MINISTRY OF SCIENCE AND HIGHER EDUCATION OF THE RUSSIAN FEDERATION

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

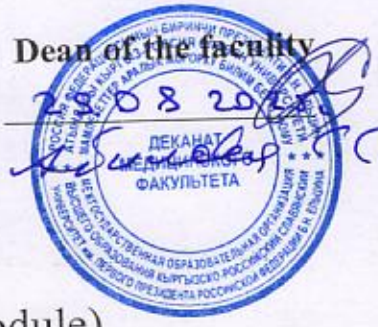
International Higher Education Institution

Kyrgyz-Russian Slavic University named after the First President of the Russian

APPROVED

Dean of the faculty

30 08 2023



PEDIATRIC SURGERY

Work program of the discipline (module)

Assigned to the Department of: Pediatric Surgery
Curriculum: 310501_20_6 ld in.plx
Specialty 05/31/01. - RF, 560001 - KR General medicine (for foreign students)
Qualification: Specialist
Form of Study: Full-time
Total workload — 2 ECTS credits
Hours according to the curriculum: 72
Including
classroom instruction: 48
independent study: 23.7

Types of assessment by semesters:
credit with a grade — 11

Distribution of Academic Hours by Semester

Semester (Course.Semester)	11 (6.1)		Total	
Weeks	18			
Type of classes	SP	WP	SP	WP
Lectures	16	16	16	16
Practical	32	32	32	32
Contact Hours During Theoretical Training	0,3	0,3	0,3	0,3
Including	2	2	2	2
Total classroom hours	48	48	48	48
Total contact hours	48,3	48,3	48,3	48,3
Independent work	23,7	23,7	23,7	23,7
Total	72	72	72	72

Program compiled by:
lecturer, A.A. Moydunov; Candidate of Medical Sciences, Associate Professor, V.N. Poroshchai

Reviewer(s):
Doctor of Medical Sciences, Professor, Head of the Department of Pediatric Surgery of KSMA,
T.O. Omurbekov

Work Program of the Discipline

developed in accordance with FSES 3++:
Federal State Educational Standard of Higher Education for the specialty 31.05.01 GENERAL MEDICINE (order of the Ministry of Education and Science of Russia dated 09.02.2016 №. 95)

compiled on the basis of the curriculum:
Specialty 31.05.01 – RF, 560001 – KR *General Medicine* (for international students)
approved by the Academic Council of the university from 30.06.25 protocol № 13

The Work Program was approved at the meeting of the Department

Protocol from August 29, 2025 No. 1
Program validity period: 2020–2026 academic years
Head of the Department, Candidate of Medical Sciences, Professor of RAE, K.M. Mykyev

The Course outline endorsed for the following academic year

Chairman of the Educational and Methodological Board 2024 year

The course outline has beed revised, considered and endorsed for implementation in 2024- 2025 Academic Year at the Staff Meeting of **Pediatric surgery** Department

Record of _____ № _____

The Hend of Department Kalybek Mykiev _____

The Course outline endorsed for the following academic year

Chairman of the Educational and Methodological Board 2025 year

The course outline has beed revised, considered and endorsed for implementation in 2025- 2026 Academic Year at the Staff Meeting of **Pediatric surgery** Department

Record of _____ № _____

The Hend of Department Kalybek Mykiev _____

The Course outline endorsed for the following academic year

Chairman of the Educational and Methodological Board 2026 year

The course outline has beed revised, considered and endorsed for implementation in 2026- 2027 Academic Year at the Staff Meeting of **Pediatric surgery** Department

Record of _____ № _____

The Hend of Department Kalybek Mykiev _____

The Course outline endorsed for the following academic year

Chairman of the Educational and Methodological Board 2027 year

The course outline has beed revised, considered and endorsed for implementation in 2027- 2028 Academic Year at the Staff Meeting of **Pediatric surgery** Department

Record of _____ № _____

The Hend of Department Kalybek Mykiev

	1. COURSE OUTLINE OBJECTIVES
1.1	The goals of mastering the discipline of pediatric surgery are to provide students with the necessary information on semiotics, clinics, diagnostics, differential diagnostics, treatment tactics and emergency care for surgical malformations, surgical and urological diseases, traumatic injuries, tumors, critical conditions in children of different age groups.
1.2	The purpose of the discipline: to study the basic principles of the diagnosis of malformations and surgical diseases in children requiring emergency (emergency) medical care, the assimilation of medical tactics in relation to them, the provision of psychological assistance to ch ildren and their parents.
1.3	The tasks of training include teaching students:
1.4	-to make a preliminary diagnosis of surgical diseases in children in typical situations;
1.5	-to learn the timing of surgical correction of congenital malformations;
1.6	-solve questions about the timing of referral to the surgeon;
1.7	- provide emergency care;
1.8	-conduct the necessary pathogenetic therapy aimed at the prevention of complications;
1.9	-Determine and provide the necessary conditions for the transportation of children with surgical diseases and malformations.
1.10	-to learn the methods of convincing parents of the need for surgical correction of malformations in specific terms;
1.11	-principles of medical examination and rehabilitation of children discharged from a surgical hospital.
1.12	The study of pediatric surgery is carried out according to the classical principle - from the propaedeutics of childhood surgical diseases to the study of nosological units.

