2.4	Obstetrics and Gynecology Practice (Physician Assistant)
2.2.5	Occupational diseases
2.2.6	Psychiatry, medical psychology
2.2.7	Urology
2.2.8	Faculty therapy
2.2.9	Faculty surgery
2.2.10	Epidemiology
2.2.11	Gynecology
2.2.12	Hospital therapy
2.2.13	Hospital surgery
2.2.14	Infectious diseases
2.2.15	Clinical pharmacology
2.2.16	Otorhinolaryngology
2.2.17	Pediatrics
2.2.18	General practice (Assistant physician of an outpatient clinic)
2.2.19	Emergency Medical Internship (Emergency Medical Assistant)
2.2.20	Traumatology, orthopedics
2.2.21	Research work
2.2.22	Ophthalmology
2.2.23	Anesthesiology, resuscitation, intensive care
2.2.24	Clinical pathology
2.2.25	Disaster Medicine
2.2.26	Fundamentals of Critical Thinking: Evidence-Based Medicine
2.2.27	Outpatient therapy
2.2.28	Outpatient surgery
2.2.29	Polyclinic obstetrics and gynecology
2.2.30	Internship in emergency medical procedures (Assistant to an anesthesiologist-resuscitator)
2.2.31	Psychotherapy
2.2.32	Family medicine
2.2.33	Forensic medicine
2.2.34	Pediatric surgery
2.2.35	Medical rehabilitation
2.2.36	Interdisciplinary state final certification in the national-regional component
2.2.37	Oncology, radiation therapy
2.2.38	Preparing for and passing the state exam
2.2.39	Sports medicine
2.2.40	Standards of diagnosis and treatment
2.2.41	Phthisiology

3. STUDENT COMPETENCIES DEVELOPED AS A RESULT OF LEARNING THE DISCIPLINE (MODULE)	
PC-3: Ready for educational activities to eliminate risk factors and develop healthy lifestyle skills	
Know:	
Level 1	- Causes, conditions and development of diseases, as well as the elimination of harmful factors affecting human health.

Be able to:	
Level 1	- To identify the harmful effects of environmental factors on human health. - To prevent the occurrence and/or spread of diseases, their early diagnosis and the causes of their occurrence. - Eliminate the causes of the emergence and spread of diseases. - Conduct educational activities to eliminate risk factors and promote healthy lifestyle skills .
Own:	
Level 1	- Skills for developing a healthy lifestyle, comprehensive measures aimed at maintaining and strengthening health. - Skills in educational activities to develop healthy lifestyle skills.

PC-4: Ready to collect and analyze patient complaints, anamnesis data, examination results, laboratory, instrumental, pathological and other studies in order to recognize a condition or establish the presence or absence of a disease	
Know:	
Level 1	- Methods and means of collecting and analyzing patient complaints, data from his anamnesis, indications and contraindications for additional clinical and paraclinical research methods; - The need to collect and analyze patient complaints and his anamnesis data; - Etiopathogenesis, clinical picture and diagnosis of major diseases; - Indications and contraindications for the selection of additional clinical and paraclinical research methods; - Indications and contraindications for additional clinical and paraclinical
Be able to:	
Level 1	- Collect and analyze patient complaints and medical history data; - Prescribe laboratory, instrumental, pathological and other studies in order to recognize the condition or establish the presence or absence of a disease; - Conduct a survey, collect complaints and anamnesis from the patient; - Create a pedigree model for families with hereditary diseases; - Conduct a clinical status study; - Determine indications and contraindications for the selection of additional clinical and paraclinical research methods; - Use methods and means of medical examination and diagnostic measures.
Own:	
Level 1	- Skills in collecting and analyzing patient complaints, data from his anamnesis, interpreting the results of the most common methods of functional diagnostics used to identify pathologies of the blood, heart and blood vessels, lungs, kidneys, liver and other organs and systems; - Skills in drawing up a medical history, skills in prescribing the necessary laboratory and instrumental examination methods for the purposes of recognition of a condition or establishment of the presence or absence of a disease; - Skills in examining patients and carrying out necessary diagnostic measures; - Skills in constructing a clinical diagnosis.

