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

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

УТВЕРЖДАЮ
декан факультета
_____
_____ 2025 г.

ПРОФЕССИОНАЛЬНЫЙ ЦИКЛ
Эпидемиология

рабочая программа дисциплины (модуля)

Закреплена за кафедрой	**Эпидемиологии и иммунологии**
Учебный план	310501_23_3 лд ин.plx Специальность 560001 - КР Лечебное дело (для иностранных студентов)
Квалификация	**врач**
Форма обучения	**очная**
Общая трудоемкость	**3 ЗЕТ**

Часов по учебному плану	108	Виды контроля в семестрах:
в том числе:		зачет с оценкой 5
аудиторные занятия	64	
самостоятельная работа	43,7	

Распределение часов дисциплины по семестрам

Семестр (<Курс>.<Семестр на курсе>)	5 (3.1)		Итого	
Недель	18			
Вид занятий	УП	РП	УП	РП
Лекции	16	16	16	16
Практические	48	48	48	48
Контактная работа в период теоретического обучения	0,3	0,3	0,3	0,3
В том числе инт.	4	4	4	4
Итого ауд.	64	64	64	64
Контактная работа	64,3	64,3	64,3	64,3
Сам. работа	43,7	43,7	43,7	43,7
Итого	108	108	108	108

Программу составил(и):
к.м.н., ст. преп., Оморова Жайнагул Турганбаевна _____

Рецензент(ы):
к.м.н., доцент, Ырысова Миргуль Бакирбаевна;к.м.н., доцент, Ибраимова Джылдыз Джумадиловна _____

Рабочая программа дисциплины

разработана в соответствии с ФГОС 3++:

Федеральный государственный образовательный стандарт высшего образования - специалитет по специальности 31.05.01 Лечебное дело (приказ Минобрнауки России от 21.09.2021 г. № 1578/1)

составлена на основании учебного плана:

Специальность 560001 - КР Лечебное дело
(для иностранных студентов)
утвержденного учёным советом вуза от ____ _____протокол № _____

Рабочая программа одобрена на заседании кафедры

Протокол от 30.09 2025 г. № 2.
Срок действия программы: уч.г.
Зав. кафедрой зав. кафедрой, д.м.н., проф. Орозбекова Бубусайра Толобаевна

Визирование РПД для исполнения в очередном учебном году

Председатель УМС

__ _____ 2025 г.

Рабочая программа пересмотрена, обсуждена и одобрена для исполнения в 2025-2026 учебном году на заседании кафедры
Эпидемиологии и иммунологии

Протокол от __ _____ 2025 г. № __
Зав. кафедрой 30.09

Визирование РПД для исполнения в очередном учебном году

Председатель УМС

__ _____ 2026 г.

Рабочая программа пересмотрена, обсуждена и одобрена для исполнения в 2026-2027 учебном году на заседании кафедры
Эпидемиологии и иммунологии

Протокол от __ _____ 2026 г. № __
Зав. кафедрой

Визирование РПД для исполнения в очередном учебном году

Председатель УМС

__ _____ 2027 г.

Рабочая программа пересмотрена, обсуждена и одобрена для исполнения в 2027-2028 учебном году на заседании кафедры
Эпидемиологии и иммунологии

Протокол от __ _____ 2027 г. № __
Зав. кафедрой

Визирование РПД для исполнения в очередном учебном году

Председатель УМС

__ _____ 2028 г.

Рабочая программа пересмотрена, обсуждена и одобрена для исполнения в 2028-2029 учебном году на заседании кафедры
Эпидемиологии и иммунологии

Протокол от __ _____ 2028 г. № __
Зав. кафедрой

1. ЦЕЛИ ОСВОЕНИЯ ДИСЦИПЛИНЫ

2. МЕСТО ДИСЦИПЛИНЫ В СТРУКТУРЕ ООП	
Цикл (раздел) ООП:	Б1.О.03
2.1	**Требования к предварительной подготовке обучающегося:**
2.1.1	Microbiology, virusology
2.1.2	Byoethics
2.1.3	History of medicine
2.1.4	Medical biology
2.1.5	Immunology
2.2	**Дисциплины и практики, для которых освоение данной дисциплины (модуля) необходимо как предшествующее:**
2.2.1	Occupational diseases
2.2.2	Infectious diseases with a course in tropical infectious diseases
2.2.3	Evidence-based medicine
2.2.4	Hygiene
2.2.5	Public health and healthcare, health economics

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

ПК-10: Способен и готов осуществлять профилактические мероприятия по предупреждению инфекционных, паразитарных и неинфекционных болезней.

Знать:	
Уровень 1	1. basic epidemiological patterns and mechanisms of transmission of infectious and parasitic diseases; 2. risk factors and determinants of chronic non-infectious diseases (cardiovascular, oncological, endocrine, etc.); 3. modern approaches and principles of primary, secondary and tertiary prevention;
Уметь:	
Уровень 1	1. identify individual and population risk factors for diseases; 2. develop and implement a set of preventive and anti-epidemic measures; 3. conduct sanitary-educational and advisory work with the population; 4. organize vaccination, preventive examinations, screening programs and dispensary observation;
Владеть:	
Уровень 1	1. skills in assessing the epidemiological situation and planning preventive measures at the level of family, team and territory; 2. methods of organizing vaccination, sanitary-hygienic and anti-epidemic measures;

ПК-11: Способен и готов проводить среди населения санитарно-просветительскую работу по устранению модифицированных факторов риска развития заболеваний, давать рекомендации по здоровому питанию.

Знать:	
Уровень 1	1. main modifiable risk factors for the development of chronic non-infectious diseases (smoking, alcohol abuse, physical inactivity, unhealthy diet, stress, etc.); 2. principles of forming and maintaining a healthy lifestyle; 3. modern methods of sanitary-educational and preventive work with the population;
Уметь:	
Уровень 1	1. identify and assess risk factors in patients and population groups; 2. develop and conduct sanitary-educational measures taking into account age, professional and cultural characteristics
Владеть:	
Уровень 1	1. practical skills in conducting individual and group preventive conversations; 2. tools for conducting preventive counseling and forming adherence to a healthy lifestyle; 3. methods of developing visual and informational materials on the issues of prevention and healthy eating.

ПК-25: Способен и готов к обучению населения основным гигиеническим мероприятиям и просветительской деятельности по формированию навыков здорового образа жизни.

Знать:	
Уровень 1	1. principles and methods of formation, preservation and strengthening of public health; 2. modern approaches to disease prevention and healthy lifestyle formation; 3. regulatory legal documents and national programs in the field of preventive medicine and public health.

Уметь:		
Уровень 1	1. 2. 3.	conduct training of the population in basic hygienic measures and personal hygiene rules; develop and implement educational programs to promote a healthy lifestyle; advise various groups of the population on health promotion and disease prevention;
Владеть:		
Уровень 1	1. 2. 3.	skills in conducting individual and group training events; methods for evaluating the effectiveness of sanitary and educational work; means of visual agitation, multimedia and digital tools for public education.