2. PLACE OF DISCIPLINE IN OOP STRUCTURE	
OOP cycle (section): j B 1.0	
2.1	Requirements for preliminary training of the student:
2.1.1	Anatomy
2.1.2	Topographic anatomy and operative surgery
2.1.3	Pharmacology
2.1.4	Propaedeutics of internal diseases
2.1.5	Pathophysiology, clinical pathophysiology
2.1.6	Pathological anatomy, clinical pathological anatomy
2.1.7	General Surgery
2.1.8	Hospital Surgery
2.1.9	Faculty surgery
2.1.10	Urology
2.1.11	Traumatology and orthopedics
2.1.12	Obstetrics and gynecology
2.1.13	Radiation Diagnostics
2.1.14	Oncology, radiation therapy
2.1.15	First Aid Basics
2.1.16	Neurology, medical genetics, neurosurgery
2.1.17	Clinical Pharmacolog
2.1.18	Standards for diagnosis and treatment

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3. TRAINING COMPETENCE FORMED BY THE DEVELOPMENT OF THE DISCIPLINE (MODULE)	
PK-4: capable and ready to conduct pathophysiological Clinical analysis syndromes, substantiate pathogenetically justified methods (principles) diagnostics, treatment, rehabilitation and prevention among the population, taking into account age-field groups;	
Know:	The necessary diagnostic methods, principles of management, treatment and rehabilitation of patients with various nosological forms, taking into account age and gender characteristics.
Be able to:	To assess the condition of patients, compare and choose the necessary and effective methods of diagnosis and treatment in connection with various nosological forms.
Own:	The main sources of information, management skills, treatment and rehabilitation of patients with various nosological forms, taking into account age and gender characteristics.

PK-5: capable and ready to conduct and interpret Demand, Physical Inspection, clinical examination, results of modem Laboratory-instrumental research, write a medical card outpatient and stationary patient adult and child;	
Know:	The main therapeutic and diagnostic methods and principles of management of patients of different age groups with various nosological forms in outpatient and hospital settings.
Be able to:	Interpret diagnostic research methods, identify the basic principles of management and determine the practical value, sequence of methods of management of patients with RNF in outpatient and inpatient settings.
Own:	Skills of searching and systematization of diagnostic methods for the management of patients with RNF in outpatient and inpatient settings.
PK-16: the ability to determine the patient's main pathological conditions, symptoms, syndromes diseases, nosological fonns in accordance with the International Statistical Classification of Diseases and health issues X revision	
Know:	The main pathognomonic signs of a pathological condition of a surgical diseases of childhood and the ability to determine the significance of the pathological condition for timely diagnosis and emergency care in life-threatening.
Be able to:	To reveal the meaning of health problems, make comparisons and present the dynamics of pathological conditions. Determine the practical value of clinical symptoms and syndromes on which the pathological condition and health problems of the patient are built.
Own:	Skills of diagnostic measures to identify, systematization clinical symptoms, syndromes of urgent and life -threatening conditions of nosological forms of surgical diseases with justification of the patient's own position of health.

PK-18:Ability carry out first aid to children in the event of urgent and life-threatening conditions, refer them to hospitalization of patients in a planned and emergency manner .	
Know:	Principles of treatment of the most common surgical diseases in children of different age categories.
Be able to:	Develop a plan and carry out the necessary therapeutic measures (primary surgical treatment of wounds, minor surgery, ligation) for surgical diseases in children of different age categories. • Clinic of emergency conditions arising from surgical diseases in children of different age categories : - septic shock s, - hypovolemic (dehydration) shock -acute respiratory failure, - injury (rupture) of internal organs, - peritonitis s • Methods of first aid, emergency care for complications of surgical diseases. • Indications for emergency and planned hospitalization .
Own:	•Skills manipulation to provide emergency first aid: - stop bleeding - artificial respiration "mouth to mouth", "mouth to nose" - cleaning the upper respiratory tract - indirect heart massage Method of rehydration therapy • Methods of anticonvulsant therapy

