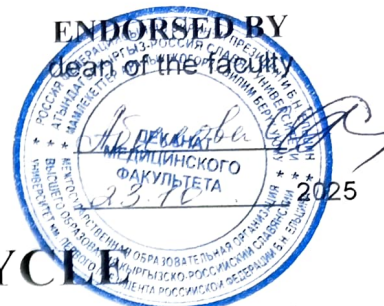


**MINISTRY OF SCIENCE AND HIGHER EDUCATION OF THE RUSSIAN FEDERATION,
MINISTRY OF SCIENCE, HIGHER EDUCATION AND INNOVATIONS
KYRGYZ REPUBLIC**

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



PROFESSIONAL CYCLE

Outpatient therapy with a course in gerontology

Course Outline (Module)

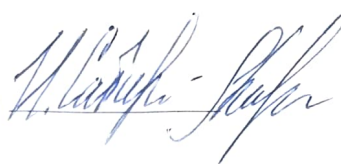
Assigned to	Department of Therapy №2 (specialty “General Medicine”)	
Academic Curriculum	_25_1 ld in.plx 560001 General Medicine (For foreignstudents)	
Qualification	Physician (General Medicine)	
Mode of Study	Intramural (full-time)	
Total Credit Value	6 credit point	
Course Hours	180	Types of control in semesters: credit 9 credit with a grade of 10
including:		
classroom activities	128	
individual work	51.4	

Course Hours Scheduling (per semester)

Semester (<Course>.<Semester in the course>)	9 (5.1)		10 (5.2)		Total	
	Weeks		Weeks			
Type of activity	UP	RP	UP	RP	UP	RP
Lectures	16	16	16	16	32	32
Practical	48	48	48	48	96	96
Contact work during the theoretical training period	0.3	0.3	0.3	0.3	0.6	0.6
Including int.	3	3	3	3	6	6
Total auditorium	64	64	64	64	128	128
Contact work	64.3	64.3	64.3	64.3	128.6	128.6
Individual work	25.7	25.7	25.7	25.7	51.4	51.4
Total	90	90	90	90	180	180

The program was compiled by:

Doctor of Medical Sciences, Professor, I.S. Sabirov; Senior Lecturer, O.O Karshina.



Reviewer(s):

Doctor of Medical Sciences, Professor, A.G. Polupanov



Course Outline of the discipline
Outpatient therapy with a course in gerontology

in accordance with the Academic Curriculum:

Specialty 560001 - KR General Medicine

confirmed by KRSU Board of Academics in 30.06.25 record № 13

The Course Outline endorsed at the Meeting of the Therapy Department № 2 Specialty "General Medicine"

Record of 26.08.2025 y. № 1

Program Validity period: 2025-2030 academic years

The Head of Department: MD, DMedSc, Professor I.S. Sabirov



The course outline endorsed for the following academic year

Chairman of the Educational
and Methodological Board

__ _____ 2026 y.

The course outline has been revised, considered, and endorsed for implementation
in the 2026-2027 Academic Year at the Staff Meeting of Therapy Department №2

Record of __ _____ 2026 y. № __
The Head of Department: MD, DMedSc, Professor I.S.Sabirov

The course outline endorsed for the following academic year

Chairman of the Educational and
Methodological Board

__ _____ 2027 y.

The course outline has been revised, considered, and endorsed for implementation
in the 2027-2028 Academic Year at the Staff Meeting of Therapy Department №2

Record of __ _____ 2027 y. № __
The Head of Department: MD, DMedSc, Professor I.S.Sabirov

The course outline endorsed for the following academic year

Chairman of the Educational and
Methodological Board

__ _____ 2028 y.

The course outline has been revised, considered, and endorsed for implementation
in the 2028-2029 Academic Year at the Staff Meeting of Therapy Department №2

Record of __ _____ 2028 y. № __
The Head of Department: MD, DMedSc, Professor I.S.Sabirov

The course outline endorsed for the following academic year

Chairman of the Educational and
Methodological Board

__ _____ 2029 y.

The course outline has been revised, considered, and endorsed for implementation
in the 2029-2030 Academic Year at the Staff Meeting of Therapy Department №2

Record of __ _____ 2029 y. № __
The Head of Department: MD, DMedSc, Professor I.S.Sabirov

1. OBJECTIVES OF LEARNING THE DISCIPLINE

1.1	Training in practical skills for organizing medical and preventive care for the population in outpatient settings, namely: the basic principles of organizing medical and preventive care for the general population in a polyclinic setting;
1.2	organizing the work of a general practitioner at a clinic;
1.3	modern diagnostic capabilities of the outpatient service and their rational use;
1.4	use the main achievements of evidence-based medicine in diagnostics and treatment.
1.5	To develop clinical thinking skills in the diagnosis of the most common therapeutic diseases in the outpatient clinic, assessment of their course, outpatient treatment, primary and secondary prevention, including in the elderly, and conducting assessments of work capacity.
1.6	Understand the principles of geriatric care, focusing on the specific needs of older patients.
1.7	To develop the ability to cope with chronic diseases and age-related illnesses by providing high-quality health care to older people.
1.8	To gain an understanding of preventive measures, rehabilitation and health promotion for elderly patients.

2. PLACE OF DISCIPLINE IN THE STRUCTURE OF THE OOP

OOP cycle (section):	B1.O.03
2.1	Requirements for preliminary preparation of the student:
2.1.1	Propaedeutics of internal diseases
2.1.2	Clinical pharmacology
2.1.3	Faculty therapy
2.1.4	Hospital therapy
2.2	Disciplines and practices for which mastery of this discipline (module) is necessary as a prerequisite:
2.2.1	Preparing for and passing the state exam

3. STUDENT COMPETENCIES DEVELOPED AS A RESULT OF LEARNING THE DISCIPLINE (MODULE)

PC-17: Able and willing to use knowledge of the structure of healthcare organizations, the referral and redirection system.

Know:	
Level 1	The structure and levels of the healthcare system, the functions of medical organizations of various profiles.
Level 2	The operating procedures of medical and preventive institutions, interaction between outpatient and inpatient care.
Level 3	Patient routing rules, indications for referral and redirection in accordance with regulatory documents.
Be able to:	
Level 1	Determine the required level of medical care depending on the patient's condition.
Level 2	Correctly prepare referrals, extracts, protocols and other medical documentation related to routing.
Level 3	Organize consistent monitoring and treatment of the patient, taking into account the structure of the healthcare system.
Own:	
Level 1	Skills in using health information systems used for patient registration and referral.
Level 2	Practical skills in interacting with medical organizations of various levels and profiles.
Level 3	Skills in planning a patient's route from primary care to specialized and high-tech care.

PC-10: Capable and ready to provide first aid in case of emergency and life-threatening conditions in adults and children at the pre-hospital stage, and refer for hospitalization on a planned and emergency basis.

Know:	
Level 1	The main types of emergency and life-threatening conditions in adults and children, their clinical manifestations and pathogenesis.
Level 2	Principles of first aid and action algorithms in accordance with current clinical guidelines and protocols.
Level 3	Indications for planned and emergency hospitalization, rules for patient routing at the pre-hospital stage.

Be able to:	
Level 1	Recognize emergency conditions and quickly assess the severity of a patient's condition on the spot.
Level 2	Provide first aid within the scope of their competence (stopping threatening respiratory and circulatory disorders, control of consciousness, etc.).
Level 3	Make decisions about hospitalization, prepare the necessary documentation and organize patient transportation.
Own:	
Level 1	Skills in performing basic first aid measures: ABC assessment, stabilization of the condition, use of basic medications and non-invasive support methods.
Level 2	Skills in working with pre-hospital equipment (tonometer, pulse oximeter, glucometer, oxygen therapy, immobilization equipment).
Level 3	Skills in interacting with emergency services and the patient's relatives to ensure rapid and safe hospitalization.

PC-8: Able and ready to use the algorithm of diagnostic measures to identify diseases, emergency and life-threatening conditions based on the results of clinical, laboratory and instrumental studies of organs, systems and the body as a whole to establish a diagnosis (primary, concomitant, complications) taking into account the ICD.

