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

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

УТВЕРЖДАЮ
Директор института клинической медицины и биомедицинских технологий
(должность)
(ФИО)
2026 г.

# PROFESSIONAL CYCLE
# Public Health and Health Care, Health Economics

## working program of discipline (module)

| | |
|---|---|
| Assigned to the Department | **Public Health and Health Care** |
| Academic Curriculum | 310501_26_1 лд ин.р!х<br>560001 - KR - General medicine (for foreign students) |
| Qualification | **specialist** |
| form of education | **intramural** |

| | |
|---|---|
| Total Credit Value | **3 ЗЕТ** |
| Course hours | 90 |
| Including: | |
| in-class learning | 48 |
| individual work | 41,7 |

Types of control in semesters:
Pass with grade 6

Course Hours Sceduling (per semester)

| Semester (<Course>. <Semester on course>) | 6 (3.2) | | Total | |
|---|---|---|---|---|
| Weeks | 18 | | | |
| Type of Training | AC | CO | AC | CO |
| Lectures | 16 | 16 | 16 | 16 |
| Practical | 32 | 32 | 32 | 32 |
| Contact work during theoretical training | 0,3 | 0,3 | 0,3 | 0,3 |
| Including int. | 4 | 4 | 4 | 4 |
| Total aud. | 48 | 48 | 48 | 48 |
| Contact work | 48,3 | 48,3 | 48,3 | 48,3 |
| Individual work | 41,7 | 41,7 | 41,7 | 41,7 |
| Total | 90 | 90 | 90 | 90 |

The course outline developed by:

-, -, *Dzhanaliev Azamat Bolotbecovich; -, -, Sultan uulu Ermek; Professor, Doctor of Medical Sciences, Mambetov Marat Avalovich*

Reviewer (s): *Doctor of Medical Sciences, Aydarov Ziyabidin Abdirayimovich; Candidate of Medical Sciences, Tumanbayev Arstanbek Muktarbekovich*

approved by HEP П:

The course outline
**Public Health and Health Care, Health Economics**

Designed on the basis of curriculum:

Specialty 560001 - KR - General Medecine (for foreign students)

Approved by Academic Council of Higer Education Institution as of 26.06.2026 order № 11.

The course outlineendorsed by **Public Health and Health Care** Department meeting

Record of 11.09.2026 г. № 2
Valid for: 2026-2031 e.y. academic year
The Head of Departmemt Doctor of medical science, Professor N.K..
Kasiev

# CHANGE RECORD SHEET for discipline (module) work program

**Public Health and Health Care, Health Economics**

| № п/п | Basis of application changes | Section/Clause | Change content |
|---|---|---|---|
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| 5. | | | |

| 1. OBJECTIVES OF LEARNING THE DISCIPLINE | |
|---|---|
| 1.1 | Formation of knowledge about the laws of public health and ways to protect and improve it in preventive activities; andabout thestrategy of public health protection, directions of reforms and economic experiments in the Kyrgyz and Russian healthcare. Formation of knowledge in modern medical statistics and evidence-based medicine in professional activities and researchwork. To contribute the development of modern social and medical thinking among future doctors, to provide a basis for makingorganizational decisions in healthcare in a market economy. |

| 2. PLACE OF DISCIPLINE IN THE STRUCTURE BEP | |
|---|---|
| Loop (section) BEP: | B1.O.03 |
| **2.1** | **Requirements for the preliminary preparation of the student:** |
| 2.1.1 | Propedeutics of Internal Medicine |
| 2.1.2 | Medical informatics |
| 2.1.3 | Basics of research work |
| **2.2** | **Disciplines and practices for which the development of this discipline (module) is necessary as a previous one:** |
| 2.2.1 | Gynecology |
| 2.2.2 | Pediatrics |
| 2.2.3 | Research work |
| 2.2.4 | Preparation for exams and passing the state exam |
| 2.2.5 | Outpatient therapy |

| 3. STUDENT'S COMPETENCES FORMED AS A RESULT OF LEARNING THE DISCIPLINE (MODULE) | |
|---|---|
| **ОК-5: Able to achieve business goals across departments and organizations by managing and transforming complex, unpredictable work or learning environments with innovative approaches.** | |
| **Know:** | |
| Level 1 | • fundamentals of the organization of the health care system and principles of management of medical organizations;<br>• economic mechanisms for the functioning of health care, sources of financing and methods of economicevaluation;<br>• current innovative approaches in health organization, management and economics |
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| **Be able to:** | |
| Level 1 | • analyze the effectiveness of medical organizations in the face of uncertainty;<br>• make management decisions taking into account socio-economic factors;<br>• assess the impact of management and innovative decisions on the health indicators of the populationandthe work of organizations. |
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| **Own:** | |
| Level 1 | • management and economic analysis skills in health care;<br>• skills in planning, forecasting and evaluating the results of the activities of medical organizations;<br>• the ability to apply innovative management technologies in professional activities. |
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| **РК-2: Able and ready to use the normative documentation adopted in the health care of the Kyrgyz Republic, as well as in international practical medicine; laws and regulations on working with confidential information, maintain medical confidentiality.** | |
|---|---|
| **Know:** | |
| Level 1 | • basic laws and regulations of the Kyrgyz Republic in the field of healthcare;<br>• international legal norms and documents governing medical activities;<br>• the legal basis for the protection of personal data and compliance with medical confidentiality. |
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| **Be able to:** | |

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|---|---|
| Level 1 | • apply regulatory documents in professional activities;<br>• ensure compliance with the law when working with medical documentation;<br>• use legal norms to protect the rights of patients and healthcare professionals. |
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| **Own:** | |
| Level 1 | • skills in legal analysis of managerial and professional situations;<br>• ability to work with regulatory and regulatory documentation;<br>• skills in compliance with the principles of confidentiality and medical confidentiality in practice. |
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| **PK-17: Able and ready to use knowledge of the structure of healthcare organizations, referral and referral system.** | |
|---|---|
| **Know:** | |
| Level 1 | • the structure of the health care system of the Kyrgyz Republic and the levels of medical care;<br>• principles of organization of primary, specialized and high-tech medical care;<br>• procedure for referral and redirection of patients between levels of medical organizations. |
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| **Be able to:** | |
| Level 1 | • navigate the structure of healthcare organizations and their functional responsibilities;<br>• correctly apply the system of referral and redirection of patients;<br>• analyze patient routing from a health care accessibility and effectiveness perspective. |
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| **Own:** | |
| Level 1 | • skills in practical use of patient routing schemes;<br>• ability to interact with various levels of medical organizations;<br>• skills in assessing the effectiveness of the referral system and continuity of care. |
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| **PK-19: Capable and ready to assess the quality of medical care using basic medical and statistical indicators.** | |
|---|---|
| **Know:** | |
| Level 1 | • basic medical and statistical indicators used to assess the health of the population and the activities of medicalorganizations;<br>• criteria and indicators of quality of care;<br>• fundamentals of statistical analysis in health care. |
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| **Be able to:** | |
| Level 1 | • calculate and analyze the main medical and statistical indicators;<br>• assess the quality and effectiveness of health care based on statistical data;<br>• interpret the results of medico-statistical analyses for management decision-making. |
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| **Own:** | |
| Level 1 | • skills in collecting, processing and analyzing medical and statistical information;<br>• the ability to use statistical data to assess the activities of medical organizations;<br>• skills to inform conclusions about quality of care. |
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**As a result of mastering the discipline, the student must**

| **3.1** | **Know:** |
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| 3.1.1 | □ content of the subject of public health and health care; |
| 3.1.2 | □ legislative framework for the protection of public health; |

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|---|---|
| 3.1.3 | □ basics of biomedical statistics; |
| 3.1.4 | □ indicators of population health and their determining factors; |
| 3.1.5 | □ the role of the health promotion service (HSS) in the formation of a healthy lifestyle (HLS); |
| 3.1.6 | □ main problems and strategies of health promotion (HM) of individual contingents of the population by WHO; |
| 3.1.7 | □ fundamentals of health care reform; |
| 3.1.8 | □ fundamentals of health care management and quality of health services; |
| 3.1.9 | □ definition of economics and financing of health care, goal, objectives and ways of further development in the context of healthinsurance and market economy; |
| 3.1.10 | □ the state of the healthcare system abroad. |
| **3.2** | **Be able to:** |
| 3.2.1 | □ plan and conduct statistical research, analyze and interpret their results in practical and scientific activities; |
| 3.2.2 | □ calculate and analyze the main coefficients of public health and the activities of medical organizations; |
| 3.2.3 | □ conduct a situational analysis of the organization and health units. |
| **3.3** | **Own:** |
| 3.3.1 | □ methodology for calculating statistical indicators, basic skills of management and marketing of healthcare organizations. |

**4. STRUCTURE AND CONTENT OF THE DISCIPLINE (MODULE)**

| Activity code | Name of sections and topics / type of lesson / | Semester / Course | Hours | Competencies | Literature | Interact. | Etc. prep. | Note |
|---|---|---|---|---|---|---|---|---|
| | **Section 1. Medical statistics** | | | | | | | |
| 1.1 | Subject and content of medical statistics. Organization of statistical research /Pr/ | 6 | 2 | OK-5 PK-2 PK-17 PK-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 1.2 | Relative values. Variational series and averages /Pr/ | 6 | 2 | OK-5 PK-2 PK-17 PK-19 | L1.1L2.1 L3.1 E1 E2 | 2 | | Drawingupalayoutofthestagesofstatisticalresearch |
| 1.3 | Selective method and assessment of the reliability of research results /Pr/ | 6 | 2 | OK-5 PK-2 PK-17 PK-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 1.4 | Correlation. Regression /Pr/ | 6 | 2 | OK-5 PK-2 PK-17 PK-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 1.5 | Dynamic series, graphic images /Pr/ | 6 | 2 | OK-5 PK-2 PK-17 PK-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 1.6 | Medical and demographic indicators /Pr/ | 6 | 2 | OK-5 PK-2 PK-17 PK-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 1.7 | Morbidity and disability rates /Pr/ | 6 | 2 | OK-5 PK-2 PK-17 PK-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 1.8 | Subject and content of medical statistics. Organization of statistical research /iw/ | 6 | 2 | OK-5 PK-2 PK-17 PK-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 1.9 | Relative values. Variational series and averages /iw/ | 6 | 3 | OK-5 PK-2 PK-17 PK-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 1.10 | Selective method and assessment of the reliability of research results /iw/ | 6 | 3 | OK-5 PK-2 PK-17 PK-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 1.11 | Correlation. Regression /iw/ | 6 | 3 | OK-5 PK-2 PK-17 PK-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 1.12 | Dynamic series, graphic images /iw/ | 6 | 3 | OK-5 PK-2 PK-17 PK-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 1.13 | Medical and demographic indicators /iw/ | 6 | 3 | OK-5 PK-2 PK-17 PK-19 | L1.1L2.1 L3.1 E1 E2 | | | |

