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

IEO HE Kyrgyz-Russian Slavic University
named after the First President of the Russian Federation B.N. Yeltsin

ENDORSED BY
Director
Abilova S.S.
04.11.2026 y.

Standards of treatment

Course Outline (Module)

Assigned to	**Therapy No. 2 (General medicine)**
Academic Curriculum	310501_26_1 LD.plx Specialty 560001 - KR General Medicine (for foreign students).
Qualification	**Physician (General Medicine)**
Mode of Study	**Intramural**
Total Credit Value	**2 credit points**
Course Hours	60
including:	
in-class learning	32
individual work	27,7

Scope of Testing Semesters:
credits 10

Distribution of course hours by semester

Semester Academic Year	10 (5.2)		Total	
Weeks	16			
Type of Traning	AC	CO	AC	CO
Lectures	8	8	8	8
Practical Session	24	24	24	24
Contact work during the theoretical training period	0,3	0,3	0,3	0,3
Including interactive session	4	4	4	4
Total in-class session	32	32	32	32
Face-to-face learning	32,3	32,3	32,3	32,3
Individual work	27,7	27,7	27,7	27,7
Total	60	60	60	60

The course outline developed by

MD, CMedSc., Associate Professor K.A. Dzhailobaeva, MD, CMedSc., Associate Professor Z.T. Radzhapova, Associate Professor S.M. Shahnabieva

Reviewers::

MD, CMedSc., Associate Professor Ibragimova T.M., MD, CMedSc., Associate Professor Suranova G.Zh.

Agreed:

Course Outline of the discipline:
Standards of treatment

Developed in accordance with the Federal State Educational Standard 3++
Federal State Educational Standard of Higher Education - specialty on 31.05.01
General Medicine (The Ministry of Education and Science of the Russian Federation order of 21.09.2021 № 1578/1).

in accordance with Academic Curriculum: Specialty 560001 - KR General Medicine (for foreign students)
confirmed by KRSU Board of Academics in "26" 06.2026 record № 11.
The Course Outline endorsed by Department of Therapy (General Medicine) Meeting

Record of 26.08.2026 y.№1
Valid for: 2026-2031 academic year
The Head of Department: MD, DMedSc., Professor I.S. Sabirov.

CHANGE REGISTRATION SHEET
to the working program of the discipline (module)

Standards of treatment

Standards of treatment *name of the discipline*

Item No.	Reason for making changes	Section/Clause	Contents of the change
1.	Relocation of a department of therapy	7	Department of Therapy has been relocated from Building 9 (L.Tolstoy campus) to the NCETM (Polyclinic, 4th floor).
2.	New literature was introduced and new guidelines were added	6.1, 6.2	New guidelines for 2025, 2026 y.
3.			
4.			
5.			

1. COURSE OUTLINE OBJECTIVES	
1.1	Development of standards of diagnostics and treatment of therapeutic diseases and possession of the general practitioner of skills of rendering the out-patient and stationary therapeutic help
1.2	Possession of professional inspection of patients and ability is correct to use necessary tactics of diagnostic search
1.3	Possession of knowledge of the standardized methods of treatment and development of skills of rendering emergency aid
1.4	Improving the prognosis of diseases from the standpoint of evidence-based medicine, improving the skills of practical work with sources of medical information, in particular standards and recommendations.

2. PLACE OF THE COURSE IN THE EDUCATIONAL PROGRAM	
Educational Program Units	B1.V.DB.11
2.1	**Students' Preliminary Training Requirements:**
2.1.1	Normal and pathological anatomy
2.1.2	Normal and pathological physiology
2.1.3	Propaedeutics of internal diseases
2.1.4	Faculty and hospital therapy
2.1.5	Clinical Pharmacology
2.1.6	Psychology and pedagogy
2.2	**Course Units and Practical Sessions imposing the prior Proficiency**:
2.2.1	Clinical practice "Physician Assistant"
2.2.2	Clinical practice "Outpatient Physician Assistant"
2.2.3	Propaedeutics of internal diseases
2.2.4	Faculty therapy
2.2.5	Hospital therapy
2.2.6	Outpatient therapy
2.2.7	Clinical Pharmacology
2.2.8	Psychology and pedagogy

3. STUDENTS' COMPETENCIES RESULTING FROM THE COURCE UNIT (MODULE)	
PC-8: the ability to determine the tactics of managing patients with various nosological forms	
Knowledge:	
Level 1	classification and main characteristics of medicines, pharmacodynamics and pharmacokinetics, indications and contraindications for the use of medicines;
Level 2	side effects of medicines
Level 3	general principles of prescribing and compounding prescriptions for medicines;
Skills:	
Level 1	to substantiate pharmacotherapy in a specific patient with major pathological syndromes and urgent conditions;
Level 2	determine the methods of administration, regimen, and dose of medications;
Level 3	evaluate the effectiveness and safety of the treatment;
Expertise:	
Level 1	skills in the use of medicines in the treatment, rehabilitation and prevention of various diseases and pathological conditions;
Level 2	proper management of medical records;
Level 3	assessments of the state of public health; methods of general clinical examination

Final Students' Competences

Knowledge:
3.1.1 Features of collecting complaints and medical history in therapeutic patients
3.1.2 The method of therapeutic examination

3.1.3	Main clinical symptoms and syndromes of common therapeutic diseases;
3.1.4	Additional diagnostic methods for common therapeutic diseases;
3.1.5	Risk factors for therapeutic diseases in the adult population
3.1.6	Etiopathogenesis, clinical picture and diagnosis of common therapeutic diseases;
3.1.7	Indications and contraindications for additional research methods.
3.1.8	Additional research methods for diseases of internal organs
3.1.9	Symptoms, syndromes of diseases, main nosological forms in accordance with ICD
3.1.10	Algorithm of topical, clinical diagnoses
3.1.11	Management of therapeutic patients with underlying diseases
3.1.12	Features of the treatment of major therapeutic diseases
3.1.13	Treatment, prevention and rehabilitation of therapeutic patients, assistance in emergency situations
3.1.14	Types of emergency care in therapy
3.1.15	Algorithm for emergency treatment in therapy
3.1.16	Features of emergency treatment in therapy
3.1.17	Types of prevention of major therapeutic diseases
3.1.18	Methods and methods of prevention of major therapeutic diseases
3.1.19	Complexes of preventive measures for major therapeutic diseases
3.2	**Skills:**
3.2.1	Collect complaints and medical history from therapeutic patients
3.2.2	To carry out a differential diagnostic search for various diseases of internal organs, identifying common and distinctive features of the syndrome
3.2.3	Prescribe differentiated therapy, taking into account the characteristics and course of the disease
3.2.4	To carry out dynamic monitoring of the effectiveness of therapy
3.2.5	Identify indications and contraindications for the selection of additional research methods
3.2.6	Make a topical diagnosis
3.2.7	Conduct a comprehensive medical examination to confirm the diagnosis
3.2.8	Identify symptoms and syndromes of major diseases of internal organs
3.2.9	Identify the nosological form of the main therapeutic diseases
3.2.10	Substantiate the main diseases of internal organs
3.2.11	Determine the principles of treatment of patients with underlying diseases of internal organs
3.2.12	Select the types and methods of treatment for patients with underlying therapeutic diseases and for emergency conditions
3.2.13	Identify methods of prevention and rehabilitation of patients with therapeutic diseases
3.2.14	Determine the tactics of emergency care in therapy
3.2.15	Use the algorithm of emergency measures in therapy
3.2.16	Determine the treatment of patients with urgent conditions in therapy
3.2.17	Identify risk factors for major therapeutic diseases
3.2.18	Determine the necessary preventive measures for major therapeutic diseases