В результате освоения дисциплины обучающийся должен

3.1	**Знать:**
3.1.1	-basic epidemiological patterns and mechanisms of transmission of infectious and parasitic diseases;
3.1.2	-risk factors and determinants of chronic non-communicable diseases (cardiovascular, oncological, endocrine, etc.);
3.1.3	-modern approaches and principles of primary, secondary and tertiary prevention;
3.1.4	-main modifiable risk factors for the development of chronic non-communicable diseases (smoking, alcohol abuse, physical inactivity, unhealthy diet, stress, etc.);
3.1.5	-principles of forming and maintaining a healthy lifestyle;
3.1.6	-modern methods of sanitary-educational and preventive work with the population;
3.1.7	-principles and methods of formation, preservation and strengthening of public health;
3.1.8	-modern approaches to disease prevention and healthy lifestyle formation;
3.1.9	-egulatory legal documents and national programs in the field of preventive medicine and public health.
3.2	**Уметь:**
3.2.1	identify individual and population risk factors for diseases;
3.2.2	-develop and implement a set of preventive and anti-epidemic measures;
3.2.3	-conduct sanitary-educational and advisory work with the population;
3.2.4	-organize vaccination, preventive examinations, screening programs and medical examination;
3.2.5	-identify and assess risk factors in patients and population groups;
3.2.6	-develop and conduct sanitary-educational measures taking into account age, professional and cultural characteristics
3.2.7	-conduct training of the population in basic hygienic measures and personal hygiene rules;
3.2.8	-develop and implement educational programs to promote a healthy lifestyle;
3.2.9	-advise various groups of the population on health promotion and disease prevention;
3.3	**Владеть:**
3.3.1	-skills in assessing the epidemiological situation and planning preventive measures at the family level, team and territory;
3.3.2	-methods of organizing vaccination, sanitary-hygienic and anti-epidemic measures;
3.3.3	-practical skills in conducting individual and group preventive conversations;
3.3.4	-tools for conducting preventive counseling and building adherence to a healthy lifestyle life;
3.3.5	-methods of developing visual and informational materials on prevention and healthy eating.
3.3.6	-skills in conducting individual and group training events;
3.3.7	-methods for evaluating the effectiveness of sanitary and educational work;
3.3.8	-means of visual agitation, multimedia and digital tools for public education.

4. СТРУКТУРА И СОДЕРЖАНИЕ ДИСЦИПЛИНЫ (МОДУЛЯ)

Код занятия	Наименование разделов и тем /вид занятия/	Семестр / Курс	Часов	Компетен-ции	Литература	Инте ракт.	Пр. подг.	Примечание
	Раздел 1. Section 1. Clinical epidemiology.							
1.1	Historical context of Epidemiology Classification of infection diseases. Chain of infection /Лек/	5	2	ПК-10 ПК-11 ПК-25				
1.2	Epidemiological stadies /Лек/	5	2	ПК-10 ПК-11 ПК-25				
1.3	Introduction to Epidemiology, definition, aims, uses and scope. Natural history of disease /Пр/	5	3	ПК-10 ПК-11 ПК-25				

1.4	Concept of disease occurrence and causation. Summarizing Data. Measures of Risk. Displaying Public Health Data. Public Health Surveillance /Пр/	5	3	ПК-10 ПК-11 ПК-25				
1.5	Basic measuremets in epidemiology /Пр/	5	3	ПК-10 ПК-11 ПК-25		2		
1.6	Epidemiological stadies. Observational studies (descriptive and analytical) /Пр/	5	3	ПК-10 ПК-11 ПК-25		2		
1.7	Experimental studies (randomizes and non-randomizes control trials) /Пр/	5	3	ПК-10 ПК-11 ПК-25				
1.8	Module control №1 /Пр/	5		ПК-10 ПК-11 ПК-25				
	Раздел 2. Section 2. General epidemiology							
2.1	Organization of vaccination, Cold chain system. Indicators and contraindicators of vaccination /Пр/	5	3	ПК-10 ПК-11 ПК-25				
2.2	Infection Control Practices. Environmental Management Practices. Care of Health Care Worker /Пр/	5	3	ПК-10 ПК-11 ПК-25				
2.3	Infection Control Precautions for Selected Situations. Module control №2 /Пр/	5	3	ПК-10 ПК-11 ПК-25				
2.4	Aspects of immunoprofylaxis /Лек/	5	2	ПК-10 ПК-11 ПК-25				
2.5	The active and passive immunoprophylaxis. Immunizing agents. Routine immunization. National schedules of immunization in India and Kyrgyzstan. /Пр/	5	3	ПК-10 ПК-11 ПК-25				
	Раздел 3. Section 3. Epidemiology of communicable and NCD							
3.1	Epidemiological features of aerosol infection /Лек/	5	2	ПК-10 ПК-11 ПК-25				
3.2	Epidemiological features of intestinal infection /Лек/	5	2	ПК-10 ПК-11 ПК-25				
3.3	Epidemiological features of zoonoses /Лек/	5	2	ПК-10 ПК-11 ПК-25				
3.4	Epidemiological features of helminthiasis /Лек/	5	2	ПК-10 ПК-11 ПК-25				
3.5	Epidemiological features of blood-borne diseases /Лек/	5	2	ПК-10 ПК-11 ПК-25				
3.6	Epidemiology of communicable diseases (aerosol infectious diseases - diphtheria, mumps, measles, rubella, meningitis, chicken pox, influence and ext). /Пр/	5	3	ПК-10 ПК-11 ПК-25				
3.7	Epidemiology of communicable diseases (intestinal infectious diseases - typhoid fever, salmonellosis. shigellosis, poliomyelitis and ext). /Пр/	5	3	ПК-10 ПК-11 ПК-25				
3.8	Epidemiology of hospital acquired infectious and blood - borne diseases (HIV-infection, Hep B, C,D) /Пр/	5	3	ПК-10 ПК-11 ПК-25				

3.9	Epidemiology of communicable diseases: zoonoses (rabies, brucellosis, anthrax) and helminthiasis (ascariasis, enterobiasis, echinococcosis and ext). /Пр/	5	3	ПК-10 ПК-11 ПК-25				
3.10	Epidemiology of non-communicable diseases (cardiovascular disease, stroke, hypertension, rheumatic heart disease and ext) /Пр/	5	3	ПК-10 ПК-11 ПК-25				
3.11	Epidemiology of non-communicable diseases (blindness, accidents and injuries, cancer, diabetes, obesity) /Пр/	5	3	ПК-10 ПК-11 ПК-25				
3.12	Final control (graduate test) /Пр/	5	3	ПК-10 ПК-11 ПК-25				
	Раздел 4. Inderpendent work							
4.1	Natural history and spectrum of disease. /Ср/	5	3	ПК-10 ПК-11 ПК-25				
4.2	Epidemiology of mental illnesses /Ср/	5	3	ПК-10 ПК-11 ПК-25				
4.3	Epidemiology of policy, public health programme. Health services etc /Ср/	5	3	ПК-10 ПК-11 ПК-25				
4.4	Epidemiology tropical infectious diseases /Ср/	5	3	ПК-10 ПК-11 ПК-25				
4.5	Occupational epidemiology /Ср/	5	3	ПК-10 ПК-11 ПК-25				
4.6	Epidemiology and prevention of chronic disease /Ср/	5	4	ПК-10 ПК-11 ПК-25				
4.7	Environmental epidemiology /Ср/	5	4	ПК-10 ПК-11 ПК-25				
4.8	Nutritional epidemiology /Ср/	5	4	ПК-10 ПК-11 ПК-25				
4.9	Immunoprevention of communicable disease /Ср/	5	4	ПК-10 ПК-11 ПК-25				
4.10	Clinical epidemiology /Ср/	5	4	ПК-10 ПК-11 ПК-25				
4.11	Epidemiology of communicable diseases (arthropod-borne infectious diseases) /Ср/	5	4	ПК-10 ПК-11 ПК-25				
4.12	Epidemiology of communicable diseases (surface infectious diseases). /Ср/	5	4,7	ПК-10 ПК-11 ПК-25				
4.13	/КрТО/	5	0,3	ПК-10 ПК-11 ПК-25				

5. ФОНД ОЦЕНОЧНЫХ СРЕДСТВ

5.1. Контрольные вопросы и задания

Questions of 1 module on epidemiology according to the section "General Epidemiology"
1)Definition of Epidemiology infectious diseases
2)Definition of Epidemiology noninfectious diseases
3)A subject of Epidemiology
4)Classification of infectious diseases
5)Definition of epidemic process
6)Three links of epidemic process.
7)Three units of epidemic process
8)Biological factor of epidemic process
9)Natural factor of epidemic process
10)Social factor of epidemic process
11)The epidemic focus

