

Questions to check your "KNOW" level of knowledge:

1. Structure of outpatient and polyclinic care for the population of the Kyrgyz Republic.
2. List of outpatient documentation completed by the physician when identifying diseases.
3. Organization of work with long-term and frequently ill individuals. Maximum permissible periods of temporary disability in long-term ill patients.
4. The concept of long-term or permanent loss of ability to work.
5. Objectives and tasks of medical examination.
6. Dispensary observation groups.
7. Key indicators for assessing the quality and effectiveness of medical examinations.

Questions to check the level of training "CAN":

1. Conduct an objective examination of the patient across all organs and systems, identify general and specific signs diseases.
2. Assess the severity of the patient's condition, determine the scope and sequence of necessary urgent, urgent, resuscitation measures.
3. Determine special research methods (laboratory, radiological, ultrasound, endoscopic, functional).
4. Justify and formulate a clinical diagnosis, conduct differential diagnostics, determine a plan and patient management tactics.
5. Prescribe medication and other treatment methods.
6. Assess the patient's ability to work and determine the prognosis.
7. Determine indications and organize hospitalization of the patient.
8. Conduct anti-epidemic measures when an infectious disease is detected.
9. Prepare medical documentation as required by healthcare legislation.

10. Be able to diagnose and provide emergency care in the following emergency conditions:

- fainting,
- hypertensive crisis,
- attack of angina pectoris,
- acute myocardial infarction,
- acute respiratory failure, pulmonary embolism,
- attack of bronchial asthma, asthmatic status,
- shock (cardiogenic, anaphylactic, infectious-toxic),
- paroxysmal tachycardia and tachyarrhythmia,

Morgagni - Adams -Stokes attacks ,

- pulmonary edema,
- acute allergic reactions,
- acute cerebrovascular accident,
- gastrointestinal bleeding,
- pulmonary hemorrhage,
- nosebleeds,
- pneumothorax,
- renal colic,
- acute renal, hepatic and adrenal insufficiency,
- hypoglycemic coma,
- ketoacidotic (hyperketonemic) coma,
- thyrotoxic crisis,
- acute diseases of the abdominal cavity (acute appendicitis, acute cholecystitis, pancreatitis, perforation of gastric ulcer and duodenum, acute intestinal obstruction).

Be able to evaluate:

- morphological and biochemical parameters of blood, urine, sputum, pleural and ascitic fluid,
- gastric and duodenal juice;

coagulation and acid-base balance indicators;

- fluoroscopy and radiography data of the chest and abdominal organs, urinary system, joints,

spine, skull; record electrocardiography data; data echocardiography; indicators of external auditory function

breathing; results of ultrasound examination of abdominal organs, kidneys;

- data from radioisotope studies of the thyroid gland, liver, kidneys;

- main hemodynamic parameters (stroke and minute volume, circulating blood volume, central venous pressure, ejection fraction, peripheral vascular resistance);

- results of immunological and serological studies (RW, immunoglobulins, hepatitis markers, etc.);

- results of hormonal blood tests (TSH, T3, T4, catecholamines, renin, ACTH, FSH, etc.);

- results of endoscopic examination (EGD, colonoscopy, bronchoscopy, rectoscopy, laparoscopy);

- glycemic profile indicators, glucose tolerance test.

Questions to check the level of "MASTER" training:

Conducting an analysis of morbidity in the assigned population; writing prescriptions (regular and discounted); filling out medical documents during medical examinations; determining indications for planned and emergency hospitalization of patients with a therapeutic profile; conducting examinations of temporary disability; making recommendations on disease prevention, a healthy lifestyle, taking into account the health status of those visiting the clinic; performing basic cardiopulmonary resuscitation and providing first aid in emergency conditions: acute coronary syndrome, hypertensive crisis, anaphylactic shock

Tests (Appendix No. 1)

Oral survey (Appendix No. 2)

Abstract (Appendix No. 3)

Independent work of a student (Appendix No. 4)

Practical skills (Appendix No. 5)

Rating scale (Appendix No. 6)

DEMO VERSION OF TESTS

1. Patients with rheumatoid arthritis are examined once a year during outpatient observation.

a) 4

b) 12

c) 1

d) 2

2. Patients suffering from COPD are examined in a clinic during dispensary observation.

a) 4 times a year b) 1 time a year

c) 2 times a year

d) once a month

3. The program of population medical examination for early diagnosis of COPD includes

a) spirometry

b) chest x-ray

c) cytological examination of sputum

d) determination of blood gas composition

4. The main sources of heme iron in the diet include:

a) meat

b) milk and dairy products; c) buckwheat

d) apples

5. The causes of alimentary genesis of iron deficiency anemia include:

a) insufficient consumption of meat; b) high physical activity.