Know:	
Level 1	<p>Basic principles of diagnosis and treatment of the most common therapeutic diseases in outpatient settings.</p> <p>The procedure for organizing the work of a polyclinic and a day hospital.</p> <p>Rules for completing medical documentation (outpatient card, referral, sick leave).</p>
Level 2	<p>Algorithms for diagnostics, routing and dispensary observation of patients with chronic non-communicable diseases.</p> <p>Modern principles of pharmacotherapy and rehabilitation of patients in outpatient settings.</p> <p>Procedure for providing emergency care in acute conditions at the pre-hospital stage.</p>
Level 3	<p>National clinical guidelines and standards for patient care for major nosologies (hypertension, coronary heart disease, diabetes mellitus, COPD, MAFLD, etc.).</p> <p>Principles of interdisciplinary interaction in the management of patients with comorbid pathology.</p> <p>Ethical and legal aspects of outpatient treatment and counseling.</p>

Be able to:	
Level 1	<p>Collect anamnesis, conduct a physical examination, formulate a preliminary diagnosis.</p> <p>Prescribe the minimum necessary volume of laboratory and instrumental studies.</p> <p>Determine indications for referring a patient for consultation or hospitalization.</p>
Level 2	<p>Conduct differential diagnostics and substantiate the clinical diagnosis.</p> <p>Prescribe rational therapy taking into account concomitant diseases, age and risk of drug interactions.</p> <p>Manage outpatients with chronic diseases, monitor the effectiveness of treatment and prevent complications.</p>
Level 3	<p>Develop individual plans for treatment, rehabilitation and follow-up.</p> <p>Coordinate the work of mid-level medical personnel in outpatient settings.</p> <p>Analyze treatment results, develop clinical thinking and patient management tactics in accordance with current recommendations.</p>

Own:	
Level 1	<p>Methods of clinical examination, measurement of basic physiological parameters (blood pressure, heart rate, temperature, etc.).</p> <p>Skills in preparing medical documentation.</p> <p>Algorithms for providing first aid in emergency situations.</p>

Level 2	Skills in conducting and interpreting basic instrumental studies (ECG, spirometry, glucose measurement, anthropometry). Methods for assessing the risk of complications and prognosis of chronic diseases. Skills in managing an outpatient with multiple chronic diseases (comorbidity).
Level 3	Knowledge of the principles of evidence-based medicine when choosing diagnostic and treatment approaches. Skills of interdisciplinary interaction and consultative work in a clinic and day hospital. Methods for organizing preventive work, health schools and medical educational events.

PC-7: Able and willing to conduct and interpret interviews, physical examinations, clinical examinations, results of modern laboratory and instrumental studies, and fill out medical records for outpatients and inpatients.

Know:	
Level 1	the main regulatory and technical documents on public health protection; the system for organizing the production of forensic medical examinations; the rights, duties and responsibilities of a physician involved in procedural actions as a specialist or expert, the main methods and techniques used in conducting forensic medical examinations;
Level 2	etiology, pathogenesis and preventive measures of the most common diseases; modern classification of diseases;
Level 3	The clinical picture, characteristics of the course and possible complications of the most common diseases occurring in a typical form in different age groups; criteria for the diagnosis of various diseases; medical and social criteria for assessing work capacity.

Be able to:	
Level 1	Analyze and evaluate the quality of medical care, the health status of the population, the impact of lifestyle factors, the environment and the organization of medical care; apply the legal and medical aspects of establishing a person's death, conduct an examination of the corpse at the place of its discovery; assess the health status of the population and the impact of environmental and industrial factors on it ; assess the patient's condition, conduct a primary examination of all systems and organs;
Level 2	identify material evidence of biological origin and organize its referral for examination; conduct forensic examinations of living persons and interpret the results of laboratory tests of forensic examination objects;
Level 3	analyze issues of general pathology and modern theoretical concepts and trends in medicine, establish the fact of temporary disability, determine the nature of the disability.

Own:	
Level 1	methods of maintaining medical records and reports in medical organizations; assessments of the health status of the population of different age groups; the skill of comparing morphological and clinical manifestations of diseases;
Level 2	interpretation of the results of laboratory and instrumental diagnostic methods in patients of different ages; methods of general clinical examination;
Level 3	algorithm for a detailed clinical diagnosis; an algorithm for establishing a preliminary diagnosis with subsequent referral of the patient to the appropriate specialist.

PC-4: Capable of carrying out a set of activities to conduct an examination of temporary disability, to participate in the medical and social examination, and to establish the biological death of a person.

Know:	
Level 1	The main theoretical principles of the discipline, key concepts, patterns and mechanisms of the processes studied.
Level 2	Regulatory frameworks, current standards, professional recommendations and algorithms related to the subject matter of the discipline.
Level 3	Modern methods of diagnostics, prevention, treatment and organizational foundations of work in the relevant field.

Be able to:	
Level 1	Apply acquired theoretical knowledge to solve practical problems and clinical situations.
Level 2	Conduct data analysis (clinical, laboratory, instrumental) and draw informed conclusions.
Level 3	Use modern methods, protocols, algorithms and technologies necessary within the framework of the discipline being studied.

Own:	
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Level 1	Skills in performing basic professional procedures, manipulations and diagnostic/therapeutic measures provided for by the discipline.
Level 2	Practical skills in working with medical documentation, digital tools and clinical standards.
Level 3	communication and interaction skills in an interdisciplinary environment necessary for effective work with patients and colleagues.

As a result of mastering the discipline, the student must

3.1	Know:
3.1.1	issues of organizing therapeutic services in a polyclinic;
3.1.2	diagnostic criteria, principles of the formulary system, basic diagnostic methods of research and treatment of the most common diseases at the outpatient stage;
3.1.3	diagnosis of emergency conditions in the adult population and provision of first medical (pre-hospital) aid to the adult population;
3.1.4	examination of temporary and permanent disability, indications for hospitalization;
3.1.5	measures of primary and secondary prevention of diseases of internal organs;
3.1.6	principles of dispensary observation of healthy and sick contingents;
3.1.7	modern methods of health education in a clinic setting, combating bad habits, alcoholism, drug addiction, and promoting a healthy lifestyle;
3.1.8	deontological and ethical skills of working in a clinic.
3.2	Be able to:
3.2.1	correctly fill out medical documentation at the clinic;
3.2.2	to conduct a high-quality examination and interview of the patient in a limited time;
3.2.3	determine the minimum number of laboratory and instrumental studies necessary to establish a diagnosis, taking into account the principles of evidence-based medicine;
3.2.4	interpret the obtained examination results (tests, ECG and other functional methods, endoscopy, X-ray examination, etc.);
3.2.5	apply proven practical recommendations when conducting diagnostic searches and selecting treatment and preventive measures for the treatment of specific patients in outpatient practice;
3.2.6	provide first aid in emergency cases before the arrival of an ambulance;
3.2.7	determine indications for hospitalization of patients with a therapeutic profile and implement hospitalization on an emergency and planned basis;
3.2.8	ensure continuity in the provision of treatment and examination at the outpatient-hospital stage;
3.2.9	use legislative provisions for assessment of work capacity;
3.2.10	determine the cause of temporary disability, criteria for recovery and restoration of working capacity;
3.2.11	promptly identify signs of disability, predict the group, and prepare documents for referral to the Medical and Social Expertise Commission;
3.2.12	conduct medical examinations (for the main groups of medical observation), prepare primary and current documentation, draw up a secondary prevention plan, and evaluate the effectiveness of medical examinations;
3.2.13	use educational, scientific, regulatory and reference literature;
3.2.14	observe the rules of medical ethics and deontology; solve a range of problems related to the relationship between doctor and patient.
3.3	Own:
3.3.1	skills in examining patients in an outpatient setting, evaluating laboratory data, ECG, and radiographs;
3.3.2	conduct differential diagnostics and diagnosis of the most common diseases, choose the tactics for managing and treating the patient, resolve issues of labor expertise;
3.3.3	skill of medical diagnostic and therapeutic procedures to provide first aid in emergency and life-threatening conditions;
3.3.4	skill in correctly filling out medical documentation and providing planned and emergency medical care in outpatient settings;
3.3.5	methods of maintaining medical records and reports in medical organizations; assessments of the health status of the population of different age groups;
3.3.6	skill of comparing morphological and clinical manifestations of diseases;
3.3.7	with methods of general clinical examination;
3.3.8	algorithm of detailed clinical diagnosis;

3.3.9	an algorithm for establishing a preliminary diagnosis with subsequent referral of the patient to the appropriate specialist doctor;
3.3.10	assessment of the state of public health;
3.3.11	methods of general clinical examination;
3.3.12	interpretation of the results of laboratory and instrumental diagnostic methods;
3.3.13	algorithm of detailed clinical diagnosis;
3.3.14	proper maintenance of medical records;
3.3.15	assessments of the state of public health; methods of general clinical examination; interpretation of the results of laboratory and instrumental diagnostic methods;
3.3.16	algorithm of detailed clinical diagnosis.

