

No.LD-21

Federal State Budgetary Educational Institution of Higher Education "North Ossetian State Medical Academy" of the Ministry of Health of the Russian Federation

Department surgical diseases No. 1

APPROVED
minutes of the meeting
Central coordination
educational and methodological council
"May, 23rd 2023 No. 5

ASSESSMENT MATERIALS

in educational practice "Introductory practice (care for surgical patients)"

main professional educational program of higher education - specialty program in specialty
05/31/01 General Medicine,
approved on May 24, 2023

for 1st year students
specialty 05/31/01 General Medicine

Reviewed and approved at a department meeting

From May 22, 2023 (protocol No. 10)

Head of the department Beslekov U.S. degree, title _____

Vladikavkaz 2023

STRUCTURE OF ASSESSMENT MATERIALS

1. Title page
2. Structure of assessment materials
3. Reviews of evaluation materials
4. Passport of evaluation materials
5. Set of assessment materials:
 - questions for the module
 - questions for testing
 - bank of situational tasks
 - standards of test tasks (with title page and table of contents)
 - tickets for competition

**FEDERAL STATE BUDGETARY EDUCATIONAL INSTITUTION OF HIGHER
EDUCATION "NORTH OSSETIAN STATE MEDICAL ACADEMY" OF THE MINISTRY
OF HEALTH OF THE RUSSIAN FEDERATION**

**REVIEW
for assessment materials**

according to educational practice “Introductory practice (care for surgical patients)”

For 1st year students

specialty 05/31/01 General Medicine

Evaluation materials were compiled at the Department of Surgical Diseases No. 1 based on the work program of the discipline Introductory practice (care for surgical patients) and meet the requirements Federal State Educational Standard of Higher Education by specialty 05/31/01 General medicine, approved by the Ministry of Education and Science of the Russian Federation on August 12, 2020 No. 988

Evaluation materials include:

- questions for the module,
 - questions for testing,
 - bank of situational tasks,
 - standards of test tasks (with title page and table of contents),
- tickets for competition

Bank of situational problems includes the tasks themselves and answer templates. All tasks correspond to the work program of the educational practice _Introductory practice (care for surgical patients) competencies formed during its study, and cover all its sections. The bank contains answers to everyone's situational tasks.

Test task standards include the following elements: test tasks, answer templates. All tasks correspond to the work program of the educational practice Introductory practice (care for surgical patients) competencies formed during its study, and cover all its sections. The difficulty of the tasks varies. The number of tasks for each section of the discipline is sufficient for testing knowledge and eliminates repeated repetition of the same question in different versions. The standards contain answers to all test tasks.

The number of tickets for the competition is sufficient for the competition and eliminates the repeated use of the same ticket during the competition within one day. Tickets for the competition are made on uniform forms according to a standard form, on paper of the same color and quality. The test ticket includes 3 questions. The wording of the questions coincides with the wording of the list of questions submitted for testing. The content of the questions on one ticket relates to various sections of the work program of educational practice, allowing you to more fully cover the material of educational practice. In addition to theoretical questions, a bank of situational tasks (tests, recipes, radiographs, electrocardiograms, etc.) / practical tasks / business games is offered. Situational tasks/practical tasks/business games make it possible to objectively assess the level of student's mastery of theoretical material during ongoing monitoring of progress and intermediate certification. The complexity of the questions in the test tickets is evenly distributed.

There are no comments on the peer-reviewed assessment materials.

In general, assessment materials for educational practice Introductory practice (care of surgical patients) contribute to a qualitative assessment of students' level of proficiency in universal/general professional/professional competencies.

Peer-reviewed assessment materials for educational practice Introductory practice (surgical nursing)

can be recommended for use for ongoing monitoring of progress and intermediate certification at **05/31/01 General medicine** for 1st year students

training.

Reviewer:

Chairman of TSUMK
in surgical disciplines

Ph.D. Kalitseva M.V.

**Passport of assessment materials for
educational practice “Familiarization practice (care for surgical patients)”**

No.	Name of the supervised section (topic) of the discipline/module	Code of the competence (stage) being formed	Name of assessment material
1	2	3	4
Type of control	Ongoing progress monitoring/interim assessment		
1.	Design, equipment and equipment of a surgical clinic	OPK-1 OPK-6	test control, questions for the module, questions for the test, bank of situational tasks, tickets for competition
2.	Organization of the work of the surgical department.	OPK-1 OPK-6	test control, questions for the module, questions for the test, bank of situational tasks, tickets for competition
3.	Medical deontology of students in the surgical department.	OPK-1 OPK-6	test control, questions for the module, questions for the test, bank of situational tasks, tickets for competition
4.	Clinical food hygiene of medical personnel in the surgical department.	OPK-1 OPK-6	test control, questions for the module, questions for the test, bank of situational tasks, tickets for competition
5.	Personal hygiene of medical personnel.	OPK-1 OPK-6	test control, questions for the module, questions for the test, bank of situational tasks, tickets for competition
6.	Clinical environmental hygiene in wards, corridors and utility rooms of the surgical department.	OPK-1 OPK-6	test control, questions for the module, questions for the test, bank of situational tasks, tickets for competition
7.	Clinical environmental hygiene in the operating and dressing unit.	OPK-1 OPK-6	test control, questions for the module, questions for the test, bank of situational tasks, tickets for competition
8.	Safety precautions for patient care in surgical departments.	OPK-1 OPK-6	test control, questions for the module, questions for the test, bank of situational tasks, tickets for competition

Questions for the module

1. Who is the founder of the organization of patient care in Russia:
2. Define asepsis:
3. What causes excessive dust in the air in the surgical department?
4. What is meant by personal hygiene?
5. List the categories of bacilli carriers according to Gromashevsky:
- 6 Specify the timing of planned operations:
7. Define a surgical operation:
8. List the measures aimed at preventing bedsores:
9. What do you need to have for gastric lavage?
10. What does the surgical dressing unit consist of?
11. List the measures aimed at preventing nosocomial infections:
12. Name the sources of wound infection:
13. What manipulations are performed in the treatment room?
14. What is meant by a terminal state?
15. List the basic deontological principles:
16. List the surgical operations:
17. what activities are included in the care of surgical patients
18. List the types of hygienic regime in surgerycom hospital:
19. Name the optimal measures for caring for patients in the ward immediately after surgery:
20. What symptoms are reliable signs of biological death?
21. What is parenteral nutrition?
22. What is the care of a postoperative wound and drainages in the first hours after surgery?
23. What kind of cleaning should be carried out in the wards of the surgical department?
24. List the factors influencing the environmental hygiene of the surgical department:
25. What kind of cleaning should be carried out in the wards of the surgical department?