12)The natural focus
13)Control measures
14)A role of the doctor in carrying out of preventive actions in the epidemic focus
15)Epidemiological studies.
16)Descriptive study
17)Analytical study
18)Expermenthal study
19)Tools of measurement in epidemiology
20)Incidence and prevalence of disease
21)Studying disease in long-term dynamics
22)Studying disease in annual dynamics
23)Definition of a level and structure of disease
24)Immunity and its kinds, types of immunoprophylaxis
25)Active immunization, means of active immunization (a vaccine, toxoid)
26)Passive immunization, means of passive immunization (antibodies, whey's, bacteriophages, interferon)
27)Ways of immunization
28)Revaccination, its ways
29)Contra-indications to vaccination (relative and absolute)
30)Postvaccinal complications and reactions, their classification.
31)A schedule of obligatory preventive inoculations
32)A schedule of preventive inoculations on epidemic situations, indications.
33)The expanded immunization programme of WHO, periods, tasks.
34)The account of the population
35)Maintenance public health organizations with vaccinal preparations
36)Observance of a temperature mode of storage and transportation of vaccinal preparations
37)Forms of registration of inoculations
38)An estimation of efficiency immunoprophylaxis
39)Epidemiological supervision by immunoprophylaxis
40)Disinfection, kinds, ways
41)Classification of agents of disinfection
42)Forms of application of agents of disinfection
43)The basic requirements to agents of disinfection
44)Concept about of infection control system and components

Questions of 2 and 3 module on epidemiology according to the section "Private Epidemiology"
Control questions:
1)Epidemiological features and prevention of diphtheria
2)Epidemiological features and prevention of whooping cough
3)Epidemiological features and prevention of scarlet fever
4)Epidemiological features and prevention of meningitidis
5)Epidemiological features and prevention of mumps
6)Epidemiological features and prevention of measles
7)Epidemiological features and prevention of rubella
8)Epidemiological features and prevention of chicken pox
9)Epidemiological features and prevention of influence
10)Epidemiological features and prevention of intestinal infectious diseases
11)Epidemiological features and prevention of typhoid fever
12)Epidemiological features and prevention of salmonellosis
13)Epidemiological features and prevention of shigellosi
14)Epidemiological features and prevention of poliomyelitis
15)Epidemiological features and prevention of cholera
16)Epidemiological features and prevention of Hospital acquired infectious and blood - borne diseases
17)Epidemiological features and prevention of HIV-infection
18)Epidemiological features and prevention of Hepatitis B
19)Epidemiological features and prevention of Hepatitis C
20)Epidemiological features and prevention of Hepatitis D
21)Epidemiological features and prevention of zoonoses
22)Epidemiological features and prevention of rabies
23)Epidemiological features and prevention of brucellosis
24)Epidemiological features and prevention of anthrax
25)Epidemiological features and prevention of helminthiasis
26)Epidemiological features and prevention of ascariasis
27)Epidemiological features and prevention of enterobiasis
28)Epidemiological features and prevention of echinococcosis
29)Epidemiological features and prevention of non-communicable diseases (cardiovascular disease, stroke, hypertension, rheumatic heart disease
Epidemiological features and prevention ofnon-communicable diseases (blindness, accidents and injuries, cancer, diabetes, obesity)

5.2. Темы курсовых работ (проектов)

5.3. Фонд оценочных средств

ANNEX 1

1.The immunizing agents classified as:
a)Ig M, IgG, IgE, IgD, IgA
b)killed live attenuated vaccines
c)normal & specific human Ig
d)vaccines, Ig& antisera
e)natural killer lymphocytes, lysozime, phagocytes

2.The transmission of infection agent through some agency:
a)vector – borne
b)air - borne
c)vehicle – borne
d)fomite – borne
e)biological transmission

3.EPIDEMIOLOGY is:
a)study of distribution & determinants of health related states & events in specified population & application of this study to the control of health problems
b)study of distribution & determinants of health related states & events animals & application of this study to the control of health problems
c)study about immunization, immunizing agents, types of immunity & causes of failure of vaccination
d)study about relation between disease & social conditions
e)a scientific field that death with the collection, classification, description, analysis, interpretation & presentation of data

4.The reservoir of influenza:
a)man
b)swine
c)horses
d)birds
e)all

5.Toxoids are produces for:
a)active immunization
b)passive immunization
c)innate immunization
d)antisera immunization
e)herd immunization

6.Immunity by transfer of maternal antibodies across the placenta is:
a)active immunity
b)passive immunity
c)innate immunity
d)herd immunity
e)transplacental

7.Major Ig of serum, comprising about 75% of total serum Ig:
a)Ig M
b)IgG
c)IgE
d)IgD
e)IgA

8.Equipment that does not penetrate the skin or sterile areas of the body but is in contact with intact mucous membranes or non – intact skin:
a)low risk
b)high risk
c)intermediate risk

9.Chemical agent of disinfection:
a)2% glutaraldehyde, 6% hydrogen peroxide, 0.3% per acetic acid
b)moist heat, hot water
c)0.5% diazinon, 2% dimehoate, 1% runnel
d)2.5% chlordane, 0.5% lindane

e)malathion&fenitrothion

10.DDT, dieldrin, methoxychlor are:
a)organochlorine compounds
b)organophosphorous compounds
c)carbamates
d)residual sprays
e)space sprays

11.Direct transmission of infectious agent possible by ways:
a)contact with soil, bite of animal, droplet infection, transplacental
b)via food, water, blood & organs
c)by handkerchief, glass, spoon, googlesect.
d)unclean hands & fingers
e)biological or mechanical vector, dust

12.The unusual occurrence of a disease in a population in excess of its expeted frequency & if disease is not prevalent then presence of at least two cases of that disease at same place is called:
a)pandemic
b)epidemic
c)endemic
d)sporadic
e)exotic

13.The host in which sexual cycle of agent occurs:
a)intermediate host
b)definite host
c)source of infection
d)carrier
e)patient

14.The immunizing agents classified as:
a)Ig M, IgG, IgE, IgD, IgA
b)killed live attenuated vaccines
c)normal & specific human Ig
d)vaccines, Ig& antisera
e)natural killer lymphocytes, lysozime, phagocytes

15.Ig which responsible for immediate allergic anaphylactic reaction:
a)Ig M
b)IgG
c)IgE
d)IgD
e)IgA

16.Items that penetrate sterile tissues, including body cavities and the vascular system, e.g. surgical instruments, intra – uterine devices, vascular catheters:
d)low risk
e)high risk
f)intermediate risk

17.The dependable, non toxic, inexpensive, sporicidal, with rapid heating and good penetration of fabrics method is:
a)ethylene oxide gas
b)chemical disinfection
c)high – level disinfection
d)steam sterilization
e)thermal disinfection

18.Fleas control measures:
a)environmental, chemical, biological control
b)residual sprays, space sprays, pyrethrum extract, genetic control
c)mosquito net, screening, repellents
d)environmental, insecticidal control, fly papers, health education
e)insecticides, repellents, rodent control

19.Transmission of arthropod – borne diseases:
a)direct contact
b)mechanical

c)biological
d)all correct
e)all non – correct

20.If non – living thing is reservoir, disease called:
a)anthroponozis
b)zoonozis
c)sapronosis

21.Types of reservoir:
a)human being, animal & non living
b)obligative, definitive & intermediate
c)zoonozis, anthroponozis, sapronosis
d)endemic, pandemic, sporadic & vector
e)clinical & subclinical

22.When preformed antibodies in one body (human or animal) are transferred to another it produced:
a)active immunity
b)passive immunity
c)innate immunity
d)herd immunity
e)antitoxin immunity

23.Cleaning is a process:
a)that reduces the number of pathogenic microorganisms
b)that removes foreign material (e.g. soil, organic material, microorganisms from an objects)
c)that destroys all microorganisms including bacterial spores
d)that kills larvae & pupae within short period of time
e)that reduces the number of non - of pathogenic microorganisms