4. STRUCTURE AND CONTENT OF THE DISCIPLINE (MODULE)

Lesson code	Name of sections and topics /type of lesson/	Semester / Course	Hours	Competitions	Literature	Inte ract.	Pr. prep.	Note
	Section 1. General Issues in Outpatient Therapy. Pulmonology							
1.1	1. Organization of outpatient therapeutic services in the Russian Federation and Kyrgyzstan. Introduction to gerontology: basic principles and objectives of caring	9	2		L1.2 L1.3 L1.4 L1.5 L1.6L2.1 L2.2 L2.7 E1 E2 E5			
1.2	1. Organization of outpatient therapeutic services in the Russian Federation and Kyrgyzstan. Clinical expert work and principles of medical and social expertise in outpatient practice. Medical documentation. 2. Gerontology. Features of the course and management of patients in old and senile	9	6		L1.3 L1.4 L1.5 L1.6L2.1 L2.2 L2.7 E1 E2 E4 E5			
1.3	1. Diet therapy for diseases of the respiratory and circulatory organs 2. Nutritional features of the elderly. 3. Basic geriatric syndromes in outpatient practice 4. Clinical aspects of frailty in elderly patients /Wed/	9	2.7	PC-7	L1.3 L1.5L2.7 E1 E5			
1.4	/Lek/	10	2					
	Pulmonology							
2.1	1. Acute respiratory viral infections, influenza, and sore throats in outpatient settings: characteristics of the course of the disease in the elderly 2. Outpatient management of patients with COPD and bronchial asthma: features of the course in the elderly. 3. Pneumonia, pleurisy in outpatient settings:	9	6	PC-7	L1.1 L1.2 L1.3 L1.4 L1.6 L1.7L2.1 L2.3 L2.7L3.8 L3.9 L3.10 E1 E2 E4 E5			

2.2	<p>1. Acute respiratory viral infections, influenza, and tonsillitis in outpatient settings. Specific management and course of treatment in the elderly.</p> <p>2. Outpatient management of patients with broncho-obstructive syndrome: features of the course of the disease in elderly patients and treatment approaches.</p> <p>3. Differential diagnosis of infiltrative processes in the lungs at the outpatient stage.</p> <p>4. Pneumonia, pleurisy in outpatient settings: features of the course and treatment in elderly patients.</p> <p>5. Outpatient management of patients with chronic respiratory failure. Pulmonary failure in outpatient practice. Prehospital pulmonary emergencies . KR No. 1 /Pr/</p>	9	15	PC-7	L1.1 L1.2 L1.3 L1.6 L1.7L2.1 L2.3 L2.7L3.2 L3.8 L3.9 L3.10 E1 E2 E4 E5 E6	1.5		<p>Conducting a lesson at the Center for Social and Aerial Health - auscultation on wheezing dummies characteristic of COPD and bronchial asthma, pneumonia, pleurisy</p>
2.3	<p>1. Primary and secondary prevention of COPD</p> <p>2. "Asthma clubs" - controlled management of bronchial asthma</p> <p>3. Features of diagnosis and treatment of elderly and senile patients.</p> <p>4. Features of the course and management of patients with pneumonia in the elderly and senile age. 6. Acute respiratory failure in outpatient practice.</p> <p>7. Pulmonary embolism in the elderly in the clinic. 8. Age-related changes in the respiratory</p>	9	7	PC-7	L1.1 L1.2 L1.3 L1.7L2.1 L2.2 L2.3 L2.7L3.2 L3.8 L3.9 L3.10 E1 E2 E4 E5			
Section 2. Cardiology part 1								
3.1	<p>1. CHD in outpatient settings: features of the course, diagnosis and treatment in elderly patients. /Lecture/</p>	9	2	PC-7	L1.1 L1.2 L1.3 L1.6 L1.7L2.1 L2.7 E1 E2 E3 E4 E5			

3.2	<p>1. Left Chest Pain Syndrome in the Practice of a District Therapist: Features of Diagnosis and Treatment in Elderly Patients</p> <p>2. Outpatient management and treatment of coronary heart disease: features of approaches and therapy in elderly patients.</p> <p>3. Infectious myocarditis in outpatient practice.</p> <p>4. Heart rhythm and conduction disorders in outpatient practice: approaches to treatment in elderly patients.</p> <p>5. Dilated cardiomyopathy, hypertrophic cardiomyopathy in outpatient practice.</p> <p>CW No. 2 /Pr/</p>	9	15	PC-7	L1.1 L1.2 L1.3 L1.4 L1.6 L1.7L2.1 L2.7L3.1 E1 E2 E3 E4 E5				
3.3	<p>1. Tactics of management and diagnosis of angina pectoris at the outpatient stage in elderly and senile patients.</p> <p>2. Management of elderly patients who have had an AMI.</p> <p>3. Diagnosis and provision of first aid and medical care for complications of acute myocardial infarction. 6. Potential of outpatient services in the early diagnosis of arrhythmias in older patients</p> <p>4. Paroxysmal forms of rhythm disturbances in outpatient practice: - atrial fibrillation and flutter - paroxysmal tachycardia; ventricular fibrillation and flutter - blockades, MES syndrome /Indep/</p>	9	9	PC-7	L1.1 L1.2 L1.3 L1.6 L1.7L2.1 L2.7L3.1 E1 E2 E3 E4 E5				
Section 3. Cardiology part 2									
4.1	<p>1. Differential diagnostic search for hypertension syndrome in outpatient settings: diagnostic features in elderly patients.</p> <p>2. Chronic heart failure in outpatient practice: features of diagnosis and treatment in the elderly.</p> <p>3. Rheumatic fever in outpatient practice. Management of patients with acquired heart defects: approaches to treating elderly patients. /Lecture/</p>	9	6	PC-7	L1.1 L1.2 L1.4 L1.7L2.1 L2.7 E1 E2 E3 E4 E5				

4.2	<p>1. Differential diagnostic workup for hypertension syndrome in outpatient settings. Symptomatic hypertension. Possibilities of examination and management of elderly patients in outpatient practice. Essential hypertension.</p> <p>2. Heart failure in outpatient practice: features of diagnosis and treatment in the elderly.</p> <p>3. Emergencies in cardiology at the pre-hospital stage: features of providing assistance to elderly patients.</p> <p>4. Infective endocarditis in outpatient practice.</p> <p>CW No. 3 /Pr/</p>	9	12	PC-7	L1.1 L1.2 L1.4L2.1 L2.7L3.11 E1 E2 E3 E4 E5	1.5		Auscultation of heart murmurs in the central coronary artery and aortic valve dummies for various defects
4.3	<p>1. Hypertensive crises at the pre-hospital stage in older people</p> <p>2. Self-monitoring for CHF. Patient education.</p> <p>3. An attack of cardiac asthma and pulmonary edema in outpatient practice</p> <p>4. Primary prevention of myocarditis.</p> <p>5. Primary and secondary prevention of cardiomyopathies.</p> <p>/Indep/</p>	9	7	PC-7	L1.1 L1.2 L1.4 L1.7L2.1 L2.2 L2.7L3.1 L3.11 E1 E2 E3 E4 E5			
4.4	Credit /KrTO/	9	0.3	PC-7	L1.1 L1.2 L1.3 L1.4 L1.5 L1.7L2.1 L2.7L3.1 L3.11			
Section 4. Gastroenterology								

5.1	<p>1. Chronic gastritis, peptic ulcer disease in outpatient practice. Features of diagnosis and treatment of chronic gastritis and peptic ulcer disease in elderly patients.</p> <p>2. Biliary dyskinesia, chronic acalculous cholecystitis, postcholecystectomy syndrome in outpatient practice in the elderly.</p> <p>3. Chronic liver disease in outpatient practice. Features of management and treatment in older people</p> <p>4. Chronic pancreatitis in outpatient practice.</p> <p>Functional bowel diseases in the practice of a local physician. /Lek/</p>	10	6	PC-7	L1.1 L1.2 L1.3 L1.4 L1.6 L1.7L2.1 L2.7L3.4 E1 E2 E4 E5 E7 E11			
5.2	<p>1. Outpatient management of patients with chronic gastritis and peptic ulcer disease. Diagnostic and treatment considerations for geriatric patients</p> <p>2. Biliary dyskinesia, chronic acalculous cholecystitis, and postcholecystectomy syndrome in outpatient practice. Management and diagnostic tactics in elderly patients.</p> <p>3. Chronic pancreatitis in outpatient practice. Chronic hepatitis and liver cirrhosis in the practice of a local general practitioner.</p> <p>4. Dysbacteriosis, inflammatory and functional bowel diseases in the practice of a local therapist. Predictors of colorectal cancer in elderly and senile patients.</p> <p>5. Emergencies in gastroenterology at the prehospital stage. CW No. 4 /Pr/</p>	10	15	PC-7	L1.1 L1.2 L1.3 L1.5 L1.6 L1.7L2.7L3.4 E1 E2 E4 E5 E7 E10 E11	1		Physical examination of a patient with gastrointestinal diseases on a model at the Centralized Social and Emergency Department. Emergency gastroenterology care on a model at the Centralized Social and Emergency Department.