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|---|---|---|---|---|---|---|---|---|
| 1.14 | Morbidity and disability rates /iw/ | 6 | 3 | ОК-5 ПК-2 ПК-17 ПК-19 | Л1.1Л2.1Л3.1 Э1 Э2 | | | |
| | **Section 2. Health management** | | | | | | | |
| 2.1 | Public health and its condition determine it /Lecture/ | 6 | 2 | ОК-5 РК-2 РК-17 РК-19 | L1.1l2.1 L3.1 E1 E2 | | | |
| 2.2 | Risk factors /Lecture/ | 6 | 2 | ОК-5 РК-2 РК-17 РК-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 2.3 | Health promotion of population contingents /Lecture/ | 6 | 2 | ОК-5 РК-2 РК-17 РК-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 2.4 | Management, Marketing in Health care /Lecture/ | 6 | 2 | ОК-5 РК-2 РК-17 РК-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 2.5 | Health care reform /Lecture/ | 6 | 2 | ОК-5 РК-2 РК-17 РК-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 2.6 | Fundamentals of family medicine. Social and health insurance /Lecture/ | 6 | 2 | ОК-5 РК-2 РК-17 РК-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 2.7 | Public health and its condition determine it. Risk factors /Pr/ | 6 | 2 | ОК-5 РК-2 РК-17 РК-19 | L1.1L2.1 L3.1 E1 E2 | 2 | | Informationmessageontopics: healthylifestyle;riskfactors; socialmobilization;prevention.Presentation (discussion) |
| 2.8 | Health promotion of population contingents /Pr/ | 6 | 2 | ОК-5 РК-2 РК-17 РК-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 2.9 | Management, Marketing in Health care /Pr/ | 6 | 2 | ОК-5 РК-2 РК-17 РК-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 2.10 | Health care reform /Pr/ | 6 | 2 | ОК-5 РК-2 РК-17 РК-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 2.11 | Fundamentals of family medicine. Social and health insurance /Pr/ | 6 | 2 | ОК-5 РК-2 РК-17 РК-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 2.12 | Public health and its condition determine it. Risk factors /iw/ | 6 | 2 | ОК-5 РК-2 РК-17 РК-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 2.13 | Health promotion of population contingents /iw/ | 6 | 2 | ОК-5 РК-2 РК-17 РК-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 2.14 | Management, Marketing in Health care /iw/ | 6 | 2 | ОК-5 РК-2 РК-17 РК-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 2.15 | Health care reform /iw/ | 6 | 2 | ОК-5 РК-2 РК-17 РК-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 2.16 | Fundamentals of family medicine. Social and health insurance /iw/ | 6 | 2 | ОК-5 РК-2 РК-17 РК-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 2.17 | Quality of medical services /iw/ | 6 | 2 | ОК-5 РК-2 РК-17 РК-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| | **Section 3. Economics of health care** | | | | | | | |

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|---|---|---|---|---|---|---|---|---|
| 3.1 | Quality of medical services. Health planning and economics /Lecture/ | 6 | 2 | ОК-5 ПК-2 ПК-17 ПК-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 3.2 | Health care funding. Health care system in foreign countries /Lecture/ | 6 | 2 | ОК-5 ПК-2 ПК-17 ПК-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 3.3 | Quality of medical services /Pr/ | 6 | 2 | ОК-5 ПК-2 ПК-17 ПК-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 3.4 | Health planning and economics /Pr/ | 6 | 2 | ОК-5 ПК-2 ПК-17 ПК-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 3.5 | Health care funding. Health care system in foreign countries /Pr/ | 6 | 2 | ОК-5 ПК-2 ПК-17 ПК-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 3.6 | Coursework "Health and Health Analysis by Region of the Country" /Pr/ | 6 | 2 | ОК-5 ПК-2 ПК-17 ПК-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 3.7 | Health care funding. Health care system in foreign countries /iw/ | 6 | 3 | ОК-5 ПК-2 ПК-17 ПК-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 3.8 | Health planning and economics /iw/ | 6 | 3 | ОК-5 ПК-2 ПК-17 ПК-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 3.9 | Coursework "Health and Health Analysis by Region of the Country" /iw/ | 6 | 3,7 | ОК-5 ПК-2 ПК-17 ПК-19 | L1.1L2.1 L3.1 E1 E2 | | | |
| 3.10 | /Contact/ | 6 | 0,3 | ОК-5 ПК-2 ПК-17 ПК-19 | L1.1L2.1 L3.1 E1 E2 | | | |

## 5. EVALUATION FUND

### 5.1. Test questions and tasks

Questions to check the level of competences KNOWLEDGE:
List of questions submitted to study by students:
1.sections of medical statistics;
2. statistical aggregate, its types;
3. stages of statistical research and their content;
4. main types of errors in the analysis of the material;
5. features of conducting social, medical and clinical research;
6. kinds of relative values;
7. intensive and extensive indicators, their differences;
8. indicators of coordination, likelihood, ratio, visibility;
9. variation range, its characteristics and types;
10. average values, their types, application;
11. the value of the standard deviation and the coefficient of variation (Cr);
12. concept and essence of reliability assessment;
13. concept necessary to assess the reliability;
14. determination of confidence limits of relative and average values;
15. concepts of reliability of average and relative values, "criterion of reliability" of research results;
16. essence of the criterion of compliance (X2);
17. main provisions of the method of standardizing statistical indicators;
18. stages of the direct method of standardization;
19. role of dynamic ranks in the analysis of scientific research;
20. ways of smoothing the dynamic ranks and their importance for material analysis;
21. essence of the correlation between the features;
22. assessment of the reliability of the correlation coefficient;
23. essence of the coefficient of determination;
24. application of the regression method in the practice of a doctor;
25. principles of building a regression cycle;
26. content of demography, medical demography, sections of demography;
27. general and special medical and demographic indicators, their content;
28. mortality rates at different periods of the life of the fetus and deaths under the age of 1 year;
29. the importance of studying the incidence of the population and methods of its study;

30. types of incidences by referral and their content;
31. incidence with temporary disability and its indicators;
32. disability, content and indicators;
33. content of evidence-based medicine;
34. types of research and their content;
35. purpose of using graphic images in statistical research and general rules for their construction, types of graphic images;
36. public health and health care content;
37. legislative framework for health protection;
38. content of the law on public health;
39. indicators of physical, mental (mental) and social well-being of a person;
40. factors influencing the state of health;
41. public health indicators and main trends;
42. health promotion and assessment technology: principles, resources;
43. health promotion strategies in international documents and Kyrgyzstan;
44. human lifestyle: definition, concept;
45. healthy lifestyle: definition, concept, spiritual values, the formation of a healthy lifestyle (HLS);
46. risk factors: definition, grouping, main risk factors influencing the onset of diseases;
47. potential health hazard (ICD-10 risk factors);
48. prevention of risk factors: definition, types;
49. social mobilization of the population;
50. International Classification of Diseases (ICD), Clinical Cost Group (CDG);
51. state of health of the population of the Kyrgyz Republic;
52. content of the dispensary service method;
53. role of the health promotion service (HSS) in the formation of a healthy lifestyle (HLS);
54. communication for health promotion;
55. international collaboration in health promotion;
56. prevention strategies in foreign countries;
57. main problems and strategies of health promotion (HM) of children and youth by WHO and KR;
58. main problems and strategies of health promotion (HM) of children, youth, women and the elderly by WHO and in the KyrgyzRepublic;
59. main problems in the health of women and the elderly, strategies to improve their health;
60. basic concepts and provisions of management;
61. solution and its types;
62. management technology;
63. basic concepts of marketing;
64. public health market;
65. marketing research and advertising;
66. system: concept, content;
67. main directions of health care reform in the Kyrgyz Republic;
68. classification and structure of health care institutions;
69. essence of social insurance, security and health insurance;
70. content of health insurance in the Kyrgyz Republic;
71. content of social pediatrics;
72. essence of the concept of "Child health protection";
73. essence of the concept of "Protection of mothers and children";
74. basics of family medicine;
75. principles, structure of FMC, FGP;
76. tasks of emergency medical care and specialized medical care;
77. content of the quality of medical services;
78. assessment and management of the quality of medical services;
79. essence of licensing and accreditation in medical institutions;
80. accounting and reporting in health care;
81. performance indicators of the general medical network;
82. performance indicators of specialized medical services;
83. essence of medical and labor expertise;
84. content of the examination of temporary incapacity for work;
85. organization of examination of incapacity for work;
86. Government decree "On the procedure and terms of temporary incapacity for work" No. 576 dated 14.08.2006;
87. fundamentals of planning and economics of health care;
88. pricing in healthcare;
89.fundamentals of Health Care Financing;
90. health system;
91. healthcare organization in developed countries: Great Britain, France, USA;
92. health care organization in developing countries;
93. International organizations.

A list of typical assignments to check the level of competence SKILLS and EXPERTISE:
1. to determine the volume and type of statistical population, unit and signs of observation;

2. to develop the stages of statistical research;
3. to make up layouts of statistical tables;
4. to calculate intensive and extensive indicators;
5. to calculate indicators of coordination, likelihood, ratio, visibility;
6. to make simple and grouped variation series;
7. to calculate the average values (M);
8. to calculate standard deviation and coefficient of variation;
9. to calculate the error of representativeness of relative and average values;
10. to evaluate reliability of the research results;
11. to calculate standardized indicators;
12. to calculate and analyze indicators of time series;
13. to calculate coefficient of determination;
14. to calculate regression coefficient;
15. to build regression graph;
16. to calculate, evaluate and analyze general and special medical and demographic indicators;
17. to calculate, evaluate and analyze mortality rates in different periods of the life of the fetus and deaths under the age of 1 year;
18. to calculate and analyze incidence rates;
19. to calculate and analyze incidence rates with temporary disability;
20. to calculate and analyze indicators of disability;
21. to select experimental and control groups for research in accordance with the requirements of evidence-based medicine;
22. to build graphic images;
23. to justify the priority of diseases in Kyrgyzstan in accordance with the WHO policy "Health for All in the 21st century";
24. to carry out social mobilization of the population to form a healthy lifestyle for the population;
25. to calculate and analyze indicators of public health and medical examination;
26. to solve situational tasks;
27. to analyze situations and make recommendations to improve the health of children and youth;
28. to analyze situations and make recommendations to improve the health of children, youth, women and the elderly;
29. to analyze situations on the incidence of women and the elderly, to offer specific recommendations to improve their health;
30. to determine the results of self-testing;
31. to calculate and analyze sections of marketing arithmetic;
32. to analyze activities of health care institutions;
33. to analyze quality of medical services provided by FMCs and FGPs;
34. to calculate and analyze performance indicators of medical services;
35. to calculate and analyze indicators with temporary and permanent disability;
36. to calculate the need of the population for medical visits, hospital beds, medical personnel;
37. to calculate the budget of the health care institution;
38. to define the health care system of a given country.

**5.2. Course work topics (projects)**

Writing a term paper and projects are not provided.