PC-5: Capable of identifying the main pathological conditions, symptoms, disease syndromes, and nosological forms in patients in accordance with the International Statistical Classification of Diseases and Related Health Problems, 10th revision.	
Know:	
Level 1	- Methods of conducting research to identify the main pathological conditions, symptoms, disease syndromes, nosological forms. - Specifics of identifying various types of pathological conditions, symptoms, disease syndromes, nosological forms in accordance with the ICD 10 revision. - The main syndromes of damage to organs and systems and their specificity in the differential diagnosis of various nosological forms in accordance with the ICD X revision.
Be able to:	
Level 1	- To understand the obtained results of the study of the main nosological forms of diseases; - Analyze various types of pathological conditions, symptoms, disease syndromes, nosological forms in accordance with the ICD X revision; - To note the practical value in comparing specific pathological syndromes and disease symptoms.
Own:	

Level 1	- Skills in identifying the main pathological conditions, symptoms, and disease syndromes; - Methods of searching, identifying and systematizing the main pathological conditions, symptoms of disease syndromes, nosological forms in accordance with the ICD 10 revision. - Skills of self-justification of the combination of various symptoms and syndromes into nosological forms in accordance with ICD X revision.

PC-9: Ready to provide primary health care in case of sudden 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	
Know:	
Level 1	- Clinical manifestations of acute and chronic diseases. - Methods of treatment and performance of medical procedures in pathological conditions and diseases. - General principles of treatment. - Diseases taking into account their etiology and pathogenesis. - Knowledge of pharmacological groups and their interactions with each other.
Be able to:	
Level 1	- Link symptoms, examination data and laboratory and instrumental examination results into a single whole and make the correct diagnosis. - Prepare the patient, instruments and medications to perform the necessary manipulation. - Assess the stage of the disease and prescribe therapy appropriate to the stage of the disease.
Own:	
Level 1	- Skills to identify signs of acute illness or exacerbation of a chronic disease. - Skills and methods of providing medical care for acute and chronic diseases. - Skills of etiological and pathogenetic therapy in the treatment of diseases depending on the severity of the disease in outpatient settings conditions.

PC-11: Ready to participate in providing emergency medical care in conditions requiring urgent medical intervention	
Know:	
Level 1	- Algorithm of emergency medical care; - Basic medical diagnostic and therapeutic measures to provide first aid in emergency conditions requiring urgent medical intervention.
Be able to:	
Level 1	– Select an individual type of care for treating the patient in accordance with the situation: first aid, ambulance, hospitalization.
Own:	
Level 1	- A set of resuscitation measures for acute respiratory and circulatory disorders, in case of clinical death; know modern methods of resuscitation and intensive care in providing assistance to patients and victims in critical conditions of various etiologies.

PC-14: Capable of maintaining medical records.	
Know:	
Level 1	- List and characteristics of accounting and reporting medical documentation in medical organizations of a therapeutic profile; - Regulatory documentation adopted in healthcare, as well as documentation for assessing the quality and effectiveness of work medical organizations.
Be able to:	
Level 1	- Conduct a medical-statistical analysis of health indicators of the assigned population; - Maintain medical records, including in electronic form.
Own:	
Level 1	- Skills and methods of maintaining accounting and reporting documentation of various types in medical institutions; - Skills in comparative analysis of medical documentation of various types in medical institutions.

PC-7: Capable of determining the tactics of managing patients with various nosological forms
Know:

Level 1	- Etiology, pathogenesis, clinical picture of diseases; - The main types and methods of treatment of patients with various nosological forms; - Main directions and problems in the management of patients with various diseases.
Be able to:	
Level 1	- To reveal the meaning of determining the tactics of treating patients with various diseases; - To compare different types and methods of treatment of patients with different nosological forms, to develop a treatment plan diseases; - To highlight the practical value of individual tactics for managing patients with various nosological forms.
Own:	
Level 1	- Skills in presenting and analyzing the etiology and pathogenesis of various clinical diseases to make a diagnosis. - Methods of searching and comparing different methods of treating patients with different nosological forms; - Possess the skills to determine the tactics for managing patients with diseases.