5.3	<p>1. Inflammatory and functional bowel diseases in the practice of a local therapist, including people of older age groups.</p> <p>2. Bowel diseases: ulcerative colitis, irritable bowel syndrome, rare forms</p> <p>3. Oncological alertness in the elderly: diagnostics, characteristics and importance of early detection of oncological diseases.</p> <p>4. Dysbacteriosis and its role in the development of chronic enterocolitis in the elderly</p> <p>5. Metabolically associated steatotic liver disease is a risk factor for cardiovascular diseases /Indep/</p>	10	10	PC-7	L1.1 L1.2 L1.3 L1.4 L1.6 L1.7L2.1 L2.7L3.4 E1 E2 E4 E5 E7 E11			
	Section 5. Rheumatology. Nephrology							
6.1	<p>1. Chronic kidney diseases in outpatient practice /Lek/</p>	10	2	PC-7	L1.1 L1.2 L1.3 L1.6 L1.7L2.1 L2.4 L2.7L3.5 E1 E2 E5 E7			
6.2	<p>1. Rheumatic fever in outpatient practice. Mitral and aortic valve defects in outpatient practice.</p> <p>2. Joint syndrome in the practice of a local therapist: osteoarthritis, rheumatoid arthritis, gout. Features of the introduction of elderly and senile patients.</p> <p>3. Management of patients with TBST in outpatient practice.</p> <p>4. Urinary syndrome in the practice of a local physician (acute glomerulonephritis). Chronic glomerulonephritis in outpatient practice. Chronic pyelonephritis in outpatient practice.</p> <p>6. CKD. Acute renal failure in outpatient practice in the elderly. Emergencies in nephrology at the prehospital stage. CW No. 5 /Pr/</p>	10	15	PC-7	L1.1 L1.2 L1.3 L1.4 L1.6 L1.7L2.1 L2.4 L2.7L3.5 E1 E2 E5 E7 E10			

6.3	<p>1. The importance of streptococcal infection in the development of acute respiratory disease and prevention</p> <p>2. Basics of cardiac auscultation in heart defects.</p> <p>3. Joint syndrome in elderly people in a clinic setting.</p> <p>4. Osteoporosis in the elderly: diagnosis, prevention and treatment.</p> <p>5. Urinary syndrome in the practice of a local therapist (acute glomerulonephritis) in outpatient practice</p> <p>6. Chronic kidney disease in the elderly in outpatient practice</p> <p>/Ind/</p>	10	8	PC-7	L1.1 L1.2 L1.3 L1.5 L1.6 L1.7L2.1 L2.4 L2.7L3.5 E1 E2 E4 E5 E7 E10			
	Section 6. Hematology. Endocrinology							
7.1	<p>1. Diabetes mellitus, tactics of patient management in outpatient settings. Treatment of diabetes mellitus in the elderly.</p> <p>2. Thyroid diseases in outpatient practice. Diagnosis, treatment , and specific features in the elderly.</p> <p>3. Anemic syndrome in outpatient practice. Anemia in the elderly: diagnosis, treatment, and characteristics.</p> <p>/Lek/</p>	10	6	PC-7	L1.1 L1.3 L1.5 L1.6 L1.7L2.1 L2.5 L2.7L3.3 L3.7 E5 E7 E8 E9			

7.2	<p>1. Diabetes mellitus: outpatient management strategies. Metabolic syndrome in the elderly.</p> <p>2. Iodine deficiency syndrome in outpatient practice. Thyroid diseases in outpatient practice: administration and diagnostic considerations in the elderly</p> <p>3. Emergency conditions in diabetology in a polyclinic setting, including in the elderly.</p> <p>4. Anemic syndrome, iron, B12, and folate deficiency anemia in outpatient practice. Features of diagnosis and treatment in older people. Aplastic anemia.</p> <p>5. Nutritional problems in the elderly: deficiency of vitamins, proteins, microelements.</p> <p>6. Multiple myeloma: clinical syndromes. Diagnostic criteria, outpatient treatment principles in the elderly.</p> <p>CW No. 6 /Pr/</p>	10	18	PC-7	L1.1 L1.2 L1.3 L1.4 L1.6 L1.7L2.1 L2.5 L2.6 L2.7L3.3 L3.7 E1 E2 E4 E5 E7 E8 E9	2		Station "Medical examination of the adult healthy population" in the Center for Social Development and Autonomous Inspection
7.3	<p>1. Thyrotoxic and Addisonian crises, hypothyroid coma in the practice of a local physician</p> <p>2. Anemic syndrome in the practice of a local physician.</p> <p>3. Anemia in the elderly</p> <p>4. Thrombosis and embolism in the elderly: diagnosis, prevention and treatment.</p> <p>5. /Wed/</p>	10	7.4	PC-7	L1.1 L1.2 L1.3 L1.4 L1.6 L1.7L2.1 L2.5 L2.6 L2.7L3.3 L3.7 E1 E2 E4 E5 E7 E8 E9			
7.4	/CreditSocial/	10	0.3	PC-7	L1.1 L1.2 L1.3 L1.4 L1.7L2.1 L2.4 L2.5 L2.6 L2.7L3.3 L3.4 L3.5 L3.6 L3.7 E1 E2 E4 E5 E6 E7			
7.5	/KrTO/	10	0.3					

5. ASSESSMENT TOOLS FUND

5.1. Test questions and tasks

Questions to check your level of knowledge KNOW

11th semester

1. Organization of outpatient therapeutic services in the Russian Federation and Kyrgyzstan.
2. Medical examination - definition. Groups of patients undergoing medical examination. Criteria for the effectiveness of medical examination.
3. Disability - definition. Disability groups.
4. Assessment of working capacity. Classification of types of work. Types of loss of working capacity.
5. What are the main biological mechanisms underlying the aging process, and how do they affect the functioning of organs and systems in older adults?
6. What are the key principles of comprehensive geriatric assessment, and why is it crucial in the management of elderly patients
7. Prevention - definition, classification, goals.
8. What is a geriatric syndrome? Give examples of such syndromes.
9. Principles of outpatient care for elderly and senile patients with internal organ diseases.
10. What is multiple polypharmacy syndrome and what risks does it pose for older adults?
11. Outpatient care of patients with acute viral upper respiratory tract infections. Expertise in VUT. Criteria for recovery and restoration of work capacity.
12. Outpatient treatment of patients with acute viral upper respiratory tract infections, including the elderly. Indications for hospitalization. Primary prevention, management tactics, and the importance of vaccination.
13. Outpatient management of patients with community-acquired pneumonia. Selection of antibacterial therapy and evaluation of its effectiveness. Non-drug treatments. Prevention.
14. Outpatient management of patients with community-acquired pneumonia. Outpatient treatment (WAP) and its optimal timing. Factors influencing its duration. Criteria for recovery and restoration of work capacity. Prevention and clinical examination.
15. Outpatient care of patients with bronchial asthma. Clinical examination. Secondary prevention. Indications for spa treatment.
16. Bronchial asthma. Examination in a clinic setting. Treatment during the interictal period. Relief of an attack in a clinic setting.
17. Outpatient care of patients with chronic obstructive pulmonary disease. Diagnostic criteria. Treatment. Timing of VUT. Secondary prevention. Clinical examination.
18. Early diagnosis, provision of first aid at the local level: pulmonary hemorrhage, acute respiratory failure.
19. Acute viral infections of the upper respiratory tract. Definition, etiology, classification. Distinctive features of the clinical manifestations of influenza and other respiratory infections.
20. Community-acquired pneumonia. Early symptoms of pneumonia. Clinical and laboratory diagnostic methods at the outpatient stage in the elderly.
21. Chronic obstructive pulmonary disease, etiology, and risk factors. Diagnostic criteria. Outpatient management of elderly and senile patients with COPD.
22. Outpatient care of patients with chronic pulmonary heart disease. Diagnostic criteria. Treatment of chronic pulmonary heart disease at the outpatient stage. Indications for hospitalization.
23. Pulmonary embolism, etiology, risk factors. Clinical presentation, diagnosis, and prehospital emergency care.
24. Various types of pulmonary failure. Acute and chronic pulmonary failure, diagnostic features, and outpatient treatment principles. Indications for hospitalization.
25. Chronic obstructive bronchitis: etiology, risk factors. Classification. Diagnostic criteria. Outpatient treatment. Indications for hospitalization.
26. Outpatient management of patients with pleurisy. Diagnostic criteria. Primary and secondary prevention. Indications for hospitalization.
27. What are the characteristics of the course and treatment of asthma and chronic obstructive pulmonary disease (COPD) in the elderly?
28. Coronary heart disease (CHD). Definition. Relevance of the problem, social significance. Risk factors for CHD, their significance. Classification of CHD according to WHO. Primary and secondary prevention.
29. Risk factors for coronary heart disease, their significance, and classification. Diagnostic criteria for stable angina and the possibility of verification in a clinic. Treatment in a clinic setting. Indications for surgical treatment.
30. CHD. Stable angina, classification. Diagnostic criteria for angina. Outpatient management of patients with stable angina. The role of monitoring risk factors for CHD. Indications for hospitalization.
31. Unstable angina, classification, and diagnostic criteria. Outpatient physician tactics for identifying a patient with suspected ACS in an outpatient setting.
32. CHD. Acute myocardial infarction: definition, diagnostic criteria. Clinical approach for a general practitioner with suspected acute myocardial infarction.
33. Providing emergency care for acute myocardial infarction at the prehospital stage in an outpatient setting. Possibilities of diagnosing myocardial infarction in an outpatient setting. Diagnostic criteria. Principles of outpatient care for elderly and senile patients who have suffered an acute myocardial infarction. Types of rehabilitation: medication, physical, psychological, social, and occupational. Medical and social assessment.
34. Hypertension. Definition, risk factors, classification. Blood pressure measurement techniques. Clinical presentation. Outpatient examination options. Non-drug and drug treatments.
35. The role of early detection of patients with hypertension. Diagnostic criteria. Outpatient management of patients with hypertension. Indications for hospitalization. Timing of VUT. Clinical examination.