**5.3. Appraisal Fund**

CURRENT CONTROL:
Presentation topics:
1. WHO policy "Health for all in the 21st century".
2. Human health and healthy lifestyle.
3. Risk factors and their impact on human health.
4. Prevention.
5. Social mobilization of the population.
6. Law on public health in the Kyrgyz Republic.
7. Health policy of Kyrgyzstan in the XXI century.
8. Strengthening women's health (strategies of WHO and KR).
9. Strengthening children's health (strategies of WHO and KR).
10. Strengthening the health of young people (strategies of WHO and KR).
11. Strengthening the health of older people (strategies of WHO and KR).
12. The latest theory of management of healthcare organizations.
13. The concept of groups and their significance.
14. Causes of conflicts.
15. Communicative behavior in the organization.
16. Marketing environment (macro, micro) and medical services.
17. Medical service and its features.
18. Life cycle of a medical service and its stages.
19. Competitiveness in medicine.
20. Demand factors and their classification.
21. Advertising in the health marketing system.
22. Questions of SWOT - analysis.
23. Reform of health care "Den Sooluk".
24. Results of the reform "Manas", "Manas Taalimi".
25. Family medicine in the Kyrgyz Republic.

26. Organization of work of a family doctor, paramedic, family nurse.
27. History of emergency medical aid. Organization of emergency medical services in the Kyrgyz Republic.
28. Social and health insurance.
29. The quality of medical services.
30. Pricing of medical services.
31. Types of economic laws.
32. Financing of the health care system of the Kyrgyz Republic.
33. Financing of FMCs (FGPs).
34. Financing of inpatient medical services.

Test: Control work 1 «Medical statistics»
1. Statistics, health statistics – definition, scope.
2. Types of relative quantities.
3. Types of statistical observation, sampling method and methods of selection.
4. Stages of statistical research.
5. The intensive parameters, their application, methods of calculation.
6. The concept of standardized indicators, methods of standardization.
7. Tasks and sections of medical statistics.
8. Types of average value.
9. The types of morbidity by appealability.
10. The contents of the 1st stage of statistical research
11. The notion of variational series and its characteristic, the difference between simple and grouped variational series.
12. Health and health indicators.
13. The content of the research plan (stage 2) of statistical research
14. Values of the base of intensive indicators.
15. Methods of calculating the arithmetic mean.
16. A statistical aggregate, the types, the requirements for sampling,
17. The index of coordination, methods of calculation.
18. Sources for the study of disease, their characteristic.
19. The essence of the third and fourth stages of statistical research.
20. Relative values, species.
21. Types of population movement and their essence.
22. Extensive indicators, coordination indicators, likelihood indicators, their application, calculation methods.
23. Characteristics of the mean square deviation (SD), and the method of calculation
24. Morbidity: concepts.
25. Statistical quantities.
26. Demography, medical demography: the concept.
27. Method of calculation of rank correlation.
28. The main types of errors in the analysis of the material.
29. The definition of dynamic range, and types of time series.
30. Methods of selection (or calculation) of the standard.
31. Sections of demography.
32. Features of social-medical and clinical-statistical researches.
33. The value of the coefficient of variation (SG), evaluation criteria, method of calculation.
34. Stages of statistical research.
35. The magnitude of the basis of morbidity and mortality.
36. Reliability of average and relative values, confidence criterion.
37. The methods of smoothing of series.
38. Definition of "correlation".
39. Special demographic indicators.
40. Sources for the study of disease and their characteristics.
41. The method of calculation of the margin of error for mean values (m).
42. The concept of standardization, methods for calculating standardized coefficients.
43. General demographic indicators, methods of calculation.
44. The methods of smoothing of series.
45. The types of morbidity by appealability.
46. The difference between intensive and extensive indicators.
47. The essence of the margin of error (m).
48. The coefficient of determination, application and methods of calculations.
49. Ratio indicators, indicators of visibility, application, calculation methods.
50. Measurement of seasonal variations, calculation principle.
51. General medical and demographic indicators.
52. Evidence-based medicine: definition.
53. The main indicators of the General morbidity according to the data of appeal.
54. Disability groups and their essence.
55. Intensive index, calculation method.
56. The essence of the reliability criterion (t).
57. Graphic images-concepts, application, statistical quantities used to construct graphic images.

58. The incidence rate according to medical examinations.
59. Indicators characterizing the dynamic series.
60. Correlation: evaluation of the correlation coefficient.
61. The concept of regression and regression coefficient, calculation method.
62. The methods of smoothing of series.
63. Infant mortality, types, methods of calculation.
64. Extensive index, methodology of calculation.
65. Average life expectancy: concept and significance.
66. Special types of morbidity.
67. Statistics, health statistics – definition, scope.
68. Special medical and demographic indicators.
69. Disability, method of calculation.
70. The main types of graphic images, chart views.
71. Methods of calculating the arithmetic mean.
72. Disability groups and their essence.
73. Health and health indicators.
74. Characteristics of the mean square deviation (Φ), and the method of calculation
75. The definition of dynamic range, and types of time series.
76. Tasks and sections of medical statistics.
77. Evaluation of the reliability criterion (p).
78. Statics of the population – the notion.
Tasks for medical and demographic indicators (Appendix 1)

Control work 2. «Management and marketing in healthcare»:
1. Marketing: concept.
2. Management method.
3. Factors influencing the final result of the decision.
4. Health care management: concept, purpose.
5. Term of transaction.
6. Tasks of marketing research.
7. Functions of management.
8. Kind of document.
9. Segmentation of the medical services market.
10. The market of public health.
11. Characteristics of the market of medical services.
12. Degrees decisions.
13. The market for medical services: the concept.
14. The stages of control.
15. Kind of document.
16. Necessity: the concept.
17. Distribution: the concept.
18. The style of the Manager.
19. Demand: theconcept.
20. The main role of the management.
21. Classification of the solution.
22. The need: the concept.
23. Types of marketing of medical services.
24. Reasons for the lack of time.
25. Request: concept.
26. Management technology: concept, operations.
27. Causes of conflicts in the team.
28. Product: concept, types.
29. Objectives of management.
30. Solution: concept, purpose, tasks.
31. Proposal: the concept.
32. Marketing research: definition.
33. Requirements for meetings.
34. Promotion: concept.
35. Features of health care management.
36. Requirements for the Manager.
37. Market: the concept.
38. The principles of management.
39. Kind of document.
40. Management skills.
41. Exchange: the concept.
42. Methods of marketing research.
43. Types of market: the concept.
44. Triad of management.

45. Requirements for meetings.
46. The deal: the concept
47. Types of marketing of medical services.
48. Management method.
49. Health care management: concept, purpose.
50. Price: concept.
51. Methods of marketing research.
52. Classification of the solution.
53. Management technology: concept, operations.
54. The market of public health.
55. Marketing research: definition.
56. Advertising: concept, types.
57. Functions of management.
58. Factors affecting the effectiveness of the solution.
59. Reasons for the lack of time.
60. Marketing: concept.
61. The stages of control.
62. Requirements for the Manager.
63. The market for medical services: the concept.
64. The principles of management.
65. Proposal: the concept.
66. Tasks of marketing research.
67. Market: the concept.
68. Features of health care management.
69. Solution: concept, purpose, tasks.
70. Types of market: the concept.
71. Objectives of management.
72. The style of the Manager.

Test on "Health Economics": List of questions submitted to study by students to pass examination:
1. Health planning - definition.
2. Purpose and objectives of planning.
3. Types of plans.
4. Methods of planning.
5. Sections of the health plan.
6. Indicators of the plan.
7. Health economics - definition.
8. Types of efficiency.
9. Factors of growth in health care costs.
10. Elements of prices and types of prices.
11. Sources of funding.
12. Types of financing.
13. Methods of payment for medical services at the primary level.
14. Methods of payment for medical services in inpatient care.
15. Preconditions for changes in health financing
16. Single Payer System: Definition.
17. Consolidation of funds: definition.
18. Expenditure of funds in the FMC.
19. Expenditure of funds in hospitals.
20. Health systems.
21. Advantages and disadvantages of the state system.
22. Advantages and disadvantages of the insurance system.
23. Advantages and disadvantages of the private business system.
24. Countries with a public health care system.
25. Countries with a health insurance system.
26. Standards of medical care.
27. Risks in health care.
28. Risk management, goals.
29. Reducing the risk of patients.

Test (list of test questions in Appendix 2)

**5.4. List of types of appraisal tools**

1.Presentation
2.Control work
3.Frontal survey (test)
4.(Grading scales for all types of assessment tools in Appendix 3)

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

### 6.1. Recommended reading

#### 6.1.1. Main literature

| | Authors, compilers | Title | Publisher, year |
|---|---|---|---|
| L1.1 | Kasiev N.K., Mambetov M.A., Bolbachan O.A., Ibraimova D.D. | Public health and health care: A Training Manual | Bishkek: KRSU Publishing House 2024 |

#### 6.1.2. Additional literature

| | Authors, compilers | Title | Publisher, year |
|---|---|---|---|
| L2.1 | Kasiev N.K., Bolbachan O.A., Ibraimova D.D., Aytalieva R.R. | Medical statistics: textbook for students of Foreign Citizens | Bishkek: KRSU Publishing House 2022 |

#### 6.1.3. Methodical developments

| | Authors, compilers | Title | Publisher, year |
|---|---|---|---|
| L3.1 | Mambetov M.A., Bolbachan O.A., Ibraimova D.D. | Medical statistics: educational and methodological recommendations for foreign students | Bishkek: Publishing House of KRSU 2023 |

### 6.2. List of resources of the information and telecommunication network "Internet"

| | | |
|---|---|---|
| E1 | KRSU library | https://e-lib.krsu.kg/ |
| E2 | Public health and healthcare | https://www.biostatistics.ca/public-health-books/ |

### 6.3. List of information and educational technologies

#### 6.3.1 Competence-based educational technologies

| | |
|---|---|
| 6.3.1.1 | Traditional educational technologies - lectures, workshops, consultations focused on the communication of knowledgetransferred to students in a finished form. Innovative educational technologies - classes in an interactive form that form systems thinking and the ability to generateideaswhen solving various problems. |
| 6.3.1.2 | They include electronic lecture notes with presentations. |
| 6.3.1.3 | Information educational technologies - the student's independent use of computer technology and Internet resources for theimplementation of practical tasks and independent work. |

#### 6.3.2 List of information reference systems and software

| | |
|---|---|
| 6.3.2.1 | http://meduniver.com/Medical/Book/28.html |

## 7. MATERIAL AND TECHNICAL SUPPORT OF THE DISCIPLINE (MODULE)

| | |
|---|---|
| 7.1 | The department is located on the territory of the National Center of Oncology - the "Conference Hall" building at the address:Bishkek, st. Akhunbaeva 92a |
| 7.2 | 1. Lecture hall for 220 seats. |
| 7.3 | 2. Auditorium No. 1 for 20 seats, for practical exercises, independent work and viewing multimedia, video materials, visual aids-stands, blackboard. |
| 7.4 | 3. Auditorium No. 2 for 30 seats, for practical exercises, independent work and viewing multimedia, video materials, visual aids-stands, blackboard. |
| 7.5 | 4. Auditorium No. 3 (reading room) for 16 seats, for practical exercises, independent work and viewing multimedia, videomaterials, visual aids - blackboard. |
| 7.6 | 5. Information sources: - library - 88 copies; - electronic library - 11 copies. |
| 7.7 | 6. Computer |
| 7.8 | 7. Projector |
| 7.9 | 8. Printer |
| 7.10 | 9. Scanner |
| 7.11 | 10. Laptop |
| 7.12 | 11. Screen |