24.To kill Mycobacterium tuberculosis is often used:
a)sterilization
b)disinsection
c)deratization
d)high – level disinfection
e)cleaning

25.The thermal & chemical are methods of:
a)sterilization
b)disinfection
c)disinsection
d)cleaning
e)deratization

26.The mechanical vector is:
a)when arthropods acts only as a passive carrier of the disease agents
b)arthropod can cause hypersensitive due to bites, stings, hairs ect.
c)when the pathogenic depend on them for completing their cycle within the body of arthropods
d)when animals acts only as a passive carrier of the disease agents
e)when the arthropods depend on them for completing their cycle within the body of man

27.Sand flies control measures:
a)environmental, chemical, biological control
b)residual sprays, space sprays, pyrethrum extract, genetic control
c)mosquito net, screening, repellents
d)environmental, insecticidal control, fly papers, health education
e)insecticides, sanitation

28.Insecticides classified into types:
a)defensive, offensive
b)contact poisons, stomach poisons, fumigants
c)residual sprays, space sprays, pyrethrum extract
d)larvicides, repellents, disinfectant, baits
e)fly papers, cords, ribbons

29.Live attenuated vaccines:
a)typhoid, cholera, pertussis
b)measles, poliomyelitis

c)rubella, measles, mumps
d)yellow fever, tuberculosis
e)anthrax, brucellosis

30.Most dangerous carriers are:
a)incubatory carrier
b)convalescent carrier
c)chronic carrier
d)healthy carrier
e)temporary carrier

31.The host in which sexual cycle of agent occurs:
a)intermediate host
b)definite host
c)source of infection
d)carrier
e)patient

32.Type of Ig has high agglutinating & complement fixing ability:
a)Ig M
b)IgG
c)IgE
d)IgD
e)IgA

33.Cleaning methods are:
a)by hot water
b)by lower temperature
c)thermal, chemical
d)manual, environmental
e)high, intermediate, low

34.The methods which preferred for reusable glass syringes & ointments, powders, oils ect. is:
a)dry heat
b)moist heat
c)boiling
d)autoclaving
e)ethylene oxide gas

35.Anti - adult measures:
a)environmental, chemical, biological control
b)residual sprays, space sprays, pyrethrum extract, genetic control
c)mosquito net, screening, repellents
d)environmental, insecticidal control, fly papers, health education
e)disinfection, sterilization

36.The anti – larval insecticides are:
a)mineral oils, Paris green, synthetic insecticides
b)residual sprays, space sprays, genetic control
c)DDT, malathion, propoxur
d)solid or liquid baits
e)fumigants & repellents

37.Pandemic –
a)is a diseases spread over a very large geographical area & effects a major portion of world
b)the habitual occurrence of a disease in population
c)cases occur irregularly, haphazardly from time to time & generally infrequent
d)infection diseases primarily of animals, transmissible to human beings under natural conditions
e)transmissible from one generation to other generation by genetic code

38.Types of acquired immunity:
a)innate immunity
b)herd immunity
c)specific & non – specific immunity
d)active, passive immunity
e)antitoxin, antisera immunity

39.Duration of protection is long lasting, severe reactions are rare, cheaper and efficacy approaches 100%:

a)active immunity
b)passive immunity
c)innate immunity
d)herd immunity
e)immediate allergic reaction

40.Normal human Ig are used for:
a)post – exposure prophylaxis of Hepatitis B, rabies, tetanus
b)temporary protection against hepatitis A for travelers to endemic areas
c)against gas gangrene, tuberculosis, measles, mumps
d)rubella, yellow fever
e)pertussis, brucellosis

41.Can be contaminated soil, faeces, urine, contaminated food, milk, water a source of infection:
a)yes
b)no

41.The mode of transmission of tick – borne relapsing fever:
a)vector – borne
b)air - borne
c)faeco - oral route
d)fomite – borne
e)direct contact

43.An immunobiological substance designed to produce resistance against a specific disease:
a)immunoglobulin’s
b)antisera
c)antoibodies
d)vaccines
e)exotoxin

44.Type of Ig has high agglutinating & complement fixing ability:
a)Ig M
b)IgG
c)IgE
d)IgD
e)IgA

45.Killed vaccines are:
a)typhoid, cholera, pertussis
b)measles, poliomyelitis
c)rubella, measles, mumps
d)yellow fever, tuberculosis
e)anthrax, brucellosis

46.Environmental control of anti - adult measures is:
a)eliminate their breeding places i.e. source eradication
b)using small fishes (Gambusiaaffinits, Lebisterretieulatus)
c)using chemical larvivides
d)screening of houses, hospitals, food markets, restaurants
e)disinfection & sterilization

47.Anti – adults insecticides are:
a)mineral oils, Paris green, synthetic insecticides
b)residual sprays, space sprays, pyrethrum extract, genetic control
c)DDT, malathion, propoxur
d)solid or liquid baits
e)fumigants & repellents

48.Fly control insecticides are:
a)mineral oils, Paris green, synthetic insecticides
b)residual sprays, space sprays, pyrethrum extract, genetic control
c)malathion, propoxur
d)DDT, 0.5% lindane, 2.5% chlordane
e)fumigants & repellents

49.The Paris green & sodium fluoride are:
a)contact poisons

b)stomach poisons
c)fumigants
d)residual sprays
e)space sprays

50.Pyrethrum, DDT are:
a)contact poisons
b)stomach poisons
c)fumigants
d)residual sprays
e)space sprays

51.EPIDEMIOLOGY is:
a)the study of man & his environment
b)study of health, health behavior & medical institution
c)study of the physical, social & cultural history of man
d)study about acute communicable diseases have been brought under control & good medical care is available to more people than ever before
e)the study of the distribution & determinants of health related states or events in specified population & the application of this study to the control of health problems

52.Normal human Igare used for:
a)typhoid, measles
b)rubella, yellow fever
c)tetanus, diphtheria, gas gangrene, botulism, snake bite
d)tuberculosis, polyomielitis
e)Hepatitis B, mumps

53.Disinfection is a process:
a)that reduces the number of pathogenic microorganisms
b)that removes foreign material (e.g. soil, organic material, microorganisms from an objects)
c)that destroys all microorganisms including bacterial spores
d)that kills larvae & pupae within short period of time
e)that reduces the number of non - of pathogenic microorganisms

54.Sterilization is a process:
a)that reduces the number of pathogenic microorganisms
b)that removes foreign material (e.g. soil, organic material, microorganisms from an objects)
c)that destroys all microorganisms including bacterial spores
d)that kills larvae & pupae within short period of time
e)that reduces the number of non - of pathogenic microorganisms

55.Elimination of reservoir is not possible in:
a)anthroponozis
b)zoonozis
c)sapronosis

56.It is substance which when introduced into body stimulates specific immune response:
a)haptens
b)antibody
c)antigen
d)phagocytus
e)polypeptide

57.For heat – labile equipments using:
a)disinfection by hot water
b)disinfection at lower temperature
c)chemical method
d)moist heat
e)autoclaving

58.The larvicides are:
a)2% glutaraldehyde, 6% hydrogen peroxide, 0.3% per acetic acid
b)moist heat, hot water
c)0.5% diazinon, 2% dimehoate, 1% runnel
d)2.5% chlordane, 0.5% lindane
e)malathion&fenitrothion

59.Equipment that does not penetrate the skin or sterile areas of the body but is in contact with intact mucous membranes or non – intact skin:
a)low risk
b)high risk
c)intermediate risk

60.Biological vector is:
a)when arthropods acts only as a passive carrier of the disease agents
b)arthropod can cause hypersensitive due to bites, stings, hairs ect.
c)when the pathogenic depend on them for completing their cycle within the body of arthropods
d)when animals acts only as a passive carrier of the disease agents
e)when the arthropods depend on them for completing their cycle within the body of man