PC-8: Ready to manage and treat patients with various nosological forms in outpatient and day hospital settings	
Know:	
Level 1	- 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.
Be able to:	
Level 1	- 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.
Own:	
Level 1	- 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-12: Ready to participate in providing medical assistance in emergency situations, including participation in medical evacuation.	
Know:	
Level 1	- The foundations of developing a safety culture, environmental awareness, and risk-oriented thinking, in which safety and environmental protection issues are considered the most important priorities in human life.
Be able to:	
Level 1	- Understand the doctrine of the epidemic process, types of epidemiological studies and their purpose; - Carry out anti-epidemic measures, protect the population in areas of particularly dangerous infections, in case of deterioration of the radiation situation situations and natural disasters; - To identify the harmful effects of environmental factors on the human body, the course and possible complications of the most common diseases, diagnostic methods, modern methods of clinical, laboratory, and instrumental examination sick; - Analyze the specifics of organizing the provision of medical care during mass and sporting events, in emergency situations and disasters in peacetime and wartime.
Own:	
Level 1	- Methods of organizing a set of measures aimed at maintaining and strengthening health and eliminating harmful factors; - Skills in analyzing and assessing the quality of medical care, the health status of the population and the impact of environmental and production factors on it; - Skills for preventing the occurrence and spread of diseases, their early diagnosis and the causes of their occurrence; - Skills in implementing preventive, hygienic and anti-epidemic measures; - The ability to select an individual type of care for treating a patient in accordance with the situation: first aid, ambulance, hospitalization.

PC-13: Ready to determine the need for the use of natural healing factors, medicinal and non-medicinal therapy and other methods in patients requiring medical rehabilitation and spa treatment.	
Know:	
Level 1	- Clinical manifestations of acute and chronic diseases in patients requiring medical rehabilitation and spa treatment; - Indications and contraindications for non-drug treatment methods, give specific recommendations for their practical use; - Methods for assessing the effectiveness of treatment measures at all stages of patient rehabilitation.
Be able to:	
Level 1	- Link symptoms, examination data and laboratory and instrumental examination results into a single whole and make the correct diagnosis. - Independently select rehabilitation programs for patients with various illnesses. - Assess the stage of the disease and prescribe the necessary rehabilitation complexes taking into account the form, stage and phase of the disease.
Own:	
Level 1	- Skills in identifying signs of acute illness or exacerbation of a chronic disease in patients; - Skills and methods of providing medical care for acute and chronic diseases; - Skills in prescribing non-drug treatment methods for patients with various profiles, correctly assessing tolerance, adequacy and the effectiveness of the rehabilitation measures carried out.

PC-15: Able to apply the basic principles of organization and management in the field of public health, in medical organizations and their structural divisions.	
Know:	
Level 1	- Fundamentals of management in the field of public health and principles of organization in the field of healthcare. - Principles of management in the field of public health, medical organizations and their structural divisions.
Be able to:	
Level 1	- Apply the principles of organization and management in the field of public health; - Apply the principles of management of medical organizations and their structural divisions.
Own:	
Level 1	- The main principles of organization and management, and their structural divisions in the field of public health.

PC-16: Ready to organize medical examinations and participate in assessing the quality of medical care using basic medical and statistical indicators.	
Know:	
Level 1	- Main directions of medical statistical indicators in the context of evidence-based medicine. - Basic principles and methods for assessing the quality of medical care using medical statistical indicators.
Be able to:	
Level 1	- Analyze medical statistical indicators and their interpretation. - Use medical statistical indicators to assess the quality of medical care. - Conduct an assessment of the quality of medical care using key medical statistical indicators, taking into account evidence-based medicine.
Own:	
Level 1	- Basic skills in working with medical statistics. - Skills in expressing and substantiating one’s own position regarding the assessment of the quality of medical care based on medical and statistical indicators, taking into account evidence-based medicine. - A set of measures to assess the quality of medical care using statistical indicators.

PC-17: Capable and willing to participate in scientific research and public presentation of medical information based on evidence-based medicine.	
Know:	
Level 1	- Medical systems and medical schools; - Methods and techniques of philosophical analysis of problems; - Forms and methods of scientific knowledge and methods of solving intellectual problems.
Be able to:	

Level 1	- Use educational, scientific, popular science literature, and the Internet for professional activities; - To analyze issues of general pathology and modern theoretical concepts and trends in the field of healthcare in diagnostics, treatment, medical rehabilitation and prevention;
Own:	
Level 1	- Skills in written, reasoned presentation of one's own point of view; - Skills of public speaking, argumentation, conducting discussions and polemics, practical analysis of the logic of various types of reasoning; - Skills in research work in the field of health care in the field of diagnosis, treatment, medical rehabilitation and prevention.