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

Technological map of the discipline (Appendix 4).
Recommendations to use the Discipline Course Work(DCW): - DCW materials contain all the main trends of the current state of public health and health care issues; - when studying the subject, concepts of the foundations of public health and health care are

given with the discussion of the mainapproaches to solve some specific problems of public health of the population and health care; - the study of public health and health care is based on the preparation of term papers by students with subsequent discussionanddefenseina group; - the practical part of the subject is based on solving situational problems, working with ICD - 10, determining the results of self-testing,analyzing the activities of health care institutions, analyzing examples of a clinical protocol, studying accounting and reportingdocuments,calculating the health budget, determining the health care system of a particular country. Recommendations to work with required and online reading: - in recent years, a large number of publications on public health and health and on the problems of the current state of public healthandhealth care has appeared in the literature on the Website - www.orthomed.ru. Recommendations to work with control questions for the topic: - control questions for the topic reflect the main course of the subject; - represent the consolidation of the topic material. Recommendations to discuss some public health and health issues: - given main problematic and discussion questions on which the teacher and students express their own opinions aimed at solvingissuesofpublic health and health. Recommendations to solve situational tasks: - situational tasks are prepared for all topics of the discipline; - when solving situational problems, the student must master the theoretical knowledge of the topic and logical thinking.
Recommendations to work with ICD – 10: -determining the results of self-testing, -analyzing the activities of health care institutions, -parsing examples of a clinical protocol, -studying accounting and reporting documents, -calculating the health budget, -determining the health care system of a particular country, the student must master theoretical and logical thinking.
Recommendations to work with the test system of disciplines: - the tests are based on module questions; - there are 4-answer-options for each question, 1 of which is correct. Recommendations to preparing for the test: - the module on the subject is presented in control questions on the topic, reflecting the basis of knowledge necessary to studythediscipline;- after passing the module and the test successfully, a credit is given. Guidelines to prepare for the examination: - in all classes, attention is paid to the questions submitted for the exam; - in all classes, situational tasks are solved, which are submitted for the exam. Presentation procedure:
The first slide should contain the title of the presentation and the names of its authors, the name of the discipline, course, group. Thesecond slide is the outline of the presentation. The presentation must necessarily end with the conclusions obtained duringthework.The last slide lists the sources used (including Internet resources). In slides with text, it is recommended to formulate abstractsmoreconcisely and break them down into separate paragraphs. Slides should not be cluttered. You should use at least fonts 30. Presentation must be done in Microsoft Power Point, 8 - 12 slides, duration of the presentation is 4-10 min. Report is presentedinwriting. Design requirements: use of a unified design style; no more than three colors on one slide; expediency of usinganimationeffects.

**Appendix 1**

Control of the "Health and demographic indicators".

| Birth weight (grams) | Number of births | | Died among them in the period | | | | | | | Total birth |
|---|---|---|---|---|---|---|---|---|---|---|
| | alive | dead | antenatal | intranatal | early neonatal (0-6 days) | late neonatal (7 to 27 days) | Post-neonatal (28 days-1year) | From 0 to 1 year | | |
| 500-999 | 25 | 7 | 4 | 3 | 21 | 0 | 4 | 25 | | 32 |
| 1000-1499 | 29 | 6 | 5 | 1 | 18 | 3 | 2 | 23 | | 35 |
| 1500-2499 | 255 | 10 | 9 | 1 | 19 | 4 | 5 | 28 | | 265 |
| 2500 and more | 5512 | 23 | 16 | 7 | 21 | 1 | 42 | 64 | | 5535 |
| Total | 5821 | 46 | 34 | 12 | 79 | 8 | 53 | 140 | | 5867 |

To calculate post-neonatal mortality.

| Birth weight (grams) | Number of births | | Died among them in the period | | | | | | | Total birth |
|---|---|---|---|---|---|---|---|---|---|---|
| | alive | dead | antenatal | intranatal | early neonatal (0-6 days) | late neonatal (7 to 27 days) | Post-neonatal (28 days-1year) | From 0 to 1 year | | |
| 500-999 | 25 | 7 | 4 | 3 | 21 | 0 | 4 | 25 | | 32 |
| 1000-1499 | 29 | 6 | 5 | 1 | 18 | 3 | 2 | 23 | | 35 |
| 1500-2499 | 255 | 10 | 9 | 1 | 19 | 4 | 5 | 28 | | 265 |
| 2500 and more | 5512 | 23 | 16 | 7 | 21 | 1 | 42 | 64 | | 5535 |
| Total | 5821 | 46 | 34 | 12 | 79 | 8 | 53 | 140 | | 5867 |

To calculate antenatal mortality.

| Birth weight (grams) | Number of births | | Died among them in the period | | | | | | | Total birth |
|---|---|---|---|---|---|---|---|---|---|---|
| | alive | dead | antenatal | intranatal | early neonatal (0-6 days) | late neonatal (7 to 27 days) | Post-neonatal (28 days-1year) | From 0 to 1 year | | |
| 500-999 | 25 | 7 | 4 | 3 | 21 | 0 | 4 | 25 | | 32 |
| 1000-1499 | 29 | 6 | 5 | 1 | 18 | 3 | 2 | 23 | | 35 |
| 1500-2499 | 255 | 10 | 9 | 1 | 19 | 4 | 5 | 28 | | 265 |
| 2500 and | 5512 | 23 | 16 | 7 | 21 | 1 | 42 | 64 | | 5535 |

| | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|
| more | | | | | | | | | | |
| Total | 5821 | 46 | 34 | 12 | 79 | 8 | 53 | 140 | | 5867 |

To calculate intranatal mortality.

| Birth weight (grams) | Number of births | | Died among them in the period | | | | | | | Total birth |
|---|---|---|---|---|---|---|---|---|---|---|
| | alive | dead | antenatal | intranatal | early neonatal (0-6 days) | late neonatal (7 to 27 days) | Post-neonatal (28 days-1year) | From 0 to 1 year | | |
| 500-999 | 25 | 7 | 4 | 3 | 21 | 0 | 4 | 25 | | 32 |
| 1000-1499 | 29 | 6 | 5 | 1 | 18 | 3 | 2 | 23 | | 35 |
| 1500-2499 | 255 | 10 | 9 | 1 | 19 | 4 | 5 | 28 | | 265 |
| 2500 and more | 5512 | 23 | 16 | 7 | 21 | 1 | 42 | 64 | | 5535 |
| Total | 5821 | 46 | 34 | 12 | 79 | 8 | 53 | 140 | | 5867 |

To calculate late neonatal mortality.

| Birth weight (grams) | Number of births | | Died among them in the period | | | | | | | Total birth |
|---|---|---|---|---|---|---|---|---|---|---|
| | alive | dead | antenatal | intranatal | early neonatal (0-6 days) | late neonatal (7 to 27 days) | Post-neonatal (28 days-1year) | From 0 to 1 year | | |
| 500-999 | 25 | 7 | 4 | 3 | 21 | 0 | 4 | 25 | | 32 |
| 1000-1499 | 29 | 6 | 5 | 1 | 18 | 3 | 2 | 23 | | 35 |
| 1500-2499 | 255 | 10 | 9 | 1 | 19 | 4 | 5 | 28 | | 265 |
| 2500 and more | 5512 | 23 | 16 | 7 | 21 | 1 | 42 | 64 | | 5535 |
| Total | 5821 | 46 | 34 | 12 | 79 | 8 | 53 | 140 | | 5867 |

To calculate post-neonatal mortality.

| Birth weight (grams) | Number of births | | Died among them in the period | | | | | | | Total birth |
|---|---|---|---|---|---|---|---|---|---|---|
| | alive | dead | antenatal | intranatal | early neonatal (0-6 days) | late neonatal (7 to 27 days) | Post-neonatal (28 days-1year) | From 0 to 1 year | | |
| 500-999 | 25 | 7 | 4 | 3 | 21 | 0 | 4 | 25 | | 32 |
| 1000-1499 | 29 | 6 | 5 | 1 | 18 | 3 | 2 | 23 | | 35 |

| | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|
| 1500-2499 | 255 | 10 | 9 | 1 | 19 | 4 | 5 | 28 | | 265 |
| 2500 and more | 5512 | 23 | 16 | 7 | 21 | 1 | 42 | 64 | | 5535 |
| Total | 5821 | 46 | 34 | 12 | 79 | 8 | 53 | 140 | | 5867 |

To calculate perinatal mortality.

| Birth weight (grams) | Number of births | | Died among them in the period | | | | | | | Total birth |
|---|---|---|---|---|---|---|---|---|---|---|
| | alive | dead | | antenatal | intranatal | early neonatal (0-6 days) | late neonatal (7 to 27 days) | Post-neonatal (28 days-1year) | From 0 to 1 year | |
| 500-999 | 25 | 7 | | 4 | 3 | 21 | 0 | 4 | 25 | 32 |
| 1000-1499 | 29 | 6 | | 5 | 1 | 18 | 3 | 2 | 23 | 35 |
| 1500-2499 | 255 | 10 | | 9 | 1 | 19 | 4 | 5 | 28 | 265 |
| 2500 and more | 5512 | 23 | | 16 | 7 | 21 | 1 | 42 | 64 | 5535 |
| Total | 5821 | 46 | | 34 | 12 | 79 | 8 | 53 | 140 | 5867 |

To calculate the stillbirth rate.

| Birth weight (grams) | Number of births | | Died among them in the period | | | | | | | Total birth |
|---|---|---|---|---|---|---|---|---|---|---|
| | alive | dead | | antenatal | intranatal | early neonatal (0-6 days) | late neonatal (7 to 27 days) | Post-neonatal (28 days-1year) | From 0 to 1 year | |
| 500-999 | 25 | 7 | | 4 | 3 | 21 | 0 | 4 | 25 | 32 |
| 1000-1499 | 29 | 6 | | 5 | 1 | 18 | 3 | 2 | 23 | 35 |
| 1500-2499 | 255 | 10 | | 9 | 1 | 19 | 4 | 5 | 28 | 265 |
| 2500 and more | 5512 | 23 | | 16 | 7 | 21 | 1 | 42 | 64 | 5535 |
| Total | 5821 | 46 | | 34 | 12 | 79 | 8 | 53 | 140 | 5867 |

To calculate early infant mortality.