Questions for testing

1. Structure of the surgical hospital.
2. Therapeutic and protective regime in a hospital.
3. Schedule for visiting surgical patients.
4. Lighting mode of the surgical hospital.
5. Temperature conditions in surgical wards.
6. Sanitary and hygienic requirements for medical equipment in a surgical hospital.
7. The concept of the daily routine of surgical patients.
8. The concept of personal hygiene of students.
9. Personal safety rules when caring for surgical patients.
10. The concept of anthropometry of patients.
11. Determination of height and weight of patients.
12. Determination of chest circumference.
13. Determination of limb circumference.
14. Determination of abdominal circumference.
15. Determination of head parameters.
16. How to treat your hands with disinfectant solutions?
17. How to use a surgical mask?
18. How to use a functional bed?
19. How to use an individual dressing package?
20. How to sanitize a patient upon admission to the hospital?
21. How to disinfect medical instruments and supplies
22. nursing?
23. How to process and disinfect bedpans and urinals?
24. How to carry out hygienic treatment of the body of an operated patient?
25. How to change a patient's underwear and bed linen?
26. How to hygienically wash patients?
27. How to disinfect air with an ultraviolet source radiation?
28. How to move from bed to gurney and back?
29. How to move from the gurney to the operating table and back?
30. How to move with an IV system and drains?
31. How to perform elastic compression of the lower extremities?
32. How to perform gastric intubation and lavage?
33. How to perform subcutaneous and intramuscular injections?
34. How to perform venipuncture, taking blood samples from a vein and intravenous injections?
35. How to remove stitches from a wound?
36. How to perform instrumental dressing of wounds?
37. How to perform indirect cardiac massage?
38. How to perform artificial respiration?

39. How to put dressings, surgical clothing, masks, gloves in the bins?
40. How to assess the sterility of the material in the container?
41. How to provide first aid in case of poisoning with disinfectants?
42. How to help a patient with vomiting?
43. How to feed patients in bed?
44. How to feed patients through a tube?
45. How to feed patients through a gastrostomy tube?
46. How to use a colostomy bag?
47. How to apply and remove transport splints?
48. How to apply and remove bandages and scarves?
49. How to insert an air duct?
50. How to administer medications through drainages and microirrigators?

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Departmentsurgical diseases No. 1
FacultyMedicinal **Well**1
DisciplineIntroductory practice (care for surgical patients)

Situational task No. 1

After the operation was completed, the nurse began to process the instruments used during the purulent operation under running water, and the used surgical material (wipes, balls, tampons, etc.) was placed in a bag and thrown into the trash.

What mistakes did she make, and what dangerous consequences could they lead to?

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Situational task No. 2

At night, the guard nurse, remembering the missed injection of a sleeping pill to the patient, left the medical history on her desk, entered the room, turned on the general light and, waking up the patient, injected him with a sleeping pill.

What mistakes did the nurse make?

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DisciplineIntroductory practice (care for surgical patients)

Situational task No. 3

While performing a standing chest x-ray on a seriously ill patient, the nurse supported the patient in her usual work uniform.

What mistake did she make and what does this mean for her?

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DisciplineIntroductory practice (care for surgical patients)

Situational task No. 4

The therapeutic and protective regime in medical institutions provides.....

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Situational task No. 5

What is the scope of patient preparation for X-ray and instrumental (endoscopic) examination of the stomach and duodenum?

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DisciplineIntroductory practice (care for surgical patients)

Situational task No. 6

A patient with a suspected colon tumor will undergo irrigoscopy and colonoscopy.

What is the extent of the patient's bowel preparation?

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Departmentsurgical diseases No. 1

Faculty Medicinal **Well1**
Discipline Introductory practice (care for surgical patients)

Situational task No. 7

An elderly patient with vague abdominal pain in satisfactory condition (history of hypertension) was prescribed a hygienic bath in the emergency room. After 10 minutes, the patient's condition worsened, and then he lost consciousness.

What happened to the patient?

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Discipline Introductory practice (care for surgical patients)

Situational task No. 8

The patient was brought to the emergency room in a state of moderate severity, with severe abdominal pain, with a picture of peritonitis.

How much sanitization does he have to do?

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DisciplineIntroductory practice (care for surgical patients)

Situational task No. 9

A patient in moderate condition with abdominal pain was accompanied by a nurse from the emergency room to the ward on foot. However, in the corridor he lost consciousness and fell.

What could have happened to him, and what mistake was made?

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DisciplineIntroductory practice (care for surgical patients)

Situational task No. 10

During examination in the emergency room, the patient was diagnosed with pediculosis.

How much sanitization will you do? The future fate of the patient?

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FacultyMedicinal **Well1**

DisciplineIntroductory practice (care for surgical patients)

Situational task No. 11

In the emergency room, the patient was diagnosed with a penetrating stab wound to the abdomen with eventration of a loop of intestine. Surgeons are busy in the operating room.

What will be your actions?

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DisciplineIntroductory practice (care for surgical patients)

Situational task No. 12

After three days of injection of dibazole into the buttock muscle, the patient developed increasing pain at the injection site of the drug, swelling and local hyperemia. 5-6 days after the injection, the temperature increased to 39-40o.

What complication occurred and what could be the reason?

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DisciplineIntroductory practice (care for surgical patients)

Situational task No. 13

A young, inexperienced nurse administers an intravenous injection to a patient. A few minutes after the injection, the patient's condition sharply worsened, shortness of breath appeared, bluishness of the face and motor agitation increased. Soon the patient stopped breathing and died.

What could be the cause of death?

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Situational task No. 14

After surgery, a patient in a state of post-narcotic sleep in the ward experienced vomiting and regurgitation.

