The Ministry of Health of the Russian Federation State Budget Educational Institution of Higher Professional Education

THE FIRST MOSCOW STATE MEDICAL UNIVERSITY NAMED AFTER I.M.SECHENOV

Seen and approved	
Rector	P.V. Glybochko

STEERING DOCUMENT OF THE COURSE GENERAL PRACTICE (FAMILY MEDICINE)

((name of the course))

major professional educational program of higher education - residency training program 31.00.00 Clinical medicine

code and name of the consolidated group of professions (training directions)
31.08.54 General practice (family medicine)
code and name of the training directions (profession)

Course credit value: 28 credits

1. The purpose and objectives of mastering the course.

The purpose of mastering the course is establishing and developing the following common and professional competences of the students attending the major professional educational program of higher education - residency training program in 31.08.54 General medical practice (family medicine) profession:

- **PC** (professional competence)-1 preparedness for performing a set of actions aimed at preserving and promoting health and comprising formation of healthy lifestyle, prevention of disease contraction and/or mongering, early disease diagnostics, discovering the reasons and conditions for contraction and development of diseases, as well as aimed at eliminating harmful impact of human environment factors on people's health.
- **PC-5** preparedness for determining patients' diseased conditions, symptoms, disease syndromes, nosological entities according to the International Statistical consultantplus://offline/ref=066C8E0F5EFEB7248E948077800DD84A4131593F7D04DEC254 3F1ElBd4MClassification of Diseases and Related Health Problems;
- **PC-6** preparedness for managing and treating patients which need medical care within the scope of general medical practice (family medicine);
- **PC-8** preparedness for utilizing natural therapeutic factors, drugs, drug-free modalities and other methods in treating patients requiring medical rehabilitation and sanatorium-resort therapy.

The tasks of the course is formation of a body of knowledge, skills and experience. Upon mastering the course, a students must:

Know:

- the legislation of the Russian Federation related to the population's health protection and organizing primary medical and sanitary care for population within the scope of general medical practice (family medicine);
- aetiology and pathogenesis of individual diseases and syndromes which are most frequent in general medical practice, their manifestations and pathogenic mechanisms, methods of their rational diagnostics, effective therapy and prevention;
- clinical symptoms and signs, pathogenesis of primary diseases of adults and children, their prevention, diagnostics, treatment, health care, clinical symptoms and signs of borderline cases;
- composition of a diagnosis, arrangement of preventive and remedial measures in general medical practice;
- the basics of drug therapy, pharmacodynamics and pharmacokinetics of major drug groups used for rendering multi-field care for adults and children; side effects and complications caused by drug intake, their correction methods;
- the basics of drug-free therapy, physical medicine, exercise therapy and medical supervision, indications and contraindications for sanatorium-resort therapy.
- organization and equipment in general medical practice; cooperation with specialized doctors in outpatient departments and in-patient clinics;
 - typical medical records in general medical practice;
- organization of first aid and rescue emergency care to adults and children in general medical practice;

Develop skills in:

- getting information on the disease from a patient, his/her relatives and legitimate representatives;
- determining the necessity of special diagnostic techniques (laboratory, radiological, functional, medicogenetic), arranging their implementation and interpreting their results;
 - establishing differential diagnosis;
- assessing the cause and the severeness degree of a patient's condition, and taking the necessary measures to bring the patient away from this state;
- determining the scope and order of therapeutic and/or surgical and organizational measures (hospitalizing, outpatient care, doctor's advice);
- substantiating care regimen, plan and surveillance strategy for a patient, indications and contraindications to medications, operative therapy;
 - developing management program, identifying indications;
- solving the issues related to the possible continuation of the patient's professional activity, properly executing medical documentation;
- calculating and analyzing the main medical and demographical factors of general medical practice;
- calculating and analyzing the main factors characterizing activities of general medical practice;
- making use of basic methodological approaches to analysis, evaluation, medical aid quality expertise in order to choose adequate administrative solutions in general medical practice;
- building social interaction with the partakers of the diagnostic and treatment process based on taking into account ethnic, cultural, confessional and existential values;

Possess skills in:

Surgical section

Surgical pathologies. Orthopedics and traumatology.

Medical examination of a surgical patient in a clinical outpatient department

Medical supervision by a GP (family doctor) of operated patients at their outpatient department stage

Pleural cavity tapping with pressure pneumothorax

Probing cavities and fistulae

Pain relief:

Local infiltration anesthesia

Aseptics and antiseptics

Hand treatment techniques

Sterilization of tools, bandaging and suture material

Disposal of medical wastes (biological material, syringes, needles, gloves, dispensable tools, drugs, etc.)

General surgical techniques and operative interventions:

Primary surgical treatment of flesh wounds

Removal of sutures

Burning wound surface treatment

Bandaging

Lancing and draining hypodermic abscesses, panaritiums

Blood and blood substitute transfusion:

Injections of all kinds (hypodermic, intramuscular, intravenous, putting a peripheral catheter into limb veins)

Rapid blood grouping, Rh testing

Drip and steam transfusion of drugs and blood substitutes

Serum injection

External hemorrhage control:

Temporary external hemorrhage control (applying a tourniquet, digital occlusion, bending the limb in its joint, a compressing bandage, wound tamponage)

Temporary external hemorrhage control by putting a clamp in the wound

Hemorrhage control by hemostatic local action agents (hemostatic sponge, etc)

Bladder catheterization with soft elastic catheter

Stomach lavage with gastric and nasogastric tube

Colonic washing (purgative enema)

Administering medical enemas

Bladder irrigation

Digital rectal and prostate examination

Techniques performed in case of traumas:

Transport immobilization in case of broken limbs, vertebral fractures

Ophthalmology

Clinical eye examination (history taking, examination and palpation of tear sac, upper and lower palpebral conjunctiva of adults and children, lacrimal glands, eyebulb mobility assessment)

Eye anterior area examination with the help of sidelight

Examination of the posterior segment by means of transmitted light

Ophthalmoscopy

Eidoptometry

Chromatic vision examination

Optical eyesight correction with trial lenses in case of myopia, hypermetropia, presbyopy

Measuring intraocular tension (palpation, with Maklakov's tonometer, electronic tonometry)

Perimetry

Local application of medicinal agents for treatment of ocular diseases

Extraction of foreign objects from the surface of the eye without damaging keratoderma

Otorhinolaryngology (ENT)

Rhinoscopy

Pharyngoscopy

Indirect laryngoscopy

Otoscopy

Optically aided otoscopy

Anterior nasal packing

Eustachian tube patency checking

Probing and rinsing tonsillar lacunae

Threshold audiometry

Performing planned treatment with conservative methods of common ear, nose and throat diseases of adults and children

Drug administration into ear and nose (drops, cotton swabs, tampons)

Ear toilet

Cerumen impaction removal

Tracheostoma and tracheostomy tube care

Providing emergency care for children and adults in case of emergencies complicating the course of diseases, traumas and burns affecting ENT organs:

Foreign objects removal from ear and nose

Primary treatment of flesh wounds affecting face, nose and earflap

Silver nitrate cauterization of nasal septum bleeders

Obstetrics and gynecology

Bimanual vaginal and rectovaginal examination

Pregnancy diagnostics and gestational age determination

External obstetric inspection, fetal heartbeats assessment

Management of normal delivery

Primary neonatal toilet, umbilical wound bandaging and treatment

Estimation of a newborn child's condition

Evaluation of afterbirth condition

Application of drugs (dermatic and intravaginal)

Rescue emergency care

Methods for cleaning upper air passages in case of liquid aspiration

Cardiopulmonary resuscitation for neonatals, children and adults

Defibrillation

Therapeutic section

Internal diseases

Medical examination of patients in community settings and domiciliary examination

Measurement of blood pressure for adults and children

Recording and analyzing ECG

Functional, endoscopic, electrophysiological and radiological diagnostic techniques

Recording and analyzing ECG

Methods for acquiring and analysing spirograms

Pneumotachometry

Peakflowmetry

Utilizing inspirators and nebulizers

X-ray picture reading methods

Laboratory diagnostics

Performing rapid glucometry

Interpretation of complete blood cell count, biochemical blood assay, clinical urine examination and biochemical urine analysis

Preparation of swabs, material for cytological and bacteriological examination

Identification of the level of protein, sugar and acetone in urine by using rapid test method

<u>Dermatovenereology</u>

Examination procedure for the patients with skin diseases

Utilizing dermatic drugs in treating skin diseases

Vitropression (diascopy)

Neurology

Clinical examination of neurological patients:

examination of the 12 pairs of cerebral nerves

examination of pathological reflexes

examination of meningeal symptoms

examination of motor qualities (posture, muscle tone, contracture, muscular dystrophy)

assessment of tactile and pain sensitivity

assessment of reflexes (tendinous, periosteous, cutaneous and mucous)

motion coordination assessment

Paediatrics

Methods for determining and assessing physical growth and development of children and teenagers

Methods for determining functional state of organism

Health groups stratification among children

Care for a newborn infant

Milk volume calculation and infant feeding when the infant is mature, premature or faces problems on the mother's side

Developmental care for premature infants

Compilation of a healthy child's menu and nurturing specifics for rachitis, diathesis, dyspepsia simplex

Conducting extramural diagnostics of common diseases among children and teenagers, with their scheduled treatment

Clinical examination of healthy and sick children

Utilizing drugs with children (per os, per rectum, by inhalation, externally)

Psychology

Communication skills for talking to the patient and his/her relatives

Specific aspects of communicating with children and seniors

Communication skills for talking with colleagues

Ability to cope with stress situations, "emotional burnout" syndrome

Psychiatry

Clinical examination of psychic and narcological patients

Taking history, acquiring objective anamnestic data regarding the psychopathy

Conducting supervision of the patient to evaluate behavioral reactions, emotional state

Conversation with a mentally disordered patient

Extramural syndrome-driven diagnostics of psychic diseases and behavioral disorders, alcohol dependence, abuse of narcotics and toxicomania;

Phthisiology

Mantoux test interpretation

Vaccination and revaccination

Dentistry

Methods for dental examination

Methods for teeth examination

Methods for parodontium examination

Methods for oral mucosa examination

Medical-preventive and business section

Physical development assessment according to standards

Public health parameters Investigation and analysis of demographic and medicalsocial public health records of contractual population:

Record keeping in general medical practice

Arrangement of diagnostic and treatment process and preventive measures in outpatient care centers and at home when providing primary medical and sanitary care

Patient's route organization: set of diagnostic, health-related and rehabilitation measures, admissions by experts, hospitalization

Promulgation of medical science, healthy lifestyles

Cooperation with social welfare authorities and humanitarian services with regard to organizing support of socially vulnerable patients

Temporary incapacity expert evaluation

General medical practice management

- 2. Position occupied by the course within the University's BASIC PROFESSIONAL EDUCATIONAL PROGRAM OF HIGHER EDUCATION.
 - 2.1. The course is part of base section.
- 2.2. To acquire the course, the students must have knowledge, capabilities and skills formed by the preceding courses/practices:

<u>Propedeutics</u>

Knowledge:

- -major disease symptoms and syndromes
- clinical examination methods and general symptomatology

Capabilities:

- distinguish guiding symptoms and syndromes, determine functional capability of organs and systems;
 - work out a plan of laboratory and instrumental examination and treatment.