As a result of mastering the discipline, the student must

3.1	**Know:**
3.1.1	- Moral and ethical standards, rules and principles of professional medical conduct;
3.1.2	- Etiology, pathogenesis, diagnosis, clinical picture, course characteristics, possible complications and prevention of common diseases that occur in a typical form in different age groups and different genders;
3.1.3	- Diagnostic methods, diagnostic capabilities of methods for direct examination of a surgical patient, modern methods of clinical, laboratory, instrumental examination of patients, including functional, endoscopic, radiological, ultrasound, magnetic resonance and other methods;
3.1.4	- Features of resuscitation and intensive care;
3.1.5	- Features of the use of etiotropic, pathogenetic and symptomatic agents in the treatment of patients with pathology of internal organs;
3.1.6	- Treatment methods and indications for their use. The mechanism of therapeutic action of exercise therapy and physiotherapy, indications and contraindications for their use, and the specifics of their implementation;
3.1.7	- Features of consultation and diagnosis of patients with acute surgical pathologies in gynecology and maternity hospital.
3.2	**Be able to:**
3.2.1	- Build and maintain working relationships with all team members;
3.2.2	- Collect anamnesis, conduct an objective examination of the organs and systems of the body, determine indications for laboratory and instrumental examination of the patient;
3.2.3	- Interpret the results of the examination, formulate a preliminary and clinical diagnosis;
3.2.4	- Diagnose life-threatening conditions and provide emergency care;
3.2.5	- Prescribe etiotropic and pathogenetic treatment in accordance with the algorithms and standards of patient care;
3.2.6	- To draw up an examination plan for a patient with a surgical disease;
3.2.7	- Evaluate examination and survey data; interpret the results of laboratory and instrumental examination methods;
3.2.8	- Formulate a preliminary diagnosis;
3.2.9	- Provide immediate and long-term prognosis and recommendations for treatment;
3.2.10	- Conduct treatment under the supervision of a physician.
3.3	**Own:**
3.3.1	- Methods of general clinical examination of a patient in a surgical hospital;
3.3.2	- Evaluation of the results of laboratory and instrumental diagnostic methods in surgical patients;
3.3.3	- Preparation of medical documentation - inpatient card;
3.3.4	- Algorithm for establishing a preliminary and detailed clinical diagnosis for surgical patients;
3.3.5	- Algorithm for implementing basic medical treatment measures to provide assistance to patients in emergency conditions;
3.3.6	- Method of transfusion of blood components.

4. STRUCTURE AND CONTENT OF THE DISCIPLINE (MODULE)								
Lesson code	**Name of sections and topics /type of lesson/**	**Semester / Course**	**Hours**	**Competent-tions**	**Literature**	**Inte ract.**	**Pr. prep.**	**Note**

	Section 1. Preparatory stage.							
1.1	Introduction to the clinical internship program and internal work regulations . Briefing on occupational health and safety, safety, and fire safety requirements . /KrTO/	8	3	PC-3 PC-15	E1 E2 E3 E4 E5 E6			Practice diary
	Section 2. Practical stage							
2.1	Introduction to the structure and operation of the admissions department, the work of the admissions department surgeon , and the completion and maintenance of	8	6	PC-3 PC-4 PC-5 PC-9 PC-11 PC-14 PC-7 PC -12 PC-15	E1 E2 E3 E4 E5 E6			Practice diary
2.2	Introduction to the structure of the surgical department and the work of a surgeon in the surgical department . Specific aspects of caring for surgical patients. Basic rules of asepsis and antisepsis in surgery. /KrTO/	8	40	PC-3 PC-4 PC-5 PC-9 PC-11 PC-14 PC-7 PC-8 PC-12 PC-13 PC-15 PC-16 PC-17	L1.1 L1.2 L1.3 L1.4L2.1 L2.2 L2.3 L2.4 L2.5 L2.6L3.1 L3.2 L3.3 E1 E2 E3 E4 E5 E6			Practice diary
2.3	the operating room structure . Sanitary and hygienic conditions of the operating room. /KrTO/	8	12	PC-5 PC-9 PC-11 PC-14 PC-7 PC -8 PC-12	L1.1 L1.2 L1.3 L1.4L2.1 L2.2 L2.4 L2.5 L2.6L3.1 L3.2 L3.3 E1 E2 E3 E4 E5 E6			Practice diary
2.4	Introduction to work and surgical procedures in the intensive care unit. /KrTO/	8	6	PC-4 PC-5 PC-11 PC-14 PC-7 PC -12 PC-15	L1.1 L1.2 L1.3 L1.4L2.1 L2.2 L2.3 L2.4 L2.5 L2.6L3.1 L3.2 L3.3 E1 E2 E3 E4 E5 E6			Practice diary
2.5	Introduction to the work of the expert and medical commission with surgical patients . /KrTO/	8	3	PC-5 PC-14 PC-7 PC-15 PC-16 PC-17	E1 E2 E3 E4 E5 E6			Practice diary
	Section 3. Independent work							
3.1	Participation in scientific, practical and pathological-anatomical conferences. /Wed/	8	6	PC-14 PC-15 PC-17	E1 E2 E3 E4 E5 E6			Practice diary Presentation