37. Nephrogenic arterial hypertension: classification, diagnostic criteria, and treatment tactics. Indications for hospitalization. Clinical examination.
38. Pheochromocytoma. Diagnostic criteria. Importance of topical diagnostics. Treatment tactics. Occupational prognosis. Contraindicated types and conditions of work.
39. Primary hyperaldosteronism. Diagnostic criteria. Treatment tactics. Medical examination. Medical and Social Expertise Commission.
40. Coarctation of the aorta. Definition. Diagnostic criteria. Management and treatment tactics. Clinical examination.
41. Vasorenal hypertension. Diagnostic criteria. Instrumental diagnostic methods at the outpatient stage. The importance of early diagnosis and principles of treatment. Clinical examination.
42. Dilated cardiomyopathy. Clinical and diagnostic criteria. Outpatient management of patients with dilated cardiomyopathy . Treatment principles. Indications for hospitalization.
43. Hypertrophic cardiomyopathy. Clinical presentation, outpatient diagnostics. Treatment principles. Indications for hospitalization.
44. Cardiomyopathies: concept and classification. Principles of outpatient cardiomyopathy management. Indications for hospitalization.
45. Chronic heart failure: definition. Diagnostic criteria. Treatment principles. The role of patient education: keeping a self-monitoring diary. Prevention. Assessment of work capacity.
46. Chronic heart failure: clinical and objective symptoms of right ventricular heart failure. Diagnosis. Treatment principles. The role of patient education: keeping a self-monitoring diary. Prevention. Medical examination. Occupational prognosis.
47. Outpatient management of patients with chronic heart failure. Clinical symptoms. Indications for hospitalization. Timing of hospitalization depending on the functional class. Diagnostic options in an outpatient setting. Treatment principles.
48. Arrhythmias caused by impaired excitability. Classification. Clinical presentation, diagnostic methods in the outpatient clinic. Indications for hospitalization.
49. Extrasystole: definition. Classification. Diagnostic criteria. Specifics of medical management in elderly and senile patients, indications for prescribing antiarrhythmic drugs. Indications for hospitalization.
50. Atrial fibrillation and atrial flutter. Definition. Clinical manifestations, ECG signs. Management of patients, including elderly patients, with persistent atrial fibrillation. Indications for hospitalization. Occupational examination and prognosis.
51. Ventricular fibrillation and flutter. Definition. Clinical presentation, ECG signs. Clinical approach for treating ventricular fibrillation.
52. Asystole. Clinical and ECG signs. Clinical physician's tactics for asystole.
53. Arrhythmias caused by conduction disturbances. Classification. Examination and treatment tactics. Indications for hospitalization for bradycardia.
54. Tactics of a clinic doctor in the event of sudden death.
55. Infectious myocarditis. Etiology. Classification. Clinical manifestations. Diagnostic options in the outpatient clinic. Management tactics.
56. Infectious myocarditis. Clinical presentation, diagnosis, and treatment. Timing of VUT. Medical examination. Occupational examination. Prognosis.
57. Pericarditis. Etiology, classification. Subjective and objective data. Diagnosis and treatment tactics. Indications for hospitalization. Clinical examination.
58. Acute rheumatic fever in the outpatient setting. Primary and secondary prevention. Clinical examination. VUT examination, its duration, criteria for recovery and restoration of work capacity. Clinical examination.
59. Outpatient care of patients with acquired heart defects. Peculiarities of the course of rheumatic heart defects in the elderly.
60. How common are cardiovascular diseases in older people and what are the specifics of their treatment at this age?
61. How does aging of the body affect the development of arterial hypertension?

12th semester

1. Outpatient care of patients with systemic lupus erythematosus. Diagnostic criteria. Prevention and clinical examination.
2. Outpatient management of patients with infective endocarditis. Early diagnosis in therapeutic practice. Medical and social expert commission. Clinical examination. Primary and secondary prevention of septic conditions.
3. Outpatient care of patients with rheumatoid arthritis. Persistent disability. Secondary prevention. Clinical examination.
4. Outpatient management of patients with osteoarthritis. Comorbid conditions in osteoarthritis. Treatment. Work capacity. Secondary prevention.
5. Outpatient management of patients with gout. Diagnostic criteria. Complications. Treatment. Clinical examination. Indications for hospitalization.
6. Infective endocarditis. Diagnostic criteria, rehabilitation, and prevention of complications. Indications for hospitalization.
7. Outpatient management of patients with systemic sclerosis. Etiology. Classification. Diagnostic criteria. Treatment principles. Indications for hospitalization.
8. Medical and social expertise of patients with systemic scleroderma. Medical examination.
9. Osteoarthritis (OA). Factors predisposing to OA development. Diagnostic criteria. Primary prevention. Indications for hospitalization. Treatment principles.

10. Acquired heart defects. Definition, classification, and etiology. Criteria for early diagnosis of mitral and aortic heart defects. Indications for hospitalization.
11. Rheumatoid arthritis (RA). The most typical clinical signs of RA. Diagnostic criteria for RA. Outpatient treatment.
12. Osteoarthritis. Medical and social examination. Medical examination.
13. Gout. Diagnostic criteria. Treatment. Relief of an acute gout attack in the outpatient setting. Indications for hospitalization.
14. Differential diagnosis and treatment of joint syndrome in outpatient practice.
15. Outpatient management of patients with chronic gastritis: classification, diagnostic criteria. Indications for hospitalization.
16. Treatment of patients with chronic gastritis: non-drug and drug therapy. Medical examination. Assessment of work capacity.
17. Outpatient management of patients with gastric and duodenal ulcers. Diagnostic criteria. Indications for hospitalization.
18. Tactics of a polyclinic therapist in the event of complications of gastric ulcer and/or duodenal ulcer (bleeding, pyloric stenosis, penetration, perforation, malignancy).
19. Outpatient care for patients with gastric and duodenal ulcers. Anti-relapse therapy. Secondary prevention. Sanatorium and spa treatment. Clinical examination. Capacity for work assessment.
20. Chronic hepatitis. Classification. Diagnosis. Indications for hospitalization.
21. Chronic hepatitis: principles of outpatient care for patients with chronic viral hepatitis. Prevention. Causes of chronic viral hepatitis. Medical examination. Assessment of work capacity.
22. Liver cirrhosis. Classification. Clinical and laboratory diagnostics. Treatment principles. Indications for hospitalization.
23. Principles of outpatient care for patients with liver cirrhosis. Medical examination. Assessment of work capacity.
24. Classification and definition of enteritis and colitis. Etiology, diagnostic criteria. Treatment in a clinic setting.
25. Inflammatory bowel diseases: enteritis, colitis. Sanatorium and spa treatment. Prevention. Medical examination. Fitness assessment.
26. Nonspecific ulcerative colitis: clinical presentation, course, and outpatient treatment. Clinical examination. Assessment of work capacity.
27. Crohn's disease. Etiological factors. Clinical manifestations: intestinal and extraintestinal. Basic principles of treatment in a general clinic setting.
28. Crohn's disease: course, treatment in a clinic. Medical examination. Assessment of work capacity.
29. Chronic acalculous cholecystitis. Etiology, risk factors. Diagnostic criteria. Outpatient treatment tactics. Prevention.
30. Dyskinesia of the biliary tract. Causes and clinical manifestations. Outpatient management . Treatment and prevention. Occupational prognosis.
31. Chronic pancreatitis. Classification. Treatment in a polyclinic setting. Medical examination. Assessment of work capacity.
32. Outpatient management of patients with acute glomerulonephritis. Diagnostic criteria. Indications for hospitalization. Treatment principles.
33. Acute glomerulonephritis: timing of VUT, the importance of clinical examination to prevent chronicization. Outpatient management . Sanatorium and spa treatment.
34. Outpatient management of patients with chronic glomerulonephritis. Diagnostic criteria. Indications for hospitalization.
35. Chronic glomerulonephritis: treatment. Indications for referral to chronic hemodialysis. Criteria for VUT. Causes of persistent disability. Medical examination.
36. Chronic pyelonephritis. Definition. Clinical presentation, laboratory and instrumental studies. Indications for hospitalization.
37. Outpatient management of patients with chronic pyelonephritis. Diagnostic criteria. Indications for hospitalization. Principles of management. Prevention.
38. Acute kidney injury. Definition, causes. Principles of diagnosis and treatment. Indications for hospitalization.
39. Chronic kidney disease (CKD), definition. Classification of CKD by stages. Early clinical and laboratory symptoms, treatment in a clinic setting. Management tactics in the elderly and senile population.
40. Chronic kidney disease. Indications for referral to chronic hemodialysis. Criteria for VUT. Causes of persistent disability. Medical examination.
41. Chronic pyelonephritis. Diagnostic criteria, including in the elderly. Indications for hospitalization. Prevention.
42. Chronic pyelonephritis. Treatment during exacerbations and remissions. Drug and non-drug therapy. Spa treatment. VUT criteria.
43. Chronic pyelonephritis. Primary and secondary prevention in the elderly. Clinical examination.
44. Diabetes mellitus types 1 and 2: risk factors, clinical features. Early diagnosis of diabetes. Indications for hospitalization.
45. Outpatient management of patients with diabetes mellitus. Indications for hospitalization.
46. Macro- and microvascular complications of diabetes mellitus. Prevention and basic principles of treatment in the clinic.
47. Medical examination of patients with diabetes mellitus. Medical and Social Expertise (MSE) and VUT in diabetes mellitus
48. What are the specific features of treating type 2 diabetes in the elderly?
49. Metabolic syndrome in outpatient settings. Diagnostic criteria. Prevention. Management tactics.