**Appendix 2**

**Knowledge Control Test**
**"Public health and health care"**
**LДigr _____ code /__/__/__/__/__/__/**

**Test № 1. The definition of public or social medicine:**
a) multi-faceted field of public medical activities aimed at the preservation of physical health;
b) multi-faceted field of public medical activities aimed at the preservation of public health;
c) multi-faceted field of medical public activities aimed at preserving the emotional state;
d) multi-faceted field of medical public activities aimed at maintaining mental health.
**Test № 2. Indicators of fetal-infant losses:**
a) the mortality rate, the birth rate;
b) the abortion rate, mortality during childbirth;
c) infant mortality, mortality of women after 42 days after childbirth;
d) fetal-infant losses, reproductive losses.
**Test № 3. A leading factor affecting human health:**
a) hereditary;
b) biological;
c) psychological;
d) social
**Test № 4. The definition of "Health" by the WHO:**
a) is a state of complete physical, mental and social wellbeing and not merely the absence of disease and disability;
b) is a state of complete physical, mental and social wellbeing and not merely the absence of disease;
c) is a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity;
d) is a state of complete physical, mental wellbeing and not merely the absence of disease or infirmity.
**Test № 5. Factors which have an influence on human well-being:**
a) emotional stress;
b) social, emotional;
c) social, physical, intellectual;
d) physical, psychological.
**Test № 6. The health of the population can be expressed as:**
a) indirect indicators in the form of indicators – determinants of health;
b) direct indicators and indicators of determinants of health;
c) direct indicators and indicators of determinants of health;
d) indirect indicators, and indicators of determinants of health.
**Test №7. Categories of the lifestyle:**
a) manners of life, quality of life, ability to work;
b) the standard of living, quality of life, psychological climate at work;
c) lifestyle, quality of life, psychological climate in the family;
d) level, quality, lifestyle.
**Test № 8. The "Disease" is:**
a) a qualitative state of the organism that occurs in response to damage by environmental influences, social conditions;
b) the state violated by the interaction of the organism with the social environment;
c) as a disturbed interaction of the organism with the external environment;
d) the state violated by the interaction of the organism with the geographical environment.
**Test № 9. The concept of classification of diseases:**
a) a specific system of distribution and unification of the States into groups and classes;
b) a specific system of distribution of pathological conditions in groups and classes;
c) a specific system of distribution and associations of diseases in groups and classes;
d) a specific system of distribution and associations of diseases and pathological conditions in groups and classes in accordance with established criteria.
**Test № 10. How many classes there are in ICD – 10:**
a) 17 b) 19; c) 21; d) 23.
**Test №11. The activity levels of ASD:**
a) national, regional, local;
b) state, regional, district;
c) state, local, city;
d) city, district, outpatient.
**Test № 12. Communication in health care:**
a) is the process of one-sided information to improve medical care;
b) is the process of information exchange in the area of health promotion among the population;

c) is the process of information exchange to improve health care and health promotion among med. workers and the population;
d) is the process of exchange of information to improve quality of life.

**Test № 13. The reformation in system is carried out when:**

a) the current system is good, but it needs further improvement;
b) the existing system is not satisfactory (bad), you need to change it;
c) the existing system is good, but it does not correspond to new socio-economic conditions;
d) all of the above situations.

**Test № 14. In the Kyrgyz Republic in the structure of causes of infant mortality the leading position is held by:**

a) congenital anomalies
b) diseases of the respiratory system
c) conditions originating in the perinatal period
d) infectious and parasitic diseases.

**Test № 15. In the Kyrgyz Republic normal delivery is observed:**

a) in 60% of cases; b) in 20% of cases;
c) in40% of the cases; d) in 30% of cases.

**Test № 16. Due to the KR strategy mean life duration without disabilities is expected to increase by:**

a) 20%; b) 25%; c) 10%; d) 15%.

**Test № 17. The main role of management is:**

a) interpersonal relationships; b) initiative;
c) knowledge of the technique; d) competence.

**Test №18. Management skills are:**

a) knowledge of the technique;
b) ability to plan work;
c) the ability to make a decision;
d) to possess the economic methods.

**Test № 19. Factor which influences on the final result of solutions:**

a) financial;
b) moral and psychological;
c) production;
d) personnel.

**Test № 20. The concept of " Management technology " is:**

a) the system of operations and procedures that runs in sequence;
b) the system of operations and procedures, performed in combination;
c) the system of operations and procedures that runs in specific sequence and combination;
d) the system operations, performed in certain sequence and combination.

**Test № 21. Characteristics of medical services market are:**

a) persistence;
b) quality consistency;
c) separability from the source;
d) intangibility.

**Test № 22. The Concept of "Goods":**

a) everything that could meet the needs, demands and requirements and offered to the market in order to attract attention, acquisition, use or consumption;
b) everything that can satisfy the needs, demands and requirements with the purpose to attract of attention, acquisition, use or consumption;
c) everything that can meet the needs, demands and requirements and offered to the market in order to attract attention, acquisition;
d) everything that can meet the needs and is offered to the market in order to attract attention, acquisition, use or consumption.

**Test № 23. The concept of "offer of services" is:**

a) the number of services that a medical institution is able to provide for a certain period of time at a certain price;
b) the number of services that a medical institution is able to provide at a certain price;
c) the number of services that a medical institution is able to provide for a certain period of time;
d) the number of services that a medical institution is able to provide.

**Test № 24. The Concept of "Price" is:**

a) the cost of a certain amount of sold goods and services;
b) the cost of a certain type and volume of realized goods and services;
c) the cost of a certain type of marketed goods and services;
d) the value of a certain type and volume of services implemented.

**Test № 25. Types of systems:**

a) real, unreal, incoming, outgoing;
b) real, abstract, open, closed;
c) abstract, essential, closed, open;

d) real, unreal, open, closed.

**Test № 26. Types of institutions:**
a) municipal, departmental, private;
b) state, private, municipal;
c) government, non-government, private;
d) state, municipal and private.
**Test № 27. The family doctor is:**
a) specialist with high medical education, which provides high notch specialized medical care at the level of FMC;
b) specialist with high medical education, which provides high notch specialized, high notch specialized assistance to the family regardless of sex and age at FDG;
c) specialist with high medical education who provides primary care for adults;
d) specialist with high medical education, which provides primary health care to the family regardless of sex and age.

**Test № 28. The expenditure of funds in the FDG:**

| Expenses | a) | b) | c) | d) |
|---|---|---|---|---|
| - financial incentives | 30% | 35% | 0% | 10% |
| - development of material and technical equipment | 40% | 40% | 60% | 20% |
| - medicines and products of med. purpose | 20% | 20% | 30% | 60% |
| - others | 10% | 5% | 10% | 10% |

**Test № 29. The model of the health system:**
a) Bismarck, Beveridge, Semashko, Brukhonenko;
b) Bismarck, Boerhaave, Semashko, private;
c) Beveridge, Semashko, Virchow, state;
g) Bismarck, Beveridge, Semashko, private.
**Test № 30. The health insurance Fund under the MOH is:**
a) dependent, non-profit insurance organization;
b) independent economic, commercial insurance company;
c) independent, own business, private insurance organization;
d) independent business, a nonprofit insurance organization.
**Test № 31. What percentage of salary deductions sent to IF for the working population by employer?**

| | | | |
|---|---|---|---|
| a) 6% | b) 3% | c) 4% | d) 2% |

**Test № 32. Elements of quality of medical services are considered from the position of:**
a) the system provider, the patient;
b) state, system, organization;
c) the system institution client;
d) of Republic, organization, the patient.
**Test No. 33. Accreditation of healthcare organizations is:**
a) the authorization procedure, when the healthcare facility public administrations (MOH) permits (licenses) to carry out medical activities in accordance with the stated types of medical services;
b) the procedure to obtain the right to conclude a contract with the MIF;
c) the official procedure of recognition of competence to carry out professional activities regardless of their forms of ownership, in accordance with accreditation standards;
d) procedure of authorization for medical business activities.
**Test No. 34. Quality is:**
a) presence of essential features that distinguish one object or phenomenon from others;
b) degree of compliance of medical services with established criteria and standards;
c) presence of essential features, properties, characteristics;
g) presence of properties, characteristics, distinguish one object or phenomenon from others.
**Test No. 35. The provision of the population with doctors is characterized by:**
(a) the number of doctors per institution;
b) the number of doctors per 10,000 population;
C) the number of doctors per FDG;
d) the number of doctors per 1000 population.
**Test No. 36. Types of medical records:**
(a) clinical, military, registration;
b) generally accepted, report-medical, Military field;
C) General medical, military medical, forensic medical;

d) ascribed, specific, clinical.

**Test No. 37. Primary visit to the doctor of FDG at home of newborns after discharge from maternity hospital:**
(a) first week;
b) within the first three days;
C) on the first day;
d) within a month.
**Test No. 38. Do not have the right to issue documents certifying temporary incapacity for work, medical workers:**

| | |
|---|---|
| (a) first aid stations; | C) health posts; |
| b) FAP; | d) ADD. |

**Test No. 39. The Concept of " Incapacity For Work»:**
(a) the condition caused by illness, injury, its effects or other permanent causes is not possible;
b) the condition caused by the disease, trauma, its consequences or other reasons when accomplishment of professional work is impossible;
C) the condition caused by the disease, trauma, its consequences;
d) the condition caused by the disease, trauma, its consequences when accomplishment of professional work is impossible.
**Test No. 40. The function of MSE:**
(a) capacity to work;
b) establishment of disability, group and term;
(C) definition of disability groups;
g) identify actions to restore the permanent incapacity for work.
**Test No. 41. The sections of the plan:**

| | |
|---|---|
| a)<br>• network med. institutions-number and composition<br>• theneedtoFinance<br>• allowance<br>• technicalsupport<br>• budget | b)<br>• network med. institutions-number and composition<br>• needformaterialresources<br>• capitalconstruction<br>• materialsecurity<br>• finance |
| c)<br>• network med. institutions-number and composition<br>• staffingrequirements<br>• capitalconstruction<br>• logistics<br>• budget | d)<br>• networkmed. institutions'<br>• theneedformedications<br>• diem<br>• capitalconstruction<br>• totalfunds |

**Test No. 42. Types of efficiency:**
(a) medical, inpatient, economic;
b) medical, social, economic;
C) medical, systemic, curative;
d) medical, budgetary, financial.

**Test No. 43. Types of plan:**
a) branch, territorial, current, perspective;
b) departmental, administrative, current, for five years;
C) branch, local, perspective, current;
d) system, territorial, current, future.
**Test No. 44. Family planning is:**
(a) right to protection from cruel and degrading treatment;
b) a set of measures aimed at eliminating risk factors;
C) the system of actions directed on adoption and realization by spouses of the decision on the birth or refusal of birth of children;
d) state of complete physical, mental and social well-being.
**Test No. 45. Who approves the state budget of the health sector?**
a) Ministry of Finance of the Kyrgyz Rebublic and Social Fund;
b) the Government of the Kyrgyz Republic;
C) the Jogorku Kenesh;
g) decree of the President of the Kyrgyz Republic.
**Test No. 46. The distribution of funds:**

| institutions | a) | b) | c) | d) |
|---|---|---|---|---|
| Hospital | 20% | 50% | 70% | 90% |
| FMC | 80% | 50% | 30% | 10% |

**Test No. 47. The shortcomings of the state system:**
(a) lack of money (residual funding principle);
b) lack of paid services;
C) high efficiency in health care expansion;
d) all of the above.
**Test No. 48. Which of the health systems has more advantages in rapid response to the increasing needs of the population?:**

| | |
|---|---|
| (a) public (national)); | C) private enterprise; |
| b) insurance; | d) not one of the systems. |

**Test No. 49. Types of rehabilitation**
(a) medical, psychological;
b) social or household;
C) professional;
d) all of the above.
**Test No. 50. The concept of " Health Promotion»:**
(a) a process that helps a person to strengthen and improve the control of health determinants;
b) a process that helps a person to strengthen control over their physical health;
C) a process that helps a person to strengthen control over the psychological state and improve it;
d) a process that helps a person to strengthen control over individual health.
**Test No. 51. The concept of public health:**
a) organization of social efforts to meet the needs of society in the field of health;
b) activity on the organization of public efforts to satisfy the needs of society in the field of protection of physical development;
c) activity on the organization of public efforts to satisfy the needs of society in the field of protection of a physical condition;
d) activity on the organization of public efforts to satisfy the needs of society in the field of protection of mental health.
**Test № 52. The task of social medicine and health care organization:**
a) examination of health facilities;
b) studying of work of bodies of health care;
c) studying of the organization of medico-social services to the population;
d) studying of work of medical institutions of health care.