What is the scope of first aid?

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DisciplineIntroductory practice (care for surgical patients)

Situational task No. 15

After surgery on the abdominal organs, the patient did not have oral care for several days due to the severity of her general condition.

What consequences can this lead to, what is the cause of the patient's ear pain?

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DisciplineIntroductory practice (care for surgical patients)

Situational task No. 16

A middle-aged patient, due to the severity of his general condition, could not care for his ears for a long time. His hearing loss gradually began to progress.

What is the reason. What other complications are expected and how to prevent them?

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DisciplineIntroductory practice (care for surgical patients)

Situational task No. 17

In the postoperative period, on days 5-6, an elderly patient developed bedsores in the area of the shoulder blades and sacrum.

What is the anatomical and pathogenetic basis for their development?

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Departmentsurgical diseases No. 1

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Situational task No. 18

In a postoperative patient, after several days of bed rest, a dark red, bluish area first appeared in the sacral area, and then a wound opened.

What happened and how to prevent it?

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Situational task No. 19

A drowned man has just been pulled out of a pond, unconscious, cyanotic, no breathing.

How much first aid should you give him?

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Situational task No. 20

An elderly patient had no bowel movements for a week. Abdominal pain is not severe, there is no nausea or vomiting. The abdomen is distended, there are no symptoms of peritoneal irritation.

What explains the patient's condition and how to help him?

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Situational task No. 21

A patient has a peptic ulcer in the acute stage.

What dietary table will you prescribe for him, justify the feasibility of the prescribed table?

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DisciplineIntroductory practice (care for surgical patients) _____

Situational task No. 22

The patient was diagnosed with chronic cholecystopancreatitis with frequent relapses.

Justify the diet plan you have prescribed for the patient.

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Departmentsurgical diseases No. 1

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Situational task No. 23

A long-haul driver suffering from chronic constipation discovered a copious amount of scarlet blood in the toilet during a bowel movement.

What is the cause of this bleeding and what do you advise the patient?

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Departmentsurgical diseases No. 1
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DisciplineIntroductory practice (care for surgical patients)

Situational task No. 24

You are called to a victim who has fallen from a tree. A deformity of the right lower limb with external rotation was discovered. The patient notes severe pain in the middle third of the thigh.

What happened to the limb and what is the scope of your first aid?

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DisciplineIntroductory practice (care for surgical patients)

Situational task No. 25

A patient who has noted frequent epigastric pain in the past complains of profuse vomiting of

“coffee grounds” and severe general weakness.

What can cause bloody vomiting and what first aid should you provide to the patient?

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Situational task No. 26

A patient with a wound to the right leg was found to have jet pulsating bleeding of scarlet blood from the wound.

What type of bleeding is this, what is your first aid?

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Situational task No. 27

A young man, while wielding a knife, accidentally injured the medial surface of the middle third of his thigh. There is profuse stream bleeding of dark blood from the wound.

What type of bleeding is this and what is your first aid to the victim?

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Situational task No. 28

After drinking vinegar essence, a patient developed a cicatricial stricture (narrowing) of the esophagus. How to solve the problem of feeding him?

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Situational task No. 29

What are the indications and types of artificial nutrition for patients?

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Situational task No. 30

An exhausted patient is forced to lie on his side for a long time.

In what places can bedsores develop and how to prevent them?

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Departmentsurgical diseases No. 1
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DisciplineIntroductory practice (care for surgical patients)

Situational task No. 31

During a thunderstorm, a man found himself under a lonely tree and was struck by lightning. There is no consciousness, he is not breathing, there is no pulse in the peripheral vessels.

How much first aid will you provide him?

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DisciplineIntroductory practice (care for surgical patients)

Situational task No. 32

A man without a hat worked for several hours in a row in his garden under the scorching sun. He suddenly lost consciousness and fell to the ground.

What could have happened to him and your actions?

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Situational task No. 33

The patient underwent surgery under anesthesia on the abdominal organs.

What pulmonary complication is associated with bed rest in a patient and how to prevent it?

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DisciplineIntroductory practice (care for surgical patients)

Situational task No. 34

The woman received a burn to her forearm from boiling water. On the forearm there are whole and broken blisters, swelling, hyperemia throughout the forearm.

What first aid should you give her?

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DisciplineIntroductory practice (care for surgical patients)

Situational task No. 35

A nursing woman complains of pain and swelling in the left mammary gland. She has not fed the baby with her left breast for several days. Subfebrile temperature

What disease can develop and how to prevent it? Your advice for the patient?

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Departmentsurgical diseases No. 1
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Situational task No. 36

Signs of poisoning—nausea, heaviness in the stomach—appeared in the patient one hour after eating poor quality food (sausage).

How to help the victim?

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Departmentsurgical diseases No. 1
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Situational task No. 37

A patient with purulent arthritis was given an intramuscular antibiotic (lincomycin) for the first time in his life. After 20-30 minutes, the patient's body became covered with red spots, itching of the skin appeared, as well as swelling of the lips.

What complication did the patient experience? How was the tactical mistake made? How to stop the complication that has occurred.

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Situational task No. 38

The man suffered a broken jaw in a car accident and lost consciousness for a short time.

How to feed the victim, what is the diet?

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Situational task No. 39

The patient had persistent nosebleeds while lying down.

What is your first aid to a patient? The further fate of the patient?

No.LD-21

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Department of Surgical Diseases No. 1

Standards of test tasks

**EDUCATIONAL PRACTICE
FAMILIARY PRACTICE (care for surgical patients)**

main professional educational program of higher education - specialty program in specialty
05/31/01 General Medicine, approved 05/24/2023.

for 1st year students

by specialty 05/31/01 General medicine

Vladikavkaz, 2023

OPTION #1

1. Who is the founder of the organization of patient care in Russia:

- a) N.I. Pirogov;
- b) A.V. Vishnevsky;
- c) D. Lister;
- d) E. Bergman;
- e) F. Nightingale.

2. A patient came to the emergency department of the hospital without asking compelling medical documents, suddenly feeling unwell. What will be your tactics?

- a) examine the patient, provide him with the necessary medical care and decide on further treatment tactics
- b) call an ambulance;
- v) send the patient for referral medical documentscops.