61.The host in which sexual cycle of agent occurs:
a)intermediate host
b)definite host
c)source of infection
d)carrier
e)patient

62.The methods which preferred for reusable glass syringes & ointments, powders, oils ect. is:
a)dry heat
b)moist heat
c)boiling
d)autoclaving
e)ethylene oxide gas

63.Anti - adult measures:
a)environmental, chemical, biological control
b)residual sprays, space sprays, pyrethrum extract, genetic control
c)mosquito net, screening, repellents
d)environmental, insecticidal control, fly papers, health education
e)disinfection, sterilization

64.The anti – adults insecticides are:
a)mineral oils, Paris green, synthetic insecticides
b)residual sprays, space sprays, pyrethrum extract, genetic control
c)DDT, malathion, propoxur
d)solid or liquid baits
e)fumigants & repellents

65.Type of Ig has high agglutinating & complement fixing ability:
a)Ig M
b)IgG
c)IgE
d)IgD
e)IgA

66.EPIDEMIOLOGY is:
a)the study of man & his environment
b)study of health, health behavior & medical institution
c)study of the physical, social & cultural history of man
d)study about acute communicable diseases have been brought under control & good medical care is available to more people than ever before
e)the study of the distribution & determinants of health related states or events in specified population & the application of this study to the control of health problems

67.If non – living is reservoir, disease called:
a)anthroponozis
b)zoonozis
c)sapronosis

68.Non – susceptibility to a given disease or a given organism:
a)tolerance
b)immunity
c)resistance
d)susceptibility

e)responsibility

69.The immunizing agents classified as:
a)Ig M, IgG, IgE, IgD, IgA
b)killed live attenuated vaccines
c)normal & specific human Ig
d)vaccines, Ig& antisera
e)natural killer lymphocytes, lysozime, phagocytes

70.Normal human Igare used for:
a)post – exposure prophylaxis of Hepatitis B, rabies, tetanus
b)temporary protection against hepatitis A for travelers to endemic areas
c)against gas gangrene, tuberculosis, measles, mumps
d)rubella, yellow fever
e)pertussis, brucellosis

71.EPIDEMIOLOGY is:
a)study of distribution & determinants of health related states & events in specified population & application of this study to the control of health problems
b)study of distribution & determinants of health related states & events animals & application of this study to the control of health problems
c)study about immunization, immunizing agents, types of immunity & causes of failure of vaccination
d)study about relation between disease & social conditions
e)a scientific field that death with the collection, classification, description, analysis, interpretation & presentation of data

72.When preformed antibodies in one body (human or animal) are transferred to another it produced:
1.active immunity
2.passive immunity
3.innate immunity
4.herd immunity
5.antitoxin immunity

73.Duration of protection is long lasting, severe reactions are rare, cheaper and efficacy approaches 100%:
a)active immunity
b)passive immunity
c)innate immunity
d)herd immunity
e)immediate allergic reaction

74.Normal human Ig are used for:
a)post – exposure prophylaxis of Hepatitis B, rabies, tetanus
b)temporary protection against hepatitis A for travelers to endemic areas
c)against gas gangrene, tuberculosis, measles, mumps
d)rubella, yellow fever
e)pertussis, brucellosis

75.Cleaning methods are:
a)by hot water
b)by lower temperature
c)thermal, chemical
d)manual, environmental
e)high, intermediate, low

76.The methods which preferred for reusable glass syringes & ointments, powders, oils ect. is:
a)dry heat
b)moist heat
c)boiling
d)autoclaving
e)ethylene oxide gas

77.Anti - adult measures:
a)environmental, chemical, biological control
b)residual sprays, space sprays, pyrethrum extract, genetic control
c)mosquito net, screening, repellents
d)environmental, insecticidal control, fly papers, health education
e)disinfection, sterilization

78.The anti – larval insecticides are:

a)mineral oils, Paris green, synthetic insecticides
b)residual sprays, space sprays, pyrethrum extract, genetic control
c)DDT, malathion, propoxur
d)solid or liquid baits
e)fumigants & repellents

79.Sporadic –
a)is a diseases spread over a very large geographical area & effects a major portion of world
b)the habitual occurrence of a disease in population
c)cases occur irregularly, haphazardly from time to time & generally infrequent
d)infection diseases primarily of animals, transmissible to human beings under natural conditions
e)transmissible from one generation to other generation by genetic code

80.Types of acquired immunity:
a)innate immunity
b)herd immunity
c)specific & non – specific immunity
d)active, passive immunity
e)antitoxin, antisera immunity

81.Malathion, Fenthion are:
a)organochlorine compounds
b)organophosphorous compounds
c)Carbamates
d)residual sprays
e)space sprays

82.Classification of infection risk from equipment or environment:
a)high – level disinfection
b)thermal, chemical, manual
c)low, intermediate, high

83.Items in contact with normal and intact skin or the inanimate environment not in contact with the patient:
a)low risk
b)high risk
c)intermediate risk

84.The preferred methods employed for sterilization of all items that penetrate the skin & mucosa is:
a)dry heat
b)moist heat
c)boiling
d)autoclaving
e)ethylene oxide gas

85.Protection against mosquito:
a)environmental, chemical, biological control
b)residual sprays, space sprays, pyrethrum extract, genetic control
c)mosquito net, screening, repellents
d)environmental, insecticidal control, fly papers, health education
e)insecticides, repellents, rodent control

86.Sulphur dioxide is:
a)contact poisons
b)stomach poisons
c)fumigants
d)residual sprays
e)space sprays

87.Non – susceptibility to a given disease or a given organism:
a)tolerance
b)immunity
c)resistance
d)susceptibility
e)responsibility

88.Elimination of reservoir is not possible in:
a)anthroponozis
b)zoonozis

c)sapronosis

89.Immunity produced is only temporary till antibody is eliminated from body is:
a)active immunity
b)passive immunity
c)innate immunity
d)herd immunity
e)antitoxin immunity

90.Endemic –
a)is a diseases spread over a very large geographical area & effects a major portion of world
b)the habitual occurrence of a disease in population
c)cases occur irregularly, haphazardly from time to time & generally infrequent
d)infection diseases primarily of animals, transmissible to human beings under natural conditions
e)transmissible from one generation to other generation by genetic code

91.Equipment that does not penetrate the skin or enter sterile areas of the body but is in contact with intact mucous membranes or non – intact skin:
a)low risk
b)high risk
c)intermediate risk

92.The dependable, non toxic, inexpensive, sporicidal, with rapid heating and good penetration of fabrics method is:
a)ethylene oxide gas
b)chemical disinfection
c)high – level disinfection
d)steam sterilization
e)thermal disinfection

93.Transmission of arthropod – borne diseases:
a)direct contact
b)mechanical
c)biological
d)all correct
e)all non – correct

94.Fleas control measures:
a)environmental, chemical, biological control
b)residual sprays, space sprays, pyrethrum extract, genetic control
c)mosquito net, screening, repellents
d)environmental, insecticidal control, fly papers, health education
e)insecticides, repellents, rodent control

95.Malathion, Fenthion are:
a)organochlorine compounds
b)organophosphorous compounds
c)carbamates
d)residual sprays
e)space sprays

96.Most dangerous carriers are:
a)incubatory carrier
b)convalescent carrier
c)chronic carrier
d)healthy carrier
e)temporary carrier

97.Sporadic –
a)is a diseases spread over a very large geographical area & effects a major portion of world
b)the habitual occurrence of a disease in population
c)cases occur irregularly, haphazardly from time to time & generally infrequent
d)infection diseases primarily of animals, transmissible to human beings under natural conditions
e)transmissible from one generation to other generation by genetic code

98.If carrier shed infectious agent for short period time (during acute illness), he called:
a)incubatory carrier
b)convalescent carrier

c)chronic carrier
d)healthy carrier
e)temporary carrier

99.Non – susceptibility to a given disease or a given organism:
a)tolerance
b)immunity
c)resistance
d)susceptibility
e)responsibility