c) insufficient consumption of fresh vegetables and fruits

d) insufficient consumption of fruits and vegetables containing iron

6. According to the WHO criteria for the age group 40-59 years, the threshold pulse rate is ___ beats per minute

a) 140

b) 180

c) 175

d) less than 120

7. Medical examination of certain groups of the adult population is carried out for every adult citizen

a) once every 3 years

b) once every 2 years c) annually

d) once every 4 years

8. The first stage of medical examination of certain groups of the adult population is carried out

a) all those subject to medical examination b) all men aged 21-99 years c) all women aged 21-99 years d) according to

indications

9. The second stage of medical examination of certain groups of the adult population is carried out

a) in accordance with the indications determined at stage 1

b) all men aged 45-66 years,

c) all women aged 45-66 years,

d) all those subject to medical examination

10. Anthropometrics is understood as

a) measuring height and body weight

b) height measurement

c) questionnaire

d) measuring hand strength

11. Anthropometry is carried out as part of a medical examination for

a) all those subject to medical examination

b) everyone who wants to

c) everyone over 40 years old

d) patients with elevated levels of total blood cholesterol

12. In a stable condition, the clinical examination of patients with CHF includes dynamic observation of the patient with

his visits to the doctor once a

- a) three months
- b) month
- c) two weeks
- d) a week

13. A patient with stage II hypertension with stable blood pressure of 220/120 mmHg should be in the outpatient department.

taking into account

- a) cardiologist
- b) local therapist
- c) head of the therapeutic department; d) nephrologist

14. The doctor shall issue a certificate of incapacity for work and shall extend it for a period of up to ____ calendar days.

- a) 15
- b) 10
- c) 20
- d) 30

15. The following persons have the right to receive a certificate of incapacity for work:

- a) a private practitioner with the appropriate license; b) a physician who is not on staff at a health care institution .

(private practitioner)

- c) blood transfusion station doctor d) first aid doctor

16. The clinic can extend the sick leave

- a) no more than 10 months b) up to 1 month
- c) up to 4 months
- d) no time limit

17. The validity period of the spa card is

- a) 2 months
- b) 1 month
- c) 10 days

d) 6 months

18. Of all the categories of doctors, only a physician can issue a certificate of incapacity for work.

a) trauma center

b) ambulance

c) sanitary doctor

d) blood transfusion stations

19. The attending physician alone can issue a certificate of incapacity for work for a maximum of _____ days.

a) 15

b) 6

c) 10

d) 20

20. The date of establishment of disability is

a) date of registration of documents in the bureau

b) date of direct examination; c) date of opening of sick leave

d) the next day after registration of documents at the bureau

21. The timeframe for issuing a sick leave certificate in case of a singleton pregnancy is from _____ weeks

pregnancy lasting _____ days

a) 30 140

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b) 28,140

c) 28,180

d) 30 180

22. Morbidity with temporary loss of ability to work means all cases

a) accompanied by temporary loss of ability to work in workers and employees

b) diseases (excluding trauma) accompanied by temporary loss of ability to work in workers and employees

c) illnesses for which a certificate of incapacity for work was issued; d) for which a certificate of incapacity for work was issued.

23. Patients with stage 1 hypertension are exempt from work in case of uncomplicated hypertensive crises.

for ____ days

- a) 5
- b) 14
- c) 7
- d) 10

24. Average duration of temporary disability during outpatient treatment of exacerbation

chronic acalculous cholecystitis is _____ day /days

- a) 14-20
- b) 7-10
- c) 21
- d) 28

25. A certificate of incapacity for work is issued for caring for a sick child aged 7 to 15 years in an outpatient setting.

treatment for each case of the disease for a period of up to ____ days

- a) 15
- b) 30
- c) 10
- d) 27

26. The decisive factor for the Medical and Social Expertise Commission to issue a conclusion on recognizing a person as disabled is

- a) unfavorable labor prognosis
- b) the patient's age
- c) defects in treatment
- d) a petition from the enterprise where the patient works

27. Isolated systolic arterial hypertension is an increase in blood pressure above _____mm Hg

a) 140 /< 90 b) 160/90 c) 150/100 d) 140/90

28. The main question that a load test can answer is

a) the probability of the presence of coronary heart disease

b) verification of IBS

c) the presence of a previous myocardial infarction

d) the presence of valve pathology

29. To establish a diagnosis of angina pectoris, it is usually sufficient

a) questioning the patient

b) computed tomography of the coronary arteries

c) coronary angiography

d) myocardial perfusion scintigraphy at rest

30. The basic examination of all patients with angina (including suspected) should include

a) standard blood tests, ECG , echocardiogram , stress test

b) treadmill test, echocardiography

c) standard blood tests, treadmill test, ECG

d) ECG , echocardiogram , stress test

5.4. List of types of assessment tools

Attendance (current control)

Report with presentation (current control)

Patient supervision (ongoing control)

Testing (midterm control)

Interview (midterm control)

TESTING RATING SCALE (current control)

At each practical lesson, the student is given a test consisting of 5 questions with one correct answer. When answering the tests: 0-40% of the questions (0-2 correct answers) - 0-1 point; 60% of the questions (3 correct answers) - 1.5 points; 80% of the questions (4 correct answers) - 2 points; 100% of the questions (5 correct

answers) - 2.5 points. All test scores are summed up and divided by the number of lessons in the section, i.e. the arithmetic mean is calculated.

number of points for the section.