**Test No. 53. Definition of the disease:**
a) new in contrast to health quality state of the organism, arising in response to damage by environmental influences, through social conditions;
b) new in contrast to health quality state of the organism, arising in response to damage by environmental influences, through economic conditions;
C) new in contrast to health quality state of the organism, arising in response to damage by environmental influences, through natural conditions;
d) new in contrast to health quality state of the body, arising in response to damage by environmental influences, through biological conditions.

**Test No. 54. Health distinguishes:**
(a) individual, public;
b) individual, group, collective;
C) individual, group;
d) individual, group, public.
**Test No. 55. The indicator recommended by WHO for the evaluation of public health:**
(a) allocation of gross national product to health;
b) deduction of tax on health care;
C) deduction from surplus value;
d) deduction from the profit of the national product on health care.
**Test No. 56. The concept of "Health Promotion" is:**
a) a process that allows a person to strengthen control over the determinants of physical condition and improve it;
b) a process that allows a person to strengthen control over determinants of health;
C) a process that allows a person to increase control over and improve the determinants of health;
d) a process that allows a person to strengthen control over the determinants of ability to work and improve it.
**Test No. 57. Factor influencing the final result of the decision:**

a) financial;
b) moral and psychological;
c) in production;
d) personnel.

**Test № 58. Group of diseases in ICD – 10:**

a) epidemic; b) etiopathological; C) pathogenetic; d) inflammatory.

**Test No. 59. The birth rate in the KR has tends:**

| | |
|---|---|
| (a) reduction; | C) to stabilization; |
| b) to increase; | d) to improve. |

**Test No. 60. The mortality rate in the Kyrgyz Republic has tends:**

| | |
|---|---|
| (a) unchanged; | C) decreases; |
| b) increases; | d) changes dramatically. |

**Test No. 61. The oratory consists of:**

| a) | b) | c) | d) |
|---|---|---|---|
| rhetoric,<br>heuristics,<br>dynamics; | heuristics,<br>dialectics,<br>proof; | rhetoric,<br>heuristics,<br>dialectics; | dialectics,<br>proof,<br>rhetoric. |

**Test No. 62. Communication channel:**

(a) face-to-face meetings, graphic and audio-visual media;
b) direct meetings, decoration, television;
C) staging, Newspapers, mass media;
d) mass media, daily meetings, publications in Newspapers.

**Test № 63. In the structure of morbidity of children and adolescents in the KR the leading position is held by:**

a) diseases of the respiratory system;
b) infectious and parasitic diseases;
C) diseases of the endocrine system;
g) diseases of the digestive system.

**Test No. 64. In the structure of causes of infant mortality the leading position is held by:**

(a) congenital malformations;
b) diseases of the respiratory system;
C) conditions arising in the perinatal period;
d) infectious and parasitic diseases.

**Test number 65. Specify what kind of medical care is currently the most resource-intensive (costly):**

(a) stationary;
b) out-patient polyclinic;
C) ambulance services;
d) health resort.

**Test № 66. Factor influencing on the effectiveness of the solution is:**

(a) collegiality in decision-making;
b) speed of decision-making;
C) initiative in decision-making;
g) competence in the issue being addressed.

**Test No. 67. Degree of solution:**

(a) request;
b) order;
in the notification;
d) instruction.

**Test No. 68. Function of management:**

(a) information;
b) control;
C) technical;
d) organizational.

**Test No. 69. Principle of management:**

a) discipline; b) economy; C) financing; d) control.

**Test № 70. The Concept of "Query":**

(a) the need that depends on the socio-economic situation of the individual;
b) a requirement supported by purchasing power;
C) the need, supported by purchasing power, i.e. depends on the economic situation of the individual;
d) the need supported by purchasing power, i.e. depends on the social status of the individual.

**Test No. 71. The Concept of “Market”:**
a) set of existing and potential buyers;
b) set of potential buyers;
c) combination of existing purchasers;
d) set of existing, potential buyers of goods and producers of services.
**Test No 72. The Concept of "Advertising»:**
a) information on consumer properties of goods and services with a view to creating demand for them;
b) information on consumer properties and types of services in order to create demand for them;
c) information on consumer properties of goods and services in order to create demand for them;
d) information on consumer properties of goods and types of services for the purpose of creation of the offer on them.
**Test No 73. The concept of “market research’:**
a) systematic identification of the range of data required in connection with the marketing situation facing the medical institution: planning, material collection, analysis and results report;
b) systematic identification of the range of data required in connection with the marketing situation facing the medical institution: collection of material, analysis and results report;
c) systematic identification of the range of data required in connection with the marketing situation facing the medical institution: planning, analysis and results report;
d) systematic definition of the range of data necessary in connection with the marketing situation facing the medical institution: planning, material collection, analysis.
**Test № 74. Reform of the system is carried out when:**
a) the existing system is good, but further improvement is needed;
b) the existing system is not satisfactory (bad), it must be changed;
C) the existing system is good, but it does not meet the new socio-economic conditions;
g) all of the above situations.
**Test № 75. Levels of institutions:**
a) pre-medical, medical, specialized;
b) outpatient, stationary, Republican;
C) primary, secondary, tertiary;
d) outpatient, stationary, mixed.
**Test No. 76. Group of family doctors is an Association that includes:**
(a) therapist, neurologist, pediatrician;
b) obstetrician-gynecologist, therapist, dentist;
C) therapist, pediatrician, oculist;
d) therapist, pediatrician, obstetrician – gynecologist.
**Test № 77. What is funded by FDG according to the Single payer system?**
(a) each visit;
b) per capita standard;
C) the treated case;
g) in the case of outpatient services.
**Test № 28. Types of social insurance:**
(a) pension, temporary incapacity for work, maternity, unemployment, funeral allowance);
b) pension, loss of breadwinner, maternity, unemployment;
C) on TD, on unemployment, on the occasion of death, on age, on change of residence;
g) retirement, death, loss of property, age, for loss of income.
**Test No. 79. Social Fund contributions for the retired and the unemployed:**
a) 2 min salary per year;
b) 1.5 min salary in a month;
C) 1.5 min of salary per year;
d) 1 min salary per year.
**Test № 80. What categories of the population are insured under the program of compulsory medical insurance in 2011?**
(a) employed persons, pensioners, unemployed persons;
b) working, pensioners, children under 16 years of age, persons receiving social benefits, persons who own, acquire insurance Policies;
C) workers, pensioners, unemployed, children under 16, persons receiving social benefits
benefits, foreign citizens;
d) pensioners, children under 16 years of age, persons receiving social benefits, unemployed, foreign nationals, students.
**Test №81. The licensing of medical activities is:**
(a) mandatory extradition procedure for legal and physical entities by organ of management (Ministry of health) of permission (license) to engage in the declared types of medical activity;
b) procedure for obtaining the right to conclude a contract with MIF;
C) procedure of recognition of competence (ability) of medical institutions to perform professional activity according to the accreditation standards approved in accordance with the established procedure;

d) professional certification of medical workers.

**Test No. 82. Medical service is:**

(a) a set of measures aimed at the prevention, diagnosis and treatment of diseases;
b) a set of measures aimed at the diagnosis and treatment of diseases;
C) the complex of actions directed on treatment of diseases and economy of financial means;
d) the complex of actions directed on treatment of diseases taking into account the market economic relations.

**Test № 83. The Concept of "Clinical Examination":**

(a) active detection, recording and monitoring the health status of certain population groups (healthy and sick);
b) recording and monitoring the state of health of certain contingents of the population (healthy and sick);
C) active detection and monitoring the state of health of certain contingents of the population (healthy and sick);
d) active identification, recording and monitoring of the state of health of the population (healthy and sick).

**Test No. 84. The hospital mortality rate is characterized by the ratio:**

(a) the number of deaths to the number of retired patients;
b) the number of deaths among the admitted to the hospital;
C) the number of persons who have left for other hospitals;
d) numbers of the dead to number transferred from other hospitals**.**

**Test No. 85. Terms of timely registration of pregnant women in FMG:**

a) up to 6 weeks;
b) up to 12 weeks;
C) up to 20 weeks;
d) up to 18 weeks.

**Test No. 86. The provision of the population with average medical personnel is characterized by:**

a) number of nurses per one doctor's post;
b) number of the average medical workers falling on 10 medical positions;
C) number of average health workers per 10,000 population;
g) number of nurses per FMG.

**Test number 87. The task of MSE:**

(a) social and labour rehabilitation;
b) the conduct of vocational rehabilitation;
C) carrying out social rehabilitation;
d) carrying out social and economic rehabilitation.

**Test No. 88. The document of temporary disability:**

(a) disability sheet;
b) sick leave;
C) disability card;
d) Bulletin of incapacity for work.

**Test № 89. The Concept of "Rehabilitation":**

(a) restoration of human capacity to work through public and medical measures;
b) restoration of working capacity of the person by means of medical actions;
C) restoration of human ability to work with the help of state measures;
d) restoration of working capacity of the person by means of social actions.

**Test № 90. Planning method:**

| | |
|---|---|
| (a) statistical<br>historical<br>according to GOST<br>experimental<br>mathematical<br>normative; | C) analysis<br>calculated<br>state standard<br>project's<br>normative<br>mathematical; |
| b) analytical<br>carrying<br>ratios and proportions<br>experimental<br>economic and mathematical<br>normative; | d) accounting<br>proportions'<br>normative<br>experiment's<br>calculated<br>statistical. |

**Test № 91. Methods of payment for medical services at the primary level:**

(a) fee, per capita, per case treated;
b) age and sex, by geographical location (city / village);
c) fee, per capita, method of payment;
d) the fee, per capita, on firm rates of the salary.

**Test No. 92. The tasks of health care reform "Manas" included:**

(a) management reform
reform of med. services
reform of training
financing reforms;
(b) institutional reform
financing reform
reform of post-graduate training
reform of the outpatient segment;
(c) management reform
reform of medical education
reform the personnel training
reform of health services;
(d) fixed service reform
reform of funding
reform of medical education
reform of training.

**Test No. 93. List of the priority items of expenditure in terms of distribution of the institution operating in the Single payer system.**

(a) wages;
b) wages and medicines;
C) wages, food and scholarships (benefits);
d) salary, contributions to the social Fund, food and medicines.

**Test No. 94. The positive side of the state system:**

A) savings;
B) reducing the likelihood of abuse;
C) it is less common to impose unnecessary procedures and medicines on patients in order to generate additional income;
D) all of the above.

**Test No. 95. The shortcomings of the insurance system:**

A) the population pays for medical services;
B) cost savings;
C) lack of money (residual financing principle);
D) poor technical equipment.