100.The immunity of a group of people where the proportion of non – susceptible is greater than susceptible:
a)active immunity
b)passive immunity
c)innate immunity
d)herd immunity
e)antitoxin immunity

101.Anti – larval measures includes:
a)environmental, chemical, biological control
b)residual sprays, space sprays, pyrethrum extract, genetic control
c)mosquito net, screening, repellents
d)environmental, insecticidal control, fly papers, health education
e)insecticides, repellents, rodent control

102.A person of animal including birds & arthropods where infecting agents can be present under natural conditins:
a)carrier
b)vector
c)host
d)reservoir
e)vehicle

103.If non – living thing is reservoir, disease called:
a)anthroponozis
b)zoonozis
c)sapronosis

104.Normal human Igare used for:
a)Diphteria, tetanus
b)Typhoid fever, rabies
c)Cholera, anthrax
d)Pertussis, measles, poliomyelitis
e)Brucellosis, mumps, tuberculosis

105.Specific humanIg are used for:
a)post – exposure prophylaxis of Hepatitis B, rabies, tetanus
b)temporary protection against hepatitis A for travelers to endemic areas

c)against gas gangrene, tuberculosis, measles, mumps
d)rubella, yellow fever
e)pertussis, brucellosis

106.The steam under pressure, dry heat, by ethylene oxide gas or low temperature steam & formaldehyde are methods of:
a)cleaning
b)chemical disinfection
c)sterilization
d)disinsection
e)high – level disinfection

107.The bronchoscopes require:
a)dry heat
b)moist heat
c)boiling
d)autoclaving
e)ethylene oxide gas

108.Medical entomology is:
a)since which dealth with the study of those arthropods, which carry or transmit the pathogenic organisms to human beings

b)since which dealth with the study of those arthropods, which carry or transmit the pathogenic organisms to animals
c)the study of man & his environment
d)study of health, health behavior & medical institution
e)study of the physical, social & cultural history of man

109.Proporux, carbaryl are:
a)organochlorine compounds
b)organophosphorous compounds
c)carbamates
d)residual sprays
e)space sprays

110.Fly control measures:
a)environmental, chemical, biological control
b)residual sprays, space sprays, pyrethrum extract, genetic control
c)mosquito net, screening, repellents
d)environmental, insecticidal control, fly papers, health education
e)insecticides, repellents, rodent control

Questions for 2 unite (EPIDEMIOLOGY)
1.Epidemiology of infectious diseases is:
Specific prevention of infectious diseases consists of:
a)Hand washing
b)Healthy food
c)Physical activities
d)Vaccination

2.Which of mentioned diseases has vesicula
a)Typhoid fever
b)Meningococcal infection c) Chickenpox
c)Measles
3.Positive Schick test indicate
a)Immunity to diphtheria
b)Susceptibility to diphtheria
c)Hypersensitivity to diphtheria
d)Infection with diphtheria

4.Carriers are important in all of the following except
a)Polio
b)Typhoid
c)Measles
d)Diphtheria

5.True about meningococcal meningitides is
a)Causative agent is a gram – ve diplococcic
b)Cases are a most important source of infection
c)Treatment with penicillin eradicates carrier state
d)Vaccine can be in pregnancy

6.National Tuberculosis institute is located at
a)New Delhi
b)Chingelput
c)Bangalore
d)Chennai

7.All of the following are blood - borne infections except
a)Hepatitis B
b)Hepatitis C
c)Heiatitis D
d)Hepatitis E

8.Salmonellas are producing?
a)Endotoxins
b)Enterotoxins
c)Exotoxins
d)Endotoxins, enterotoxins
9.Incubation period for whooping cough is commonly:
a)12 h

b)7- 10 days
c)15 days
d)1 month
10.What is the reservoir for salmonella typhi?
A)Humans
B)Cattle
C)Humans and cattle
D)Rodents
11.New cases of patients with Variola (smallpox) are registered:
a)Globally
b)Only in Africa
c)Only in South-east Asia
d)Not registered
12.Influenza vaccine
a)The content of vaccine remains the same every year
b)Every season vaccine is different
c)Is not available
d)It is alive vaccine
13.The only known reservoir of Corynebacterium diphtheria?
A)Moskitos
B)Rats
C)Humans
D)Chimpanzees
14.Agent of Tuberculosis is:
a)Mycobacterium africanum
b)Mycobacterium bovis
c)Mycobacterium tuberculosis
d)All of the above mentioned
15.Typhoid is first week of illness is best diagnosed by
a)Serum Widal test
b)Stool culture
c)Urine test
d)Blood culture

16.Hepatitis E virus is transmitted by
a)Sexual route
b)Blood and blood products
c)Needles and syringes
d)Faecal-oral route

17.Period of infectivity for Measles is
a)5 days prior to appearance of rash till 4 days afterwards
b)4 days prior to appearance of rash till 5 days afterwards
c)4 days prior to appearance of rash till 1 days afterwards
d)1 days prior to appearance of rash till 4 days afterwards

18.The main preventive measure against polio is
a)planned and additional mass vaccination of children of the decreed age
b)detection of patients with polio and acute flaccid paralysis (AFP)
c)high-quality water supply, communal landscaping
d)health promotion among the population about the prevention of polio

19.The mode of transmission of varicella:
a)Air-borne
b)Fecal – oral route
c)vector-borne
d)sexual transmission

20.Specify the most effective measures for shigellosis
a)sanitary-and-hygienic
b)specific prevention
c)measures aimed at the source of infection
d)disinfection

21.Seasonality in measles
a)not observed
b)mild spring

c)pronounced winter-spring
d)summer-autumn

22.Which of the mentioned allegations of typhoid fever is not correct?
a)Characterized by virusemia
b)Characterized by systematic damage of intestinal lymphatic system
c)Infectious source and carrier is diseased person
d)Incubation period is up to 2 weeks

23.Which of mentioned diseases has vesicula?
a)Typhoid fever b)Chickenpox
c)Meningococcus infection
d)Measles

24.What is the source of infection in case of salmonellosis?
a)Wild and domestic animals
b)Humans
c)Birds
d)A+b

25.Airborne/aeroegnic diseases are caused by:
a)Virus
b)Bacteria
c)Mycoplasma
d)All of the above
27.Which of infectious diseases WHO considers as the most important now?
a)Malaria, HIV/AIDS, tuberculosis
b)Pertussis, mumps, measles
c)Chickenpox, virus hepatitis A, virus hepatitis E
d)Diptheria, salmonellosis, helicobacteriosis

28.«Hundred day cough» is the name of
a)Cough due to Bordetella pertussis
b)Cough due to Hemophylus influenza
c)Cough due to Adenovirus
d)Cough due to Respiratory syncytial virus

29.. Which of the following pairs of Rickettsial Diseases - Insect vectors is wrongly matched
a)Epidemic typhus - Louse
b)Scrub typhus - Flea
c)Rocky Mountain spotted fever - Tick
d)Rickettsialpox - Mite

30.The most appropriate test to assess the prevalence of tuberculosis infection in community is
a)Mass Miniature Radiography
b)Sputum examination
c)Tuberculin test
d)Clinical examination

31.The usual incubation period for pertussis is
a)7-14 days
b)3-5 days
c)21-25 days
d)Less than 3 days

32.Risk of the damage of fetus by maternal rubella is maximum if mother gets infected is
a)6-12 weeks of pregnancy
b)20-24 weeks of pregnancy
c)24-28 weeks of pregnancy
d)32-36 weeks of pregnancy

33.The usual incubation period for typhoid fever is
a)10-14 days
b)3-5 days
c)21-25 days
d)Less than 3 days

34.Chicken Pox is characterized by all except

a)Scabs are infective
b)Pleomorphic stages
c)Rashes symmetrical centripetal dew-drop like
d)Palms and soles not affected by rash