3. The sanitary checkpoint is equipped with:

- 1. Sink, toilet;
- 2. Bathroom;
- 3. Safe;
- 4. A set of instruments for tracheostomy, stopping bloodflow;
- 5. Bedpans;
- 6. Means for sanitary treatment.
- 7.

4. List the auxiliary diagnostic units of the surgical department:

- 1. X-ray room;
- 2. Endoscopy room;
- 3. Statistical office;
- 4. Stenography office;
- 5. Ultrasound diagnostic room;

6. Biomicroscopic diagnostics room.

5. What contributes to the appearance of cockroaches in hospital departments?

- A) untimely removal of food waste and poor cleaning of catering facilities;
b) cracks in walls and baseboards;
V) nosocomial infections;
G) insufficient sanitary treatment of patients.

6. Define asepsis:

1. A set of measures aimed at preventing infection from entering the wound or the body as a whole;
2. A set of measures aimed at destroying infections in the wound or in the whole body;
3. A set of measures aimed at sterilizing instruments and materials;
4. A set of sanitary and hygienic standards aimed at to prevent nosocomial infections.

7. Which definition most fully reflects the term "deontology"?

1. The science of proper and norms of behavior between medical professionals;
2. The science of proper and norms of treatment;
3. A set of rules and norms for communication with patients and relatives of patients;
4. The science of what should be, that is, the norms of behavior of a medical worker in various situations of communication with patients, relatives of the patient and colleagues in the profession.

8. What percentage of total daily calories should include lunch?

1. 30%--40%;
2. 40% -50% ;
3. 60%;
4. 70%;
5. Any.

9. What causes excessive dust in the air in a surgical department?

1. Exacerbation of chronic diseases of the upper respiratory tract;
2. An attack of bronchial asthma;
3. Skin irritation;
4. Conjunctivitis;
5. Excessive dust does not affect the body.

10. What is the length of time from the start of the preparing the patient for surgery before the operation?

1. Diagnostic period;
2. Treatment period;
3. Preoperative period;
4. Operating period;
5. Treatment and diagnostic period.

TASK:The nurse, having mixed up the outwardly similar bottles, instead of heparin administered to the patient a large dose of insulin, which quickly lowers blood sugar levels, resulting in a sharp deterioration in the patient's condition (hypoglycemic coma). How can you evaluate the actions of a nurse?

OPTION #2

1. What is meant by personal hygiene?

1. Hygienic body maintenance;
2. Hygienic maintenance of linen, clothing, shoes;
3. Hygienic maintenance of bedding;
4. Hygienic maintenance of objects surrounding a personComrade

2. List the categories of bacilli carriersaccording to Gromashevsky:

1. Healthy;
2. Sick;
3. Immunized;
- 4.Reconvalescent;
5. Latent;

6. Mixed.

3. Define a surgical operation:

1. Method of treatment carried out by means of physical or mechanical effects on organs or tissues with violation of the integrity of the skin;
2. A method of physical or mechanical influence on the organs and tissues of a living organism with mandatory repairing the integrity of the skin, carried out for therapeutic or diagnostic purposes;
3. A method of influencing the human body, leading to a violation of the anatomical integrity of organs and tissues and the recovery of the patient;
4. A bloody or bloodless method of treatment or diagnosis, carried out through open or closed mechanical or physical impact on organs or tissues.

4. Specify the timing of planned operations:

1. The first 1-6 hours after admission;
2. The first 1-3 days after admission;
3. 1-7 days after admission;
4. Any time after admission;
5. There are no planned operations

5. List the measures aimed at preventing bedsores:

1. Early activation of patients;
2. Change of bed linen;
3. Exception to strict bed rest in a hospital;
4. Elimination of folds in bed linen;
5. Lining of rubber circles.

6. List the possible causes of explosions and fires in the operating room:

1. Violation of fire safety rules;
2. Use of oxygen cylinders;
3. Use of ignition sources and flammable substances;
4. Using clothing made from wool or synthetic materials;
5. Grounding of electrical wires.

7. Give the most accurate definition of artificial nutrition:

1. Introduction of nutrients into the human body intravenously or subcutaneously;
2. Introduction of synthesized nutrients into the human body via vein nutrients;
3. Introduction of nutrients into the human body using probes, parenterally;
4. Lack of possibility of essential nutrients entering the patient's body physiologically.

8. What do you need to have for gastric lavage?

1. Gastric tube;
2. Nasointestinal tube;
3. Glycerol;
4. Water;
5. Container for rinsing water;
6. Nothing special is needed.

9. What categories of patients are transported to the operating room? are you on a gurney?

1. Only severely ill patients;
2. Only patients who cannot move independently;
3. Only patients with labile psyche;
4. Only patients who are undergoing surgery on the abdominal and chest organs;
5. All patients.

10. What do patients pay attention to in the first hours after surgery when caring for the respiratory system?

1. Excursion of the chest;
2. Stange test;
3. Sample Compliance;
4. Breathing pattern;
5. Color of the skin and mucous membranes;
6. Movement of the diaphragm.

TASK: After surgery for acute appendicitis, a patient's postoperative wound festered. Where should a patient with

such a wound be located, in which dressing room should he undergo dressings?

OPTION #3

1. Patients admitted to the emergency department:

1. In a planned manner;
2. On an emergency basis.

2. The operating and dressing unit includes:

1. operating room;
2. Preoperative;
3. Procedural;
4. Sterilization;
5. Material room.

3. Who manages the work of medical nurses and nurses?

1. Deputy Chief Physician for Surgery;
2. Head of the surgical department;
3. Surgeons;
4. Senior nurse of the surgical department.

4. List the measures aimed at preventing nosocomial infections:

1. Denial of hospitalization;
2. Early discharge of patients from hospital;
3. Medical examination of surgical department staff once a year;
4. Dividing the surgical hospital into clean and purulent departments;
5. Sanitation of bacteria carriers among medical staff;
6. Disinfection of sanitary items after each use.

5. Which definition most fully reflects the term "deontology"?

1. The science of proper and norms of behavior between medical professionals;
2. The science of proper and norms of treatment;
3. A set of rules and norms for communication with patients and relatives of patients;
4. The science of what should be, that is, the norms of behavior of a medical worker in various situations of communication with patients, relatives of the patient and colleagues in the profession.