As a result of mastering the discipline, the student must

3.1	Know:
3.1.1	-etiology and pathogenesis and preventive measures of the most common surgical diseases;
3.1.2	- the modern classification of surgical diseases;
3.1.3	- the clinical picture, features of the course and possible complications in various age groups;
3.1.4	- the basic principles for the diagnosis of childhood surgical diseases;
3.1.5	- modem methods of clinical, laboratory, instrumental examination of patients;
3.1.6	- treatment methods and indications for their use;
3.1.7	- the basics of the organization of outpatient care to the population;
3.1.8	- the terms of surgical treatment of congenital malformations in children;
3.1.9	- the principles of clinical examination and rehabilitation of patients;
3.1.10	- ethical and deontological aspects in pediatric surgery.
3.2	Be able to:
3.2.1	- collect anamnesis from a surgical patient;
3.2.2	- conduct a patient examination;
3.2.3	- interpret the results of studies (laboratory, radiological, instrumental);
3.2.4	- formulate a clinical diagnosis;
3.2.5	- formulate indications for the chosen method of treatment;
3.2.6	- apply prevention methods;
3.2.7	- organize the transportation of newborns with surgical pathology, with injuries of internal organs, bums;
3.2.8	- fill in-the medical history.
3.3	Own:
3.3.1	- about various types of operations in acute surgical diseases of the abdominal organs in children;
3.3.2	- on the timing and types of surgical diseases of the gastrointestinal tract in children;
3.3.3	- about the methods of surgical treatment of diseases of the lungs and pleura in children;
3.3.4	- about methods of conservative treatment of orthopedic congenital diseases in children;
3.3.5	- on methods of treating children with various bone injuries;
3.3.6	- the timing of surgical treatment of children with congenital malformations;
3.3.7	- on methods of treating children with urological pathologies;
3.3.8	- on the principles of treatment of children with cancer;
3.3.9	- on the use of endovideo surgical technologies in the diagnosis and treatment of acute surgical pathology abdominal cavity in children.

4. STRUCTURE AND CONTENT OF DISCIPLINE (MODULE)							
The code lessons	Name of sections and topics/ typ/lessons/	Semester / Course	Hours	Competen-cetions	Literature	Interactiv.	Note
	Section 1. Emergency surgery.						
1.1	Acute appendicitis and peritonitis in children /Lee./	10	2	PK-4; PK-5; PK- 16; PK-18;	LI. 1; L1.2; L2.1; L2.2.		
1.2	Acquired intestinal Obstruction /Lee./	10	2	PK-4; PK- 5; PK-16; PK-18;	Ll.l; L1.2; L2.1 ; L2.2		
1.3	Congenital intestinal Obstruction/Lec./	10	2	PK-4; PK- 5; PK-16; PK-18;	Ll.l; LI.2; L2.1 ; L2.2		
1.4	Blunt abdominal trauma. Damage to parenchymal and hollow organs in children. Clinic, diagnosis, treatment / lec/	10	2	PK-4; PK- 5; PK-16; PK-18;	Ll.l; LI.2; L2.1 ; L2.2		
1.5	Acute hematogenous osteomyelitis, epiphyseal osteomyelitis. Chronic hematogenous and primary-chronic osteomyelitis / Lee/	10	2	PK-4; PK-5; PK-16; PK-18;	Ll.l; L1.2; L2.1 ; L2.2		
1.6	Acute and chronic suppurative lung diseases in children. Destructive pneumonia, classification, clinic, treatment / Lec /	10	2	PK-4; PK- 5; PK-16; PK-18;	Ll.l; LI.2; L2.1 ; L2.2		
1.7	Acute appendicitis and peritonitis in children./Prac./	10	2	PK-4; PK-5; PK-16; PK-18;	Ll.l; L1.2; L2.1 ; L2.2		
1.8	Acquired intestinal Obstruction/Prac./	10	2	PK-4; PK- 5; PK-16; PK-18;	Ll.l; LI.2; L2.1 ; L2.2	Interactive form of education	
1.9	Congenital intestinal Obstruction/Prac./	10	2	PK-4; PK- 5; PK-16; PK-18;	Ll.l; LI.2; L2.1 ; L2.2		
1.10	Blunt abdominal trauma. Damage to parenchymal and hollow organs in children. Clinic, diagnosis, treatment /Prac/	10	2	PK-4; PK-5; PK-16; PK-18;	Ll.l; L1.2; L2.1 ; L2.2		
1.11	Gastrointestinal bleeding in children. / Prac /	10	2	PK-4; PK- 5; PK-16; PK-18;	Ll.l; L1.2; L2.1 ; L2.2		
1.12	Malformations of the esophagus / Prac/	10	2	PK-4; PK-5; PK-16; PK-18;	Ll.l; L1.2; L2.1 ; L2.2		
1.13	Bums of the esophagus and their complications / Prac / *	10	2	PK-4; PK- 5; PK-16; PK-18;	Ll.l; LI.2; L2.1 ; L2.2		
1.14	Malformations of the anterior abdominal Walls (gastroschisis,	10	2	PK-4; PK-5;	Ll.l; L1.2;		