3.2.19	To draw up an individual plan for the comprehensive prevention of major therapeutic diseases for patients
3.3	**Expertise:**
3.3.1	Skills in collecting patient complaints and medical history data
3.3.2	Medical ethics and deontology
3.3.3	The method of therapeutic examination
3.3.4	Skills in prescribing the necessary laboratory and instrumental examination methods for the diagnosis of common therapeutic diseases
3.3.5	Skills of topical diagnosis
3.3.6	Skills in interpreting basic laboratory and X-ray examination methods
3.3.7	Skills of registration of medical history of the therapeutic patient
3.3.8	Skills of substantiating a preliminary diagnosis
3.3.9	Skills in the formation of syndromes and nosological forms in accordance with ICD
3.3.10	Interpretation of the results of additional examination methods for underlying diseases
3.3.11	Skills of differential diagnosis of major diseases
3.3.12	Principles of treatment of major diseases of internal organs and emergency conditions
3.3.13	The algorithm of treatment, prevention and rehabilitation of therapeutic patients, providing assistance in emergency situations
3.3.14	Skills of providing emergency care to patients with urgent pathology in different age groups
3.3.15	Principles of emergency care
3.3.16	The algorithm of emergency care in therapy in different age groups
3.3.17	Skills of providing emergency care to patients with urgent pathology
3.3.18	Ways to identify risk factors for major diseases of internal organs
3.3.19	Skills in determining preventive measures for major diseases of internal organs
3.3.20	Skills of stage-by-stage preventive measures for major therapeutic diseases

4. COURSE (MODULE) STRUCTURE AND CONTENT								
Class Code	**Subject Name /Type of Class/**	**Semester / Academic**	**Hours**	**Competencies**	**Literature**	**Interactive**	**Notes**	**Hours**
	Section 1. Chronic diseases of cardiovascular, respiratory, musculoskeletal systems							
1.1	Introduction to the subject "Standards of diagnosis and treatment". Rheumatoid arthritis, diagnostic standards / Lec /	12	2	PC-8	L1.1. E1 E6			
1.2	COPD: modern standards of diagnostics and treatment. Definition COPD, etiology, pathogenesis, classification, clinic, diagnostics. Definition of degree of COPD, questionnaires of CAT, mMRCA, Fagerstroma. Assessment of risk of aggravations. An algorithm of maintaining sick COPD depending on degree. / Pr/	12	2	PC-8	L1.1 L2.1 E1	2		
1.3	Pneumonia: modern standards of diagnostics and treatment. Definition of pneumonia, etiology, pathogenesis, classification, clinic, diagnostics. The choice of the place of treatment on CRB-65 scale, a further algorithm of maintaining patients with pneumonia. / Pr/	12	2	PC-8	L1.1. L1.4 E1 E15			
1.4	Questionnaires of CAT, mMRCA, Fagerstrom. Assessment of risk of	12	2	PC-8	E1 E17			
1.5	The choice of the place of treatment on CRB, a further algorithm of maintaining	12	2	PC-8	E1 E15 E16 E17			
1.6	Acute coronary syndrome (ACS): modern standards of diagnostics and treatment. Definition of Construction Department, etiology, pathogenesis, classification, clinic, diagnostics. Predictive scales of GRACE, CRUSADE. An algorithm of maintaining sick Construction Departments with an elevation and without ST segment elevation. Post-hospital maintaining the patients who have transferred myocardial infarction. Modification of the risk factors	12	2	PC-8	L1.1., L 1.2., L 1.3. E3 E4 E5 E18 E19			
1.7	Chronic heart failure (CHF): modern standards of diagnostics and treatment. Definition CHF, etiology, pathogenesis, classification, clinic, diagnostics. Features of systolic and diastolic heart failure. Algorithm of diagnostics and treatment of CHF. /Lek /	12	2	PC-8	L1.1., L 1.2., L 1.3. E3 E4 E5 E18 E19			

1.8	Acute coronary syndrome (ACS): modern standards of diagnostics and treatment. Definition of construction department, etiology, pathogenesis, classification, clinic, diagnostics. Predictive scales of GRACE, CRUSADE. An algorithm of maintaining sick Construction departments with an elevation and without ST segment elevation. Post-hospital maintaining the patients who have transferred myocardial infarction. Modification of the risk factors (RF), RF target levels. / Pr/	12	2	PC-8	L1.1., L 1.2., L 1.3. E3 E4 E18 E19			
1.9	Arterial Hypertension (AH): modern standards of diagnostics and treatment. The questionnaire of World Health Organization for an exception of symptomatic AH. Definition hypertension, an etiology, pathogenesis, classification, stratification of risk of complications at sick hypertension, clinic, diagnostics. Target arterial blood pressure levels. Algorithms of maintaining the patient with hypertension depending on the accompanying pathology. Hypertensive crises. arterial blood pressure at pregnant women. / Pr/	12	2	PC-8	L1.1., L 1.2., L 1.3. E2 E4 E5 E18 E19			
1.10	Congestive heart failure (CHF): modern standards of diagnostics and treatment. Definition CHF, etiology, pathogenesis, classification, clinic, diagnostics. Features of systolic and diastolic heart failure. Main groups of medicines. Algorithm of diagnostics and treatment of CHF. A self-checking role under the authority of sick CHF. Algorithm of treatment of acute decompensating of CHF. Invasive methods of treatment of CHF. Assessment of scales of CHA2DS2VASc, HAS-BLED when maintaining patients with vibrating arrhythmia. New oral anticoagulants in treatment of ciliary arrhythmia. / Pr/	12	2	PC-8	Э5 Э6 Э18 Э19			
1.11	Post-hospital maintaining the patients who have transferred myocardial infarction. Modification of the risk factors (RF), RF target levels. / Iw/	12	2	PC-8	E18 E19			
1.12	Hypertensive crises. / Iw/	12	2	PC-8	E2 E18 E19			
1.13	Scales of CHA2DS2VASc, HAS-BLED at patients with ciliary arrhythmia. New oral anticoagulants in treatment of	12	2	PC-8	E7			
1.14	Main groups of medicines at treatment of CHF. / Iw/	12	2	PC-8	E18 E19			