6. Euthanasia is...

1. A set of unintentional actions or inactions, when leading to the death of the patient or worsening of the disease;
2. Intentional harm to the health or life of a patient;
3. Purposefully leading to the death of a patient, doomed a severe incurable disease;
4. There is no correct definition.

7. Shoes in the surgical department should:

1. Be comfortable to wear;
2. Do not squeeze the foot;
3. Have thick soles or high heels;
4. Do not cause noise;
5. Promote free sweating;
6. Make it difficult to regulate heat.

8. What is the optimal air temperature in the surgical department:

1. 25°C;
2. 20-23°C;
3. 18-20°C;
4. Not higher than 22°C;
5. Not higher than 18°C.

9. Name the sources of wound infection:

1. Exogenous;
2. Parenteral;

3. Endogenous;
4. Enteral;
5. Intradermal;
6. There are no such sources.

10. When is it recommended to shave hair in the surgical area?

1. On the day of surgery;
2. 1-2 days before surgery;
3. Shaving time does not matter.

TASK: Name in which department (“clean” or “purulent”) patients with the following pathology should be hospitalized:

1. post-injection abscess;
2. ankle sprain;
3. acute uncomplicated appendicitis;
4. chronic calculous cholecystitis;
5. shoulder phlegmon;
6. external intestinal fistula;
7. gangrene of the limb.

OPTION #4

1. What manipulations are performed in the treatment room?

- A) injections;
- b) puncture of the pleural cavity;
- V) setting up jars, mustard plasters;
- G) taking medicinal baths;
- d) determination of blood group.

2. What disinfecting solutions are used for wet cleaning?

- A) 0.5% bleach solution;
- b) 10% bleach solution;
- V) 1% chloramine solution;
- G) 3% hydrogen peroxide solution;
- d) potassium permanganate solution

3. The patient developed severe pain in the epigastric region, nausea, and vomiting. Medical workers assessed this condition as a manifestation of food poisoning and sent the patient to an infectious diseases hospital, where, after a more thorough examination, a diagnosis of an abdominal (gastralgic) form of myocardial infarction was established. How would you rate the initial actions of health workers?

- A) absolutely correct;
- b) as a manifestation of a medical error;
- V) careless, negligent.

4. What should be the ratio of proteins, fats and carbohydrates in the diet of patients?

- A) 1:1:4;
- b) the protein content should predominate;
- V) the ratio of proteins, fats and carbohydrates should be determined by the nature of the disease.

5. What zones are allocated in the operating unit for provention of airborne infection?

- A) sterile;
- b) strict asepsis regime;
- V) limited mode;
- G) general hospital regime;
- d) sanitary inspection station.

6. What should be done in the initial stage of bed sore formation?

- a) strengthen all preventive measures (bed maintenance, changing the patient’s position, careful skin care);
- b) use various biologically active ointments;
- V) carry out surgical treatment;
- d) prescribe physiotherapy to the affected area (UHF, UV);
- e) treat the affected areas with a 1% solution of brilliant green, a strong solution of potassium permanganate, and a 5-10% solution of iodine.

7. What is meant by terminal state?

- A) state of clinical death;
- b) atonal period;
- V) period of dying;
- G) borderline state between life and death.

8. What indicates the effectiveness of chest compressions?

- A) a pulse appears in the carotid arteries;
- b) pupils constrict;
- V) pupils dilate;
- G) blood pressure increases;
- d) spontaneous breathing is restored.

9. Routine cleaning in the operating room is carried out:

- A) 1 per day;
- b) throughout the working day;
- V) before surgery;
- G) at the end of the working day.

10. What is parenteral nutrition?

- A) nutrition that is provided artificially;
- b) introduction of mixtures of a certain composition for nutritional purposes;
- V) administration of various substances for the purpose of nutrition, bypassing the stomachbut-intestinal tract.

TASK: The sick physicist was suffering from a serious incurable disease that could lead to his death in the coming months. Should he be told this in some form?

OPTION #5

1. The dressing room is equipped with:

- 1. Dressing table;
- 2. A table with sterile plaster;
- 3. A table with sterile instruments and materials;
- 4. Cabinet for medicines and antiseptic;
- 5. Wardrobe with dressing gowns.

2. Who does the senior medical officer directly report to? Which surgical nurse?

- 1. Minister of Health;
- 2. The chief physician of the hospital;
- 3. Head of the surgical department;
- 4. Head of the Department of Surgery;
- 5. To the surgeon;
- 6. Head nurse of the hospital.

3. List the basic deontological principles:

- 1. Responsibility;
- 2. Mercy;
- 3. Do no harm;
- 4. Soulfulness;
- 5. Medical secrecy;
- 6. Ethical behavior of medical personnel and students in a surgical clinic;
- 7. Compliance with the laws of the Russian Federation and moral principles.

4. Requirements for medical gowns in the surgical department:

- 1. Robes should be spacious and not restrict movement;
- 2. The gowns must be surgical;
- 3. There should be no decorations on robes;
- 4. Robes should only be made of cotton fabric;
- 5. Robes can be made of any fabric;
- 6. All of the above is acceptable.

5. Bacillary carriage is...

- 1. Preservation in the human body and release into the environment of infectious disease pathogens without visible clinical manifestations of the disease;
- 2. Preservation in the human body and release into the environmentenvironment of non-pathogenic microflora, which can under certain conditions cause an infectious process;

3. Release of microorganisms into the environment;
4. Release of pathogenic microorganisms into the environmentisms with clinical manifestations of the disease.

6. What is the standard area for one bed in multi-bed rooms?

1. 12m²;
2. 9m²;
3. 7m²;
4. 5m²;
5. There is no such rule.

7. List the sources of unpleasant odors in the wards:

1. Patients with intestinal fistulas;
2. Patients with vesical fistulas;
3. Patients with inguinal hernia;
4. Patients with gangrene or ulcers;
5. Free after undergoing operations;
6. Visitors who brought stale food.

8. List the surgical operations:

- 1 Laparoscopy;
- 2 X-ray;
- 3 Hernia repair;
- 4 Appendectomy;
- 5 Liver biopsy;
- 6 Microscopy.