Skills:

- taking history;
- methods of clinical and laboratory examination of patients for each organ and system, compilation of examination and treatment programs.

Clinical pharmacology

Knowledge:

- classification and specifications of major drug groups;
- main adverse effects of the most popular drugs, their detection.

Skills:

Determine drug therapy taking into account pharmacokinetics, pharmacodynamics and potential adverse effects of drugs.

Experience:

- drug selection.

Dermatovenereology

Knowledge:

- aetiology, pathogenic mechanism, clinical presentation of most common skin and venereal diseases:
 - major abnormal symptoms and syndromes in dermatovenereology.

diagnostic methods, prevention and treatment of skin and venereal diseases.

Capabilities:

- diagnosing basic manifestations of most common skin diseases and sexually transmitted diseases:
- conducting differential diagnostics, formulating a preliminary nosological diagnosis; compiling an examination and treatment program.

Skills:

- clinical examination of patients with skin and venereal diseases to detect most widespread nosological entities, compiling a standard (clinical, laboratory, instrumental) examination and treatment program;
 - establishing clinical diagnosis; specifying indications for a patient's hospitalization.

Departmental, hospital and ambulatory therapy

Knowledge:

- aetiology, pathogenic mechanism, clinical presentation of most common nosological entities of therapeutic profile;
- major pathological symptoms and syndromes in the clinical picture of internal diseases, range of diseases and conditions capable of inducing them, and specific manifestations of various medical diseases.

Capabilities

- diagnosing major symptoms of prevailing nosological entities;
- determining standard methods of examination to confirm a diagnosis; conducting differential diagnostics in a group of diseases with similar symptoms;
 - formulating a preliminary nosological diagnosis.

Skills:

- clinical examination to reveal prevailing nosological entities, compilation of standard (clinical, laboratory, instrumental) examination plan and its interpretation at hospital or in an outpatient department;
- preliminary nosological diagnosis establishing algorithm. Guiding syndrome diagnostics
 - conducting differential diagnostics;
- determining indications for a patient's hospitalization; formulating and substantiating a diagnosis of medical diseases.

Departmental, hospital, pediatric surgery, traumatology and orthopedics

Knowledge:

- aetiology, pathogenic mechanism of basic surgical and orthopedic diseases, traumas, wounds and wound infections, lower urinary tract diseases, pain management and anesthesia, aseptics and antiseptics;
- operating room and bandaging room management; clinical symptoms and syndromes, prevailing with surgical and urological diseases;
- diagnostic, preventive, conservative and operative treatment methods for surgical, orthopedic and urological diseases of adults and children, hospitalization indications;
- approaches and treatment modalities for bone and limb joint fractures, vertebral and pelvic fractures;

- methods for their diagnostics, correction, prevention and treatment; measures aimed at prevention and well-timed correction of locomotorium functional disorders;
 - basics of surgical oncology, plastic surgery and transplantology.

Capabilities

- clinical examination, detection and diagnostics of objective signs of surgical, orthopedic and basic purulent-septic diseases of adults and children;
- differential diagnostics, assigning preoperative preparation and providing post-surgical treatment;

Skills:

- examination of surgical and orthopedic patients (adults and children); making a syndrome-based or nosological diagnosis;
 - performing surgical practices and manipulations required from a surgery assistant;
- rendering medical care in case of acute surgical and orthopedic diseases, traumas and wounds, determining mode of patient's transportation to his/her destination.

Obstetrics and gynecology

Knowledge:

- organizing assistance for obstetric and gynecological services;
- mother and child protection; reproductive health services; basics of perinatal medicine; pregnancy physiology and pathologies, pregnancy complications;
- normal and abnormal labor;
- aetiology, pathogenic mechanism, risk factors for gynecological diseases and diseases of pregnant women;
- diagnostic, preventive and treatment methods for gynecological diseases and diseases of pregnant women. Modern contraceptive methods.

Capabilities:

- clinical obstetric and gynecological examination of women;
- detection of objective signs of pregnancy and gynecological diseases;
- diagnostics and differential diagnostics of major gynecological diseases, pregnancy complications;
- prescribing a diagnostic and treatment plan; urgent and emergency conditions in obstetrics and gynecology.

Skills:

- pregnancy diagnostic methods and gestational age determination;
- gynecological exam;
- management of normal delivery;
- providing emergency care for pregnant women and women with gynecological diseases.

Paediatrics

Knowledge:

- antenatal protection of fetus, physiology and pathology of newborn infants;

- anatomico-physiological characteristics of children from infancy to sexual maturity;
- methods of objective examination of children and general semiotics of childhood diseases;
 - dietetics of healthy and sick children;
 - special pathology and prevention of childhood diseases.

Capabilities:

- interview and case history assessment of a child's life and diseases;
- genealogical medical background and hereditary load;
- physical examination of a child and assessment of the data received according to the corresponding age norm.
- assessment of clinical urine test results, complete blood count results and instrumental examination methods with regard to age.
- performing diagnostics and differential diagnostics, compiling a treatment and rehabilitation plan, prevention measures for prematurity, immaturity;
- perinatal affection of central nervous system and major diseases and conditions of infancy, babyhood, childhood and adolescence.
 - providing aid in case of acute diseases, urgent and emergency conditions.

Skills:

- clinical examination of children from infancy to adolescence;
- prescribing rational feeding for an infant and for a child after 12 months;
- prescribing examination, treatment and prevention for major diseases of infancy, babyhood, childhood and adolescence;
 - training parents in newborn infant care;
 - providing urgent and emergency care.

Neurology

Knowledge:

- aetiology, pathogenic mechanism, clinical implications, diagnostic methods, differential diagnosis, treatment and prevention of neurological disorders.
- Major clinical symptoms and syndromes of neurological disorders; topical diagnosis formulation principles.

Capabilities:

- history taking and complaints' particularization;
- clinical neurological examination of patients. Compilation of an examination, treatment and prevention plan for neurological disorders;
 - differential diagnostics, making a clinical diagnosis for a neurological patient;
 - urgent and emergency conditions in neurology.

Skills:

- neurological examination nervous system examination methods;
- formulating clinical and topical diagnosis;

- providing urgent and emergency care in case of acute diseases and nervous system traumas.

Otorhinolaryngology (ENT)

Knowledge:

- organization of otorhinolaryngological aid;
- aetiology, pathogenic mechanism of major ENT diseases and traumas;
- clinical symptoms and syndromes of prevailing ENT diseases;
- diagnostic methods, prevention, conservative and surgical treatment of ENT diseases and traumas;

Capabilities:

- taking history, general clinical examination of patients with ENT diseases, analysis of general clinical examination results, laboratory and instrumental examination methods for ENT diseases and traumas;
 - differential diagnostics, indications for hospitalization;

Skills:

- performing medical manipulations and utilizing modern treatment and prevention methods for ENT diseases and traumas;
 - providing urgent and emergency care in case of ENT diseases and traumas.

Psychiatry, medical psychology

Knowledge:

- aetiology, pathogenic mechanism and clinical manifestations of mental disorders on neurotic and psychotic levels, substance dependence disorders in childhood, adolescence and adult stage;
 - notions of nosology, symptoms and syndromes in psychiatry;
- specifics of examining patients with mental disturbances, mental and addictive disorders' diagnostics;
- principles and methods for treatment of mental illnesses and socially significant mental disorders (toxicomania, drug abuse, alcohol dependence); psychosomatic manifestations of various diseases, psychological consequences of traumas;
- diagnostics, treatment and prevention of neuropsychic diseases; psychiatric service management.

Capabilities:

- diagnostics of the most significant clinical syndromes of mental illnesses;
- selection of appropriate methods for laboratory and instrumental examination; differential diagnostic algorithm development;
 - determining indications for hospitalization of a mental patient;
 - treatment principles of major nosological entities of psychological and mental disorders.

Skills:

interview, objective examination, clinical examination, interpretation of the results of laboratory and instrumental assessments of patients with mental disorders;

- providing urgent and emergency care for mental patients.

Ophthalmology

Knowledge:

- principles and methods for eyesight protection management;
- aetiology, pathogenic mechanism and basic clinical manifestations of diseases and traumas of visual system;
 - specifics of diagnostics and assessment of visual organs of adults and children;
 - treatment and prevention methods for visual organs' diseases.

Capabilities:

- case history and complaints taking;
- visual system examination methods;
- diagnostics and differential diagnostics of visual system diseases; compilation of a treatment and prevention plan;
 - formulating a clinical diagnosis;
- providing emergency care in case of acute inflammatory diseases and traumas of visual organs.

Skills:

- ophthalmopathy diagnostics;
- utilizing special instruments and equipment to diagnose and treat diseases and traumas of visual organs.