**Test № 96. The Fund of obligatory medical insurance is:**

A) dependent, non-profit insurance organization
B) self-managing, commercial insurance company
C) independent, independent economic, private insurance company
D) independent, independently managing, non-profit insurance organization

**Test No. 97. Who / Europe has developed in 1999 a document:**

A) “Health for all in the 21st century”;
B) “Health for all”;
C )”Health for children in the 21st century”;
D)”Health for women in the 21st century”.

**Test № 98. One of the main principles of health promotion:**

A) political mobilization of the population;
B) economic mobilization of the population;
C) social mobilization of the population;) financial mobilization of the population.

**Test № 99. Triad of management:**

A) organization, decision, control;
B) office-work, decision, control;
C) information, decision, control;
D) management, decision, control.

**Test No. 100. Managementstyle:**

| | |
|---|---|
| (a) policy | in the economic |
| b) control | d) financial |

**Test No. 101. The concept of public health:**

A) organization of social efforts to meet the needs of society in the field of health
B) activity on the organization of public efforts to satisfy the needs of society in the field of protection of physical development
C) activity on the organization of public efforts to satisfy the needs of society in the field of protection of a physical condition
D) activity on the organization of public efforts to satisfy the needs of society in the field of mental health protection

**Test No. 102. The definition of "Social medicine and organization of health care»:**

A) the science that studies the influence of various social factors on the health status of the population
B) the science studying influence of various factors on a state of health of the population
C) the science studying influence of various natural factors on a state of health of the population
D) the science studying influence of various biological factors on a state of health of the population

**Test No. 103. Who / Europe has developed in 1999 a document:**

A) “Health for all in the 21st century”;
B) “Health for all”;
C )”Health for children in the 21st century”;
D)”Health for women in the 21st century”.

**Test No. 104. One of the first health protection laws of the Kyrgyz Republic:**
(A) the law on protection of physical condition of the population of the Kyrgyz Republic
B) the law on health protection of the population
C) the law on protection of physical development of the population of Kyrgyz Republic
D) the law on protection of mental health of the population of Kyrgyz Republic

**Test No. 105. The resources necessary to achieve health:**
(A) socio-economic
B) social
C) economic
D) financial

**Test No. 106. Kyrgyzstan established a national program based on the WHO**
A) "Health care of Kyrgyzstan in the 21st century"
B) "Health of Kyrgyzstan in the 21st century"
C) "Children's Health of Kyrgyzstan in the 21st century"
G) "Medicine of Kyrgyzstan in the 21st century"

**Test No. 107. Types of prevention:**
(A) initial, intermediate, final
B) primary, secondary, final
C) initial, secondary, tertiary
D) primary, secondary, tertiary

**Test No. 108. Factors affecting human health:**

| | A | B | C | D |
|---|---|---|---|---|
| Lifestyle | 20% | 30%; | 10% | 50% |
| Heredity | 50% | 30%; | 20%; | 20% |
| Environment | 20% | 20%; | 50% | 20% |
| Health | 10% | 20% | 20% | 10% |

**Test № 109. In the structure of mortality in the Kyrgyz Republic, the leading place is occupied:**
(A) neoplasms
B) diseases of the respiratory system
C) injury and poisoning
D) diseases of the circulatory system

**Test number 110. In the structure of morbidity in the Kyrgyz Republic, the leading place is occupied:**
A) diseases of the respiratory system
B) diseases of the circulatory system
C) diseases of the digestive system
D) diseases of the genitourinary system

**Test No. 111. The purpose of the prophylactic medical examination:**
A) strengthening population health, increasing life expectancy of people and increased labor productivity working
B) preservation and strengthening of health of the population, increase of life expectancy of people and increase of productivity of the working people
C) preservation of health of the population, increase of life expectancy of people and increase of productivity of the working
D) preservation and strengthening of health of the population, increase in life expectancy of people, improvement of productivity of the working

**Test No. 112. Communication channel:**
(A) staging, Newspapers, media
B) direct meetings, decoration, television
C) direct meetings, graphic and audiovisual media
D) mass media, daily meetings, publications in Newspapers

**Test № 113. The target audience are:**
(A) primary, secondary, tertiary
B) zero, primary
C) primary, secondary
D) target, non-target

**Test No. 114. The concept of "Strengthening the health of children and youth":**
A) the system of national, medical, social events aimed at improving the quality of life of the young generation
B) the system of social, medical, social activities aimed at improving the quality of life of the young generation
C) the system of medical and social measures aimed at improving the quality of life of the young generation
D) the system of the all-state, medical directed on improvement of quality of life of the young generation

**Test No. 115. The Concept of "Disease" is:**

a) a qualitative state of the organism, arising in response to damage by environmental influences, through social conditions;
b) the state violated by interaction of the organism with the social environment;
C) the state of the disturbed by interaction of the organism with the environment;
g) the state violated by interaction of the organism with the geographical environment.

**Test № 116. The WHO recommends to reduce maternal mortality by up to:**
(A) 15 per 100,000 live births
(B) 20 per 100,000 live births
(C) 25 per 100,000 live births
(D) 10 cases per 100,000 live births
**Test number 117. In ICD – 10 there are classes:**

| | | | |
|---|---|---|---|
| a) 17; | b) 19; | c) 21; | d) 23. |

**Test № 118. Requirements to personal qualities of health care Manager:**
A) a basic degree in
B) higher education
(C) qualification in economy
D) qualification in finance
**Test №119. The Concept of "Solution»:**
(A) a logically deliberate legal act developed in time
B) the emotionally psychological legal act developed on time
C) the logically deliberate, emotionally psychological legal act developed on time
D) the legal act developed on time
**Test No. 120. Features of management in health care:**
A) difficulties in the management of
B) special responsibility in financial matters
(C) special responsibility of decisions
D) difficulties in management
**Test No. 121. Management methods are:**
(A) organizational and administrative
B) Directive
C) controlling
D) liberal
**Test № 122. Definition of " health care Management»:**
(A) the totality of all types and forms of management of medical organizations and enterprises
B) set of all forms of management of the medical organizations and the enterprises
C) set of all types of management of the medical organizations and the enterprises
D) set of all types and forms of management of the medical organizations
**Test №123. The Concept Of "Marketing»:**
(A) the type of human activity aimed at meeting needs through exchange
B) the type of the human activity directed on satisfaction and needs by means of the exchange
C) the type of human activity directed on satisfaction of needs and requirements by means of the exchange
D) the type of the human activity directed on satisfaction of needs and requirements
**Test No. 124. The concept of " market of medical services»:**
A) a set of technologies, products of medical equipment, methods of the organization of medical activity, the pharmaceutical industry realized in the conditions of competition
B) a set of technologies, methods of the organization of medical activity, the pharmaceutical industry realized in the conditions of competition
C) a set of technologies, products of medical equipment, methods of the organization of medical activity realized in the conditions of competition
D) a set of technologies, products of medical equipment, the pharmaceutical industry realized in the conditions of competition
**Test No. 125. The concept of " Demand for medical services»:**
A) this is the number of medical services that buyers wish to purchase
B) these are services that patients wish to purchase in medical organizations
C) this is the number of medical services that patients wish to purchase
D) this is the number of medical services that patients wish to purchase
**Test No. 126. The Concept of "Need»:**
(A) the need accepted a specific form according to the cultural level and personality of the individual
B) the need accepted a specific form according to cultural level and character of the individual
C) the need accepted a specific form according to cultural level and feature of the individual

G) the need accepted a specific form according to cultural level and habits of the individual

**Test № 127. The program "Manas" - the purpose:**

(A) improving public health through increased funding

B) improving the health of the population by increasing the efficiency and quality of health care

C) improving the health of the population through the introduction of new financing methods at the outpatient level of medical care

D) improving the health of the population by increasing the efficiency of the use of financial resources

**Test № 128. The types of system:**

A) real, unreal, open, closed

B) real, abstract, open, closed

C) abstract, essential, closed, open

D) real, unreal, incoming, outgoing

**Test № 129. The tasks of the health care reform "Manas" included:**

(A) management reform
reform of medical services
reform of post-graduate training
reform of financing

(B) institutional reform
financing reform
reform of training
reform of the outpatient segment

(C) management reform
reform of medical education
reform the personnel training
health care reform

(D) fixed service reform
reform of funding
reform of medical education
training reform

**Test № 130. A family doctor is:**

A) specialist with higher medical qualification who provides high notch specialized medical care

B) specialist with higher medical qualification who provides high notch specialized, high notch specialized assistance to the family, regardless of gender and age

C) specialist with higher medical qualification who provides primary care to adults

D) specialist with higher medical qualification who provides primary care by a family member regardless of gender and age

**Test № 131. The model of the health system:**

A) Bismarck, Beveridge, Semashko, Brukhonenko

B) Bismarck, Boerhaave, Semashko, private

In) Beveridge, Semashko, Virchow, state

G) of Bismarck, Beveridge, Semashko, private

**Test No. 132. Health insurance:**

(A) compulsory social security

B) mandatory, voluntary

C) universal, one-time

D) family, temporary

**Test number 133. What percentage of deductions from the wage Fund is sent to the MIF for working citizens by the employer?**

| | | | |
|---|---|---|---|
| a) 6% | b) 3% | c) 4% | d) 2% |

**Test № 134. Clinical protocols – this are:**

(A) guidelines for physicians.

B) instructions to be followed if there is no reason to the contrary.

(B) training manuals for doctors and patients.

D) complete therapeutic guides.

**Test № 135. Licensing of medical activity is a mandatory procedure:**

(A) for legal entities and physical persons irrespective of their form of ownership and departmental affiliation.

B) for state medical institutions

C) for the legal entities and physical persons performing entrepreneurial medical activity (private medical practice)

D) for physical persons to carry out private medical practice

**Test № 136. Types of indicators:**

(A) quantitative, special

B) qualitative, quantitative

C) quantitative, individual

D) qualitative, nominal

**Test № 137. Clinical protocols are used for:**

(A) optimal use of resources.

B) punishment of the doctor for medical mistakes.

C) advertising of drugs of a certain pharmaceutical company.

G) the displacement of all the expensive drugs.