1.15	Algorithm of treatment of acute decompensating of CHF. / Iw/	12	2	PC-8	E18 E19			
1.16	Self-checking role under the authority of patients with CHF. Invasive methods of treatment of CHF. / Iw/	12	2	PC-8	L 1.3.			
1.17	Systemic lupus erythematosus: modern standards of diagnostics and treatment. Definition, etiology, pathogenesis, classification, clinic, diagnostics, treatment /Lek /	12	2	PC-8	E8 E20			
1.18	Acute rheumatic fever. Modern standards of diagnostics and treatment. Definition, etiology, pathogenesis, classification, clinic, diagnostics, treatment. Year-round prevention. / Pr/	12	2	PC-8	L1.1., L 1.2., L 1.3. E8 E9 E20			
1.19	Rheumatoid arthritis: modern standards of diagnostics and treatment. Definition, etiology, pathogenesis, classification, clinic, diagnostics, treatment. Extra articulate defeats at rheumatoid arthritis. Rules of selection of basic therapy. Systemic lupus erythematosus: modern standards of diagnostics and treatment. Definition, etiology, pathogenesis, classification, clinic, diagnostics, treatment. Assessment of activity of hard currency. The Genetically Engineered Biological Medicines (GEBM) in treatment of hard currency. / Pr/	12	2	PC-8	L1.1., L 1.2., L 1.3. E8 E9 E20			
1.20	Extra articulate defeats at rheumatoid arthritis. Clinical options of a current of rheumatoid arthritis (Steel's Syndrome, Felty's	12	2	PC-8	L1.5 E9			
1.21	Rules of selection of basic therapy at rheumatoid arthritis. / Iw/	12	2	PC-8	E8 E20			
1.22	Activity assessment of systemic lupus erythematosus. / Iw/	12	2	PC-8	E8 E20			
1.23	GEBP in treatment of systemic lupus erythematosus. / Iw/	12	2	PC-8	E20			
	Section 2. Chronic diseases of gastrointestinal, endocrine, secretory system, system of blood							
2.1	Chronic viral hepatitis B, C: modern standards of diagnostics and treatment. Definition of chronic hepatitis, etiology, pathogenesis, classification, clinic, diagnostics. Algorithm of maintaining patients with chronic hepatitis /Lek /	12	2	PC-8	L1.1., L 1.2., L 1.3. E10			

2.2	Chronic viral hepatitis B, C: modern standards of diagnostics and treatment. Definition of chronic hepatitis, etiology, pathogenesis, classification, clinic, diagnostics. Algorithm of maintaining patients with chronic hepatitis. New medicines in treatment of chronic hepatitis B, S. / Iw/	12	2	PC-8	L1.1., L 1.2., L 1.3. E10			
2.3	Algorithm of maintaining patients with chronic hepatitis. New medicines in treatment of chronic hepatitis B, S. / Iw/	12	2	PC-8	L1.1., L 1.2., L 1.3. E6			
2.4	Acute and chronic complications of hepatitis: cirrhosis of the liver, standards of diagnosis and treatment/ Iw/	12	2	PC-8	E10			
2.5	Chronic kidney diseases (CDK): modern standards of diagnostics and treatment. Definition CDK, etiology, pathogenesis, classification, clinic, diagnostics. Protecting a kidney therapy of CDK. Treatment of a terminal stage of CDK. / Pr/	12	2	PC-8	L1.1., L 1.2., L 1.3. E11 E12			
2.6	Protecting a kidney therapy at CDK. Treatment of a terminal stage of CDK. / Iw/	12	2	PC-8	E11 E12			
2.7	Supportive hemodialysis treatment for CKD / Iw/	12	1,7	PC-8	L 1.3.			
2.8	Diabetes (D): modern standards of diagnostics and treatment. Definition D, etiology, pathogenesis, classification, clinic, diagnostics. Tactics of maintaining sick D. Target levels of sugar of blood, glycol hemoglobin and other RF. / Pr/	12	2	PC-8	L1.2 L1.3			
2.9	Tactics of maintaining sick diabetes. Target levels of sugar of blood, glycol hemoglobin and other RF. / Iw/	12	2	PC-8	E6			
2.10	Complications of diabetes mellitus: hypoglycemic comas, hyperglycemic comas, chronic cardiovascular diseases, kidney, eye, and nerve damage. / Iw/	12	2	PC-8	L1.1., L 1.2., L 1.3.			

2.11	Determination of fasting blood glucose, 2 hours after eating, conducting an oral glucose tolerance test /CW/	12	0,3	PC-8	L1.1., L 1.2., L 1.3.			
2.12	Anemia: modern standards of diagnosis and treatment. Definition of anemia, etiology, pathogenesis, classification, clinic, diagnosis, treatment. Anemia in pregnant women. Final test./ Pr/	12	2	PC-8	L1.1., L 1.2., L 1.5. E13 E14			
2.13	Anemia modern standards of diagnostics and treatment / Iw/	12	2	PC-8	E13 E14			
2.14	Aplastic and hemolytic anemia: features of diagnosis and treatment / Iw/	12	2	PC-8	E13			

5. ASSESSMENT FUND

5.1. Advancement Questions and Assignments

Treat the certification tests used on the 6th course:
1. current control of knowledge:
- offset on discipline for the 12th semester;
- assessment of results of implementation of papers;
2. final assessment:
- cross-disciplinary state exam in the specialty.