	embryonic umbilical hernia). / Prac/			PK-16; PK-18;	L2.1 ; L2.2		
1.15	Anorectal anomalies / Prac/	10	2	PK-4; PK- 5; PK-16; PK-18;	Ll.l; L1.2; L2.1 ; L2.2		
1.16	Diaphragmatic hernia, congenital lobar emphysema, pulmonary cyst, Pierre-Robin syndrome, atresia of choan / Prac/	10	2	PK-4; PK-5; PK-16; PK-18;	Ll.l; L1.2; L2.1 ; L2.2		
1.17	Acute hematogenous osteomyelitis, epiphyseal osteomyelitis. Chronic hematogenous and primary-chronic osteomyelitis / Prac/	10	2	PK-4; PK- 5; PK-16; PK-18;	Ll.l; LI.2; L2.1 ; L2.2		
1.18	Acute and chronic suppurative lung diseases in children. Destructive pneumonia, classification, clinic, treatment / Prac/	10	2	PK-4; PK-5; PK-16; PK-18;	Ll.l; L1.2; L2.1 ; L2.2		
1.19	Purulent-septic diseases of the skin and subcutaneous fat /Sr /	10	2	PK-4; PK- 5; PK-16; PK-18;	Ll.l; L1.2; L2.1 ; L2.2		
1.20	Malformation surgery'. The timing surgical treatment /Sr/.	10	1	PK-4; PK-5; PK-16; PK-18;	Ll.l; L1.2; L2.1 ; L2.2		
1.21	Acquired intestinal Obstruction /Sr/.	10	2	PK-4; PK- 5; PK-16; PK-18;	Ll.l; L1.2; L2.1 ; L2.2		
1.22	Congenital intestinal Obstruction/ Sr /.	10	1	PK-4; PK-5; PK-16; PK-18;	Ll.l; L1.2; L2.1 ; L2.2		
1.23	Neonatal peritonitis/ Sr /.	10	1	PK-4; PK- 5; PK-16; PK-18;	Ll.l; L1.2; L2.1 ; L2.2	*	
1.24	Neonatal necrotizing enterocolitis / Sr /.	10	2	PK-4; PK-5; PK-16; PK-18;	Ll.l; LI.2; L2.1 ; L2.2		
1.25	Chronic hematogenous and primary-chronic osteomyelitis / Sr/	10	1	PK-4; PK- 5; PK-16; PK-18;	Ll.l; L1.2; L2.1 ; L2.2		
1.26	Edematous-hyperemic scrotum syndrome in / Sr /	10	1	PK-4; PK-5; PK-16; PK-18;	Ll.l; LI.2; L2.1 ; L2.2		
1.27	Malformation surgery. The timing surgical treatment /Sr/.	10	1	PK-4; PK- 5; PK-16; PK-18;	Ll.l; L1.2; L2.1 ; L2.2		
	Section 2. Routine Surgery (Elective)			PK-4; PK-5; PK-16; PK-18;	Ll.l; L1.2; L2.1 ; L2.2		

2.1	Anomalies in the development of the urinary system in children. / Lec /	10	2	PK-4; PK- 5; PK-16; PK-18;	Ll.l; L1.2; L2.1 ; L2.2		
2.2	Pathology of the vaginal process peritoneum (inguinal hernia, dropsy testicular membranes, seed cyst cord). Hernia: umbilical, white abdominal lines, etiopathogenesis, clinic, complications, diagnosis, treatment./Prac./	10	2	PK-4; PK-5; PK-16; PK-18;	Ll.l; L1.2; L2.1 ; L2.2		
2.3	Anomalies and pathologies of the biliary tract, spleen and pancreas. / Prac /	10	2	PK-4; PK- 5; PK-16; PK-18;	Ll.l; L1.2; L2.1 ; L2.2		
2.4	Portal Hypertension Syndrome / Prac /	10	2	PK-4; PK-5; PK-16; PK-18;	Ll.l; L1.2; L2.1 ; L2.2	Interactive form of education	
2.5	Malformations of the blood vessels. Classification, clinic, diagnostics, treatment principles/Prac./	10	2	PK-4; PK- 5; PK-16; PK-18;	Ll.l; L1.2; L2.1 ; L2.2		
2.6	Congenital pyloric stenosis. Pathology yolk and urinary duct./Prac/	10	2	PK-4; PK-5; PK-16; PK-18;	Ll.l; L1.2; L2.1 ; L2.2		
2.7	Hirschsprung disease/Prac./	10	2	PK-4; PK- 5; PK-16; PK-18;	Ll.l; LI.2; L2.1 ; L2.2		
2.8	Malformations of the upper urinary tract. / Prac /	10	2	PK-4; PK-5; PK-16; PK-18;	Ll.l; LI.2; L2.1 ; L2.2		
2.9	Dropsy of the testis, hypospadias, epispadias, cryptorchidism, bladder exstrophy/ Prac /	10	2	PK-4; PK- 5; PK-16; PK-18;	Ll.l; L1.2; L2.1 ; L2.2	•	
2.10	Anomalies in the development of the urinary system in children / Sr /	10	2	PK-4; PK-5; PK-16; PK-18;	Ll.l; L1.2; L2.1 ; L2.2		
2.11	Hydronephrosis. Obstructive pyelonephritis / Sr /	10	2	PK-4; PK- 5; PK-16; PK-18;	Ll.l; L1.2; L2.1 ; L2.2		
2.12	Malformations of the blood vessels. Classification, clinic, diagnostics, treatment principles./Sr/	10	2	PK-4; PK-5; PK-16; PK-18;	Ll.l; LI.2; L2.1 ; L2.2		
2.13	Malformations of the esophagus /Sr/	10	2	PK-4; PK- 5; PK-16; PK-18;	Ll.l; LI.2; L2.1 ; L2.2		
2.14	Congenital pyloric stenosis. Pathology yolk and urinary duct./Sr/	10	2	PK-4; PK-5; PK-16; PK-18;	Ll.l; LI.2; L2.1 ; L2.2		
2.15	Crohs diseas, clinic, diagnostics,	10	2	PK-4; PK-	Ll.l;		