ATTENDANCE ASSESSMENT SCALE (current monitoring)

When attending: 0-59% of classes in one section - 0-0.25 points 60-69% - 0.5 points
70-84% - 0.75 points 85-100% - 1 point

SRS ASSESSMENT SCALE (current control)

For each practical lesson, the student must complete homework : When completing 0-59% of the tasks of one

section – 0-0.9 points 60-69% - 1 point 70-84% - 1.25 points 85-100% - 1.5 points

TEST RATING SCALE (midterm control)

1. There are 20 questions in one test task.
2. The questions are given ready-made answers to choose from, one is correct and the rest are incorrect.
3. For each correct answer – 5%
4. The overall grade is determined as the sum of the percentages earned.
5. The accumulated percentage is converted into points.

From 0 to 60% (0-12 correct answers), then this is 0-7 points

From 65% to 75% (13-15 correct answers), then this is 8-9 points

From 80% to 90% (16-18 correct answers), then this is 10-11 points

From 95% to 100% (19-20 correct answers), then this is 12 points

INTERVIEW ASSESSMENT SCALE (midterm control)

“85-100%” • deep and solid understanding of the section material; • complete, consistent, competent and logically presented answers; • demonstration by the student of knowledge in the scope of the completed program and information from additional literature; • reproduction of educational material with the required degree of accuracy.

“70-84%” • presence of minor errors that are confidently corrected by the student after additional and leading questions; • demonstration by the student of knowledge within the scope of the completed program; • clear presentation of the educational material.

“60-69%” • presence of minor errors in the answer that are not corrected by the student; • demonstration by the student of insufficient knowledge of the completed program; • unstructured, incoherent presentation of the educational material in the answer.

“less than 60%” •lack of knowledge of the section material; •serious errors occur when answering.

ASSESSMENT SCALE FOR ORAL SURVEY (interim control – “KNOW”)

When assessing oral responses to the "KNOW" level of learning test, the following criteria are taken into account:

1. Knowledge of the basic processes of the discipline being studied, depth and completeness of disclosure of the issue.
2. Mastery of terminology and its use when answering.
3. Ability to explain the essence of physiological mechanisms and processes, draw conclusions and generalizations, give reasoned answers.
4. Proficiency in monologue speech, logical and consistent responses, the ability to answer questions, and express one’s opinion on the issue under discussion.

85-100% (6 points) is awarded to an answer that demonstrates a solid knowledge of basic physiological processes, is distinguished by the depth and completeness of the topic's coverage; mastery of terminology; the ability to explain the essence of mechanisms, draw conclusions and generalizations, give reasoned answers, and provide examples; fluency in monologue speech, and a logical and consistent answer.

70-84% (5 points) is awarded to responses that demonstrate a solid understanding of basic physiological processes and are distinguished by depth and comprehensiveness of topic coverage; mastery of terminology; the ability to explain the essence of mechanisms, draw conclusions and generalizations, provide reasoned answers, and provide examples; fluency in monologue speech; and logical and consistent responses. However, one or two inaccuracies in the response are permitted.

60-69% (4 points) is awarded for answers that primarily demonstrate knowledge of physiological processes and are characterized by insufficient depth and comprehensiveness of the topic; knowledge of key theoretical issues; poorly developed skills in analyzing mechanisms; insufficient ability to provide reasoned answers and provide examples; insufficient fluency in monologue speech, and insufficient logic and consistency in the answer. Several errors in the content of the answer are allowed.

0-59% (0-3 points) is assigned to responses that demonstrate a lack of knowledge of physiological processes, characterized by a shallow understanding of the topic; ignorance of key theoretical issues; undeveloped skills in analyzing mechanisms; an inability to provide reasoned answers; poor monologue skills; and a lack of logic and consistency. Serious errors in the content of the response are permitted.

ASSESSMENT SCALE FOR ANALYTICAL TASKS (interim control – “BE ABLE TO DO”)

When evaluating responses to the “KNOW HOW” level of training, the following criteria are taken into account:

A score of 85-100% (8 points) is awarded to a student who demonstrates full understanding of the assignment. All requirements are met.

A score of 70-84% (7 points) is given to a response in which the student demonstrates significant understanding of the task. Most of the task requirements are met, with some minor errors.

60-69% (5-6 points) is the score for an answer in which the student demonstrates partial or little understanding of the task.

The task was completed no more than halfway, and a large number of errors were made.

0-59% (0-4 points) is the grade for an answer in which the student either does not complete the task at all or completes it partially.

ASSESSMENT SCALE FOR PRACTICAL TASKS (interim control – “MASTER”)

When evaluating the answers to the ABILITY level test, the following criteria are taken into account:

A score of 85-100% (10 points) is awarded for a student's answer that fully completes the practical task without making any errors and comprehensively interprets the results obtained.

A score of 70-84% (9 points) is given for a student's answer in which they complete the practical task. Most of the task requirements are met. There are minor errors. The student is able to interpret the data with little difficulty.

60-69% (8 points) is the score for an answer in which the student demonstrates partial completion of the practical task.

The assignment is no more than half completed, with a large number of errors. The student is unable to interpret the results obtained.

0-59% (7 points) is the score for an answer in which the student either does not complete the practical task at all or completes it completely incorrectly.