The current certification is carried out by a discussion method during the seminar of questions of standards of treatment. In the course of analysis of a subject each student has an opportunity to be certified.
Total control is exercised on the concluding session at the end of the XII semester of preparation including total control of theoretical knowledge, assessment of knowledge and practical abilities of students of the "Standards of Treatment" program.
"To KNOW" questions for check of level of training:
5 options on 100 questions are carried out in the form of blanks testing: see the Appendix No. 1. Tests for carrying out intermediate certification of students of General Medicine.
Tasks for check of level of training "to be ABLE and OWN":
On the supervised patient it is necessary:
1. To collect complaints, the anamnesis at the patient with a disease of internals.
2. To investigate and estimate a condition of internals.
3. To reveal symptoms and syndromes, to establish the topic diagnosis, to make the preliminary clinical diagnosis.
4. To interpret results of clinical and additional methods of a research.
5. To make the clinical diagnosis at the main diseases of internals with reflection of an etiology, the topic diagnosis, a current, character and extent of the broken functions.
6. To provide emergency medical service at identification at patients of urgent pathology.
7. To perform prevention of the main therapeutic diseases.

The list of questions for total control (offset).
1. Subject "Standards of Treatment". Substantiality levels. Types of clinical trials. Application of evidential medicine in clinical practice.
2. Standards of diagnostics and treatment of chronic obstructive pulmonary disease.
3. Standards of diagnostics and treatment of pneumonia (extra sick-lists).
4. Standards of diagnostics and treatment of construction department.
5. Standards of diagnostics and treatment of arterial hypertension. Hypertensive crises.
6. Standards of diagnostics and treatment of vibrating arrhythmia.
7. Standards of diagnostics and treatment of congestive heart failure.
8. Standards of diagnostics and treatment of diabetes.
9. Standards of diagnostics and treatment of rheumatoid arthritis.
10. Standards of diagnostics and treatment of a systemic lupus erythematosus.
11. Standards of diagnostics and treatment of chronic diseases of kidneys.
12. Standards of diagnostics and treatment of chronic viral hepatitis.
13. Standards of diagnostics and treatment of anemia.

Along with obligatory visit of a practical training, active participation in a maintaining patients and analysis of patients, performance of independent work, the following questions are included:
2. A situational task on occupation with the answer to 3 questions:
1) the diagnosis according to classification; 2) standards of inspection with the expected results; 3) standards treatment of the patient.
3. Interpretation of the analysis or data of tool inspection has to contain 2 answers: 1) as this change, for example, a proteinuria is called; 2) of what disease this analysis or at what disease can be is characteristic.
4. Interpretation of the ECG means answers according to the protocol:
1) The rhythm is correct, wrong
2) The rhythm is sinus, not sinus
3) Provision of axis
4) Heart rate
5) The characteristic of intervals and teeth of a ventricular complex in chest assignments.
Conclusion.
5. An extract of recipes with the indication of a dose and signature.
6. Hearing, discussion and assessment of papers and the multimedia presentations, according to the plan of independent work (appendix No. 3).
7. At the end of a course total offset according to the current rating is exposed.

5.2. Course Papers Themes

are not provided.

5.3. Assessment Fund

Tests (Appendix No. 1)
Situational tasks (Appendix No. 2)
Independent work of the student (Appendix No. 3)
Paper (Appendix No. 4)
Practical skills (Appendix No. 5)
Scale of estimation (Appendix No. 6)

5.4. List of Assessment Tools

Test
Situational tasks
Paper
Examination
Presentation
Practical skills
Estimation scales by types of estimated means in the Appendix No. 6

6. COURSE (MODULE) METHODOLOGICAL AND INFORMATIONAL SUPPORT

6.1 Recommended Reading

6.1.1 Required Reading List

	Authors, Compliers	Title	Book publisher, Year
L1.1.	Sabirov I.S., Djailobaeva K.A., Mirbakieva D.M., Radjapova Z.T. et al.	Lectures	KRSU, 2026y.
L1.2.	Maxine A. Papadakis; Michael W. Rabow; Kenneth R. McQuaid; Monica Gandhi	Current Medical Diagnosis & Treatment, 2025, 64th Edition	McGraw-Hill Education, 2025y.
L1.3.	Dan Longo, Anthony S. Fauci, Dennis L. Kasper, et al.	Harrison’s Principles of Internal Medicine, Twenty-Second Edition (Vol. 1 & Vol. 2).	McGraw-Hill Professional, 2025y.
L1.4.	Robbins, Cotran & Kumar	Pathologic Basis of Disease, 11th Edition	Elsevier Health Sciences, 2025y.
L1.5.	Ian B. Wilkinson, Tim Raine, et al.	Oxford Handbook of Clinical Medicine, 11th Edition	Oxford University Press,2024y.

6.1.2 Advanced Reading

	Authors, Compliers	Title	Book publisher, Year
L2.1	Shahnabieva S.M., Mamasaidov Zh.A., Sabirov I.S.	Practical handbook: clinical cases of policlinic therapy	Bishkek: KRSU Publishing House 2023y.

6.2 Online Resources

E1	GLOBAL STRATEGY FOR PREVENTION, DIAGNOSIS AND MANAGEMENT OF COPD: 2026 Report	https://goldcopd.org/2025-gold-report/
E2	Hypertension Guideline 2026	https://www.jwatch.org/na59168/2025/09/25/comprehens
E3	2026 ESC Guidelines for the management of chronic coronary syndromes	https://doi.org/10.1093/eurheartj/ehae177
E4	2026 Focused Update of the 2019 ESC/EAS Guidelines for the management of dyslipidaemias. Eur Heart J. 2025;ehaf190.	doi:10.1093/eurheartj/ehaf190
E5	2026 ACC/AHA/ACEP/NAEMSP/SCAI Guideline for the Management of Patients With Acute Coronary Syndromes:	https://www.ahajournals.org/doi/10.1161/CIR.000000000
E6	Electronic library of the KRSU	https://lib.krsu.kg/
E7	2026 ESC Guidelines for the management of atrial fibrillation ESC Clinical Practice Guidelines	https://www.escardio.org/Guidelines/Clinical-Practice-
E8	2026 American college of rheumatology	https://acrjournals.onlinelibrary.wiley.com/doi/epdf/10.100
E9	2026 Osteoarthritis Guideline	https://rheumatology.org/osteoarthritis-guideline
E10	American Gastroenterology Association	www.gastro.org
E11	Kidney Disease Improving Global Outcomes	www.kdigo.org
E12	European Society of Urology	www.uroweb.org
E13	American Society of Hematology	www.hematology.org
E14	European Hematology Association	www.ehaweb.org
E15	European Respiratory Society	www.ersnet.org
E16	American Journal of Respiratory and Critical Care Medicine	www.ajrccm.atsjournals.org
E17	Global Initiative for Asthma	www.ginasthma.org
E18	American College of Cardiology	www.acc.org
E19	European Society of Cardiology	www.escardio.org
E20	American College of Rheumatology	www.rheumatology.org
E21	The European Alliance of Associations for Rheumatology	www.eular.org
E22	European Society of Gastrointestinal Endoscopy	www.esge.com
E23	American College of Gastroenterology	www.gi.org
E24	The European Association for the Study of the Liver	www.easl.eu

6.3. List of Information and Education Technologies

6.3.1 Competence-based Educational Technologies

6.3.1.1	Traditional analog educational publications: lecture notes, textbooks, teaching aids for studying theoretical material. Traditional lectures, practical exercises. Innovative technologies such as brainstorming, doctor-patient business game. Solving situational problems and analyzing educational case histories by nosology.
6.3.1.2	Innovative educational technologies: an interactive form of educational technology - provides topics for study, which are monitored in the form of presentations using multimedia. Information educational technologies: the student's independent use of computer technology and Internet resources to perform practical tasks and independent work, the use of artificial intelligence.