	treatment principles ./Sr/			5; PK-16; PK-18;	L1.2; L2.1 ; L2.2		
3.1	**Section 3. Traumatology and orthopedics of children.**			PK-4; PK- 5; PK-16; PK-18;	Ll.l; L1.2; L2.1 ; L2.2		
3.2	Traumatic brain injury in children./lek/	10	2	PK-4; PK-5; PK-16; PK-18;	Ll.l; LI.2; L2.1 ; L2.2		
3.3	Congenital dislocation of the hip, clubfoot, torticollis / Lek	10	2	PK-4; PK- 5; PK-16; PK-18;	Ll.l; LI.2; L2.1 ; L2.2		
3.4	Features of damage to the bones of the limbs in children. Birth injuries in children / Prac /	10	2	PK-4; PK-5; PK-16; PK-18;	Ll.l; L1.2; L2.1 ; L2.2	Interactive form of education	
3.5	Fractures of the spine and pelvic bones in children. Clinic, diagnosis, treatment./Prac/	10	2	PK-4; PK-5; PK-16; PK-18;	Ll.l; L1.2; L2.1 ; L2.2		
3.6	Traumatic brain injuries in children. Classification, clinic, diagnosis, treatment / Prac/	10	2	PK-4; PK-5; PK-16; PK-18;	Ll.l; LI.2; L2.1 ; L2.2	Interactive form of education	
3.7	Congenital dislocation of the hip, clubfoot, torticollis / Prac /	10	2	PK-4; PK-5; PK-16; PK-18;	Ll.l; L1.2; L2.1 ; L2.2		
3.8	Chest malformations. Violation of posture. Curvature of the spine. Classification, clinic, diagnosis, treatment./Prac/	10	2	PK-4; PK-5; PK-16; PK-18;	Ll.l; LI.2; L2.1 ; L2.2		
3.9	Osteochondropathy in children. Etiopathogenesis, clinic, diagnosis, treatment. /Pacr/	10	2	PK-4; PK- 5; PK-16; PK-18;	Ll.l; LI.2; L2.1 ; L2.2	•	
3.10	Congenital dislocation of the hip, clubfoot, torticollis./Sr./	10	2	PK-4; PK-5; PK-16; PK-18;	**Ll.l; L1.2; L2.1; L2.2**		
3.11	Features of traumatic injuries in children. Prevention of child injury/Sr/	10	2	PK-4; PK- 5; PK-16; PK-18;	**Ll.l; LI.2; L2.1; L2.2**		
3.12	Chest malformations. Violation of posture. Curvature of the spine. Classification, clinic, diagnosis, treatment./Sr/	10	2	PK-4; PK-5; PK-16; PK-18;	**Ll.l; L1.2; L2.1; L2.2**		
3.13	Features of damage to the bones of the limbs in children. Birth injuries in children / Sr/	10	2	PK-4; PK- 5; PK-16; PK-18;	**Ll.l; LI.2; L2.1; L2.2**		
3.14	Traumatic chock. Classification, clinic, diagnosis, treatment /Sr/.	10	2	PK-4; PK-5;	**Ll.l; LI.2;**		

				PK-16; PK-18;	L2.1; L2.2		
3.15	Osteochondropathy in children. Etiopathogenesis, clinic, diagnosis, treatment. /Sr/	10	2	PK-4; PK-5; PK-16; PK-18;	Ll.l; L1.2; L2.1; L2.2		

5. ASSESSMENT FUND

5.1. Test questions and tasks

CHECK-UP QUESTIONS FOR CHILD SURGERY.