3.2	Assistant to a surgeon during surgical procedures /Wed/	8	18	PC-3 PC-4 PC-5 PC-9 PC-11 PC-14 PC-7 PC -8 PC-12 PC-13 PC-15 PC-17	L1.1 L1.2 L1.3 L1.4L2.1 L2.2 L2.3 L2.4 L2.5 L2.6L3.1 L3.2 L3.3 E1 E2 E3 E4 E5 E6			Practice diary
3.3	Assistant to a surgeon in the preparation of medical documentation /Wed/	8	6	PC-3 PC-4 PC-5 PC-9 PC-14 PC-7 PC-8 PC-13 PC-15 PC-16 PC-17	E1 E2 E3 E4 E5 E6			Practice diary
	Section 4. Interim assessment							
4.1	Preparing for the exam. Completing the clinical internship diary /Wed/	8	6	PC-3 PC-4 PC-5 PC-9 PC-11 PC-14 PC-7 PC -8 PC-12 PC-13 PC-15 PC-16	L1.1 L1.2 L1.3 L1.4L2.1 L2.2 L2.3 L2.4 L2.5 L2.6L3.1 L3.2 L3.3 E1 E2 E3 E4 E5 E6			
4.2	Credit /KrTO/	8	2	PC-3 PC-4 PC-5 PC-9 PC-11 PC-14 PC-7 PC-8 PC-12 PC-13 PC-15 PC-16 PC-17	L1.1 L1.2 L1.3 L1.4L2.1 L2.2 L2.3 L2.4 L2.5 L2.6L3.1 L3.2 L3.3 E1 E2 E3 E4 E5 E6			Practice diary Test tasks Security questions, situational tasks Practical skills

5. ASSESSMENT TOOLS FUND

5.1. Test questions and tasks

TEST QUESTIONS FOR THE CREDIT:

1. Surgical anatomy of the appendix. Relationship between clinical manifestations of acute appendicitis and variations in anatomical location.
2. Clinical presentation and symptoms of acute appendicitis.
3. Complications of acute appendicitis. Appendicular infiltrate: clinical features, diagnosis, and treatment principles.
4. Complications of acute appendicitis. Appendiceal abscesses: causes, location, clinical features, diagnosis, and treatment.
5. Complications after appendectomy. Intra-abdominal bleeding. Clinical presentation, diagnosis, and treatment.
6. Clinical presentation and diagnostics of acute cholecystitis.
7. Complications of cholelithiasis and acute cholecystitis. Clinical presentation and diagnostics.
8. Choledocholithiasis. Definition and diagnosis. Principles of surgical treatment. Types of external and internal drainage of the common bile duct.
9. Clinical presentation and diagnostics of acute pancreatitis.
10. Principles of treatment of acute pancreatitis. Conservative therapy. Indications for surgical treatment, types of operations.
11. Strangulated hernia. Types of strangulation. Clinical features and diagnostics. Principles of surgical treatment. Tactics for spontaneous hernia reduction.
12. Complications of abdominal hernias - irreducibility, coprostasis, inflammation. Clinical presentation, diagnosis, treatment.
13. Clinical presentation and diagnostics of widespread peritonitis.
14. Clinical presentation and diagnostics of spleen injuries. Treatment principles.
15. Clinical presentation and diagnostics of abdominal trauma with damage to a hollow organ.
16. Clinical presentation and diagnostics of abdominal trauma with damage to parenchymal organs.
17. Treatment tactics for open abdominal trauma. Types of surgery for damage to hollow and parenchymal organs.
18. Symptomatology of spleen and liver injury.
19. Clinical presentation of covered and atypical perforation of gastric ulcer and duodenal ulcer. Symptomatology. Significance