6.3.2 List of Information Reference Systems and Software

6.3.2.1	1C, Microsoft Teams, Microsoft Office, "KRSU Electronic Library":
6.3.2.2	1C:Enterprise is a software product system developed by the Russian company 1C to automate processes at enterprises of any scale.
6.3.2.3	Microsoft Teams is a teamwork platform that combines chats, video conferencing, file sharing, and applications in a single workspace. It allows users to communicate in real time, hold online meetings, and collaborate on documents while integrating with other products. Microsoft 365.

6.3.2.4	Microsoft Office is an office suite of the American Microsoft Corporation for Windows operating systems, Windows Phone, Android, macOS, iOS, iPadOS. This package includes software for working with various types of documents: texts, spreadsheets, databases, etc.
6.3.2.5	"KRSU Electronic Library": www.lib.krsu.kg
6.3.2.6	Information search engines: Medline, PubMed, Web of Science
6.3.2.7	Scientific Electronic Library:http://elibrary.ru
6.3.2.8	Electronic Library of the Russian State Library (RSL) http://www.gumer.info/

7. COURSE (MODULE) LOGISTICS	
7.1	The study of this discipline is based on National Center of Cardiology and Therapy named after academician Mirsaid Mirrahimov under the Ministry of Health of the Kyrgyz Republic on T. Moldo Street,3, 4th floor (6 classrooms with 10–12 seats, 1 lecture hall with 60 seats, 1 conference hall in the main building of the NCCT with 250 seats) and in the departments of the NCCT (about 320 beds), the pulmonology department of the National Hospital with 30 beds (study room – basement), the Clinical Hospital of Emergency Medical Care department of cardiology and therapy with 60 beds.
7.2	The department is equipped with proogrammic, technical and electronic means of teaching and knowledge control: 1. Computer and multimedia equipment; 2. Discs of training programs; 3. Electronic library of the discipline in the library of the KRSU 4.Traditional analog educational publications: reference lecture notes, methodological manuals for studying theoretical material, etc.
7.3	Technical training tools used in teaching standards for the diagnosis and treatment of internal diseases to 6th-year students of the KRSU Medical Faculty: 1. Tables of models for various diseases of the respiratory, cardiovascular, digestive, urinary and musculoskeletal systems. 2. Multimedia system and computer. 3. Discs, audio recordings on cardiac auscultation, X-ray of respiratory organs in various diseases

8. COURSE (MODULE) PROFICIENCY METHODICAL GUIDELINES (FOR STUDENT)

During the work with the present working program it is necessary to understand accurately the purposes and tasks of the section "Standards of treatment" classroom hours (lectures and a practical training) have to be carried out by students in full. Students have to be informed of contents of programs of independent and individual work, and teachers have to carry out these loadings.

For optimization of educational process the student has to use methodical instructions where questions which need to be studied and used during the practical work during a maintaining patients. For preparation for seminars and a practical training and also for fruitful digestion of lecture material the student can and has to use the main and additional literature.

The specifics in studying of discipline "Standards of diagnostics" consist in use of the main educational and methodical receptions: work of students at lectures, a practical training, when studying separate subjects use of visual aids (posters, models, multimedia slides), with the subsequent demonstration of thematic patients. Also includes studying of nosology with use of additional literature (monographs, handbooks, methodical recommendations) and also analysis and a maintaining patients of thematic patients with writing of the clinical record.

Recommendations when studying separate subjects of discipline:

When studying each subject according to the working program it is necessary to pay attention to the integrated system of studying of discipline which provides the following: before assimilation of a concrete subject of occupation, the student has to know questions of related subjects as anatomy, physiology of this or that system of a human body, functional methods of a research, questions of an etiology, formation of the mechanism of development of this or that pathology, the main syndromes accompanying diseases of internals and also practical skills at inspection of the patient.

Methodical recommendations for independent out-of-class work of students about studying of discipline. Studying of a theoretical part of discipline is intended not only to deepen and set knowledge gained on classroom occupations but also to contribute to the development in students of creative skills, an initiative and the organization of the free time.

Independent work of the student when studying discipline includes:

- reading the recommended literature, the Internet - sources and digestion of theoretical material of discipline;
- preparation for various forms of control (situational task, examination, test);
- writing of the clinical record of the supervised patient.

Planning of time necessary on studying of discipline, students need to carry out during all semester, providing at the same time regular repetition of material.

Work with educational literature is considered as a type of study on discipline within the hours allotted on her studying (in the section independent work).

Each student is provided with access to library stocks of the University and department.

Work of the student in group forms feeling of collectivism and skill to communicate.

Each student is provided with access to library stocks of the University and department.

Work of the student in group forms feeling of collectivism and skill to communicate. Training of students promotes formation at them ethics - deontological skills of communication with patients

therapeutic profile. Initial level of knowledge of students is defined by a cut of knowledge, the current control of assimilation of discipline and also oral poll during the occupations, during clinical analyses, at the solution of standard situational tasks.

SITUATIONAL TASK.

Example of performance in the Appendix No. 2.

PAPER

Recommendations about writing of the paper.

1. The subject of the paper is chosen according to the interests of the student and has to correspond to the provided approximate list.