1. The structure of children's medical institutions, the features of the organization of their work, interaction.
2. The history of the formation and development of modem pediatric surgery. Russian and Kyrgyz schools.
3. Anatomical and physiological characteristics of the child from the point of view of the pediatric surgeon.
4. Deontological aspects in pediatric surgery from the point of view of a sick child + parents + doctor.
5. Congenital surgical malformations. Causes, etiopathogenesis. The concept of agenesis, aplasia, organ hypoplasia. Methods of prevention, early diagnosis, Organization of children's surgical service for malformations.
6. Pathology of the vaginal process of the peritoneum (inguinal hernia, dropsy of the testicles, cyst of the spermatic cord). Embryogenesis, diagnostic methods, complications and treatment. Terms of surgical treatment.
7. Hernias of the anterior abdominal wall in children: umbilical, white line of the abdomen, ventral. Clinic, diagnostics. Methods treatment.
8. Malformations of the blood and lymph vessels. Clinic, diagnosis, treatment.
9. Acute appendicitis in children. Features of the clinic in children under 3 years of age, "two-phase" course, ■ features diagnosis and treatment in children.
10. Complications of acute appendicitis before and after surgery. Appendicular infiltrate, abscess. Clinic, diagnostics, treatment tactics.
11. Peritonitis in children. Classification of peritonitis in children. Appendicular, cryptogenic, ascites peritonitis. Clinic appendicular, diplococcal, and ascites peritonitis. Tactics of preoperative preparation and treatment depending from the stage of peritonitis.
12. Acquired intestinal obstruction in children. Classification, clinic of intestinal obstruction in children. Diagnostics, differential diagnostics, value
X-ray and ultrasound studies.
13. Intestinal intestinal invagination in children. Definition, classification, clinic of intestinal invagination.
General physician tactics
surgeon. Diagnosis, differential diagnosis, tactics of conservative and surgical treatment.
14. The syndrome of “acute abdomen and congenital intestinal obstruction” in newborns and infants.
Etiology, pathogenesis, classification, clinic, diagnosis, differential diagnosis, tactics of a family doctor (FMC). The principles of treatment in newborns with congenital intestinal obstruction and peritonitis.
15. The syndrome of "vomiting of milk" in infants. Congenital pyloric stenosis. Etiology, pathogenesis, classification, clinic, diagnostics, differential diagnostics, doctor’s tactics (FMC, FGP).
16. Malformations of the anterior abdominal wall (gastroschisis, embryonic umbilical hernia). Pathologies of vitelline and urinary duct, complete and incomplete navel fistula.
Etiopathogenesis Classification, clinic, complications, diagnosis.
17. Congenital malformations of the anorectal region. Etiopathogenesis. Classification, clinic, complications, diagnosis, differential diagnosis, treatment. Tactics of a neonatologist, doctors at the FMC.
18. Hirschsprung's disease, megacolon, large intestine dysfunction, chronic constipation in children.
19. Rectal prolapse, fissures, polyps, hemorrhoids, chronic paraproctitis. Etiopathogenesis, clinic, diagnostics, differential diagnostics, tactics of the doctor of FMC, treatment principles. Algorithm for examination and treatment.
20. Malformations of the esophagus. Congenital atresia of the esophagus, tracheoesophageal fistula, narrowing of the esophagus, chalazia,
achalasia of the esophagus.
21. Bums of the esophagus in children. Etiopathogenesis, classification, clinic, diagnosis, differential diagnosis, immediate and distant complications. Emergency physician tactics at prehospital and
hospital stages.
22. Cicatricial narrowing of the esophagus. Clinic, diagnostics. The principles of treatment. Rehabilitation and medical examination.
23. Syndrome of portal hypertension, definition, causes, etiopathogenesis. Clinic of suprahepatic, hepatic and extrahepatic form of blockade of portal hypertension. Complications, diagnostics. Modern research methods. Tactics of conservative and surgical treatment.
24. Anomalies in the development and pathology of the spleen, pancreas in children. Acute cholecystitis, acute pancreatitis, classification, clinic, differential diagnosis, tactics in treatment and examination.
25. Echinococcosis of internal organs, clinic, complications, diagnosis, differential diagnosis, tactics in examination and treatment. The value of ultrasound, MRI, CT.
26. ONE syndrome caused by malformations of the upper respiratory tract (cholera atresia, Pierre-Robin syndrome, wounded, macroglossia, basal hernia) and pathology of the chest cavity (congenital lobar emphysema, pulmonary cyst, pulmonary