**Test No. 138. The types of accounting:**

A) operational and technological, warning
B) a signal containing information
C) operational and technological, urgently technological
D) operational and technological, signal

**Test № 139. The rate of abortion (not mini abortions)**

(A) is characterized by the proportion of abortions among all
B) is characterized by the share of abortions to all women from 18 to 35 years.
C) is characterized by the share of abortions to all women from 20 to 45 years.
D) structure of abortions to all

**Test № 140. The timeliness of registration of pregnant women in the women's consultation is characterized by:**

A) specific gravity of pregnant women eligible to register up to 32 weeks of pregnancy among all pregnant women who were registered
B) specific gravity of the pregnant women who were registered till 22 weeks of pregnancy among all pregnant women who became on accounting
C) specific gravity of the pregnant women who were registered till 12 weeks of pregnancy among all pregnant women who became on account
D) specific gravity of the pregnant women who were registered till 28 weeks of pregnancy among all pregnant women who became on accounting

**Test № 141. The level of hospitalization of the population is characterized by:**

(A) the number of hospitalized persons with FMG
B) the number of the hospitalized persons from the serviced site
C) the number of hospitalized individuals with FMC
D) the number of hospitalized persons per 100 persons of the population

**Test No. 142. The availability of hospital beds is characterized by:**

(A) the number of beds per 1,000 population
B) the number of beds per 10,000 population
C) the number of beds attributed to the population
G) the number of beds the number of hospital organizations

**Test № 143. The use of hospital bed Fund is characterized by:**

(A) the number of days of bed occupancy per year
B) the number of days of bed occupancy per month
C) the number of days of employment per quarter
D) the number of days of employment of the bed for the half-year

**Test № 144. The concept of "medical and social expertise":**

(A) medical examination of a person's ability to work to determine the extent and duration of his or her incapacity to work
B) examination of working capacity of the person which is carried out to determine the duration of his disability
C) examination of disability rights, therapists to determine the degree of incapacity for work
D) examination of a person's ability to work and the duration of his / her incapacity to work

**Test № 145. Type of incapacity for work depending on the reasons:**

A) medical contraindications to performance of professional work
B) medical contraindications to performance of specific work
C) medical contraindications to performance of work
D) medical contraindications to physical or mental work

**Test № 146 Plan Indicators:**

| A) | B) |
|---|---|
| the power of the medical organizations<br>the work of medical institutions<br>medical personnel<br>finance | attendance<br>expenses<br>profit<br>resources |
| C) | D) |
| Staff turnover<br>The staffing<br>Resources<br>Expenses | The work of medical institutions<br>The turnover of financial resources<br>Expenditure of material resources<br>The number of doctors |

**Test # 147 Method of payment of the stationary help:**

A) For the held bed-days for each case
B) at the average cost per treated case
C) for every bed per case
D) for the treated case

**Test # 148 Types of funding:**

A)
- State budget
- Rental of premises
- Co-payment
- MIS
- Donation

B)
- State budget
- MIS
- Co-payment
- Special means
- SWAP Means

C)
- State budget
- Municipal funds
- Donation
- Funds from rent
- Private insurance

C)
- State budget
- MIS
- Means enabling Fund
- World bank
- Taxpayers' money

**Test # 149.The payment methods medical services in hospitals in Single payer system:**

A) at the bed-days
B) at the average cost of treatment
C) actual expenditure for hospitalization
G) for the treated case

**Test № 150. The positive side of the insurance system:**

A) the money doesn't go to the General budget of the state, but purposefully go for health;
B) allow us to respond to the expanding needs of population in medical care;
C) social solidarity (the rich pays for the poor, the young for the old, the healthy for the sick);
D) all of the above.

**APPENDEX 3**

**SCALE OF EVALUATION. Test (theoretical questions) (boundary control)**
«85-100%»
• deep and durable learning themes of the module;
• complete, consistent, competent and logically presented answers to questions;
• reproduction of educational material on the themes of the module with the desired high degree of accuracy.

«75-84%»
• the presence of minor errors in the presentation of the material of the module;
• demonstration of the students knowledge of the completed the program;
• clear presentation of training material.

«60-74%»
• the presence of significant errors in the responses on module;
• demonstration to students is not enough knowledge on the program;
• not a clear presentation of educational material in the answer.

«less than 60%»
• no knowledge of materials topics;
• a serious mistakes in answers.

Control work "Medical statistics"
0- 59% - 0-4 points rating of "poor"
60-74% - 5-6 points rating of "satisfactory"
75-84% - 7-8 points rating of "good"
85-100% - 9-10 points rating of "excellent"

Control work of "Management and marketing in healthcare"
0-59% - 0-4 points rating of "poor"
60-74% - 5-6 points rating of "satisfactory"
75-84% - 7-8 points rating of "good"
85-100% - 9-10 points rating of "excellent"

Control work the "Health Economics"
0-59% - 0-4 points rating of "poor"
60-74% - 5-6 points rating of "satisfactory"
75-84% - 7-8 points rating of "good"
85-100% - 9-10 points rating of "excellent"

**SCALE of EVALUATION of the PRESENTATION (current control)**

| № p/p | Indicator Name | Points (%) |
|---|---|---|
| | **PRESENTATION** | 70 |
| 1. | Cover sheet with title | 0-4 |
| 2. | Design of slides and use of additional effects (slide transitions, sound, drawings) | 0-10 |
| 3. | The text of the presentation is concised, well-formulated and ideas are clear and structured | 0-40 |
| 4. | Slides are presented in a logical sequence | 0-10 |
| 5. | Slides are printed | 0-6 |
| | **REPORT** | 30 |
| 1. | Correctness and accuracy of speech while defending | 0-12 |
| 2. | Breadth of vision (answers to questions) | 0-10 |
| 3. | Implementation of rules | 0-8 |
| | | **Total score** |

During the presentation
0-59% - 0-7 points rating of "poor"
60-74% - 8-9 points rating of "satisfactory"
75-84% - 10-11 points rating of "good"
85-100% - 12-13 points rating of "excellent"

**SCALE OF ASSESSMENT OF FRONTAL SURVEY TEST**
**(current control)**

1. One test has 20 questions.
2. The questions are given with ready-made answers to choose one correct option.
3. For each correct answer – 5%.
4. Overall rating is defined as the amount of accumulated interest.
5. Scoring % is translated into points.

At testing:
0-59% (0-11 correct answers) - 0-7 points rating of "poor"
60-74% (12 to 14 correct answers) - 8-9 points rating of "satisfactory"
75-84% (15-17 correct answers) - 10-11 points rating of "good"
85-100% (18-20 correct answers) - 12-13 points rating of "excellent"

**SCALE OF ASSESSMENT OF ORAL TEST**
**(intermediate control – "KNOWLEDGE»)**
**(differential offset in the VI semester)**

The following criteria are taken into account when evaluating oral questioning to the test of the level of training "KNOWLEDGE":

1. Knowledge of the basic processes of the studied subject area, depth and completeness of disclosure of the issue.
2. Ability to solve situational problems, making inferences and generalizations, to give reasoned answers.
3. Possession of a monological speech, the consistency of the answer, ability to answer questions, to express their opinion on the problem.

85-100% (16-20 points) evaluates the response showing *strong* knowledge of
- The content of subject of public health and health care;
- the legislative framework for the protection of public health; fundamentals of biomedical statistics; health indicators of the population and factors determining them;
- the role of service health promotion in the formation of healthy lifestyle;
- the main challenges and strategies of health; basics of health care reform; the foundations of the Department of health and the quality of health services;
- definitions of Economics and of health financing, purpose, objectives and ways of further development in the context of medical insurance and a market economy; health abroad;
- the consistency of the response.

75-84% (10-15 points) estimated the response exhibiting *strong* knowledge of
- the content of the subject of public health and health care;
- the legislative framework for the protection of public health; fundamentals of biomedical statistics; health indicators of the population and factors determining them;
- the role of service health promotion in the formation of healthy lifestyle;
- the main challenges and strategies of health promotion;
- basics of health care reform; the foundations of the Department of health and the quality of health services;
- definitions of Economics and of health financing, purpose, objectives and ways of further development in the context of medical insurance and a market economy; health abroad;
- the consistency of the response.

*However, it may be one or two inaccuracies in the response.*

60-74% (5-10 points) evaluates the response indicating mainly *basic* knowledge of
- the subject of public health and health services;
- the legislative framework for the protection of public health;
- *insufficient* depth of knowledge of the fundamentals of biomedical statistics;
- health indicators of the population and factors determining them; the role of service health promotion in the formation of healthy lifestyle; the main challenges and strategies of health promotion;
- basics of health care reform; the foundations of the Department of health and the quality of health services;
- definitions of Economics and of health financing, purpose, objectives and ways of further development in the context of health insurance and the market economy; the state of the health system abroad.

*There could be several errors in the content of the response.*

0-59% (1-4 points) estimated the response exhibiting ignorance of
- the subject of public health and health services;
- the legislative framework for the protection of public health;

- the fundamentals of biomedical statistics;
- health indicators of the population and factors determining them;

*A student demonstrate inability to give reasoned answers, a weak command of monological speech, lack of logic and continuity. Serious errors are made in the content of the response.*

**SCALE OF ASSESSMENT OF PRACTICAL TASKS**
**(intermediate control – "KNOWLEDGE" and "SKILLS")**
**(differential offset in the VI semester)**

The following criteria are taken into account when evaluating oral questioning to the test of the level of training "SKILLS"

85-100% (8-10 points) estimates the response in which the student is able to
- plan and conduct statistical studies to analyze and interpret their results in practical and scientific activities;
- calculate and analyze key ratios of population health and activity of medical organizations;
- undertake a situational analysis of the organization and departments of health;
- be proficient in the calculation of statistical indicators;
- possesses basic skills of management and marketing of health care organizations.

Demonstrates a complete understanding of the problem. All the requirements for the job were done.

75-84% (4-7 points) evaluates the response in which the student is able to
- plan and conduct statistical studies to analyze and interpret their results in practical and scientific activities;
- calculate and analyze key ratios of population health and activity of medical organizations;
- undertake a situational analysis of the organization and departments of health;
- be proficient in the calculation of statistical indicators;
- has not enough basic skills of management and marketing of health care organizations.

Demonstrates considerable understanding of the problem. Most of the requirements of the job were done.

60-74% (1-3 points) estimates the response in which the student is able to
- plan and conduct statistical studies to analyze and interpret their results in practical and scientific activities;
- calculate and analyze key ratios of population health and activity of medical organizations;
- undertake a situational analysis of the organization and departments of health;
- be not quite well conversant with the methodology of calculating statistical indicators;
- has not enough good command of basic skills of management and marketing of health care organizations.

Demonstrates partial or little understanding of the problem. Many of the requirements for the job were not done.

0-59% (0 points) evaluates the response in which the student shows lack of understanding of a problem or no reply and did not even attempt to solve the problem

**APPENDEX 4**

## TECHNOLOGICAL MAP OF THE DISCIPLINE

## "PUBLIC HEALTH AND HEALTHCARE, HEALTH ECONOMICS"

**Course 3, 6 semester, 3 CU, Pass with a grade**

| The name of the discipline modules according to the Course Outline | Control | Form of control | Credit minimum | Credit maximum | Control schedule |
|---|---|---|---|---|---|
| **Unit 1** | | | | | |
| Medical statistics | Current control | Activity, attendance, front survey tests, problem solving and self-directed learning: preparation for the written homework | 8 | 13 | 4 week |
| | Boundary control | Test | 5 | 10 | |
| **Unit 2** | | | | | |
| Health management | Current control | Activity, attendance, front survey tests, problem solving and self-directed learning: preparation for the written homework | 8 | 13 | 11 week |
| | Boundary control | Test | 5 | 10 | |
| **Unit 3** | | | | | |
| Economics of health care | Current control | Activity, attendance, front survey tests, problem solving and self-directed learning: preparation for the written homework | 9 | 14 | 16 week |
| | Boundary control | Test | 5 | 10 | |
| **TOTAL for the semester** | | | 40 | 70 | 18 week |
| **Intermediate control (pass with a grade)**<br>**1. Theoretical question (0-20 points)**<br>**2. Analysis assignment (0-10 points)** | | | 20 | 30 | |
| **Semester rating by discipline** | | | 60 | 100 | |