Infectious diseases and phthisiology

Knowledge:

- general notion of infectious diseases and tuberculosis;
- structure and operating mode of infectious diseases hospitals and tuberculosis hospitals. Regulations on hospitalization of contagious patients.
- diagnostics and differential diagnostics of infectious diseases and tuberculosis. major causative agents of infectious diseases and tuberculosis, methods of their detection;
- aetiology, pathogenic mechanism and clinical manifestations of infectious diseases and tuberculosis;
 - early diagnostics and prevention;
 - etiotropic and pathogenetic therapy; surgical treatment of tuberculosis.

Capabilities:

- prescribing rational etiotropic and pathogenetic therapy;
- providing emergency medical aid in case of critical conditions of infectious origin.
- proper collection and assessment of case history, with identification of data relevant for diagnostics, which is characteristic of infectious diseases and tuberculosis;
- revealing epidemiological anamnesis data and utilizing this information for making a diagnosis;
 - revealing clinical syndromes of infectious diseases and tuberculosis.

Skills:

- clinical examination of contagious patients and suspected tuberculosis patients, interpretation of laboratory and instrumental assessment results;
- compilation of an examination and treatment plan, conducting a set of treatment and preventive measures;
- conducting preventive and epidemiological measures; follow-up supervision and health survey after previous infectious diseases and tuberculosis.
 - indications for a consultation by an infectiologist and a phthisiotherapist.

Occupational diseases

Knowledge:

- aetiology, pathogenic mechanism, clinical picture and treatment of major occupational pathologies. Classification of occupational diseases.
- principles of organizing and conducting preliminary and periodical medical check-ups. Issues of working capacity examination and health survey with regard to occupational diseases. Medical-labor expert commission with regard to occupational diseases. Issues of medical and social rehabilitation.

Capabilities:

- examination of a patient with an occupational disease;
- methods of diagnostics and prevention; treatment principles, medical rehabilitation; execution of a preliminary and clinical diagnosis.

Skills:

- diagnostics and differential diagnostics of occupational diseases with non-occupational internal diseases.

Dentistry

Knowledge:

- aetiology, pathogenic mechanism, clinical manifestations, prevention and treatment of prevailing diseases and traumas of maxillofacial area.
 - diagnostic methods, differential diagnostics of dental diseases.

Capabilities:

- case and complaints taking, methods of mouth cavity examination, maxillofacial area and neck examination;
 - diagnostics and differential diagnostics, prescribing a treatment and prevention plan;
 - urgent and emergency care in case of dental diseases and traumas.

Skills:

- clinical examination of mouth cavity, maxillofacial area and neck;
- providing urgent and emergency care in case of diseases and traumas of mouth cavity and maxillofacial area.
- 3. Studying the course required for the knowledge, capabilities and skills formed by the subsequent courses/practices:

General medical practice (family medicine)

Knowledge:

- aetiology, pathogenic mechanism, risk factors of prevailing diseases of adults and children in general medical practice;
 - -major symptoms and syndromes;
- modern methods of diagnostics, treatment and prevention; specifics of clinical picture and disease progress of frequent diseases affecting children, adults, elderly people;
- modern approaches to treatment and prevention of diseases, health survey, formation of healthy life style on an outpatient basis, indications for a consultation by a specialized doctor.

Capabilities:

- performing early diagnostics of diseases in extramural conditions, by clinical and laboratory symptoms and syndromes,
- conducting differential diagnostics, prevention, individualized treatment and rehabilitation of patients with common diseases in general medical practice, coordinating diagnostic and treatment actions with specialized doctors.
- providing continuous medical aid for every patient who applied, regardless of age, sex and the nature of the disease

Skills:

- methods of clinical (case taking, examination, physical examination), laboratory (rapid assessment methods, utilizing portable devices, biological sampling) and instrumental examination of patients, followed by interpretation of the results;
- assessment of the data received due to examination, determination of preliminary and final clinical diagnosis, compilation of an individual treatment and diagnostic case management plan with regard to common conditions in the context of general medical practice. Appointment to consultation or hospital depending on the indications.
 - providing aid in case of urgent and emergency conditions.
 - clinical operation management in general medical practice. Patient counselling.
 - 3. The requirements to the results of mastering the discipline.

Studying of the course is aimed at forming the following professional competences of the students (PC-1, PC-5, PC-6, PC-8)

Se			Upon studying the course, students must:						
ria 1 N o	Code compete nces	Contents of the competence (or its part)	Know	Develop skills in	Become experienced in	Assessment methods*			
1	PC-1	preparedness for performing a set of actions aimed at preserving and promoting health and comprising the formation of healthy lifestyles, preventing disease contraction and/or mongering, early disease diagnostics, discovering the reasons and conditions for	analysis of general medical practice activities; putting together various reports, execution of organizational and administrative documents;	up-to-date methods of calculation and analysis of major medical and demographical parameters of population health state in general medical practice; basic principles of rendering primary medical, sanitary care, first aid, emergency and	calculation and analysis of statistical parameters characteristic of health state of the population attributed to general medical practice; analysis of general medical practice activities; putting together various reports, execution	tests, screening questions, essays, management game			

2	PC-5	contraction and development of diseases, as well as at eliminating the harmful impact of human environment factors on people's health. Preparedness for determining patients' disease conditions, symptoms, disease syndromes, nosological entities according to the	Clinical pathoanatomy and morbid physiology of organs and systems. Major clinical	specialized aid, including high-technology medical care, medical care for patients with socially significant and socially conditioned diseases; principles of organizing treatment and diagnostic process in a health-care organization; calculating and analyzing major medical and demographical parameters; calculating and analyzing major parameters characterizing activities involved in primary medical, sanitary care, first aid, emergency and specialized aid, including hightechnology medical care provided in outpatient departments and in fixed medical treatment facilities; Acquire information about the disease, use objective examination methods, detect common and specific signs of the	Clinical examination of healthy adults and children with therapeutical and surgical diseases. Experience in	Follow-up of patients Reports Credit
		International Statistical Classification of Diseases (ICD) and Related Health Problems.	symptoms, syndromes and diseases of adults and children. Methods of disease diagnostics, principles for formulating a diagnosis according to ICD-10.	disease. Interpret the assessment data. Conduct differential diagnostics. Substantiate clinical diagnosis.	recording and interpreting ECG, rapid diagnostics, diagnostic procedures, collection and preparation of swabs, instrumental examination of visual organs, nervous system, ENT organs; genito-urinary system of men and women	
3	PC-6	Preparedness for managing and treating patients which need medical care within the scope of general medical practice (family medicine);	Methods of rendering medical and preventive aid; The basics of pharmacotherap y, pharmacodynam ics and pharmacokinetic s of major groups of drugs	Substantiate the plan and strategy of patient management taking into account age and sex. Determine indications for hospitalization and consultation by specialized doctors.	Management and application of treatment methods to handle patients with common diseases in outpatient departments	Follow-up of patients Reports Credit

4	PC-8	Preparedness for using natural therapeutic factors, drugs, drug-free modalities and other methods in treating patients requiring medical rehabilitation and sanatorium-resort therapy.	used in scheduled, urgent and emergency care The basics of drug-free therapy, physical medicine, exercise therapy and medical supervision, indications and contraindications for sanatorium-resort therapy.	Substantiating the plan and strategy of managing a patient utilizing natural therapeutic factors, drug-free modalities and other methods in treating patients requiring medical rehabilitation and sanatorium-resort therapy.	Using natural and drug-free methods in treating patients during rehabilitation and sanatorium-resort therapy. Execution of documents for sanatorium-resort therapy	Follow up of patients, filling in resort cards, Reports Credit
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^{*}types of assessment methods which may be used when mastering the competences: colloquium, review work, conversation over situational tasks, written and computer tests, typical calculations, individual tasks, reports, essays

4. Course sections and competences formed when mastering them:

	4. Course sections and competences formed when mastering them:						
Seri al No	Competen ce code	Name of the course section	Section content in teaching units				
1.	PC-6	Introduction to General medical practice (family medicine)	Definition of the profession and major competences of a GP according to WONCA. Major areas of activity GP responsibilities in patient management in the scope of general medical practice. Providing scheduled and emergency medical care in outpatient clinics. Drugs most commonly used in general medical practice. Cooperation of GP with specialized doctors in out-patient and in-patient clinics.				
2.	PC-1	Evidence based prevention	Basic diagnostic methods for medical and demographic parameters of health state of population in general medical practice. Statistical data concerning health state of population attributed to general medical practice. Providing medical and preventive medical aid to patients suffering from socially significant diseases.				
3.	PC-5 PC-6, PC-8	 Internal diseases Diseases of the elderly Surgical diseases. The basics of traumatology and orthopedics in general medical practice. Urgent and emergency aid. Cardiopulmonary 	Major clinical symptoms, syndromes and diseases of adults and children. Diagnostic and treatment				

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resuscitation	methods used in general
- Obstetrics and gynaecology	medical practice. Strategy of
- Diseases in children and adolescents	patient management
- Infectious diseases and tuberculosis	according to age, sex and
- Neurological disorders	problem type. Differential
- Patients with mental disorders. Medical	diagnostics. Formulating a
psychology	diagnosis according to ICD-
- Occupational diseases	10.
- ENT diseases	Indications for hospitalization
- Visual organs' diseases	and consultation by
- Skin diseases and sexually transmitted	specialized doctors. Natural
infections	and drug-free treatment and
- Dental diseases, mouth cavity and tongue	rehabilitation methods,
mucous membrane diseases	including sanatorium-resort
	therapy.