2. The paper has to be based on study of several sources, additional to the main literature (the monograph, articles).
3. The plan of the paper has to be author's. In him approach of the author, his opinion, the analysis of a problem is shown.
the rule, is special monographs or articles.
4. All facts and the borrowed reasons given in the paper have to be followed by references to the source of information.
5. It is unacceptably simple to group the paper from pieces of the borrowed text. All quotes have to be submitted in quotes with the instruction in brackets of a source and the page. The lack of quotes and references means plagiarism and, according to the established scientific ethics, it is considered gross violation of copyright.
6. The paper is made out in the form of the text on sheets of a standard format (And - 4) by the Times New Roman font, 14. Begins with the title page in which the name of higher education institution, a subject matter, a paper subject, a surname and the student's initials, year and the geographical place of location of higher education institution is specified. Then the table of contents with the indication of pages of sections follows. It is desirable to subdivide the text of the paper into sections: heads, subchapters and to entitle them. Use in the paper of quantitative data and illustrations is welcomed (schedules, tables, charts, drawings).
7. The sections "Conclusion" and "List of the Used Literature" finish the paper. The main conclusions clearly formulated in a thesis form and, usually, numbered are presented in the conclusion.
8. The list of references has to be made in full compliance with the existing standard (rules), including special arrangement of punctuation marks. Generally the order of bibliographic references which is most often used in our country following:
Author I. O. Name of the book. Place of the edition: Publishing house, Year of the edition. Total number of pages in the book. Author I. O. Name of article// Name of the magazine. Year of the edition. Tom __. No. __. Pages from __ to ___.
Author I. O. Name article / Name of the collection. Place of the edition: Publishing house, Year of the edition. Pages from __ to ___.
Approximate content of work: Name: Volume: 13-15 p.

The PRESENTATION in Microsoft PowerPoint
The presentation gives the chance to visually present the innovative ideas, developments and plans. The educational presentation represents result of independent work of students by means of which they clearly demonstrate materials of a public statement before audience. The computer presentation is a file with necessary materials which consists of the sequence of slides.
Each slide contains information finished on sense as it isn't transferred to the next slide automatically unlike the text document. One of the main programs for creation of the presentations in world practice is the Power Point program of the Microsoft company.
Structure of the presentation:
It is possible to keep active attention of listeners no more than 15 minutes, and, therefore, at average calculation of time of viewing – 1 minute on a slide, the quantity of slides shouldn't exceed 15. The first slide of the presentation has to contain a work subject, a surname, a name and the performer's middle name, number of educational group and also a surname, a name, a middle name, a position and an academic degree of the teacher. On the second slide it is expedient to present the purpose and the summary of the presentation. The subsequent slides need to be broken into sections according to points of the plan of work. On a final slide the main is taken out, main of the content of the presentation. Recommendations about registration of the presentations in Microsoft Power Point:
For visual perception the text on slides of the presentation has to be not less than 18 font, and for headings – not less than 24 font. The model of the presentation has to be issued in strict color scale. The background shouldn't be too bright or motley. The text has to be read well. The same elements on different slides has to be one color. The space of a slide (screen) has to be most used, due to, for example, increase in scale of the drawing. Besides, it is whenever possible necessary to occupy top ¾ the spaces of a slide (screen) as the lower part of the screen is badly looked through from the last ranks.
Each slide has to contain heading. At the end of headings the end isn't put. A conclusion from information provided on a slide has to be reflected in headings. Registration of headings capital letters can be used only in case of their brevity. On a slide it is necessary to place no more than 5-6 lines and no more than 5-7 words in the offer. The text on slides has to be read well. At addition of drawings, schemes, charts, pictures of the screen (screenshots) it is necessary to check the text of these elements for existence of mistakes. It is impossible to overload slides with animation effects – it distracts listeners from the semantic maintenance of a slide. For change of slides use the same animation effect.

CUT OF KNOWLEDGE
It is carried out in the form of the written answer to a question of a task or the solution of a situational task according to the thematic plan of a practical training. The contents of answers on the general neurology have to be accented on knowledge of the carrying-out ways, neurologic symptoms and syndromes, statement of the topic diagnosis. The contents of answers on private neurology have to be accented on knowledge of an etiology, pathogenesis, criteria of diagnosis of the main neurologic diseases and justifications of the clinical diagnosis, on questions of treatment and prevention of the main neurologic diseases. The purpose of a cut of knowledge is determination of quality of digestion of material. When training students for a cut of knowledge it is necessary to use the lecture material and textbooks specified generally list of references of the working program of discipline.

PRACTICAL SKILLS OF OBJECTIVE INSPECTION
Students study an inspection technique, work practical skills in group, work with patients in chambers therapeutic office under the leadership of the teacher. For work it is recommended to use methodical recommendations to practical occupation, posters, tables, methodical developments of department. Hardware: at department there are a tonometer, a lung-tester, centimeter, etc. The final stage of work is the maintaining patients of the patient and execution of the clinical record.

CLINICAL RECORD
The scheme of writing of the clinical record in the appendix No. 8

INTERMEDIATE CERTIFICATION is carried out with use of test control, oral poll and the solution of situational tasks.

TESTS
The offered tests for intermediate certification are terse, with one correct answer.
Recommendations about preparation for examination:
By training students for examination it is necessary to pay attention to the following textbooks:

1. Evidential medicine: pocket reference book. M.: GEOTAR-media, 2026.
2. Petrov V.I., Nedogoda S.V. Medicine based on proofs. 2012. - 144 pages.
3. Standards of diagnostics and treatment of internal diseases. B.I. Shulutko, S.V. Makarenko 2005.
4. Diagnostics and treatment of extra hospital pneumonia at the adult / Clinical management / Bishkek. – 2025.
5. Clinical protocols on pulmonology for primary and secondary levels of health care in the Kyrgyz republic / Bishkek – 2026.
6. The clinical protocol pre-hospital maintaining patients with acute coronary syndrome without raising of a segment of ST on the ECG / Order Ministry of Health KR from 2025.
7. The clinical protocol hospital maintaining patients with acute coronary syndrome without raising of a segment of ST on the ECG the Order Ministry of Health KR protocol of 2025.
8. The clinical protocol post-hospital maintaining patients with a sharp coronary syndrome without raising of a segment of ST on the Order Ministry of Health KR ECG / protocol.
9. Clinical management "Diagnostics and treatment of a hypertension at adults" management of KR Order Ministry of Health KR No. 839 * 12/25/2009 management Order Ministry of Health KR.
12. Clinical protocol "Diagnostics and Treatment of Myocardial Infarction with Raising of a Segment of ST" Order Ministry of Health KR No. 38 protocol * 01.02.11
13. Clinical management "Diagnostics and treatment of stable stenocardia". management Order Ministry of Health KR No. 97 * 11.03.11
14. Chronic heart failure for all levels of health care the management the Order Ministry of Health KR No. 750 of December 30, 2013
15. Chronic heart failure / protocol Order Ministry of Health KR No. 750 of December 30, 2025.
16. Rheumatology: Clinical recommendations. Under E.L. Nasonov edition. M.: GEOTAR-media, 2010.
17. The clinical management "Diagnostics and treatment of diabetes 2 types at primary level of health care" the management the Order Ministry of Health KR.
18. Diabetes 2 types Order Ministry of Health KR No. 325 protocol of 08.06.09
19. Diagnostics, treatment and prevention of viral hepatitis C at all levels of delivery of health care the management the Order Ministry of Health KR No. 479 of 25.08.2014.
20. Diagnostics, treatment and prevention of viral hepatitis B at all levels of delivery of health care the management the Order Ministry of Health KR No. 479 of 25.08.2014.
21. Chronic disease of kidneys: basic principles of screening, diagnostics, prevention and approaches to treatment / Russian recommendations of 2026
22. Screening, prevention and treatment of iron deficiency anemia at children, women of childbearing age, pregnant women and persons are more senior than 50 years for primary link of health care of the Kyrgyz Republic (appendix 3); management Order Ministry of Health KR No. 392 from 7/8/2015
23. Lecture material and also the editions published by department