additional research methods.
20. Gastrointestinal bleeding. Clinical presentation depending on the location of the bleeding source.
Differential diagnosis. Diagnostic algorithm.
21. Diagnostic algorithm for acute appendicitis.
22. Clinic, diagnostics and treatment of stomach cancer.
23. Clinical presentation and diagnostics of breast cancer
24. Clinic, diagnosis and treatment of lung cancer.
25. Clinic for diagnosis and treatment of esophageal cancer.
26. Clinical presentation of acute appendicitis with retrocecal and retroperitoneal location of the appendix.
Diagnostic features.
27. Differential diagnosis between paralytic, obstructive and strangulating intestinal obstruction.
28. Phlegmon of the hernial sac in strangulated hernia. Clinical features and surgical treatment.
29. Diagnostic algorithm for acute abdomen syndrome.
30. Differential diagnosis of acute intestinal obstruction.
31. Symptomatology of strangulation intestinal obstruction.
32. Symptomatology of obstructive intestinal obstruction.
EXAMPLES OF TEST TASKS:
1. What examination should be performed if a perforated gastric ulcer is suspected:
a) FGDS
b) plain radiography of the abdominal cavity in the supine position
c) plain radiography of the abdominal cavity while standing
d) X-ray contrast study of the stomach
d) ultrasound of the abdominal cavity
2. What should be done before performing an emergency FGDS if gastrointestinal bleeding is suspected:
a) give the patient a glass of water to drink
b) perform a survey radiography of the abdominal cavity
c) perform a cleansing enema
d) gastric lavage until the water is clear
d) shave the hair on the anterior abdominal wall
3. Which of the following laboratory tests should be performed first in a patient with gastrointestinal bleeding:
a) UAC
b) OAM
c) blood electrolyte test
d) liver enzyme levels
d) Complete blood count with leukocyte formula
Evaluation criteria:
The test score is assigned proportionally to the proportion of correct answers:
90-100% - excellent grade
80-89% - "good" rating
70-79% - satisfactory rating
Less than 70% of correct answers – “unsatisfactory” rating.

5.2. Topics of coursework (projects)

Not provided.

5.3. Assessment Fund

The assessment tools fund for conducting midterm assessment of students during industrial practice consists of the following sections: interview questions, test control questions, a list of practical skills for industrial practice, and a methodology for a point-rating system for assessing students' academic achievements during industrial practice.

5.4. List of types of assessment tools

Patient care diary
Night duty report
Theoretical task
Patient care
Presentation
Differentiated assessment based on test questions. Completing the internship diary.

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	A.G. Abdullayeva	Hospital Surgery: A Textbook	M.: GEOTAR-Media 2013

	Authors, compilers	Title	Publisher, year
L1.2	Funloer I.S., Osmonov T.A., Madaminov A.M.	Clinical Surgery: Lecture Course (Faculty Surgery)	Bishkek: KRSU Publishing House 2017
L1.3	T.A. Kornilov	Surgical diseases: a textbook	IP R Media 2019
L1.4	Abdullayev A.G.	Hospital Surgery. Syndromology: Textbook - : Textbook -	2013
6.1.2. Further reading			
	Authors, compilers	Title	Publisher, year
L2.1	Mazurkevich G.S., Bagnenko S.F.	Shock: Theory, Clinical Features, and Organization of Anti-Shock Care: A Guide for Physicians	St. Petersburg: Polytechnic 2004
L2.2	Barash P.J., Cullen B.F., Stalting R.K.	Clinical Anesthesiology: A Textbook	M.: Medical Literature 2004
L2.3	Bisenkov L.N.	Thoracic Surgery: A Guide for Physicians	St. Petersburg: Hippocrates Publishing House
L2.4	Bebezov H.S., Bebezov B.Kh., Dvumarov A.A., Ilyenko N.V.	Surgical endocrinology: diagnostics and surgical treatment.	KRSU 2010
L2.5	Rivkin V.L. and others.	Coloproctology: A Reference Guide for Physicians.	M.: GEOTAR-Med 2011
L2.6	Zatevakhin I.I.	Abdominal surgery: National guidelines	2016
6.1.3. Methodological developments			
	Authors, compilers	Title	Publisher, year
L3.1	H.S. Bebezov, N.I. Akhunbaeva, B.Kh. Bebezov, S.B. Boronbaev	Clinical features and complications of acute appendicitis: A teaching aid	Bishkek: Publishing house KRSU 2005
L3.2	Comp.: A.M. Madaminov, J.N. Nurmanbetov, I.S. Funloer, et al.	Acute intestinal obstruction: A teaching aid	2014
L3.3	Madaminov A.M., Osmonov T.A.	Hemorrhoids: A Study Guide	Bishkek: KRSU Publishing House 2005
6.2. List of resources of the information and telecommunications network "Internet"			
E1	Electronic library of KRSU		http://lib.krsu.edu.kg/
E2	Electronic library system "Student Consultant"		https://www.studentlibrary.ru/
E3	Electronic resource Surgery.ru		https://surgery.ru/
E4	Medical and biological information portal for specialists		http://www.medline.ru/
E5	Legal reference system "Consultant Plus"		https://www.consultant.ru/
E6	Medical video portal		https://www.med-edu.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.
6.3.1.4	The organization of the clinical practice "Assistant physician of a surgical hospital" in modern conditions should be based on innovative psychological and pedagogical approaches and technologies aimed at developing a competency-based approach and technologies aimed at developing a competency-based approach and improving the effectiveness of teaching and the quality of training of students.