5. Distribution of the course credit value.

5.1. Distribution of General medical practice (family medicine)course credit value and

types of study work throughout the terms:

Type of study work	Credit	Credit valuethroughout the				
	amount of	amount of		terms	(AH)	
	credits (C)	academic	1	2	3	4
		hours (AH)				
Classroom work, including		648	168	168	168	144
Lectures (L)		56	14	14	14	14
Practical studies (PS)		336	88	88	88	72
Seminars (S)		256	66	66	66	58
Resident's individual work (IW)		354	90	90	90	84
Interim attestation (IA)						
pass-fail exam/examination (specify	examinati	6				6
type)	on					
TOTAL	28	1008	258	258	258	234

5.2. Course sections, types of studies and ongoing monitoring methods:

Serial	Term	Name of the				es (AH)		Assessment
No	number	discipline section						methods
			L	PS	S	IW	total	
1.	1	Introduction to General medical practice (family medicine)	2	4	4	8	18	Written work essay
2	1.2	Scientifically based prevention	2	4	4	8	18	Written work essay
3	1,2,3	Internal diseases. Diseases of elderly people	6	32	36	70	144	Follow-up of patients Case histories Credit
4	2,3,4	Surgical pathologies. The basics of traumatology and orthopedics in general medical	6	34	18	32	90	Follow-up of patients Case histories Credit

		practice. Urgent and emergency aid. Cardiopulmonary resuscitation						
5	3.4	Obstetrics and gynaecology	6	88	48	74	216	Follow-up of patients Case histories Credit
6	2.3	Diseases in children and adolescents	6	56	70	84	216	Follow-up of patients Case histories Credit
7	1.2	Infectious diseases. Tuberculosis	4	16	12	16	48	testing
8	1.2	Neurological disorders	4	16	12	16	48	testing
9	3.4	Patients with mental disorders. Medical psychology	4	12	10	10	36	Testing
10	3	Occupational diseases	2	8	6	8	24	Testing
11	2.3	ENT diseases	4	18	10	16	48	Follow-up of patients Case histories Credit
12	3.4	Visual organs' diseases	4	20	14	18	56	Follow-up of patients Case histories Credit
13	2.3	Skin diseases and sexually transmitted infections	4	14	10	12	40	Follow-up of patients Case histories Credit
14	4	Dental diseases, mouth cavity and tongue mucous membrane diseases	2	4	2	4	12	Testing
		TOTAL	56	336	256	360	1008	
5	.3 Distribu	ution of lectures through	out the te	erms:				

	.5 Distribution of rectures timoughout the terms.		
Serial	Lecture subject name	Amount	Term
No		in	
		academic	
		hours	
		(AH)	
1.	History, philosophy and principles of family medicine	2	1
2.	Evidence based prevention in general medical practice.	2	
	Prevention of chronic non-infectious diseases in general medical		
	practice.		
3.	Acute coronary syndrome	2	1
4.	Arterial hypertension syndrome. Tactics of a general practitioner	2	1

5.	Chronic heart disease	2	1
6.	COPD (Chronic obstructive pulmonary disease)	2	2
7.	Providing aid to elderly people in general medical practice.	2	1
8.	Managing a surgical patient in community settings and at home.	2	2
9.	Traumas in general medical practice. Emergency aid to patients	2	2
	with wounds, burns, cold injuries and traumas.		
10	Surgical diseases in anorectal area	2	2
11	Providing aid to pregnant women in general medical practice.	2	2
12	Woman's health in general medical practice	2	2
13	Providing aid to newborn infants, children and adolescents in	2	2
	general medical practice		
14	Infantile infections	2	2
15.	Specifics of the course of prevailing somatic diseases in	2	3
	childhood.		
16	Viral hepatitis. Diagnostics, management tactics.	2	2
17.	Organization of antituberculous aid in general medical practice		
18	Major neurological symptoms and syndromes	2	1
19.	Cerebrovascular diseases	2	
20	Somatoform disorders and neurotic disorders	2	2
21	Detection and evaluation of early signs of occupational factors	2	1
	producing impact on health		
22	Major ENT diseases' symptoms and syndromes	2	1
23	Emergency conditions care in case of acute diseases and traumas	2	1
	of visual organs		
24	Emergency conditions with ENT diseases	2	3
25	Major symptoms and syndromes of visual organs' diseases	2	4
26	Major skin diseases' symptoms and syndromes	2	2
27	Major symptoms and syndromes of sexually transmitted diseases	2	2
28	Major symptoms and syndromes as to the diseases of tongue,	2	4
	mouth cavity, dental, parodontal, mouth cavity and tongue		
	mucous membrane		
	TOTAL	56	

5.4 Distribution of practical studies' subjects throughout the terms:

Serial	Practical studies' subject names	Amount	Term
No		in	
		academic	
		hours	
		(AH)	
1.	Record keeping in general medical practice	4	1
2.	System of physical education and physiological norms for motion	4	1
	activity of children, adolescents, adults and elderly people.		
3.	Respiratory function examination spirography, peakflowmetry,	4	1
	broncholytic probing. Practical skill training		
4.	Examination methods in cases of medical diseases: laboratory,	4	1
	radiological, endoscopic, etc.		
5.	Bronchial asthma	4	1
6.	Using devices in treating patients with pulmonary diseases:	2	2
	inspirators, nebulizers, oxygen therapy		
7.	Acute myocardial infarction. Managing a patient after the	4	1
	discharge from hospital		

8.	Primary and secondary cardiomyopathy. Tactics of a general practitioner. Analysis of clinical events.	2	1
9.	Secondary arterial hypertension. Analysis of a patient.	4	1
10.	Systemic rheumatic diseases in general medical practice. Tactics	2	1
10.	of a general practitioner	_	1
11.	Arthronosos in general medical practice.	2	1
12.	Diseases with metabolic disorders	2	1
13.	Pharmacotherapy of medical diseases	4	1
14.	Electrocardiography: Recording and analyzing ECG graphs	12	1
15.	Emergency conditions in the clinical picture of internal diseases	4	2
16.	Medical examination of a surgical patient in community settings	4	2
10.	and at home.	•	_
17.	Major surgical diseases of abdominal cavity organs	4	2
18.	Surgical diseases in anorectal area	2	4
19.	Vascular diseases: arteries and veins. Tactics of a general	4	4
	practitioner	•	
20.	Surgical treatment and diagnostic methods in the scope of general	12	2
	medical practice. Practical skills training		_
21.	Traumas and wounds most common in general medical practice.	2	2
	Clinical tasks.	_	_
22.	Emergency conditions with surgical diseases. Analysis of clinical	4	3
	events.		
23.	Conservative treatment of surgical diseases. Analysis of patients	2	3
24.	Regulation of a woman's reproductive cycle. Impregnation.	2	3
25.	Physiological changes in the body of a pregnant woman.	2	3
26.	Examination of a woman's genital sphere.	2	3
27.	Laboratory examination methods: collection and preparation of	2	3
	UCVR swabs, material for cytological (Papanicolaou test),		
	bacteriological, PCR-test from urethra, uterine cervix and vaginal		
	opening. Tests: menstrual cycle tracking graph, measuring basal		
	temperature, cervical mucus assessment, interpretation of		
	cytological and bacteriological tests from urethra, uterine cervix		
	and vaginal opening, histological examination, biopsic material		
28.	Breast exam (visual inspection, palpation)	1	
29.	Pregnancy diagnostics and gestational age determination.	2	3
	Algorithm for examination of pregnant women. Diagnostics of		
	recent and late pregnancy. External and internal obstetric		
	inspection, fetal heartbeats assessment		
30.	Laboratory and instrumental diagnostic methods in obstetrics.	2	3
	Examination of pregnant women with functional diagnostic		
	methods		
31.	Prenatal diagnostics of congenital defects and hereditary diseases.	2	4
32.	Early gestosis: vomiting with pregnant women	2	3
33.	Methods of uterine cervix preparation for delivery.	2	4
34.	Management of normal delivery. Primary neonatal toilet,	4	3
	umbilical wound bandaging and treatment. Apgar scoring of a		
	newborn infant. Afterbirth condition estimation		
35.	Physiological postnatal and neonatal period.	2	
36.	Pathological postnatal period. Silverman score for premature newborns.	2	3
37.	Gestation course and management of women with Rh-negative	2	3
		_	

	blood.		
38.	Pelvic presentations. Malpositions.	2	3
39.	Vaginal delivery operations (obstetrical forceps, cesarean section,	2	3
	fetus-destroying operation).		
40.	Fetal hypoxia and infantile asphyxia. Fetal cardiac monitor.	2	4
	Fisher grade. Apgar score.		
41.	Hemorrhages in early (spontaneous abortion, extrauterine	2	3
	pregnancy) and late pregnancy (molar pregnancy, low insertion of		
	placenta, premature detachment of normally presented placenta)		
42.	Puerperal septic diseases. Lactational mastitis. Modern specifics	4	7
	of aetiopathogenesis and clinical progression. Determination of		
	breast feeding capability, indications for lactation suppression.		
	Prevention of mastitis.		
43.	Inflammatory diseases of external and internal genitals.	2	3
44.	Inflammatory processes of female genital system organs of	1	4
	specific aetiology.		-
45.	Menolipsis	2	3
46.	Polycystic ovary syndrome	2	4
47.	Fertility disorder	2	3
48.	Premenstrual syndrome	2	3
49.	Climacteric syndrome	2	3
50.	Postmenopausal period.	2	4
51.	Hyperplastic and dystrophic processes of genitals.	2	3
52.	Benign and malignant diseases of female genital sphere.	4	4
53.	Uterine cervix diseases of viral aetiology	2	4
54.		$\frac{2}{2}$	4
55.	Traumas of female genitals	2	
33.	Abortion and its complications. Induced and spontaneous abortion. Infected abortion.	2	4
56.		2	4
36.	Mammary gland diseases. Mastopathy. Cystic lesions.	2	4
-7	Fibroadenoma. Breast cancer	4	4
57.	Pharmacotherapy in obstetrics and gynecology.	4	4
59.	Drug-free treatment methods. General measures.	2	4
<i>c</i> 1	Local treatment		4
61.	Rehabilitation after the treatment of inflammatory diseases,	2	4
-62	abortion, surgical interferences, traumas of female genitals	1	4
62.	Prevention of most common diseases of female genitals and	1	4
(2)	mammary glands in general medical practice	1	4
63.	Organizing, planning and conducting training courses for	1	4
<i>C</i> 4	pregnant women and members of their families	1	4
64.	Working capacity examination as to pregnant women and	1	4
<i></i>	gynecological patients.		2
65.	Perinatal disease incidence and mortality. Public health authority	2	3
	challenges in reducing infant mortality.		4
66.	Diseases in newborn infants: biliousness, respiratory disorder	4	4
	syndromes,		
67.	Prenatal infection. Predisposing causes. Aetiology and pathogenic	2	3
	mechanism. Clinical variations, differential diagnosis, treatment		
	principles.		
68.	Perinatal affection of central nervous system. Differential	2	4
	diagnostics. Prognostication. Treatment		_
69.	Vomiting and regurgitation syndromes of newborn infants and	2	3