50. Possibilities of managing patients with thyroid diseases at the outpatient stage.
51. Indications for hospitalization, surgical and radiological methods of treating thyroid diseases
52. Medical examination of patients with thyroid diseases.
53. Iodine deficiency syndrome in outpatient practice. Diagnosis in the elderly and senile. Treatment tactics. Prevention.
54. Hypoglycemic coma. Causes. Diagnosis. Management tactics. Prevention.
55. Hyperglycemic (hyperosmolar) coma. Causes. Diagnosis. Management tactics. Emergency care.
56. Hypoglycemic (hyperketonemic) coma. Causes. Diagnosis. Management tactics. Emergency care.
57. Hypothyroidism – definition. Diagnostic criteria, including in the elderly. Outpatient management of patients with hypothyroidism.
58. VUT and MSE for thyroid diseases.
59. What is "nutritional deficiency" in the elderly? What consequences can it lead to?
60. Outpatient management of patients with iron deficiency anemia. Diagnostic criteria, including in the elderly. Treatment principles. Monitoring the effectiveness of iron therapy and its duration. Indications for hospitalization.
61. Medical examination of patients with iron deficiency anemia. Primary and secondary prevention. Timing of VUT.
62. Outpatient management of patients with B12-deficiency anemia, diagnostic criteria. Indications for hospitalization. Treatment.
63. Hemolytic anemias. Classification. Diagnosis. Management tactics. Indications for hospitalization. MES.
64. Myeloma disease - clinical presentation, diagnostic options in a clinic, treatment principles.
65. Anemic coma. Emergency diagnosis and first aid.
66. What changes occur in the musculoskeletal system with age and how can they lead to disability?
67. How does aging affect muscle mass and strength? What is sarcopenia and how can it be treated?
68. How does aging affect cognitive functions and what disorders can develop in old age?

List of typical tasks for checking the level of training to BE ABLE to do and MASTER: see Appendix No. 2.

5.2. Topics of coursework (projects)

Coursework is not provided.

5.3. Assessment Fund

TEST. List of test questions (Appendix No. 1)

SITUATIONAL PROBLEM. List of tasks (Appendix No. 2)

REPORT WITH ABSTRACT. The student independently chooses the topic of the abstract in accordance with the topic.

Topics of the reports:

1. Diet therapy for diseases of the respiratory and circulatory organs
2. Diet therapy for diseases of the gastrointestinal tract and urinary system
3. Covid-19 etiology, clinical manifestations, and outpatient diagnosis
4. Atypical pneumonia in outpatient practice
5. Features of the course and management of patients with pneumonia in the elderly and senile age
6. Primary and secondary prevention of COPD
7. Arterial hypertension in pregnant women, pregnancy management tactics
8. Outpatient management of patients who have had an acute myocardial infarction
9. Primary prevention of myocarditis
10. Primary and secondary prevention of cardiomyopathies
11. Prevention of congenital heart defects in Kyrgyzstan
12. Potential of outpatient services in early diagnosis of arrhythmias
13. The importance of streptococcal infection in the development of acute respiratory disease and prevention
14. Indications and monitoring of treatment with immunosuppressants and biological agents in the clinic
15. Inflammatory and functional bowel diseases in the practice of a local therapist
16. Bowel diseases: ulcerative colitis, irritable bowel syndrome, rare forms
17. Dysbacteriosis and its role in the development of chronic enterocolitis

REPORT WITH PRESENTATION. The student independently chooses a topic according to the subject matter.

Presentation topics:

1. Acute respiratory failure in outpatient practice
2. PE in the clinic
3. Pulmonary hemorrhage, tactics of the local therapist
4. Hypertensive crises at the pre-hospital stage
5. Differential diagnosis of angina pectoris at the outpatient stage
6. Diagnosis and provision of first aid and medical care in case of complications
7. Paroxysmal forms of rhythm disturbances in outpatient practice:
 - atrial fibrillation and flutter;
 - paroxysmal tachycardia;
 - ventricular fibrillation and flutter
 - blockades, MES syndrome
8. Self-monitoring in CHF. Patient education
9. Attack of cardiac asthma and pulmonary edema in outpatient practice

10. Features of physical activity in congestive heart failure
11. Chronic kidney diseases in outpatient practice
12. Emergency nephrology at the pre-hospital stage
13. Thyrotoxic and Addisonian crises, hypothyroid coma in the practice of a local physician
14. Anemic syndrome in the practice of a local physician
15. Anemic coma
16. Blast crisis in the practice of a local doctor

Interpretation of ECG (Appendix No. 4), tests (Appendix No. 6)

X-RAY (Appendix No. 5)

CARE OF OUTPATIENTS.

Each student is assigned one patient with medical diseases to supervise.

PRACTICAL SKILLS FOR EXAMINING a patient in an outpatient setting:

On the patient being consulted it is necessary:

15-20 minutes are allocated for each patient.

1. Collect complaints and anamnesis from a patient with internal organ diseases.
 2. Examine and assess the condition of the respiratory, cardiovascular, musculoskeletal, digestive, urinary, nervous, endocrine and hematopoietic systems (examination, palpation, percussion and auscultation of internal organs).
 3. Identify symptoms and syndromes of internal organ diseases, interpret the results of anamnesis and physical examination data, and make a preliminary diagnosis.
 4. In accordance with the preliminary diagnosis, prescribe the necessary and possible laboratory and instrumental studies at the outpatient stage.
 5. At the follow-up appointment, make a clinical diagnosis taking into account the latest classifications based on the results of laboratory and instrumental data.
 6. Provide emergency medical care for certain emergency conditions at the outpatient stage.
 7. Carry out prevention of the main therapeutic diseases.
 8. Decide on the treatment strategy for the patient being consulted (prescribe non-drug (regime, diet) and drug treatment on an outpatient basis. Or identify indications for hospitalization).
- Registration for dispensary care. Conduct preventive treatment (primary, secondary, tertiary).
9. Decide on the work capacity of a specific patient.
 10. Decide on the period of temporary disability or identify the criteria for disability for a specific disease and resolve the issue of medical and social examination.

REGISTRATION OF AN OUTPATIENT CARD.

SCHEME FOR WRITING an outpatient card:

TITLE PAGE – contains the details of the university, the name of the department, and the full name student with indication of group and year, full name, position, rank and degree of the teacher.

Example of design:

KRSU

Head of Department: rank, degree, full name

Teacher: rank, degree, full name

Medical record of a patient receiving medical care on an outpatient basis (registration form No. 025/u)

Curator: Full name of the student, year, group

PASSPORT SECTION:

Last name, first name, patronymic.

Home address.

Date of the patient's first visit. Doctor's appointment - Therapist

1. Patient's complaints (first of all, the main ones, then general ones)
2. History of the disease (how the disease began, how it developed, what medications the patient received independently, what was the effect of the treatment).
3. Life history. Diseases suffered in childhood.
3. Status praesens objectivus (objective examination data):
Somatic status (according to the standard scheme)
Preliminary diagnosis: made on the basis of complaints, anamnesis data, objective examination and physical data.
5. Patient examination plan (logically follows from the preliminary diagnosis, which must either be confirmed or refuted).
6. The next appointment with the doctor is carried out immediately after receiving the patient's laboratory and instrumental data.
7. A clinical diagnosis is made.
8. Prescribed treatment (starting with non-drug treatment - regimen, diet, cessation of bad habits. If necessary, five-minute conversations about risk factors and triggers. Drug treatment - writing prescriptions indicating the calculated dose, method and frequency of administration).
9. Recommendations are written out for the patient (A follow-up visit to the local doctor. The presence of indications for hospitalization. Questions about the duration of temporary disability, about the patient's future ability to work. Recommendations for work

regime after incomplete recovery).

10. Signature of the curator

TEST after each module (consists of a task (Appendix No. 2), a test (Appendix No. 1), an analysis (Appendix No. 6) or an ECG (Appendix No. 4), or an X-ray film (Appendix No. 5), depending on the topic of the lesson).