6.3.1.5	Conducting clinical practice ensures the acquisition and consolidation of necessary skills, the development of professional competencies, readiness for independent and individual work, and the adoption of responsible decisions within the framework of professional competencies.
6.3.1.6	Working with patients develops in students not only a readiness for independent and individual work and the making of responsible decisions within the framework of professional competence, but also the ability to scientifically analyze medical and socially significant problems, a readiness for logical analysis of various types of reasoning, and mastery of communication skills, argumentation, polemics, and discussion.
6.3.1.7	Independent work by students promotes the development of cognitive activity and creative thinking , instills skills for independent information search, and also develops the ability and readiness for self-improvement, self-realization, and creative adaptation.
6.3.2 List of information reference systems and software	
6.3.2.1	Windows 7.10 - Multitasking operating system from Microsoft
6.3.2.2	Adobe Reader - A program for viewing electronic documents
6.3.2.3	Foxi tReader - A program for viewing electronic documents
6.3.2.4	Internet Explorer - Browser
6.3.2.5	Google Chrome - Browser
6.3.2.6	Kaspersky Antivirus - Antivirus protection
6.3.2.7	Open Office.org (Calc) - Software for working with electronic documents

7. LOGISTICS AND TECHNICAL SUPPORT OF THE DISCIPLINE (MODULE)	
7.1	The industrial clinical practice "Assistant physician of a surgical hospital" is conducted at the I.K. Akhunbaev Clinic of the National Hospital of the Ministry of Health of the Kyrgyz Republic in 6 surgical departments: purulent surgery, thoracic surgery,
7.2	Surgical gastroenterology and endocrinology, proctology, vascular surgery, and a department of plastic surgery and hand surgery. The hospital has 210 beds. The Center for Simulation Training and Accreditation of Physicians is used for practical skills development.

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

CONTENTS OF SURGICAL PRACTICE
Industrial clinical practice for fourth-year students studying in the specialty "General Medicine" is carried out after the seventh and
During the eighth semester, students will be employed as an inpatient surgical assistant in the surgical departments of the National Hospital of the Ministry of Health of the Kyrgyz Republic, working six hours a day for two weeks. Students are permitted to participate in the internship upon presentation of a health certificate confirming "admission to work in a medical and preventive institution," as well as a gown, cap, mask, and surgical uniform.
phonendoscope, work diary.
During their internship, students must adhere to the rules of medical ethics and deontology when interacting with patients and hospital staff, strictly adhere to the hospital's internal work regulations, safety regulations, and occupational health and safety. The student's workday begins with a morning medical conference in the department, followed by a general medical conference, after which they conduct rounds of supervised patients (4-5 patients), completing diaries in the inpatient medical records, and, in consultation with the attending physician, completing prescription sheets.
Conducts an initial description of admitted patients and prepares staged and discharge summaries. Familiarizes with the procedures for preparing and maintaining medical documentation in accordance with accepted standards, the procedures for issuing sick leave certificates, and medication storage.
Participates in instrumental and functional studies of supervised patients, performs medical and physiotherapeutic procedures, and participates in dressing changes.
The head of the department (basic supervisor of the practice) conducts daily clinical analysis of patients supervised by students, in the form of a practical lesson in accordance with the practice plan and taking into account the accepted procedures and standards for the provision of medical care to the population.
Together with the head of the department, the student participates in patient examinations, hospitalizations, and consultations.
Accompanies the patient during examinations or consultations at other medical facilities. Attends medical scientific and practical conferences and pathology conferences, and attends postmortem examinations of deceased patients. Conducts health education activities aimed at preventing internal diseases and promoting a healthy lifestyle (talks with supervised patients in the wards).
Works with medical documents (filling out medical histories and discharge summaries).
During their clinical internships, students consolidate the knowledge, practical skills, and abilities they acquired during their studies . Independent work examining and treating patients with surgical pathologies under the guidance of their internship supervisors fosters clinical judgment, principles of medical ethics, and ethical conduct.
Completion of all specified types of medical activities is recorded daily in the practical training diary. The basic and university practical training supervisors regularly monitor the completion of the diaries 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 supervisor.