70. Reanimation and intensive care of newborn infants. 71. Rickets and rickets-like diseases 72. Anaemia in children of tender age. 73. ECG peculiarities of a healthy child within various age periods. 74. ECG of children with rhythm disturbance and asequence. 75. ECG of children with rhythm disturbance and asequence. 76. First aid and emergency aid for children with acute cardiovascular insufficiency, anoxic blue spell, acute hypersensitivity reaction, hyperthermic and paroxysmal syndrome, etc. 75. Anatomico-physiological features of respiratory organs of children in various age periods. Congenital and hereditary respiratory system diseases in children 76. Bronchial asthma in children. Providing emergency care in case of a bronchial asthma attack and status asthmaticus. 77. Pollen fevers. Clinical picture, diagnostics. Treatment Prevention 78. Obstructive syndrome in children in early years. 79. Community-acquired pneumonia in children. 70. Low-grade fever of unclear actiology. 80. Low-grade fever of unclear actiology. 81. Biliary system diseases in children. 82. Chronic eating disorders and dyspepsia in children in early years. 83. Malabsorption syndrome. 84. Differential diagnosis of arthritis in children in early years. 84. Differential diagnosis of arthritis in children 85. Diabetes in children. Differential coma diagnosis of diabetes. 86. Growth disorder in children. 87. Rehabilitation of RNI children. 88. Supervision of newborn infants in outpatient clinics. 89. Pollow-up care of children with chronic diseases 90. Respiratory infections 91. Intestinal infections 92. 1 93. Highly infectious (quarantine) infections 94. Toberculosis: early diagnostics, prevention in general medical practice 95. HIV infection in general medical practice 96. Fusarium infections 97. Varsalum infections 98. Clinical examination of a neurological patient. 99. Vacaluar diseases of brain and spinal cord 100. Diseases of peripheral nervous system 101. Cephalgia 102. Fainness 103. Clinical examina				
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109.	Occupational diseases of chemical aetiology	2	3
110.	Respiratory occupational diseases of dust aetiology	4	3
111.	Occupational diseases conditioned by physical factors	2	3
112.	Diagnostics of inflammatory diseases of external, middle, internal	4	2
	ear, management tactics. Early diagnostics of otogenic		
	complications.		
113.	Diagnostics and treatment of acute and chronic diseases of upper	4	2
	air passages (laryngitis, pharyngitis, rhinitis, polyposis, adenoid		
	vegetation).		
114.	Diagnostics, treatment and prevention of chronic tonsillitis.	4	2
115.	Inflammatory diseases of nose and its accessory sinuses:	4	2
116.	Foreign bodies and traumas of external auditory canal.	2	2
117.	Clinical examination of eyes. Eidoptometry and lens selection	2	4
118.	Ophthalmoscopy	2	3
120.	Measuring intraocular tension	2	3
121.	Glaucoma	2	3
122.	Conjunctiva diseases,	2	4
123.	Cataract	2	3
124.	Red eye syndrome	2	4
125.	Sore eye syndrome	2	3
126.	Decrement in visual acuity	2	3
127.	Emergency conditions care in case of acute diseases and traumas	2	3
	of visual organs		
128.	mMethods of examining skin and cutaneous appendages	2	2
129.	Skin diseases major symptoms and syndromes	2	2
130.	Skin infections: bacterial, viral, fusarium	2	2
131.	Emergency conditions in dermatology	2	3
132.	Sexually transmitted infectionsmost common in general medical	2	3
	practice: major symptoms and syndromes		
133.	Diagnostics of sexually transmitted infections	2	3
134.	Diagnostics and prevention of sexually transmitted infections	2	3
135.	Anatomy and functioning of maxillofacial area, modern dental	2	4
	treatment techniques.	<u></u>	+
136.	Principles and methods of mouth cavity, teeth and parodontium		
	examination in general medical practice, planning preventive	4	4
	measures against dental diseases of various age groups.		
	TOTAL	336	

5.5. Distribution of seminars subjects throughout the terms:

Serial	Seminar subject name	Amount	Term
No		in	
		academic	
		hours	
		(AH)	
1.	Work management of a general practitioner. Basic functions	2	1
2.	General medical practice arrangement	2	1
3.	Risk factors of common diseases.	2	1
4.	Theoretical basis for rational and balanced diet. Principles for	2	1
	healthful and dietary meals.		
5.	Major symptoms and syndromes of bronchopulmonary system's	8	1
	diseases.		

6.	Risk factors and prevention of respiratory diseases	4	1		
7.	Pneumonia Analysis of patients	2	1		
8.	Interstitial lung diseases. Tactics of a general practitioner	2	2		
	Analysis of patients				
9.	Benign and malignant tumors in respiratory organs: early	4 2			
	detection, diagnostics, prevention				
10.	Purulent lung diseases: Bronchiectasia and chronic abscess	2	2		
11.	Emergency conditions in pulmonology Algorithms for the	6 2			
	provision of aid. Analysis of patients and clinical events.				
12.	Prevention of most common respiratory diseases in general	2	2		
	medical practice. Analysis of patients and clinical events.				
13.	Myocarditis. Patient management on an outpatient basis:	2	1		
	diagnostics, treatment after hospital, prevention				
14.	Pericarditis. Patient management on an outpatient basis:	2	1		
	diagnostics, treatment after hospital, prevention	_	_		
15.	Patient management and treatment tactics by a general	2	2		
	practitioner (family doctor) during remission of surgical diseases	_	_		
16.	Risk factors and prevention of surgical diseases	2	2		
17.	Surgical infection of skin and soft tissues, including wound	4	3		
10	infection. Analysis of patients				
18.	Emergency conditions with surgical diseases. Analysis of clinical	2	3		
10	events.	4	2		
19.	Outpatient anesthesia in general medical practice	4	3		
20.	Aseptics and antiseptics in general medical practice. Prevention of	2	3		
21	hospital-acquired infection	2	3		
21.	Health survey of pregnant women. High risk groups Extragenital pathology of pregnant women: ARVI and flu,	4	3		
22.	community-acquired pneumonia, intestinal infections, urinary	4	3		
	tract infections, acute and chronic pyelonephritis,				
	glomerulonephritis				
23.	Extragenital pathology of pregnant women: arterial hypertension,	6	8		
23.	cardiac anomalies, diabetes, thyroid body diseases, anaemia, viral	O	O		
	hepatitis				
24.	Childbearing anomalies.	2	4		
25.	Contracted pelvis in modern obstetrics.	2	3		
26.	Cervical incompetence (insuficiencia istmicocervical).	2	3		
27.	Puerperal septic diseases.	2	3		
28.	Rhesus incompatibility. Hemolytic disease of newborn.	2	3		
29.	Habitual miscarriage.	2	4		
31.	Neuroendocrinological syndromes	4	4		
32.	The basics of gynecology of children and adolescents.	2	4		
33.	Contraception. Hormonal contraception. Intrauterine	4	3		
	contraception. Barrier contraception and other methods.				
	Sterilization. Methods of men's contraception				
34.	Sterile marriage.	2	4		
35.	Pausimenia and perimenopausal period. Major types of pathology.	2	4		
	Diagnostics, treatment, prevention of oncopathology				
36.	Chronic lower abdominal pain	2	4		
37.	Fetal and infantile asphyxia. Primary resuscitation	2	4		
38.	Myocarditis	2	4		
39.	Acute respiratory failure. Aetiology, clinical picture, diagnostics,	2	4		

	therapy.		
40.	ARVI: causal, pathogenetic and symptomatic therapy. non-	2	3
10.	specific and specific prevention of flu and ARVI	_	
41.	Nasal allergy of adults and children.	2	4
42.	Bronchial asthma	2	3
43.	Atopic dermatitis of adults and children.	2	3
44.	Long-lasting fever of unclear aetiology.	2	3
45.	Anatomic and physiological features of cardiovascular system of	2	3
45.	children in various age periods	2	3
46.	Myocarditis in children. Differential diagnosis of non-rheumatic	2	3
40.	carditis, cardiopathy, myocardiodystrophy.	2	3
47.	Congenial cardiomyopathy in children. Aetiology, clinical	2	4
7/.	picture, diagnostics, therapy	2	_
48.	Arterial hypertension in children and adolescents. Vegetative	2	3
40.	dystonia syndrome.	2	3
49.	Infective endocarditis. Pericarditis in children.	2	3
50.		4	3
50.	Differential diagnosis of conjunctive tissue diffuse diseases in children	4	٥
51.	Juvenile rheumatoid arthritis.	2	3
52.			3
	Diabetes in children.	2	
53.	Hemorrhagic diathesis. Aetiology, clinical picture, diagnostics.	2	4
~ 1	Principles of therapy.		2
54.	Hemorrhagic diathesis in children. Features of hemorrhagic	2	3
	diseases and hemorrhagic syndromes with various types of		
	angiostaxis. Emergency care in case of hemorrhage, hemarthrosis,		
	hematoma.		4
55.	Hypoplastic and hemolytic anemia in children.	2	4
56.	Anatomico-physiological features of urinary system of children in	2	3
	various age periods		2
57.	Germ inflammatory diseases of urinary system in children.	2	3
58.	Nephrotic syndrome. Aetiology, clinical picture, diagnostics.	2	4
50	Therapeutic issues.		4
59.	Differential diagnosis of glomerulopathy in children. Treatment	2	4
	of acute and chronic glomerulopathy in children.		4
60.	Acute and chronic kidney failure. Emergency care and treatment.	2	4
61.	Anatomico-physiological features of gastrointestinal tract of	2	3
	children in various age periods.		2
62.	Chronic diseases of stomach and dodecadactylon in adults and	2	3
	children.		2
63.	Intestinal tract diseases in adults and children.	2	3
64.	Ulcerative colitis and Crohn's disease in adults and children	2	4
65.	Viral hepatitis B and C: aetiology, epidemiology, pathogenic	2	3
	mechanism, classification. Marker diagnostics in dynamics.		
	Active hepatitis B immunization.	_	_
66.	Acute intestinal infections: differential diagnosis, causal and	2	3
	symptomatic therapy, prevention, health survey.		
67.	Scarlet fever. Measles. Rubella. Pertussis. Aetiology,	2	3
	epidemiology, pathogenic mechanism, clinical picture,		
	diagnostics, treatment and prevention. Aetiology, epidemiology,		
	pathogenic mechanism, clinical picture, diagnostics, treatment		
	and prevention.		