9. What stages are identified in the postoperative period?

1. Treatment period;
2. Rehabilitation period;
3. Early postoperative period;
4. Late postoperative period;
5. Period of diagnosis of postoperative complications;
6. Discharge period.

10. Indicate the volume of physical activity of patients under strict bed rest:

1. Position: sitting in bed;
2. Position - lying on your back;
3. Position - lying on your side, head up;
4. Movement of the limbs in the supine position;
5. Walking around the ward.

TASK:The student came to class in the surgical department without a change of shoes. The teacher does not allow the student to work in the surgical department. Is the teacher doing the right thing and why?

OPTION #6

1. Caring for surgical patients is:

- A) fulfilling doctor's orders;
- b) compliance with the patient's personal hygiene measures;
- V) preparing the patient for surgery;
- G) nursing the patient after surgery;
- d) all of the above.

2. The reception department is intended for:

- A) reception and registration of patients;
- b) preliminary examination;
- V) sanitary and hygienic treatment of patients;
- G) providing emergency assistance;
- d) all of the above.

3. Most often bedsores occur:

- a) in the area of the sacrum, shoulder blades, elbows and heels, occipital region;
- b) in the buttocks, back of the neck;
- c) in the area of the lateral surface of the chest, elbows;
- d) in the area of the greater trochanter, hips, lumbar region;
- e) in the area of the back of the neck, back of the head.

4. Artificial nutrition is the introduction of nutrients into the body through:

- A) gastric tube;
- b) enemas;
- V) parenteral (subcutaneous or intravenous) route;
- G) all of the above methods;
- d) none of the above methods.

5. Time for administering an enema before planned operations:

- A) one day before surgery;
- b) the evening before the operation;
- V) in the morning on the day of surgery;
- G) no enema is given;
- d) one hour before surgery.

6. The ward nurse is obliged to:

- A) ensure the recording and accurate implementation of the attending physician's prescriptions;
- b) be present when a doctor visits patients;
- V) collect materials for analysis and transfer them to the laboratory;
- G) monitor the cleanliness and order in the wards;
- d) all of the above are true.

7. In the postoperative period, there may be complications from the skin:

- A) bleeding;
- b) intestinal paresis;
- V) mumps;
- G) bedsores;
- d) bronchitis.

8. Complications in the postoperative period from the organon breathing:

- A) mumps;
- b) pneumonia;
- V) thrombophlebitis;
- G) gastritis;
- d) dermatitis.

9. When performing cardiopulmonary resuscitation by two rescuers The ratio of blowing into the victim's airways and compression on the sternum should be:

- A) 2:15;
- b) 2:10;
- V) 1:5;
- G) 1:2;
- d) 1:15.

10. Time for performing a cleansing enema before emergency surgery:

- a) 6 hours before surgery;
- b) 2 hours before surgery;
- V) immediately before surgery;
- G) no enema is given;
- d) none of the above.

TASK: During surgery, the operating room nurse grabbed two gauze balls in one clamp. What mistake did she make? Why can't this be done?

OPTION #7

1. List the types of hygienic regime in surgery hospital:

1. General mode;
2. Passive bed rest;
3. Active bed rest;
4. Semi-bed rest;
5. Inactive bed rest;
6. Active general mode.

2. Which of the following can be used when treating the patient's skin?

1. Camphor alcohol;
2. Soap "K";
3. Sodium benzyl benzoate;
4. Detergent type "News";
5. 1% salicylic alcohol.

3. Indicate what the nurse should use to treat the oral cavity of seriously ill patients?

1. Soda solution;
2. Furacillin solution;
3. Detergent type "News";
4. Boric acid solution;
5. Formalin solution;
6. Pervomur solution;
7. For severely ill patients, it is not advisable to treat the mouth

cavity.

4. Name the main method of preventing the abandonment of foreign bodies when performing abdominal operations:

1. Use only large napkins during operations;
2. Using shiny new tools;
3. Fixation of napkins during surgery with metal rings and clamps;
4. Strict accounting of the materials and tools used
5. The use of laparoscopic surgical techniques

before and after surgery;

interventions.

5. Specify the recommended area for shaving hair during surgery on the stomach:

1. Anterior surface of the abdomen;
2. Pubis;
3. Front and inner thighs;
4. Chest to nipple level;
5. Crotch.

6. Indicate the scope of measures when a patient is detected with lice:

1. Shaving hair;
2. Treatment with soap "K";
3. Treatment with sulfur ointment;
4. Clothes, linen and the patient are sent to a death chamber;
5. Only the patient's clothes are sent to the disinfection chamber;
6. The patient is sent to the infectious diseases department;
7. Hygienic bathing of the patient in the bathroom.

7. What categories of patients are transported to the operating room? are you on a gurney?

1. Only severely ill patients;
2. Only patients who cannot move independently;
3. Only patients with labile psyche;
4. Only patients who are undergoing surgery on the abdominal and chest organs;
5. All sick people.

8. Name the optimal measures for caring for patients in the ward immediately after surgery:

1. The patient is most often placed on his back;
2. It is more optimal to place the patient on his side;
3. You should absolutely not cover the patient;
4. The patient must be covered with a blanket;
5. The patient is inhaled with humidified oxygen;
6. The patient is inhaled with nitrous oxide to relieve pain in the wound;
7. An ice pack is placed on the wound area;
8. A warm heating pad is placed on the wound area;
9. The drainage tubes are tightly closed;
10. Drainage tubes are lowered into a free container to collect exudate.

9. Specify signs of respiratory arrest:

1. Lack of chest excursion;
2. Presence of cough;
3. Raspberry color of the skin and mucous membranes;
4. Blue color of the skin and mucous membranes;
5. Presence of hemoptysis;
6. Presence of tachycardia;
7. Presence of vomiting.

10. Specify the signs of acute cardiovascular failure accuracy:

1. Sharp pallor of the skin and mucous membranes;
2. Cyanosis of lips;
3. Cold sweat;
4. Temperature increase;
5. Shallow breathing;
6. Decreased blood pressure;
7. Increased blood pressure;
8. Blackout of consciousness.