35.Period of infectivity for Measles is
a)5 days prior to appearance of rash till 4 days afterwards
b)4 days prior to appearance of rash till 5 days afterwards
c)4 days prior to appearance of rash till 1 days afterwards
d)1 days prior to appearance of rash till 4 days afterwards

36.Hepatitis which spreads by faecal – oral route is
a)Hepatitis A
b)Hepatitis B
c)Hepatitis C
d)Hepatitis D

37.Prophylactic prevention of contact with measles case is necessary up to how many days after appearances of rash:
a)2 days
b)5 days
c)7 days
d)9 days
38.Which of the following is not true about influenza virus
a)Influenza virus A is subject to frequent antigenic variation
b)Antigenic drift is a gradual antigenic change over a period of time
c)Antigenic shift is due to genetic recombination of virus
d)Major epidemics are due to antigenic drift
39.Iceberg phenomenon is not seen in
a)AIDS
b)TB
c)Poliomyelitis
d)Measles
40.BCG vaccination
a)Recommended for all healthy newborns
b)Prevent anybody from TB infections
c)Revaccination is done at the age of 17
d)Post-vaccination immunity is active for the rest of the live
41.Rash on the skin in case of smallpox
a)Shows immediately and remains same in development stage
b)Develops step by step and in different development stages
c)Not different from chickenpox
d)Will not leave scars on the skin
42.Influenza virus enters the human organism through:
a)Skin
b)Upper respiratory tract mucosa
c)Digestive tract mucosa
d)Eyes' mucosa
43.The primary modes of spread of diphtheriaeconsist of :
a)Direct or via airborne droplet
b)Fecal – oral
c)Sexual transmission
d)Through medical equipment
44.Lists biotypes of Corynebacteriumdiphtheriae:
a)gravis, intermedius, mitis, belfanti
b)gravis, intermedius,
c)mitis, belfanti
d)intermedius, mitis
45.The source of infection in chickenpox is:
a)contaminated air
b)chicken pox cases
c)insect
d)water

46.Susceptible to influenza a virus
a)only human
b)man, ducks, geese, dogs
c)man, horses, chickens, geese, ducks, pigs

d)man, pigs, dogs, chickens and others

47.Time of risk in scarlet fever
a)summer
b)the first weeks of forming teams
c)spring period of the year
d)morbidity per year is distributed

48.Epidemiologic control of infectious diseases:
a)Continuous and dynamic observation of disease
b)Systemic collection and analysis of epidemiological data
c)Preventive activities
d)all of the above
49.Incubation period for measles is ranges from:
a)7 - 21 days
b)30 - 35 days
c)few hours to 3 days
d)20 – 25 days

50.Definition of measlesis:
a)An acute highly contagious viral disease with fever, runny nose, cough, red eyes, and a spreading skin rash
b)Communicable disease marked especially by fever, diarrhea, prostration, headache, and intestinal inflammation
c)An infectious disease characterized by intense vomiting and profuse watery diarrhea and that rapidly leads to dehydration and often death
d)An acute infectious upper respiratory tract disease that affects the throat

51.Koplik Spots are seen in which diseases
a)Measles b) Mumps c) Rubella d) Enteric fever

52.Pathogenesis of airborne/aerogenic infections is characterized by?
a)Cause of infection in URT
b)Primary replication
c)Viremia, bacteaemia
d)All of the above
53.Definition of diphtheria is:
a)An acute highly contagious viral disease with fever, runny nose, cough, red eyes, and a spreading skin rash
b)Communicable disease marked especially by fever, diarrhea, prostration, headache, and intestinal inflammation
c)An infectious disease characterized by intense vomiting and profuse watery diarrhea and that rapidly leads to dehydration and often death
d)An acute infectious upper respiratory tract disease that affects the throat

54.Period of infectivity for Chicken pox is
a)5 days prior to appearance of rash till 4 days afterwards
b)4 days prior to appearance of rash till 5 days afterwards
c)4 days prior to appearance of rash till 1 days afterwards
d)1 days prior to appearance of rash till 4 days afterwards
55.Chinese letter arrangement of bacilli under microscopy in shown by
a)Mycobacterium tuberculosis
b)Mycobacterium leprae
c)Clostridium tetani
d)Corynobacterium diphtheria
56.Orchitis without of epidydimitis is manifestation of
a)Measles
b)Mumps
c)Rubella
d)Tuberculosis

57.Koplik Spots are seen in which diseases
b)Measles
c)Mumps
d)Rubella
e)Enteric fever

58.Sub-acute Sclerosis Pan Encephalitis (SSPE) is a complication of
a)Measles
b)Mumps
c)Rubella
d)Chicken pox

59.23.Incubation period for cholera is ranges from:
a)7 - 21 days
b)few hours to 5 days
c)7-10 days
d)2 - 3 days
60.Measures for the influenza patient
a)isolation at home, hospitalization only for clinical and epidemiological indications
b)compulsory hospitalization in health facilities
c)hospitalization of sick children under 3 years
d)hospitalization of elderly patients
61.Who is mostly infected of measles
a)children under 7 years
b)age does not matter
c)only children under 1 year
d)male persons
62.The period of the greatest contagion of the patient with measles
a)from the beginning of the prodromal period and the first 4 days of rash
b)from the last day of incubation until the end of the inflammatory process
c)from 8 days of incubation until the end of the rash period
d)since the beginning of the period of the rash till normalization of the temperature
63.Immunity after suffering whooping cough
a)resistant for life
b)short-term unstrained
c)relatively resistant
d)persistent, type-specific
64.The main measure of prevention of whooping cough
a)vaccination
b)decompression, isolating groups of kindergarten and schools
c)identification and isolation of patients
d)active health promotion
65.The main measures of prevention of typhoid fever are
a)identification of patients and bacterial carriers
b)timely isolation and treatment of patients
c)vaccination of the population
d)provision of good-quality water

66.Types of carriage in typhoid and paratyphoid:
a)acute and chronic
b)short-term
c)short-term, prolonged
d)acute, short-term

67.Maximum incubation period for polio
a)3-7 days
b)8 days
c)12 days
d)20 days

68.The main sources of polio are
a)cases with paralytic form of disease
b)healthy virus carriers
c)bacterial carriers
d)convalescents
69.Specific prophylaxis (vaccination) is possible against following disease:
a)Cytomegalovirus infection
b)Parainfluenza
c)Mycoplasma pneumonia
d)Influenza
70.Influenza epidemics means that there are:
a)100 patients
b)1000 patients
c)100 patients from 100 000 inhabitants during 1 week
d)100 patients children
71.The incubation period for shigellosis
a)2-10 days
b)8-17 days
c)10-21 days

d)from several hours to 7 days
72.Definition of typhoid fever is:
a)An acute highly contagious viral disease with fever, runny nose, cough, red eyes, and a spreading skin rash
b)Communicable disease marked especially by fever, diarrhea, prostration, headache, and intestinal inflammation
c)An infectious disease characterized by intense vomiting and profuse watery diarrhea and that rapidly leads to dehydration and often death
d)An acute infectious upper respiratory tract disease that affects the throat

73.The main factor of transmission of the causative agent of HAV is:
a)water
b)food
c)household items
d)Flies
74.Who mostly infected HAV?
a)children under 3 years
b)children of preschool and primary school age
c)adults
d)elderly persons
75.Manifestations of HVE:
a)sporadic morbidity
b)epidemic
c)endemic
d)all of the above
76.Source of cholera infection:
a)Infective person
b)Infective animal
c)Soil
d)Mosquito’s

77.Typhoid is first week of illness is best diagnosed by
a)Serum Widal test
b)Stool culture
c)Urine test
d)Blood culture