68.	Diphtheria. Infectious mononucleosis. Epidemic parotitis. Varicella.	2	3
69.	Prevention work with children in health locality by a general practitioner. Follow-up care of healthy children.	2	3
70.	Follow-up care with respiratory and cardiovascular pathologies.	2	3
71.	Clinical and expert work in an outpatient clinic.	2	4
72.	Antiepidemic and quarantine measures on the site of infection, including tuberculosis	2	2
73.	Rehabilitation and follow-up of convalescents and bacteria carriers	2	1
74.	Vaccination and revaccination management	2	1
75.	Urgent medical aid for patients with emergency conditions, complicating the treatment of infectious diseases	2	1
76.	Virus infections (herpetic fever, Epstein–Barr (EBV), cytomegala virus)	2	1
77.	Fusarium infections and helminthic invasion	2	1
78.	Vegetative disturbances	2	1
79.	Traumatic injuries of nervous system	2	1
80	Parkinson's disease	2	1
81.	Sleep and vigilance disturbance	2	1
82.	Infectious and parasitic diseases of nervous system	2	1
83.	Tumors of central nervous system	2	1
84.	Delirium, mental debility (including Alzheimer's disease), amnesia, cognitive abnormalities. Analysis of patients	2	4
85.	Anxiety and anxiety disorders.	2	4
86.	Psychosis and psychopathy	4	4
87.	Basics of medical psychology.	2	4
88.	Doctor - patient relations	2	3
89.	Occupational medicine in various branches of industry	2	3
90.	Procedure for medical examination of people exposed to adverse occupational factors	2	3
91.	Principles of early diagnostics and prevention of occupational diseases	2	3
92.	Diagnostics of inflammatory diseases of external, middle, internal ear, management tactics Early diagnostics of otogenic complications.	2	2
93.	Diagnostics and treatment of acute and chronic diseases of upper air passages (laryngitis, pharyngitis, rhinitis, polyposis, adenoid vegetation).	2	2
94.	Diagnostics, treatment and prevention of chronic tonsillitis.	1	3
95.	Inflammatory diseases of nose and its accessory sinuses:	2	2
96.	Foreign bodies and traumas of external auditory canal.	1	3
97.	Glaucoma	2	3
98.	Malady of the age and lacrimal apparatus	2	3
99.	Diseases of keratoderma	2	3
100.	Diseases of posterior eye segment	2	4
101.	Neuroophthalmological diseases	2	4
102.	Eye lesions related to diseases/conditions of other organs and systems, as well as effects of drugs, toxins and occupational hazards	2	4

103.	Clinical pharmacology of major drugs for local application used	2	4
	to treat visual organs' diseases		
104.	Eczema and pruritic dermatitis	2	3
105.	Benign and malignant skin tumors	2	3
106.	Diseases of hair and nails	2	3
107.	Major groups of drugs for local and systemic application in	2	3
	dermatovenereology		
108.	Risk factors and prevention of skin and cutaneous appendage	2	3
	diseases		
109.	Mouth cavity examination, diagnostics of major dental diseases,		
	pain syndromes in mouth cavity. Providing emergency care in	2	4
	case of diseases and traumas of maxillofacial area by a general	2	7
	practitioner		
110.	Preventive measures against dental diseases for children, pregnant	2	4
	women and adult patients.	<u> </u>	+
	TOTAL	256	

5.6 Distribution of a resident's individual work (IW) by types and throughout the terms:

Serial	Type of IW*	Amount	Term
No		in	
		AH	
1.	Working with references	160	1, 2, 3, 4
2.	Writing a paper	60	1, 2, 3, 4
3.	Preparation for a patient report at a clinical analysis and delivering	24	1, 2, 3, 4
	a statement on the topic under discussion		
4.	Working with digital educational resources at the University's	50	1, 2, 3, 4
	educational web portal		
	Executing case histories and out-patient medical records	60	1, 2, 3, 4
	TOTAL	354	

*types of individual work: working with literature and other sources of information on the section under study including interactive forms, performing tasks stipulated by the curriculum (group and/or individual tasks) in the form of executing case histories, papers, essays, reports, addresses; preparation for taking part in interactive studies (role playing and business games, training courses, imitation projections, computer simulations, discussions), working with digital educational resources at the University's educational web portal, writing course papers, etc.

6. Assessment methods to check progress and the results of mastering the discipline.

6.1 Ongoing monitoring and interim attestation methods, types of assessment methods:

				Assessment methods			
Ser ial No	Year	Monitoring methods	Name of the course section	Types	Number of questions in the assignment	Number of independent options	
1	2	3	4	5	6	7	
1.	1	credit	Introduction to General medical practice (family medicine)	tests, situational tasks	10	2	
2.	1	Credit	Scientifically based prevention prevention	tests, situational tasks	20	2	
3.	1.2	Credit	Internal diseases. Diseases of elderly people	tests, situational tasks	50	2	

4.	1.2	Credit	Surgical pathologies. Basics of traumatology and orthopedics in general medical practice. Urgent and emergency care. Cardiopulmonary resuscitation	tests, situational tasks	50	2
5.	2	Credit	Obstetrics and gynecology	tests, situational tasks	50	2
6.	1.2	Credit	Diseases in children and adolescents	tests, situational tasks	50	2
7.	1	Credit	Infectious diseases. Tuberculosis	tests, situational tasks	40	2
8.	1	Credit	Neurological disorders	tests, situational tasks	40	2
9.	2	Credit	Patients with mental disorders. Medical psychology	tests, situational tasks	20	2
10.	2	Credit	Occupational diseases	tests, situational tasks	20	2
11.	1.2	Credit	ENT diseases	tests, situational tasks	40	2
12.	2	Credit	Visual organsdiseases	tests, situational tasks	40	2
13.	1.2	Credit	Skin diseases and sexually transmitted infections	tests, situational tasks	50	2
14.	2	Credit	Dental diseases, mouth cavity and tongue mucous membrane diseases	tests, situational tasks	10	2

Test assignments, situational tasks, case histories, medical treatment records, papers.

Examples of assessment methods:

1. Test assignments

Ser ial No	Section Introduction to General medical practice (family medicine)
1.	Doctor's admission (consultation) comprises the following number of phases: A. 6 phases - establishing relations; identifying the reason for the visit; examination; discussion of examination results; development of an examination or treatment plan; end of consultaion.

- B. 4 phases collection of complaints; case history examination; examination; prescribing examination and treatment.
- C. 5 phases collection of complaints; case history examination; life history examination; physical examination; prescribing examination and treatment.

Correct answer: A

- 2. Choose a correct statement related to patient's role in developing treatment and diagnostic tactics
 - A. improves treatment results.
 - B. impairs treatment results.
 - C. produces no impact on treatment results.

Correct answer: A

Situational tasks

Task 1

A 23-year old man, Ivanov I.M., comes to visit a GP complaining of temperature increasing up to 37.2–37.5°C and coughing with scarce thick mucous begma. The condition has been persisting for three weeks. He has not been to a doctor before now, he has been using folk medicine with no effect. A lawyer by profession, he has recently visited a prison camp by the nature of his office.

He is not married, has been smoking from the age of 18, 5-10 cigarettes a day, drinks 200-250 grams of ardent spirits once or twice a week. Housing conditions are acceptable. He has a separate apartment.

Objectively: pale skin, asthenic bodybuild, body mass index 17, vesicular respiration in lungs, no rale, respiration rate 20 per minute, clear and rhythmic cardiac sound, heart rate 76 per minute, arterial pressure 130/70 mmHg. Soft abdomen, analgic in all parts. Analgic urination.

General practice has no begma collection facilities.

Questions:

- 1. What diseases do you suspect the patient has? Provide grounds.
- 2. What factors could encourage contraction?
- 3. What examination methods would you prescribe to the patient to make a diagnosis?
- 4. Choose the correct form from the suggested list and fill it in for the patient.
- 5. Determine the patient's route.

Answer:

1. Acute bronchitis (temperature increasing up to 37.2–37.5°C and coughing with scarce thick mucous begma for three weeks, vesicular respiration in lungs, no rale).

Pulmonary tuberculosis (temperature increasing up to 37.2–37.5°C and coughing with scarce thick mucous begma for three weeks, has recently visited a prison camp by the nature of his office).