TASK: The area of the surgical field was shaved for the patient in advance, one day before the operation. What mistake was made? Why can't this be done?

OPTION #8

1. How does exogenous infection spread?

- A) airborne;
- b) contact;
- V) lymphogenous;
- G) implantation;
- d) hematogenous.

2. In what cases is artificial nutrition of patients through a nasogastric tube used?

- A) for burns, inoperable tumors of the esophagus and pharynx;
- b) after operations on the esophagus;
- V) for swallowing disorders
- d) for jaw fractures;
- d) in an unconscious state.

3. What should the nurse do if the patient's tongue recesses?

1. Move the upper jaw forward slightly;
2. Move the lower jaw forward slightly;
3. Perform tracheostomy;
4. Perform tracheal intubation;
5. Call the surgeon on duty;
6. Call the on-duty pulmonologist

4. Disinfection of the bath after the patient:

- A) wipe with 6% hydrogen peroxide solution;
- b) treat with a 3% chloramine solution;
- V) wash with hot water and detergent solution;
- d) wipe 2 times with an interval of 10-15 minutes with a 1% chloramine solution.

5. Can bedsores occur when patients are forced to sit?

- a) they cannot, since bedsores form only when the patient is positioned on his back, stomach or side;
- b) can, in the area of the ischial tuberosities;
- c) they cannot, because when sitting, a large layer of subcutaneous fat and muscle tissue remains between the bony protrusions and the mattress.

6. Why is it inappropriate to instill more than 1-2 drops of medicinal solutions into the eyes?

- a) eye drops contain potent substances;
- b) more than 1 drop of solution is not retained in the conjunctival cavity;
- c) a large amount of fluid adversely affects the condition of the conjunctiva.

7. What symptoms are reliable signs of biological death?

- a) cessation of breathing;
- b) cessation of cardiac activity;
- V) the appearance of cadaveric spots;
- G) decrease in skin temperature below 20 ° C;
- d) the appearance of rigor mortis.

8. What indicates the effectiveness of indirect cardiac massage?

- A) a pulse appears in the carotid arteries;
- b) pupils constrict;
- V) pupils dilate;
- G) blood pressure increases;
- d) spontaneous breathing is restored.

9. What is parenteral nutrition?

- A) nutrition that is provided artificially;
- b) introduction of mixtures of a certain composition for nutritional purposes;
- V) administration of various substances for the purpose of nutrition, bypassing the stomachbut-intestinal tract.

10. What recommendations would you use when drawing up study of the diet for a patient with peptic ulcer disease?

- A) frequent, split meals;
- b) restriction of fluid intake;
- V) mechanical and chemical sparing;
- G) reducing calorie intake;
- d) increasing the protein content in the diet;
- e) organization of fasting days.

TASK:The patient, who was operated on for purulent pleurisy, has a concomitant disease: varicose veins of the lower extremities. What complications will you prevent and how will you prevent the patient in the postoperative period?

OPTION #9

1. Specify the signs of acute cardiovascular failure accuracy:

- 1. Sharp pallor of the skin and mucous membranes;
- 2. Cyanosis of lips;
- 3. Cold sweat;
- 4. Temperature increase;
- 5. Shallow breathing;
- 6. Decreased blood pressure;
- 7. Increased blood pressure;

8. Blackout of consciousness.

2. What is postoperative wound care and drainages in the first hours after surgery?

1. Monitoring the condition of the dressing and drainage;
2. Observation of the nature of discharge through drainages;
3. Change the dressing if it becomes saturated with discharge;
4. Emptying containers with discharge through drains;
5. Monitor your condition in the first hours after surgery

There is no need for bandages and drainage discharge

3. List the general signs of gastrointestinal croleakage in the first hours after surgery:

1. Weakness and dizziness;
2. Paleness of the skin and mucous membranes;
3. Vomiting like "coffee grounds";
4. Tarry stools;
5. Reduced blood pressure;
6. Increased blood pressure;
7. Frequent weak pulse.

4. After which of the listed operations is the most observed then motor-evacuation of the gastrointestinal tract will be observed

1. Cholecystectomy;
2. Appendectomy;
3. Pulmonectomy;
4. Coronary artery bypass grafting;
5. Hemicolectomy;
6. Phlebectomy.

5. How and with what exactly are they washed in patients with Is the zogastric tube washed?

1. Using Esmarch's mug;
2. Using a Janet syringe;
3. Using a bucket;
4. Water;
5. Furacillin solution;
6. 3% hydrogen peroxide solution;
7. Soda solution;
8. Iodopirone solution.

6. List the signs of possible suppuration after surgeryrational wound:

1. High hyperthermia;
2. Local hyperemia and hyperthermia of the skin;
3. Pain in the wound;
4. Compaction and swelling of the edges of the wound.

7. What is used to protect the skin around the fistula?

1. Talc;
2. Zinc paste;
3. Charcoal;
4. Pasta Lassara;
5. Kaolin;
6. 3% hydrogen peroxide solution;
7. Formalin.

8. List the signs of biological death:

1. Absence of pulse only in the radial arteries;
2. Absence of pulse in the carotid and femoral arteries;
3. Absence of heart contractions;
4. Lack of breathing;
5. Cold body.

9. In the general ward of the surgical department it is mandatory must be:

1. Beds;
2. Wardrobe;
3. TV;
4. Bedside tables;
5. Fridge.

10. List the measures aimed at preventing nosocomial infections:

1. Denial of hospitalization;
2. Early discharge of patients from hospital;
3. Medical examination of surgical department staff once a year;
4. Dividing the surgical hospital into clean and purulent departments;
5. Sanitation of bacteria carriers among medical staff;
6. Disinfection of sanitary items after each use.

TASK: In a patient after an appendectomy operation, the bandage on the wound began to be stained with blood profusely. Blood drips from the bandage onto the bed. What condition did the patient have? Your actions?

OPTION No. 10

1. What should be understood by nosocomial infection?

1. Infection of patients with the types of microbes that live in a given medical institution;
2. Infection of patients with those types of microbes that live in this medical institution, but only no deaths;
3. Infection of patients with those types of microbes that live in this medical institution, but only from doctors and medical staff;

2. The treatment room must be equipped with:

1. Household refrigerator;
2. Electrocardiograph;
3. Endoscope;
4. Stands for intravenous infusions;
5. Safe for storing medicines;
6. Germicidal lamps;
7. Centrifuge;
8. Washstand with hot and cold water.