atelectasis, pulmonary agenesis and aplasia, pneumo, hydro, pyothorax, tumors mediastinum, strangulated diaphragmatic hernia) in newborns. Etiology, pathogenesis, classification, clinic, diagnostics, differential diagnostics, doctor's tactics of FMC, FGP.
27. Panaritium. Classification, felon. Phlegmon, abscessed furunculosis, lymphadenitis, erysipelas in children, clinic, diagnosis, treatment.
28. Paraproctites. Etiopathogenesis, clinic, diagnosis, complications. Treatment.
29. Acute hematogenous osteomyelitis, epiphyseal osteomyelitis. Definition Classification, Clinic Adynamic, septic-pemic and local focal forms of acute hematogenous osteomyelitis in children. Diagnostics, differential diagnostics. Tactics of treatment, indications for osteoperforation. Tactics of treating children with epiphyseal
osteomyelitis. Clinical examination and rehabilitation.
30. Classification of chronic hematogenous and primary chronic osteomyelitis in children. Complications, clinic, tactics in treatment, clinical examination and rehabilitation.
31. Hydronephrosis, definition. Causes. Clinical signs depending on the degree of hydronephrotic transformations. Diagnostics. Indications for surgical treatment. Modem methods of pathology correction. Complications Forecast. Clinical examination, rehabilitation.
32. Obstmctive pyelonephritis, paranephritis, pyonephrosis, cystitis in children. Etiopathogenesis, clinic, diagnosis, treatment. Clinical examination, rehabilitation.
UP: 31050150_13_56LD.plx p. 11
33. Malformations of the upper urinary tract. Classification of abnormalities in the development of the kidneys, urinary tract. Clinical manifestations depending on the anomaly. Diagnostic Methods
34. Hypospadias, epispadias, bladder exstrophy. Clinic, diagnosis, treatment.
35. Cryptorchidism, definition, classification, clinic, diagnosis, treatment. Complications
36. Phimosis, paraphimosis. Clinic, diagnosis, treatment.
37. Features of bone fractures in children. Children's injuries. Prevention of childhood injuries.
38. Damage to the bones of the upper limbs, frequent localization. Typical fractures. Clinical signs, diagnosis, first aid in hospital. The principles of treatment.
39. Fractures of bones of the lower extremities in children. Classification. The principles of treatment depending on the age of the child.
40. Craniocerebral trauma in children. Classification. Clinical features depending on age. Diagnostics.
Indications for CT, NMR. Treatment, complications. Forecast, rehabilitation.
41. Spinal fractures in children. Damage mechanism, frequent localization. Etiology, classification.
Compression fracture of the spine.
42. Pelvic fractures in children. Classification: Clinic depending on the type of fracture. Diagnosis, treatment.
43. Birth injuries in children. The concept of birth injury. The frequency and causes of birth injury to newborns. Predisposing factors. Pathogenesis. Types of birth injuries. Clinical signs, diagnosis. Treatment.
44. Cephalohematoma, fracture of the clavicle, humerus and femur, damage to the spine and spinal cord.
45. Closed injuries of internal organs. The mechanism of education. Localization. Differential diagnosis.
Dates and tactics of treatment. Complications
46. Congenital dislocation of the hip. Classification. Etiopathogenesis. Early clinical symptoms. Clinic, diagnostics
(X-ray and ultrasound) in various age groups. Complications Conservative treatment.
47. Congenital clubfoot. Classification, diagnostics. Treatment, principles, methods: plastering, superelastic designs, soft dressings; Indications for surgical treatment.
48. Torticollis. Causes, symptoms, clinical forms. Differential diagnosis. Dates and principles conservative and surgical treatment. Clinical examination, rehabilitation.
49. Syndactyly, polydactyly, congenital obliquity, synestosis. Clinic, diagnosis, treatment.
50. Features of intensive care and resuscitation of children. Traumatic shock in children. Definition etiopathogenesis. Classification. Clinic, diagnostics. Providing prehospital care.

5.2. Themes of term papers (projects)

term papers and projects are not provided

5.3. Valuation Fund

Test (Appendix No. 1)
Situational tasks (Appendix No. 2) Report (Appendix No. 3)
Abstract (Appendix No. 4)
Examination (Appendix No. 5) Presentation (Appendix No. 6)
Practical skills (Appendix No. 7)
Medical history (Appendix No. 8)

5.4. The list of types of assessment tools

Test
Report
abstract
Test
Presentation Practical skills

Medical history
Assessment scales by type of assessment tools in Appendix No. —. Grading scales

6. Educational-methodical and information support of the discipline (module)			
6.1. Recommended reading			
6.1.1. Main literature			
Ll.l	George W. Holcomb III, J. Patrick Murphy, and Daniel J. Ostlie	Ashcraft's Pediatric Surgery	Publication date: 2020 (6th edition) Page count: 1,496 pages
L1.2	Arnold G. Coran, N. Scott Adzick, Thomas M. Krummel, Jean- Martin Laberge, and Robert Shamberger	Pediatric Surgery	Publication date: 2012 (7th edition) Page count: 3,056 pages
L1.3	Stephanie B. Abbuhl	Pediatric Surgery Handbook	Publication date: 2017 (2nd edition) Page count: 576 pages
LI.4	Keith W. Ashcraft, J. Patrick Murphy, and Shawn D. St. Peter	Principles and Practice of Pediatric Surgery	Publication date: 2020 (2nd edition) Page count: 1,216 pages
LI.5	Lewis Spitz and Arnold Coran	Operative Pediatric Surgery	Publication date: 2013 (7th edition) Page count: 1,536 pages
LI.6	Richard A. Polin and Mark R. Stephens	Pediatric Surgery Secrets	Publication date: 2020 (2nd edition) Page count: 864 pages

7. MATERIAL AND TECHNICAL SUPPORT OF DISCIPLINE (MODULE)	
7.1	Theoretical and practical preparation of the study of the program for pediatric surgery is carried out on the basis of the surgical departments of the Center for Nuclear Medicine and Children where there are the
7.2	Department of Surgery for Congenital Malformations,
7.3	Department of Neurosurgery,
7.4	surgical infections department
7.5	Department of Urology,
7.6	Department of Oral and Maxillofacial Surgery
7.7	Department of Neonatal Surgery

7.8	neonatal intensive care unit,
7.9	Department of General Resuscitation.

8. METHODICAL INSTRUCTIONS FOR TRAINERS IN DEVELOPMENT OF THE DISCIPLINE (MODULE)

Recommendations for the organization of student independent work

1. Tips for planning and organizing the time required to study the discipline.

It is recommended as follows to organize the time required to study the discipline:

Studying the lecture notes on the same day, after the lecture - 10-15 minutes.