- 2. Has visited a prison camp. Has been smoking from the age of 18, 5-10 cigarettes a day. Drinks 200-250 grams of ardent spirits once or twice a week. Body mass index 17 (weight deficit, normal would be 19-25).
- 3. Microscopic investigation of three begma samples for acid-fast mycobacteria, thoracic organs X-ray, complete blood count.
- 4. Directional forms and accounting documents to perform begma test for BK (bacillus Kochii)

No 05-TE/y Appointment of microscopic tuberculosis test

No 04-1-TE/y Logbook of material collected for microscopic tuberculosis tests

№04-2-TБ/y Accompanying note on the delivery of diagnostic material for microscopic tuberculosis test

5. Upon receipt of positive tuberculosis, takes (X-ray signs assuming tuberculosis: dissemination, roundish formation, cavity formation, increased intrathoracic lymph nodes,

pleuritis or discovery of acid-fast mycobacteria in at least one of the begma samples) the patient must be sent to a phthisiotherapist.

Test questions
Subject: Prevention

- 1. Definitions of *prevention*, *medical prevention*, *pre-existing disease*, *disease*, *health promotion*, *healthy lifestyle*. Factors controlling population;s health, health groups.
- 2. Prevention types primary, secondary, tertiary; specifics of its implementation in general medical practice.

Practical	ckil	1c'	eval	nation
FIACUCA	1.261	115	cvai	uation

Resident's full name	 _
Date	

f	Evaluation sheet for practical skill First aid action plan in case of absence of vital signs (cardiopulmonary resuscitation)			
No	PLAN of actions	Compliance criterion	maximum score	received score
1	Situation assessment	Look around	2	
2*	Determine state of consciousness	Give a slight shake on the shoulders, ask: "Are you alright? Do you need help?"	2	
3	Call surrounding persons for help	Make an appeal to those around you in a loud voice with a specific address	2	
4	Call experts for help	Give a clear instruction to the assistant	2	
5*	Determine the presence of respiration and pulse	Place two fingers onto carotid artery projection; assess presence of respiration with ear, cheek and visually (max. 5-10 sec)	2	
6	Finding the spot for closed chest cardiac resuscitation (CCCR)	From the first attempt	2	
7*	Correct position and hand motions during closed chest cardiac resuscitation	At least 90% compressions must be adequate	2	
8*	Chest compression must be of adequate depth and frequency	At least 80% compressions must be adequate	2	
9	Disimpaction of respiratory passages	Put the sharp of one hand on the patient's forehead, use two fingers of the other hand to pull the chin up, carefully tilt the head back	2	
10	Volume and air flow rate during artificial pulmonary ventilation	At least 80% perfusions must be adequate	2	

	(APV)			
11	Correlation of CCCR/APV activities	30:2 C-A-B	2	
12	Keep to the prescribed order Continue until biological death signs emerge			
	Total score			

^{* -} Failure to complete the items marked with "*" automatically leads to end of manipulations and an unsatisfactory score.
"5" - 20 - 24 points
"4" - 17 - 19 points
"3" - 15 - 16 points
"2" - 14 and fewer points

Grade:						
Commentary:						
Examiner	Signature	Printed name				
Desident's full name						
Resident's full name						
Date						

	Evaluation sheet for a practical skill Rectal examination				
No	PLAN of actions Fitting criterion		maximum score	received score	
1*	Arranging of comfortable and safe conditions for the examination	Close the door tightly or place the patient behind a blind during the examination	2		
2	Help the patient to initial position	Knee-elbow position or lying on the side on the bed's edge with feet brought to abdomen	2		
3*	Preparation of the doctor;s hands for the examination	Put on gloves and treat index finger with mineral butter	2		
4	Visual inspection of perianal area	Determining skin and visible mucosa condition; presence, location and enhancement degree of hemorrhoidal tumors	2		
5	Rectum and prostate palpation	Anal sphincter tonus estimation, assessment of rectum wall state, internal hemorrhoidal tumors. Estimation of the prostate's size, tonus, surface condition, groove intensity and painfulness when palpating.	2		
6*	Assessment of the glove's color after the examination	Determine presence/absence of blood on the glove, identify	2		

	reasons for it, if possible.	
Total score		

^{* -} Failure to complete the items marked with "*" automatically leads to end of manipulations and an unsatisfactory score.

7. Educational and information provision for the discipline (printed and digital publications, Internet and other network resources).

7.1 List of recommended books:

No	Number of copies		of copies
		In the	In the library
		department	
1	A Textbook of Family Medicine/Ian R. McWhinney;		1
	Thomas Freeman. – 3rd ed.; 2009, p. 472		
2	Textbook of Family Medicine, /Robert E.		1
	Rakel, David Rakel MD. – 9th Ed.; 2015, p. 1215		
3	Resident's Guide to Ambulatory Care/Michael B.		1
	Weinstock, Miriam Chan. – 7th ed.,2015, p.		
4	Family Medicine: Principles and Practice/Robert B.		1
	Taylor. –7th ed.; 2017, p.		
5	Fundamentals of Family Medicine/Editor Robert B.		1
	Taylor. –7th ed.; 2017, p.		1
6	Resident's Guide to Ambulatory Care/Michael B.		1
	Weinstock, Miriam Chan. – 7th ed., 2015, p.		1
7	Family Medicine, 2011 (Current Clinical		1
0	Strategies)/ Paul D. Chan. –2011th Ed.,2010., p.272		1
8	Current Diagnosis & Treatment in Family		1
	Medicine/Jeannette South-Paul, Samuel Matheny,		
9	Evelyn Lewis. – 4th Ed.,2015, P. 752 The Family Medicine Handbook: Mobile Medicine/		1
9	Mark A. Graber, Jennifer L. Jones, Jason K. Wilbur–		1
	5th Ed., 2006, p.		
10	Outpatient and Primary Care Medicine/Paul D. Chan,		1
10	David M. Thomas, Elizabeth K. Stanford. – 3rd ed.;		1
	2010, p. 294		
11	Sanford Guide to Antimicrobial Therapy/ David N		1
	Gilbert. – 4th Ed.,2015, P.		
12	Tarascon Pocket Pharmacopoeia/2017 Deluxe Lab-		1
	Coat, Richard J. Hamilton. – 18th Ed., 2017, p.470		
13	Tarascon Medical Procedures Pocketbook/ <u>Joseph S.</u>		1
	Esherick. –1st Ed.,2012, p.240		
14	The Color Atlas of Family Medicine/Richard P.		1
	Usatine, Mindy Ann Smith, E.J. Mayeaux Jr. –2nd		
	Ed.,2017, p.		
15	Current Diagnosis & Treatment in Family		1
	Medicine/Jeannette South-Paul, Samuel Matheny,		
	Evelyn Lewis. – 4th Ed.,2015, P. 752		

[&]quot;5" - 11 - 12 points

[&]quot;4" - 9 - 10 points

[&]quot;3" - 7 - 8 points

[&]quot;2" - 6 and less points

16	Procedures for Primary Care/ John L. Pfenninger,	1
	Grant C. Fowler. – 3e Ed.,2011, p. 1776	
17	Clinical Procedures for Health Professionals/H.Multak	1
	– 2017, p.196	
18	Oxford American handbook of clinical examination	1
	and practical skills / edited by Elizabeth A. Burns,	
	Kenneth Korn, James Whyte IV; with James Thomas,	
	Tanya Monaghan. 2011, p. 692	
19	10 Minute Clinical Assessment. 2nd Edition, 2016,	1
	p.896	
20	Practical Obstetrics and Gynaecology Handbook for	1
	O&G Clinicians and General Practitioners	
	Downloaded from www.worldscientific.com by	
	83.149.254.66 on 12/09/16.	
21	The Patient-Doctor Consultation in Primary Care/J	1
	Thistlethwaite and P Morris 2007, p. 260	
22	Clinical Procedures for Health Professionals/H.Multak	1
	– 2017, p.196	
23	Smith and Tanagho's General Urology/ <u>Jack W.</u>	1
	McAninch; Tom F. Lue- 18th Ed., 2013, p.758	
	The 5 Minute Urology Consult (The 5-Minute Consult	
	Series)/ Leonard G. – 3 th Ed., 2015, p.1032	
	Management for New GPs/ V Wilkie and P Spurgeon.	
	- 2009, p.230	
24	The Patient-Doctor Consultation in Primary Care/J	1
	Thistlethwaite and P Morris 2007, p. 260	

8. Material and technical support for the dcourse

	o. Material and technical support is	or the c	icourse	
Serial	Location of study room(s)*,	room	Room	Location of equipped study rooms,
No	premises for practical studies,	No	area (m ²)	premises for practical studies, sports
	sports facilities			facilities, with a list of major
				equipment*
1	3	4	5	6
1.	Rossolimo, ,str., 11, building 4	1.2	40	Auditorium for lectures, seminars and
				practical studies
				multimedia set (laptop, projector,
				screen)
2	Rossolimo, ,str., 11, building 4	556	20	Auditorium with simulation
				equipment, training diagnostic and
				treatment equipment
3	Rossolimo, ,str., 11, building 4			Laboratory for blood and urine tests
4	Rossolimo, ,str., 11, building 5			Multi-field in-patient clinic

^{*}specially equipped premises (auditoriums, study rooms, laboratories, etc) designed for lectures, seminars, practical and clinical studies when mastering disciplines, including:

dissecting room, anatomical museum, corpse storage room;

auditoriums with simulation equipment;

offices for working with patients receiving medical aid.

9. Interactive educational techniques used in the process of teaching the discipline*: Role-playing games, lectures, discussions, apprenticeship with patient analysis

^{*}laboratory, instrumental equipment (specify), multimedia set (laptop, projector, screen), TV set, video camera, slide projector, VCR, PC, video- and DVD players, monitors, slide sets, charts/multimedia graphic materials on various sections of the discipline, videos, disks, etc.

*imitation techniques: role-playing and business games, imitation projections, computer simulation, cases, etc.; non-imitation techniques: lecture (problem-based, visualization, etc.), discussion (with and without brainstorming), apprenticeship, programmed education, etc.

Total 20% interactive studies in the volume of auditorium work.

9.1 Examples of interactive educational techniques:

Role-playing game scenario 1.

Purpose: Training the skills of consulting parents of a child with a conversion of tubercular tests. The group will consist of three members: general practitioner, mother of the child with a conversion of tubercular tests, an observer.