Appendix 1

Tests on discipline "Standards of treatment"

1. THE MAIN RESOLVENTS FOR TREATMENT OF PATIENTS OF BRONCHIAL ASTHMA ARE

A) glucocorticoids

B) metilksantina

C) inhibitors of a fosfodiesteraza 4

D) nonsteroid resolvents

2. BRONHOSPASTICHESKOE HAS EFFECT

A) propranolol

B) fenoterol

C) beclametazone

D) salbutamol

3. FOR TREATMENT OF PATIENTS WITH BRONCHIAL ASTHMA OF MODERATE SEVERITY ARE USED

A) inhalation glucocorticosteroids and β2-agonist

B) antibacterial and mukolitichesky medicines

C) system glucocorticoids and metilksantina

D) kromona and antihistaminic medicines

4. ANTIBACTERIAL THERAPY TO PATIENTS WITH EXACERBATION OF THE CHRONIC OBSTRUCTIVE PULMONARY DISEASE IS APPOINTED IN THE CASE

A) increases in volume and degree of inflammation of a phlegm

B) existence of symptoms of a sharp respiratory infection

C) emergence of the dry whistling rattles

D) long experience of smoking

5. AS STARTING ANTIBACTERIAL THERAPY OF EXTRA HOSPITAL PNEUMONIA OF NOT HEAVY CURRENT AT THE HOSPITALIZED PATIENTS CAN BE CHOSEN

A) amoxicillin + clavulanic acid

B) ciprofloxacin

C) gentamycin

G) tetraciclin

6. THE MEDICINE CONTRAINDICATED AT PYELONEPHRITIS IN THE STAGE OF THE CHRONIC RENAL FAILURE, IS

A) gentamycin

B) oxacilline

C) azitromycine

D) karbenicilline

7. THE LEVEL OF CREATININE AT WHICH CARRY OUT THE HEMODIALYSIS MAKES μMOL/L

A) 700

B) 400

C) 500

D) 600

8. CHOICE MEDICINE IN TREATMENT OF RHEUMATOID ARTHRITIS IS

A) methotrexate

B) a hydroxychloroquine

C) leflunomide

D) sulfasalazine

9. THE MEDICINE OF THE CHOICE OF GENETICALLY ENGINEERED BIOLOGICAL THERAPY APPLIED TO TREATMENT OF PATIENTS OF SYSTEM RED VOLCHANKAYA WITH HIGH IMMUNOLOGICAL AND CLINICAL ACTIVITY IS

A) belimumab

B) infliximab

C) etanerzent

D) adalimumab

10. AT PATIENTS WITH CHRONIC GASTRITIS IN COMBINATION WITH SEKRETORNY INSUFFICIENCY THE MOST EFFECTIVE IS

A) atsidin-pepsin

B) almagel

C) ranitidine

D) famotidine

Appendix №2

Methodical instructions to the solution of situational tasks:

For example, to a Section Cardiology:

Task. Man A. 56 years, the research associate complains of pains in the top third of a breast, the squeezing character. Pains arise several times a day at height of physical activity when walking by a moderate step through 500 meters, last up to 10 minutes, nitroglycerine are removed in 3-4 minutes. Objectively: the correct constitution, the raised food. Over lungs a pulmonary sound, vesicular breath. The right and top borders of heart within norm, left on the median clavicle line. Tones are clean, rhythmical, are muffled. Accent of the II tone over an aorta, a rhythm correct, pulse-78/mines, AD-140/70. Blood and urine without features. Cholesterol of-7,6 mmol/l. On the ECG at pains: in V4-V6 chest assignments ST segment shift down of horizontal character on 1,5 mm is noted. At a x-ray research of bodies of a thorax small increase in the left ventricle is noted.

1) the diagnosis according to classification;

2) standards of inspection with the expected results;

3) standards treatment of the patient.

Answer:

1. Coronary heart disease. Stenocardia of tension of functional class II. Atherosclerosis of an aorta, coronary arteries. Hypertension of the I degree of very high risk. Hypercholesterolemia of very high risk.

2. 1) The research of urine will help to reveal diabetes and damage of kidneys, i.e. factors accelerating development of atherosclerosis. 2) Blood test has to include determination of content of lipids (cholesterol and lipoprotein of high density), glucose, creatinine, hematocrit number and in the presence of the indications established at objective inspection, function of a thyroid gland. 3) Radiological inspection of a thorax as it helps to reveal such complications of an ischemic disease as increase in heart, an aneurysm of the left ventricle and also symptoms of heart failure and a calcification of coronal arteries.

4) Electrocardiogram. On the ECG symptoms of earlier postponed myocardial infarctions can come to light. The typical changes of a segment of ST and a tooth of T which are arising during an attack of stenocardia and undergoing later his disappearances are more specific to coronary heart disease. 5) Load tests. For diagnosis of coronary heart disease use the test including registration of the ECG in 12 assignments to loading and during loading on the treadmill or the stationary bicycle more often. 6) Coronary angiography. This invasive method allows to reveal obstructive defeats in coronal arteries, to estimate local and general reduce function of the left ventricle.

3. Diet: days of intake of cholesterol of 200 mg, a diet No. 10, atenolol of 50 mg on ½ tablet 2 times a day, aspirin 0,5 on 1 time in the evening after a meal, Liprimar 10 mg during a dinner once a day.

Methodical recommendations about her performance:

- at the solution of this situational task, it is necessary to pay attention first of all, to passport data, complaints given the anamnesis, objective signs. Results of laboratory and tool inspection. Using knowledge of qualification of a disease and criteria of the diagnosis it is necessary to resolve the first issue: to expose the diagnosis, according to classification. Proceeding from the aforesaid, it is necessary to make the plan of inspection and to appoint the corresponding inspection with the expected results. Then to resolve a final issue: purposes of treatment, taking into account doses and a course of treatment.