Studying the lecture notes the day before the next lecture - 10-15 minutes.

The study of theoretical material in the textbook and compendium - 1 hour per week.

Preparation for a practical lesson - 2 hours.

Just a week - 3 hours 30 minutes.

2. Description of the student's sequence of actions

To understand the material and its qualitative assimilation, the following sequence of actions is recommended: After listening to a lecture and graduating from training, in preparation for the next day's classes, you must first view and ponder the text of the lecture that was heard today (10-15 minutes).

In preparation for the next day's lecture, you need to look at the text of the previous lecture, think about which one be the topic of the next lecture (10-15 minutes).

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

In preparation for the next day's practical exercises, you must first read the basic concepts and approaches on the topic of homework. When performing an exercise or task, you must first understand what is required in the task, which theoretical material needs to be used, outline a plan for solving the problem.

3. Recommendations on the use of materials of the educational complex.

It is recommended to use the guidelines for the course (Appendix No. _____), the text of the lectures of the teacher.

4. Recommendations for working with literature.

The theoretical material of the course becomes more understandable when, in addition to listening to a lecture and studying compendium, are studied and books. It is easier to master the course, adhering to one textbook and abstract. Recommended except

"Memorizing" the material, to achieve a state of understanding of the topic of discipline. To this end, it is recommended after studying the next paragraph, perform some simple exercises on this topic. Also very useful

mentally ask yourself the following questions (and try to answer them): what is this paragraph about ?, what are the new concepts

introduced, what is their meaning ?, what will it give in practice ?.

5. Tips for preparing for midterm and intermediate controls.

In addition to studying lecture notes, you must use the textbook. In addition to "memorizing" the material,

It is very important to achieve a state of understanding of the subjects studied. For this purpose, it is recommended after study.

of the next paragraph to perform several exercises on this topic. It's also very helpful to mentally ask yourself the following questions (and try to answer them): what is this paragraph about ?, what new concepts are introduced, what is their meaning ?, what will this give in practice ?. In preparation for the intermediate control, you need to study the theory: the definitions of all

concepts and approaches to evaluating to a state of understanding the material and independently solve several typical problems

from each topic. When solving problems, it is always necessary to be able to qualitatively interpret the outcome of the solution.

6. Guidelines for organizing homework. When doing homework, you must

first read the basic concepts and approaches on the topic of the assignment. When performing an exercise or task, you must first understand what is required in the task, what theoretical material should be used, outline a plan for solving the problem, and then

proceed with calculations and make a qualitative conclusion.

Preparation of the report for the lesson

The main stages of the preparation of the report:

topic selection;

teacher consultation;

preparation of a report outline;

work with sources and literature, collecting material;

writing the text of the report;

preparation of the manuscript and providing it to the teacher before the start of the report, which determines the student's readiness for

performance;

presentation, answers to questions.

The subject of the report is proposed by the teacher at the Federal Educational Center.

Recommendations for writing an abstract

The topic of the abstract is selected in agreement with the teacher. It is important that in the abstract: firstly, they were covered as scientific and social aspects of the problem; and secondly, both general theoretical propositions and concrete examples.

The abstract should be based on the study of several additional sources to the main literature, how as a rule, these are special monographs or articles. It is recommended to use also as additional literature popular science magazines: "Children's Surgery", "Bulletin of KRSU", "Health of Kyrgyzstan", "Bulletin of the KSMA" and others, as well as newspapers specializing in medical topics.

The essay plan must be copyrighted. It shows the author’s approach, his opinion, analysis of the problem.

All facts cited in the abstract and borrowed considerations should be accompanied by links to the source information.

It is unacceptable to simply compose an abstract from pieces of borrowed text. All quotes must be submitted in quotation marks indicating in parentheses the source and page. The absence of quotation marks and references means plagiarism and, in accordance with

established scientific ethics is considered a gross violation of copyright.

The abstract is drawn up in the form of text on sheets of a standard format (A-4). Starts with a title page in which the name of the university, academic discipline, topic of the essay, surname and initials of the student, academic number

groups, year and geographical location of the university. This is followed by a table of contents indicating the pages of the sections. Himself

it is advisable to subdivide the text of the abstract into sections: chapters, sub-chapters, and title them. Use in abstract of quantitative data and illustrations (graphs, tables, charts, figures).

The abstract is completed by the'sections "Conclusion" and "List of references". In conclusion, the main conclusions clearly articulated in thesis form and usually numbered.

References should be compiled in full compliance with the current standard (rules), including special punctuation marks. To do this, just use any book published as an example.

large scientific publishing houses: "GEOTAR-Media", "Progress", "World", "Publishing house of Moscow State University", etc. Or cited

above list of references. In general, the most frequently used bibliographic procedure in our country The links are as follows:

Author I.O. Title of the book. Place of publication: Publisher, Year of publication. The total number of pages in the book.

Author I.O. Title of the article // Name of the journal. The year of publishing. Tom_____ . No. __ . Pages __ to ___ .

Author I.O. Title of the article / Title of the collection. Place of publication: Publisher, Year of publication. Pages to