The group will receive three sheets with situation description

Patient's instruction

Your name is Vera Ivanovna. You are visiting a general practitioner. Your child has undergone Mantoux test, and a conversion of tubercular tests was detected (after a number of negative responses a positive response emerged). You are very much disturbed as you enter the doctor's office. Your husband's father has visited you two months ago. He is registered at a TB dispensary in another town, he has an open pulmonary tuberculosis, but strongly objects to hospitalization and does not want to be treated on an outpatient basis. You realize that tuberculosis is a highly contagious disease and you need to take preventive measures not to become ill.

Doctor's consultation:

You've never met this doctor before. He is an absolute stranger to you. You need support and detailed information on tuberculosis prevention for people contacting with a diseased person. The talk shouldn't take more than 10 minutes. When it's over, take 5 minutes to describe your impressions of what the doctor did well and what feelings you experienced, so that the mother correctly understands what needs to be done to manage the child with a conversion of tubercular tests and how to deal with contacts. Then specify aspects which could have been changed for better.

Doctor's instruction:

Situation: general medical practice.

Time: Tuesday afternoon

Vera Ivanovna is seeing the doctor because her son has had a conversion of tubercular tests. You've never seen her before, and you know nothing about her son. Ask her about her son and their relatives in order to identify the reason for the conversion of tubercular tests, and tell her of preventive measures to be taken by people contacting with a person sick with tuberculosis.

The talk shouldn't take more than 10 minutes. When it's over, take 5 minutes to describe your impressions of what you did well and what you felt when consulting the mother on what needs to be done to manage the child with a conversion of tubercular tests and how to deal with contacts. Then specify aspects which could have been changed for better.

Observer's instruction:

Situation: general medical practice.

Time: Tuesday afternoon

Vera Ivanovna is visiting a general practitioner. The doctor has never seen her before, and he knows nothing about her family. He is asking her about her son's condition to identify the reason for the conversion of tubercular tests, and tells her of preventive measures to be taken by contacting persons.

Additional information:

The woman's son has undergone Mantoux test, and a conversion of tubercular tests was detected. The patient's grandfather is registered at a TB dispensary with an open pulmonary tuberculosis. He's visited them for a short time two months ago.

Your task is as follows:

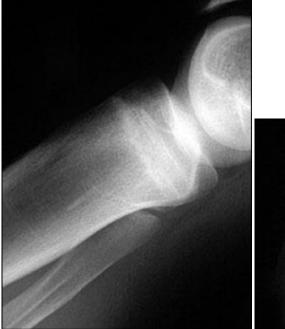
- 1. To evaluate the correctness of information presented by the doctor concerning conversion of tubercular tests and prevention of tuberculosis for contacting persons.
- 2. To listen to the discussion and make notes on what was said and done by the doctor to establish trust-based relations with the parents which can help them share their feelings and anxieties so that they are ready to fulfill all the doctor's recommendations.

The consultation and its discussion should not last more than 20 minutes. When it's over, take 5 minutes to discuss only what was said and done by the doctor to make the patient share her feelings and anxieties and fulfill all the doctor's instructions.

Group discussion: The teacher asks everybody in the group what they think the doctor did right from the patient's point of view, from the doctor's point of view, then what the doctor didn't manage to do right and what could have been done better. Then, after summarizing the group's opinion, the teacher formulates improvement recommendations. The discussion is capsuled and mutual understanding is achieved among the doctor, the child's mother, the teacher and the group. The discussion shouldn't take more than 10 minutes.

Task 2. Discussion

A 20-year old military man has been followed up for three weeks on an outpatient basis with regard to pain in the anterior surface of the right knee joint. No traumas, edema, obstructivity or instability of the joint were registered. During the previous visit a physical therapy course was recommended to the patient but the treatment proved ineffective. The last examination revealed a positive "theatrical symptom" (the pain in the knee increases sharply after sitting for a long time), knee-cap pressing test with displacement was positive, ligamentous apparatus stable, McMurray's test caused pain, palpation of medial condyle of tibia caused pain. X-ray investigation was performed (see picture).





Question

Based on data from case history, examination and X-ray, which of the following diagnoses seems the most probable?

- A. Medial fold syndrome
- B. Knee tendopathy
- C. Patellofemoral pain syndrome
- D. Bursitis Pes anserine
- E. Proximal tibial hairline fracture (stress fracture)

Discussion

Answer: E Proximal tibial stress fracture This type of fracture is also called march fracture or hairline fracture. Most tibial stress fractures occur in the diaphysis region. Typically, medial condyle is affected. This condition is common for sportsmen. Stress fracture may be the result of normal load when bony tissue is weak (i.e. deficiency fracture) or a new unaccustomed repeated load on normal bony tissue (fatigue fracture). Sportsmen (1) and military recruits (2) are most vulnerable to fatigue fracture risks.

Fatigue fracture may reveal itself by constant pain occurring when physical load intensity is increased sharply (duration, distance or conditions of the physical load). When examining, you can detect pain upon palpation along the medial articular line, pain upon moving with a load, when jumping on the affected leg. Effusion into joint cavity is also possible. (1)

X-ray 2D picture may remain normal for several weeks or even months. (1,3) As long as cylindrical bone metaphysis is presented mainly by spongy bone tissue, normal periosteal/endosteal reaction is not visualized. A typical manifestation of stress fracture for this type of bones is a bandage-shaped induration area. (3,4) When suspecting a stress fracture and having negative X-ray results, the next examination stage may be magnetic resonance tomography (MRT) or bone scanning. Of these two, MRT is more sensitive in stress fracture diagnostics. (1) Bone scanning may produce non-specific results, so the positive test result must be assessed in the context of the clinical picture and case history (3,4).

Tibial stress fracture treatment comprises reduction of the load on the affected area. The patient must avoid traumatic exercises. Instead, he can perform exercises to train cardiovascular system, not assuming load on the affected area (e.g. swimming). Gradual regression to habitual loads must be performed with regard to pain intensity. Activity must increase slowly provided that there is no pain relapse. (1.2)

Medial fold syndrome is a thickening of the medial anchor which may be painless or painful. Usually, this thickening can be palpated in the projection of the medial joint line. Medial fold syndrome may result from a direct trauma of a bent knee, though there have been cases of medial fold syndrome after overexertion and joint convolution. (5) Clinical signs of medial fold syndrome include pain at 30 - 60 degrees of knee joint bending, pain when coming upstairs, pain upon motion and "pseudoobstructivity" of the joint (5). The question whether medial fold syndrome is capable of inducing pain of the whole knee joint has not been answered yet.

Knee tendopathy (jumper syndrome) manifests itself with a theatrical syndrome and sudden pain when coming upstairs. At the same time, pain can be related to increased physical activity, especially to jumping. When examining the patient, painful patellar tendon can be detected, especially in its lower pole point. (6)

Patellofemoral pain syndrome is the most common cause of pain in the anterior part of the knee. This diagnosis should be made by a process of elimination. The patient may complain of a theatrical syndrome. Painfulness may be caused by pressing the kneecap in the direction of tibial groove. McMurray test may cause pain when the knee is bent completely, because the kneecap is pressed against tibial groove. (7)

Bursitis Pes anserine occurs upon inflammation of gracilis muscle tendon, semitendinous and tailor's muscle, which developed as the result of a trauma or overexertion. The inflammation is

developed in the spot where the tendons of these muscles proceed over medial condyle of femur and connect to medial part of tibia. (8)

Summary table	
Disease	Specification
Medial fold syndrome	Palpable thickening of ligament tissue, typically in the projection of the joint line, resembling a bow-string when
	palpating.
Knee tendopathy	Kneecap tendon painfulness related to increased activity,
	especially jumping.
Patellofemoral pain syndrome	Pain along the anterior surface of the knee joint, pain when
	coming upstairs, absence of X-ray signs.
Bursitis Pes anserine	Painfulness and inflation in the spot where muscle tendons
	are connected to medial surface of proximal part of tibia.
Proximal tibial stress fracture	Painfulness on the affected side, signs of sclerosis on X-
	ray pictures.

Non-imitation techniques: lecture (problem-based)



Analysis of patients on an in-patient basis (university's clinical hospital No 3) and in general medical practice (GP's office)

9.2 Digital educational resources used in the process of teaching the discipline:

	5.2 Digital educational resources used in the process of	to morning the discipline.
Serial	Name and brief description of digital educational	Number of copies, access points
No	and information resources (digital publications and	
	information databases)	
1	3	4
1.	http://emedicine.medscape.com/	2
2.	http://www.aafp.org/home.html	2
3.	http://www.rcgp.org.uk/	2
4.	http://www.racgp.org.au/	2
5.	http://www.cfpc.ca/	2
6.	http://www.globalfamilydoctor.com/	2
7.	http://bjgp.org/	2
8.	CDs adopted by teachers of the department of	2-10 copies
	family medicine	-
	1. Prevention and metaphylaxis in the work of a	
	family doctor	
ı	2. Ocular diseases in the work of a general	

	practitioner (family doctor)	
	3. Neurological, psychosomatic and ocular disorders	
	in the work of a general practitioner (family doctor)	
	4. Ororhinolaryngology for a general practitioner	
	5. Practical skills in the work of a general	
	practitioner (family doctor)	
	6. Utilizing portable physiotherapy devices in the	
	work of a family doctor	
	7. Primary surgical treatment of wounds	
9.	Methodology textbooks and guides adopted by	2-10 copies
	teachers of the department of family medicine	_
	1. Clinical lectures for general practitioners	
	2/ Modular arrangement of the teaching process on	
	the stage of postgraduate professional education of	
	doctors	
	3. Organizing a day patient facility and home care	
	facility in general medical practice.	
	4. Clinical electrocardiography	
	5. ECG diagnostic algorithms in general medical	
	practice	
	6. Ocular diseases in general medical practice	
	7. Management of patients with urinary tract	
	infections in general medical practice	
	8. A quick guide on organizing tuberculosis	
	management for general practitioners	
	9. Skin diseases (with atlas and formulary)	