5.4. List of types of assessment tools

Tests
X-ray films
Situational tasks
Report with an abstract
Presentation
Test
Interpretation of ECG and tests
Outpatient care
Rating scales for types of assessment tools in Appendix No. 3
Outpatient card

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

6.1. Recommended literature

6.1.1. Primary Literature

	Authors, compilers	Title	Publisher, year
L1.1	Prof. I.I. Chukaeva, Prof. B.Ya. Barta	Outpatient therapy	Knorus 2017
L1.2	Davydkin Igor Leonidovich	Outpatient therapy	GEOTAR-Media 2016
L1.3	Storozhakov G.I., Chukaeva I.I.	Outpatient therapy	GEOTAR-Media 2013
L1.4	I.M. Starovoitova, K.A. Sarkisov, N.P. Potekhin	Medical examination	GOETAR-Media 2010
L1.5	B. Kaganov, H. Sharafetdinov	Therapeutic nutrition for chronic diseases	Eksmo 2014
L1.6	Viktorova I.A.	Examination of temporary disability and medical and social examination in outpatient practice	2015
L1.7	Zyuzenkov M.V., Mesnikova I.L., Khursa R.V.	Outpatient Therapy: A Textbook	

6.1.2. Further reading

	Authors, compilers	Title	Publisher, year
L2.1	I.M. Starovoitova, K.A. Sarkisov	Medical examination. Examination of temporary disability, medical and social, military medical examination.	GEOTAR - Media 2010
L2.2	Arkhangelskaya G.S., Bakcheeva R.F., Boriskin P.V.	Selected Lectures on Gerontology and Geriatrics. Textbook	
L2.3	Sabirov I.S.	Pulmonary arterial hypertension and pulmonary heart disease in outpatient practice: a monograph	2009
L2.4	Ed. I.E. Tareeva	Nephrology: A Handbook for Physicians: In 2 volumes. Volume 1: Scientific	M.: Medicine 1995
L2.5	A.R. Raimzhanov	Hemostasis system and disseminated intravascular coagulation	2012
L2.6	Usenova A.A., Raimzhanov A.R., Makimbetov E.K.	Epidemiological features of leukemia in Kyrgyzstan: a monograph	Bishkek: KRSU Publishing House 2009
L2.7	Zadionchenko VS, Koltsov P.A., Livandovsky Yu.A.	Treatment of medical patients in a polyclinic.	2003

6.1.3. Methodological developments

	Authors, compilers	Title	Publisher, year
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	Authors, compilers	Title	Publisher, year
L3.1	Beishenkulov M.T., Chazymova Z.M., Tagaeva A.K., Kaliev K.R.	Emergency conditions in cardiology	2016
L3.2	Murataliev T.M., Sabirov I.S., Rajapova Z.T., Dzhaylobaeva K.A.	Pulmonary embolism. Modern approaches to diagnosis and treatment: a methodological guide	Bishkek: KRSU Publishing House 2016
L3.3	Bobusheva G.S. Sabirov I.S., Dzhaylobaeva K.A. etc.	Differential Diagnosis and Treatment in Endocrinology: A Tutorial	2011
L3.4	Dzhaylobaeva K.A., Mirbakieva D.M., Sabirov I.S.	Diagnostic and Treatment Issues in Gastroenterology: A Textbook	2016
L3.5	D.M. Mirbakieva, K.A. Dzhaylobaeva, I.S. Sabirov and others.	Issues of differential diagnosis and treatment of kidney diseases	2012
L3.6	Murataliev T.M., Sabirov I.S., Rajapova Z.T., Dzhaylobaeva K.A.	Pulmonary Embolism: Modern Approaches to Diagnosis and Treatment: A Methodological Guide	Bishkek: KRSU Publishing House 2016
L3.7	Makimbetov E.K., Tsopova I.A., Usenova A.A., Raimzhanov A.R.	Acute leukemia: Guidelines	Bishkek: KRSU Publishing House 2006
L3.8	Sabirov I.S., Dzhaylobaeva K.A., Bobusheva G.S., Abdulkadyrova Z.A.	Pulmonology Issues: A Textbook for Extracurricular Training of Senior Students	Bishkek: KRSU Publishing House 2009
L3.9	Sabirov I.S., Sarybaev A.Sh., Maripov A.M., Yusupov S.A., Mirrakhimov M.M.	Acute respiratory viral infections and acute inflammatory diseases of the pharynx in outpatient practice: a tutorial	Bishkek: KRSU Publishing House 2009
L3.10	Eredzhepova L.N.	Optimization of the management of patients with chronic obstructive pulmonary disease (COPD) at the primary level of health care in Kyrgyzstan: Abstract of a dissertation for the degree of candidate of medical sciences	Bishkek 2009
L3.11	Shakhnabieva S.M., Sabirov I.S., Rysmatova F.T.	Congenital heart defects: monograph	Bishkek: KRSU Publishing House 2018

6.2. List of resources of the information and telecommunications network "Internet"

E1	Medical and social examination	www.invalidnost.com
E2	RMZh is an independent publication for practicing physicians.	www.rmj.ru
E3	Israeli cardiology in Russian	www.cardiosite.net
E4	Medscape - a web resource for doctors	www.medscape.com
E5	Electronic Library of KRSU	www.lib.krsu.kg
E6	Covid-19 Clinical Protocol	https://med.kg/clinicalProtocols
E7	Clinical guidelines for geriatrics	https://rgnkc.ru/o-tsentre/specialistam/klinicheskie
E8	Clinical guidelines for diabetes mellitus	https://www.endocrincentr.ru/sites/default/files/specialists
E9	Clinical guidelines for anemia	https://www.endocrincentr.ru/sites/default/files/specialists
E10	Clinical guidelines for rheumatology	https://rheumatolog.ru/experts/klinicheskie-rekomendacii/

E11	Clinical guidelines of the Russian State Academy of Medicine	https://www.gastro.ru/klinicheskie-rekomendatsii-roa
6.3. List of information and educational technologies		
6.3.1 Competency-oriented educational technologies		
6.3.1.1	Traditional educational technologies—verbal methods (lectures, discussions, discussions, explanations)—are primarily focused on communicating knowledge and methods of action, conveyed to students in a ready-made form and designed for reproducible assimilation and analysis of specific examples. Practical classes are most often held directly at the KRSU outpatient clinic, with mandatory patient admission.	
6.3.1.2	Innovative educational technologies—activities that develop systems thinking and the ability to generate ideas when solving various creative problems. These include activities in a simulation center.	
6.3.1.3	Information and educational technologies - In the process of teaching the discipline, modern information, communication and educational technologies are actively used, aimed at improving the effectiveness of assimilation of educational material and development of independent work of students. Use of digital platforms and software: educational platform 1C: Education - for accounting, planning, completion of practical and control assignments; corporate communications system Microsoft Teams (Office 365) - for conducting online classes, webinars, consultations, as well as exchanging educational materials and completing group projects; electronic library of KRSU (https://lib.krsu.kg/) - for access to educational and methodological literature, scientific articles, reference materials and publications; official website of the discipline / department - for posting methodological instructions, graphs, current information on the course. Preparation of lectures and presentations using multimedia technologies; organization of interactive forms of training (tests, online surveys, discussions).	
6.3.2 List of information reference systems and software		
6.3.2.1	www.med.kg - electronic library of the Ministry of Health of the Kyrgyz Republic	
6.3.2.2	www.rmj.ru - an independent publication for practicing physicians	
6.3.2.3	http://medic.ossn.ru - Society of Heart Failure Specialists	
6.3.2.4	www.cardiosite.ru - Israeli cardiology in Russian	
6.3.2.5	www.medmir.com - reviews of world medical journals in Russian	
6.3.2.6	www.medscape.com - a web resource for doctors	
6.3.2.7	www.escardio.org - European Society of Cardiology	
6.3.2.8	www.guideline.gov - a public resource for summaries of evidence-based clinical practice guidelines	
6.3.2.9	www.invalidnost.com - medical and social examination	
6.3.2.10	Electronic library system "ZNANIUM.COM"	
6.3.2.11	www.med-edu.ru - a website for doctors Medical video portal	
6.3.2.12	Information system "Single window of access to educational resources" (http://window.edu.ru/)	
6.3.2.13	http://www.med-edu.ru/articles	
6.3.2.14	Electronic Library of KRSU (www.lib.krsu.kg)	
6.3.2.15	Electronic library system "ZNANIUM.COM"	

7. LOGISTICS AND TECHNICAL SUPPORT OF THE DISCIPLINE (MODULE)

7.1	The course is taught at the Kyrgyz-Russian Slavic University outpatient clinic, which has three classrooms, and at the Family Medicine Center of the 4th City Clinical Hospital, which has one classroom. A total of four classrooms are used to implement the educational process.	
7.2	Standard classrooms (approximately 15 square meters each). The classrooms are equipped with: desks and chairs (12 seats in each classroom); whiteboards and display stands; cabinets for storing visual aids and supplies; internet access and access to the university's local area network. Classes are held in two lecture halls (large and small), designed for 200 and 100 seats each. Lectures last two academic hours and include multimedia presentations, projectors, photos, and videos. Student presentations and reports are supported by computers, multimedia tools, and Microsoft Office programs (PowerPoint, Word, Excel, Teams).	

7.3	The simulation center (Alamedin-1 building) is equipped with robotic simulators, modern resuscitation equipment, electronic phantoms, training devices, interactive and medical equipment, instruments, and consumables.
7.4	Computer and multimedia equipment;
7.5	Training software discs;
7.6	Electronic library of the discipline in the library of KSMA (rental);
7.7	Website addresses of Russian publishers on internal medicine.
7.8	Audio lectures by the head of the department, academician M.M. Mirrakhimov on specific topics of internal medicine.
7.9	Traditional analog educational publications: lecture notes, teaching aids for studying theoretical material, etc.
7.10	Tables of models for various diseases of the respiratory, cardiovascular, digestive, urinary and musculoskeletal systems.
7.11	Discs, audio recordings of cardiac auscultation, radiography of respiratory organs for various diseases.