Situational tasks

Task №.1

The man of 51 years, the smoker, with the long anamnesis of an arterial hypertension. Doesn't receive hypotensive therapy. From the anamnesis: the father has a stroke at the age of 49 years. At inspection: circle of a waist of 105 cm. Arterial blood pressure of 174/96 mm Hg., heart rate of 62 beats/min. Glomerular filtration rate of 57 ml/min. / 1.73м2, the relation albumin/creatinine in a morning portion of urine of 45 mg/g.

1) the diagnosis according to classification;

2) standards of inspection with the expected results;

3) standards treatment of the patient.

Task №.2

The patient, 48 years, the mechanic, has arrived with complaints to pain in a thorax and short wind. Pain was localized behind a breast, arose at physical activity, irradiated in the left hand and passed in rest. Short wind arose at rise on one ladder flight. The patient denies any diseases in the past, administration of drugs, smoking and alcohol intake. At survey: heart rate – 78 in min., arterial blood pressure – 130/75 mm Hg. Temperature – 37,2 °C. Respiration rate – 13 in min. Auscultative data: the systolic noise with a maximum in an aorta point irradiating on neck vessels, easing 2 tones over an aorta. A X-ray analysis of bodies of a thorax – without pathological changes.

The ECG is attached.

1) the diagnosis according to classification;

2) standards of inspection with the expected results;

3) standards treatment of the patient.

Task №.3

The man of 24 years, the graduate student, has addressed with complaints to headaches, decrease in working capacity against the background of the increased figures arterial blood pressure. At 17-year age increase arterial blood pressure to 180/100 mm Hg for the first time has accidentally been recorded. At inspection (blood tests and urine, ultrasonography of kidneys and adrenal glands, ultrasonography of a thyroid gland) pathology isn't revealed. According to the recommendation of doctors constantly I accepted a Concor of 5 mg/days, Arifon 1,5 mg/days - without effect. Objectively: heart rate = 78 beats/min., arterial blood pressure = 200/110 mm Hg. arterial blood pressure on the lower extremities of 160/100 mm Hg. Tones of heart rhythmical. Systolic noise over all surface of heart with a maximum at an auscultation in inter scapular area is listened. For the rest on bodies – without features. ECG: Axis deviation to the left, signs of hypertrophy of the left ventricle. Echocardiography: left auricle=3,2 of cm, final diastolic size =5,0 of cm, final systolic size=3,2 of cm, the valve device it isn't damaged, pathological currents isn't revealed.

1) the diagnosis according to classification;

2) standards of inspection with the expected results;

3) standards treatment of the patient.

Appendix №3
INDEPENDENT WORK OF STUDENTS

Content of the material of disciplines which is taken out on IWS		Number of hours	Form of control
1.	Types of clinical trials	2	Presentation
2.	Questionnaires of SAT, mMRCA, Fagerstrom. Assessment of risk of aggravations.	2	Presentation
3.	The choice of the place of treatment on CRB, a further algorithm of maintaining patients with pneumonia.	2	Presentation
4	Principles of pain management and thrombolytic therapy.	2	Presentation
5	Post-hospital maintaining the patients who have transferred myocardial infarction. Modification of the risk factors (RF), FR target levels.	2	Presentation

Appendix No. 4

Subject		Form of control
1.	Application of evidential medicine in clinical practice	Paper
2.	Tobacco addiction	Paper

3.	A role of basic medicines in treatment of an obstructive syndrome	Paper
4	Dyslipidemia, target levels of a lipid range	Paper
5	Predictive scales of GRACE, CRUSADE	Paper

Appendix No. 5

The student has to be able:

1. To estimate the objective status of the patient, using propaedeutic methods (survey, a palpation, percussion, an auscultation).
2. To be able to conduct the corresponding examination of the patient:
• to be able to remove and interpret the ECG
• to interpret results of beam and ultrasonic diagnostics
• to carry out electro pulse therapy
• to carry out a puncture of a pleural and abdominal cavity
• to hold resuscitation events at urgent states in clinic of internal diseases
• to carry out monitoring and assessment of violations of a rhythm
3. To carry out differential and diagnostic search at various diseases of internals, marking out the general and distinctive signs of a syndrome.
4. To appoint the differentiated therapy taking into account features and the course of a disease.
5. To exercise dynamic control of efficiency of propaedeutic therapy.

Appendix No. 6

SCALE of ESTIMATION of the TEST (boundary control)

1. In one test task of 25 closed questions.
2. To tasks ready answers to the choice, one correct and other wrong are given.
3. The student needs to remember: in each task with the choice of one correct answer the correct answer has to be.
4. For each correct answer – 4 points
5. The general assessment is defined as the sum of the gained points.
6. Mark of (%).

"Perfectly" - 85-100% of the correct answers
"Well" - 70-84% of the correct answers
"Well" - 60-69% of the correct answers
"Unsatisfactorily" - less than 60% correct the answer

SCALE of ESTIMATION of SITUTSIONNY TASKS (boundary control)

1. To make the correct diagnosis - 25%.
2. To choose the correct plan of inspection – 25%.
3. To carry out differential diagnostics – 25%.
4. To appoint the correct treatment – 25%.

Appendix №7

The planning sheet of discipline " Standards of treatment "

Specialty "General Medicine" for the 2026-2027 academic year.

Course 6, semester 12, Credit units (CU) – 2

Title of module according to WPD	Type of control	Forms of control	Minimal credit points	Maximal credit points	Week of control
Module 1					
Section 1. Chronic diseases of cardiovascular, respiratory systems	Formative assessment	Practical skills, attendance. Independent work of the student: - paper, presentation, - work with educational and methodical literature, - preparation for midterm examination	**17**	**30**	**29 week**
	Midterm examination	Test	**3**	**5**	
Module 2					
Section 2. Chronic diseases of musculoskeletal, gastrointestinal, endocrine, secretory system, system of blood	Formative assessment	Practical skills, attendance. Independent work of the student: - paper, presentation, - work with educational and	**17**	**30**	

		methodical literature, - preparation for midterm examination			**35 week**
	Midterm examination	Test	**3**	**5**	
TOTAL			**40**	**70**	
Midpoint assessment		Task of standards of diagnostics and treatment	**20**	**30**	
Summative assessment			**60**	**100**	

Note:

1. For active participation in a work practice 0.5 points are added.

2. For active participation in science work – 3 points.

3. For each missed and not fulfilled working day 0.5 points are removed.