78.Hepatitis E virus is transmitted by
a)Sexual route

b)Blood and blood products
c)Needles and syringes
d)Faecal-oral route

79.Period of infectivity for Measles is
a)5 days prior to appearance of rash till 4 days afterwards
b)4 days prior to appearance of rash till 5 days afterwards
c)4 days prior to appearance of rash till 1 days afterwards
d)1 days prior to appearance of rash till 4 days afterwards

80.Hepatitis which spreads by faecal – oral route is
a)Hepatitis A
b)Hepatitis B
c)Hepatitis C
d)Hepatitis D

81.Prophylactic prevention of contact with measles case is necessary up to how many days after appearances of rash
a)2 days
b)b) 5 days
c)c) 7 days
d)d) 9 days

82.Definition of cholera is:
a)An acute highly contagious viral disease with fever, runny nose, cough, red eyes, and a spreading skin rash
b)Communicable disease marked especially by fever, diarrhea, prostration, headache, and intestinal inflammation
c)An infectious disease characterized by intense vomiting and profuse watery diarrhea and that rapidly leads to dehydration and often death
d)An acute infectious upper respiratory tract disease that affects the throat

83.Which of the following modes of transmission is typical for cholera:

a)Direct contact through droplet infection
b)Fecal - oral
c)Sexual transmission
d)Through medical equipment
84.The leading role in the prevention of salmonellosis belongs to
a)sanitary and veterinary supervision
b)creation of collective immunity
c)detection and isolation of sick people
d)identification of bacterial carriers
85.Susceptible to measles disease:
a)children only
b)everyone, regardless of age
c)only organized children
d)men are more receptive
86.Manifestations of influenza:
a)sporadic morbidity
b)epidemic
c)pandemic
d)all of the above
87.After suffering a meningococcal infection immunity is formed:
a)lifelong
b)not formed
c)short
d)long-lasting, type-group-specific
88.The source of the causative agent of meningococcal infection is contagious with
a)the beginning of the incubation period
b)the end of the incubation period until recovery
c)2 days from the start of nasopharyngitis clinic
d)end of the first week of the disease

89.What is the reservoir for salmonella typhi?
a)Humans
b)Cattle
c)Humans and cattle
d)Birds

90.Infectious diseases cannot be caused by:
a)Virus
b)Bacteria
c)Rat
d)Rickettsia

91.Measles virus enters the human organism through:
a)Skin
b)Upper respiratory tract mucosa
c)Digestive tract mucosa
d)Eyes' mucosa

92.Which of the following modes of transmission is typical for shigellosis:
a)Direct contact through droplet infection
b)Fecal - oral
c)Contact with skin surfaces
d)Through medical equipment

93.Variants of influenza a virus antigenic structure
a)H0N1, H1N1, H2N2, H3N2
b)H0N1, H2N1, H3N2 H2N2
c)H1N1, H0N1, H1N2, H3N2
d)H1N1, H0N2, H2N3, H3N2

94.Transmission pathway in chickenpox
a)airborne
b)vector-borne
c)household contact
d)water –borne

95.Which of the following toxins is the most important in the pathogenesis of cholera?

a)Endotoxin
b)Enterotoxin
c)Hemolysin
d)Neuraminidase

96.For the active prevention of polio is used:
a)live oral polio vaccine (OPV)
b)inactivated polio vaccine (IPV)
c)OPV and IPV
d)OPV and genetically engineered vaccine

97.Preventive measures in chickenpox
a)vaccination
b)communal improvement
c)prevention of contact cases with chickenpox
d)not conducted

98.The source of mumps is
a)sick person
b)convalescent carrier
c)healthy carrier
d)convalescents
99.Timing of immunization against mumps
a)once in the first days of life
b)three times, in 2 - 3.5 - 5 months
c)twice, in 12 months and 6 years
d)once, in 15 months

100.Causative agents of tuberculosis in the external environment
a)stable
b)unstable
c)weakly resistant
d)long-term resistant
101.The main source of human tuberculosis is
a)sick animal(cattle)
b)sick birds
c)sick person
d)sick animal and human

5.4. Перечень видов оценочных средств

SCALE OF EVALUATION. Examination (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.

6. УЧЕБНО-МЕТОДИЧЕСКОЕ И ИНФОРМАЦИОННОЕ ОБЕСПЕЧЕНИЕ ДИСЦИПЛИНЫ (МОДУЛЯ)

6.1. Рекомендуемая литература

6.3. Перечень информационных и образовательных технологий

6.3.1 Компетентностно-ориентированные образовательные технологии

6.3.1.1	6.3.1.1. Traditional educational technologies are lectures, a practical training, and consultations, focused on the message of

6.3.1.2	knowledge imparted to students in finished form.
6.3.1.3	6.3.1.2. Innovative educational technology classes in an interactive form, what form of system thinking and the ability to
6.3.1.4	generate ideas in solving various problems. These include electronic texts of lectures with presentations.
6.3.1.5	6.3.1.3. Information educational technologies - independent use by the student computer equipment and Internet resources for
6.3.1.6	practical tasks and independent work.
6.3.2 Перечень информационных справочных систем и программного обеспечения	
6.3.2.1	6.3.2.1.http://meduniver.com/Medical/Book/28.html

7. МАТЕРИАЛЬНО-ТЕХНИЧЕСКОЕ ОБЕСПЕЧЕНИЕ ДИСЦИПЛИНЫ (МОДУЛЯ)	
7.1	7.1. The department is located on the territory of the - address: Bishkek, L.Tolstoi campus
7.2	7.2. Classroom № 4.2 for 16 seats, for practical training, individual work (multimedia, video, visual aids - stands, board, sets of tables and diagrams).
7.3	7.3. Classroom №.4.16 for 16 seats, for practical training, individual work and viewing multimedia, video materials, visual aids - stands, board, sets of tables and diagrams).
7.4	7.4. Classroom №411 for 20 seats, for conducting practical exercises and individual work (multimedia, video materials, visual aids - stands, board, sets of slides, tables, multimedia visual materials on various sections of the
7.5	discipline).
7.6	7.5. Classroom №415 for 16 seats for practical training.
7.7	7.6. Classroom №412 for 12 seats, for practical training.
7.8	7.8. Computer
7.9	7.9. Projector
7.10	7.10. Printer
7.11	7.11. Scanner
7.12	7.11. Netbook

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

Discipline planning sheet (appendix 3). Recommendations about use of RPD:
-RPD materials course guidelines contains all main tendencies of the current state of of epidemiology issues;
-when studying a subject concepts of epidemiology fundamentals discussins of the main approaches of some problems of public health care;
-a practical part of a subject is based on the of situational tasks, determination of of self-testing results, analysis of infectious incidence, studying of standard and directive documentation.
Recommendations to study the discipline:
-1 section "General Epidemiology" studying of the main laws of development epidemic is necessary
process, planning and holding anti-epidemic and preventive actions for prevention andlocalizations of the centers of infectious diseases;
-2 sections "Private Epidemiology" are necessary development of epidemiological features separate relevant infectious diseases and bases of epidemiological surveillance behind them;
-The 3rd section "Military Epidemiology" studying of features of anti-epidemic providing the population is necessaryat emergency situations and wartime.
Recommendations regarding work with the educational materials / readings:
-large number of publications on epidemiology issues are available on the website -www.epidemiolog.ru. Testing:
-test questions reflect a basic course of a subject;
-represent subject material fixing.
Recommendations for discussion on some epidemiology problems:
-the teacher and students express their opinion regarding the main problematic and debatable issues. The teacher and students express their opinion on the most critical issues directed to population epidemiological wellbeing.
Recommendations to the solution of situational tasks:
-the situational tasks prepared on all subjects of discipline;
-at the solution of situational tasks the student has to seize theoretical knowledge of a subject and logical thinking.
Recommendations to the work with the test system of disciplines:
-tests are made on modular questions;
-5 answer available for each question, one of them is true/correct. Recommendations to the prepare for to graded credit:
-it is recommended to refer to the set of discipline questions ;
if the assessment is positive.