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

The technological map of the discipline is in Appendix No. 3.

Methodological recommendations for studying the discipline.

Recommendations for using the materials of the educational and methodological complex.

The specificity of the study of outpatient therapy lies in the use of basic teaching and methodological techniques:

student work in lectures, practical classes, the use of visual aids

(posters, dummies, multimedia slides) when studying individual topics, followed by a demonstration of thematic patients, as well as analysis and

supervision of thematic patients with the preparation of outpatient cards.

Methodological recommendations for independent extracurricular work of students in studying the discipline:

The study of the theoretical part of the course is intended not only to deepen and consolidate the knowledge acquired in the classroom, but also to promote the development of students' creative skills, initiative, and the organization of their free time.

The student's independent work in studying the discipline includes:

- reading recommended literature, internet sources and mastering the theoretical material of the discipline;

- preparation for various forms of control (survey, situational task, test, ECG, X-ray, analysis);

- writing an outpatient card for the supervised patient.

Students must plan the time required to study the subject throughout

the semester, while providing for regular repetition of the material.

Working with educational literature is considered a type of academic work in the discipline within the hours allocated for it.

Study (in the Independent Work Study section).

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

Student work in a group develops a sense of collectivism and communication skills.

Training students helps them develop ethical and deontological skills for communicating with outpatients.

The initial level of students' knowledge is determined by a knowledge assessment, ongoing monitoring of the mastery of the discipline, as well as

oral questioning during classes, during clinical analyses, and when solving typical situational problems.

SITUATIONAL PROBLEM

An example of implementation is in Appendix No. 7. Rating scales

REPORT

Preparing a report for class.

The main stages of report preparation are: choosing a topic; consulting with the instructor; preparing a report outline; working with sources and literature, collecting material; writing the report text; preparing the manuscript and submitting it to the instructor before the presentation, which determines the student's readiness to present; delivering the report, answering questions.

ABSTRACT

Recommendations for writing an abstract.

1. The topic of the paper is chosen in accordance with the student's interests and must correspond to the provided sample list. Section 5.3

2. The abstract should be based on the study of several sources additional to the main literature. (monographs, articles).

3. The outline of the paper should be the author's own. It reflects the author's approach, opinion, and analysis of the problem. As a rule, these are special monographs or articles.

4. All facts and borrowed ideas presented in the abstract must be accompanied by references to the source of information.

5. It is important to simply rephrase the text from one source of borrowed text. All citations must be presented in

Quotation marks, with the source and page number indicated in parentheses. The absence of quotation marks and references constitutes plagiarism and, according to

established scientific ethics, is considered a gross violation of copyright.

6. The abstract is formatted as text on standard-size sheets (A4) using Times New Roman font, 14 point. It begins with a title page, which indicates the name of the university, the academic discipline, the topic of the abstract, the student's last name and initials, and the year and geographic location of the university. This is followed by a table of contents indicating the page numbers of the sections.

It is advisable to divide the text of the abstract into sections: chapters, subchapters, and titles. The use of quantitative data and illustrations (graphs, tables, diagrams, and figures) in the abstract is encouraged.

7. The abstract concludes with the "Conclusion" and "Bibliography" sections. The conclusion presents the main findings, clearly stated in thesis form and usually numbered.

8. The bibliography must be compiled in full compliance with the current standard (rules), including the specific placement of punctuation marks. Generally, the most commonly used order of bibliographic references in our country is as follows:

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

Article title // Journal title. Year of publication. Volume __. No. __. Pages from __ to __.

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

Approximate content of the work: Title: Volume: 13-15 pages.

PRESENTATION in Microsoft PowerPoint

A presentation provides an opportunity to clearly present innovative ideas, developments, and plans. A classroom presentation is the result of independent student work, through which they visually demonstrate the materials of a public presentation to an audience. A computer presentation is a file containing the necessary materials, consisting of a sequence of slides. Each slide contains self-contained information, as it does not carry over to the next slide.

Automatically, unlike a text document. One of the main presentation programs worldwide is Microsoft's PowerPoint.

Presentation structure:

It is possible to hold the active attention of listeners for no more than 15 minutes, and, therefore, with an average viewing time of 1 minute per slide, the number of slides should not exceed 15.

The first slide of the presentation should contain the topic of the paper, the last name, first name, and patronymic of the presenter, the study group number,

and the last name, first name, patronymic, position, and academic degree of the instructor. The second slide should ideally present the purpose and summary of the presentation. Subsequent slides should be divided into sections according to the points of the work plan. The final slide should highlight the most important content of the presentation.

Recommendations for designing presentations in Microsoft PowerPoint:

For visual perception, the text on the presentation slides should be at least 18 pt, and for headings - at least 24 pt.

The presentation layout should be designed in a strict color scheme. The background should not be too bright or colorful.

The text should be easy to read. The same elements on different slides should be the same color. The slide (screen) space should be used as much as possible, for example, by increasing the scale of the image. In addition, whenever possible, it is necessary to occupy the upper 3/4 of the slide (screen) area, since the lower part of the screen is poorly visible from the back rows. Each slide should contain a title. A period is not placed at the end of the titles.

The titles should reflect

A conclusion drawn from the information presented on the slide. Headings in capital letters are only acceptable if they are brief. Slide length should be no more than 5-6 lines, and sentences should be no more than 5-7 words. Text on slides should be easily legible. When adding images, diagrams, charts, or screenshots, check the text for errors.

Avoid overloading slides with animation effects—this distracts listeners from the slide's content.

Use the same animation effect for each slide transition.

SECTION OF KNOWLEDGE

This assignment is completed in the form of a written response to a question or a situational problem based on the topical plan for practical training. The content of the answers on outpatient therapy should emphasize knowledge of faculty therapy, hospital therapy, and occupational diseases.

The purpose of the knowledge assessment is to determine the quality of assimilation of the material.

When preparing students for the knowledge assessment, it is necessary to use lecture materials and textbooks specified in the main list of literature of the working program of the discipline.

Students study the methodology of examining outpatients (section 5.3), practice practical skills in a group, and work with patients in emergency rooms under the guidance of a teacher.

For the work, it is recommended to use the methodological recommendations for the practical lesson, posters, tables, and methodological developments of the department - PATIENT EXAMINATION SCHEME.

The final stage of work is the supervision of the outpatient and the preparation of an OUTPATIENT CARD (see paragraph 5.3)

INTERIM CERTIFICATION is carried out using test control, solving situational problems,

TESTS (Appendix No. 1)

The proposed tests for midterm assessment are monosyllabic, with one correct answer.

ECG decoding means the answers according to the protocol:

1. The rhythm is correct, incorrect
2. Rhythm: sinus, non-sinus
3. Position of the EOS
4. Heart rate
5. Characteristics of intervals and teeth of the ventricular complex in the chest leads.

Conclusion.

Recommendations for preparation for differentiated testing:

When preparing students for the exam, the following textbooks should be considered:

1. Zyuzenkov M.V. - Outpatient therapy - 2021.
2. Outpatient therapy T.1 and T.2. textbook / comp.: S.M. Shakhnabieva, I.S. Sabirov, K.A. Dzhaylobaeva and others
3. Outpatient therapy – I. L. Davydkina, Yu. V. Shchukina. 2nd edition, 2020.
4. Lecture material, as well as publications published by the department
5. Website: Invalidnost.com
6. Fundamentals of geriatrics for primary care physicians - E.V. Sedova • F.N. Paleev, 2019
7. Gerontology and Geriatrics. Study Guide, 2024. B.V. Churin
8. Outpatient therapy: Textbook for students of medical universities. /for students of medical universities. /G.I. Storozhakov, I.I. Chukaeva, A.A. Aleksandrov. - M.: GEOTAR-Media, 2007.
9. Medical-labor examination, edited by Arbatskaya Yu.D. M., 2003.
10. Guide to primary health care. / Edited by Academician of the Russian Academy of Medical Sciences A.A. Baranov, Academician of the Russian Academy of Medical Sciences I.N. Denisov, Academician of the Russian Academy of Medical Sciences A.G. Chuchalin. - Moscow: GEOTAR-Media, 2007.
11. Treatment of medical patients in the outpatient clinic. Zadionchenko VS, Koltsov P.A., Livandovsky Yu.A., M., 2003
12. Outpatient Medicine: Diagnosis and Treatment of Major Diseases at the Pre-Hospital Stage: A Handbook for General Practitioners. //Ed. by G.A. Khai. - St. Petersburg: Polytechnic, 2002.
13. Gasilin VS, Kulikova NM Outpatient stage of rehabilitation of AMI. 2003
14. Intestinal dysbacteriosis as a clinical and laboratory syndrome: current state of the problem: manual. V.M. Bondarenko, T.V. Matsulevich. – M.: GEOTAR-Media, 2007.
15. Diseases of internal organs in outpatient practice / Edited by V.G. Radchenko. – St. Petersburg: Dialect, 2007.
16. Natochin Yu.V., Mukhin N.A. Introduction to nephrology: teaching aid. – M.: GEOTAR-Media, 2007.