practices.
Upon completion of the internship, the surgical internship supervisor provides the student with a performance review, outlining the volume and quality of work performed, the number of practical skills acquired, and assessing their discipline, meticulousness, diligence, and adherence to ethical principles. The hospital administration reports any students who violate the hospital's internal regulations to the university rector.
A conference is held midway through the second week of the surgical internship.
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 tools for 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.
RULES FOR FORMATTING A PRACTICE DIARY
A mandatory reporting document for a student's internship is the internship diary. The diary must include logs of the various types of work completed by the student during the internship. Logs are prepared for each day of internship. The log must include the date and the work completed that day.
The practice diary must be signed:
a) after each protocol - by the supervisor of the student's practice.
b) on the title page - by the internship supervisor from the organization (university) and the internship supervisor from the specialized organization (internship base).
Sample diary entry plan
Notes from the first day of practice:
On the first day, the student must be given a briefing at the specialized organization on labor protection, fire safety, safety precautions, internal work regulations, sanitary and epidemiological rules and hygienic standards.
- Data familiarization with the database: number of departments, number of beds in the hospital, list the departments, hospital equipment (passport of the medical organization), patient contingent;
- then the characteristics of the department in which the student works: the number of wards, the number of beds in the department and directly in the ward (wards) that the student supervises, the contingent of patients, the organization of the work of the unit, the equipment of the department, additional offices, etc.
- Every day of work must be signed by a doctor.
- The student, as a ward physician, manages 5-8 patients, makes daily rounds of his patients and performs some surgical operations, with permission assists the ward physician or the head of the department, actively participates in all urgent and emergency operations for strangulated hernia, acute appendicitis, peritonitis, intestinal obstruction, etc.
- is required to be present and, if possible, participates in all department operations;
- provides first aid in case of accidents, in particular, household and industrial injuries – wounds, fractures, dislocations;
- participates in emergency operations.
In the dressing room, under the supervision of a physician, the student applies dressings, removes sutures, drains wounds, applies plaster casts and splints, performs traction on fractures, administers anesthesia, and becomes familiar with preparing the dressing table, preparing materials, and sterilizing materials and instruments. The student personally applies dressings to their patients, administers intravenous medications, applies plaster casts, performs pleural punctures, etc.
In the operating room, the student assists during surgeries, learns local anesthesia techniques, administers anesthesia, and performs surgeries under the guidance of a physician, primarily minor surgery; gains practical experience preparing the operating room and dressing table, preparing materials, and sterilizing materials and instruments.
- Diary entries: Describe the composition and management of supervised patients, noting the specific clinical course of these patients; ward rounds with senior colleagues and their assessments; admission of new patients with a brief examination summary and diagnostic criteria, a full diagnosis, and a plan for further examination and treatment. Various procedures performed independently or with the student's participation are noted.
- daily:
1. A brief digital report on how many patients the student examined (full name, age, diagnosis), list all patients,
Date No. Full name, age of patient I/II Complaints, medical history Objective examination data Diagnosis Treatment diary
2. What documents were processed - quantity, What documents were processed - quantity,
 What laboratory and instrumental research data – laboratory, radiographs, etc. – were assessed
 In what diagnostic and therapeutic procedures for supervised patients did you participate (attendance at X-ray examinations, endoscopy, assistance during surgeries, list which ones, number.
Manipulations performed independently: dressings, opening of abscesses, etc.)
3. Describe 2-3 patients examined in the department (complaints, brief medical history, physical status, diagnosis according to the classification of primary and concomitant diseases, rationale for the diagnosis, indications or contraindications for surgery, and treatment measures). For 3 patients, provide detailed case histories (appendicitis, hernia, peptic ulcer) with a detailed description of the surgery. If a student assists in a surgery, the surgery should be described in detail, including the name of the procedure, the procedure, and its specific features.
When supervising patients, attention should be paid to preoperative preparation, postoperative care, therapeutic nutrition, and medication administration. When supervising trauma patients, attention should be paid to methods for restoring the function of the damaged organ, which should be reflected in the diary.
In addition to supervised patients, the diary should also describe cases of rare diseases and injuries.