3. List the areas of the operating block that provide sterility mode:

1. Sterile zone;
2. High security zone;
3. High security zone;
4. Restricted zone;
5. Unrestricted zone;
6. General regime zone.

4. Which definition most fully reflects the term "deontology"?

1. The science of proper and norms of behavior between medical professionals;
2. The science of proper and norms of treatment;
3. A set of rules and norms for communication with patients and relatives of patients;
4. The science of what should be, that is, the norms of behavior of a medical worker in various situations of communication with patients, relatives of the patient and professional colleagues.

5. Medical confidentiality is...

1. All information received from the patient;
2. Information received from the patient and his relatives;
3. All information received from the patient and does not pose a threat to others and society.

6. Requirements for medical gowns in surgical department:

1. Robes should be spacious and not restrict movement;
2. The gowns must be surgical;
3. There should be no decorations on robes;
4. Robes should only be made of cotton fabric;
5. Robes can be made of any fabric;
6. All of the above is acceptable.

7. List the categories of bacilli carriers according to Gromashevsky:

1. Healthy;
2. Sick;
3. Immunized;
4. Convalescent;
7. Latent;
8. Mixed.

8. What is the optimal air temperature in the surgical department:

1. 25°C;
2. 20-23°C;
3. 18-20°C;
4. Not higher than 22°C;
5. Not higher than 18°C.

9. What kind of cleaning should be done in surgical rooms?

1. Planned;
2. Unscheduled;
3. Current;
4. Hourly;
5. General;
6. There are no cleaning services.

10. Define a surgical operation:

1. Method of treatment carried out by means of physical or mechanical effects on organs or tissues with violation of the integrity of the skin;
2. Method of physical or mechanical influence on organs and tissues of a living organism with obligatory improving the integrity of the skin, carried out for therapeutic or diagnostic purposes;
3. A method of influencing the human body, leading to disruption of the anatomical integrity of organs and tissues and the recovery of the patient;
4. Bloody or bloodless method of treatment or diagnosis, carried out through open or closed with mechanical or physical impact on organs or fabric.

TASK: The patient, who was operated on for purulent pleurisy, has a concomitant disease: varicose veins of the lower extremities. What complications will you prevent and how will you prevent the patient in the postoperative period?

OPTION No. 11

1. List the measures aimed at preventing bedsores:

1. Early activation of patients;
2. Change of bed linen;
3. Exception to strict bed rest in the hospital;

4. Elimination of folds in bed linen;
5. Lining of rubber circles.

2. Indicate the most optimal care measures nasal passages and scalp hair:

1. Removing crusts from the nasal passages;
2. Instillation of drops into the nose of all surgical patients;
3. Wash your hair once every 5-10 days;
4. Washing your hair as prescribed by your doctor;
5. Hair cutting and combing as prescribed by a doctor;
6. Daily combing of hair, as well as cutting it during long-term hospitalization.

3. What is the length of time from the start of the preparing the patient for surgery before the operation?

1. Diagnostic period;
2. Treatment period;
3. Preoperative period;
4. Operating period;
5. Treatment and diagnostic period.

4. List the types of hygienic regime in surgery hospital:

1. General mode;
2. Passive bed rest;
3. Active bed rest;
4. Semi-bed rest;
5. Inactive bed rest;
6. Active general mode.

5. List the types of operations according to the timing of their completion:

1. Early;
2. Late;
3. Emergency;
4. Primary delayed;
5. Secondary;
6. Planned;
7. Urgent.

6. Name the sources of wound infection:

1. Exogenous;
2. Parenteral;
3. Endogenous;
4. Enteral;
5. Intradermal;
6. There are no such sources.

7. List possible sources of microbial air pollution in the surgical department:

1. Sick;
2. Bacilli carriers;
3. Visitors only;
4. The air in the surgical department is always aseptic.

8. List the requirements when performing closed cardiac massage:

1. Carry out at a speed of 60 shocks per minute;
2. Carry out at a speed of 100 shocks per minute;
3. Carry out at a speed of up to 30 shocks per minute;
4. The patient is placed on a hard surface;
5. The patient should be on a soft bed;
6. The thrusts are applied to the area of the lower third of the sternum;
7. The thrusts are applied to the left of the sternum on 7 cm in 3-6 intercostal spaces;
8. The thrusts are applied in the area of the upper third of the sternum.

9. What is used to protect the skin around the fistula?

1. Talc;
2. Zinc paste;

3. Charcoal;
4. Pasta Lassara;
5. Kaolin;
6. 3% hydrogen peroxide solution;
7. Formalin.

10. List the requirements for a colostomy bag:

1. The clasp should be on the front;
2. It is advisable that the fastener be along the midline behind;
 3. There should be no fastener;
 4. The colostomy bag should fit tightly to the skin;
 5. All parts of the colostomy bag should not deteriorate from washing;
 6. The colostomy bag should only be made of rubber.

TASK: On the 4th day after an appendectomy, a patient developed pain in the wound and the body temperature increased to 38 C. On palpation, there was compaction of the soft tissue around the wound and pain. What's happened? What are your actions as a ward nurse?

OPTION No. 12

1. List the structural divisions of the surgical departments:

1. Reception department;
2. Operating and dressing unit;
3. Residency for doctors;
4. Post of on-duty therapist;
5. Post of infectious disease specialist on duty;
6. Treatment and diagnostic rooms;
7. Office of the head of the department;
8. Plaster;
9. Emergency room.

2. Patients admitted to the emergency department:

1. In a planned manner;
2. As an emergency.

3. List the areas of the operating block that provide sterility mode:

1. Sterile zone;
2. High security zone;
3. High security zone;
4. Restricted zone;
5. Unlimited mode zone;
6. General regime zone.

4. List the basic deontological principles:

1. Responsibility;
2. Mercy;
3. Do no harm;
4. Soulfulness;
5. Medical secrecy;
6. Ethical behavior of medical personnel and students in a surgical clinic;
7. Compliance with the laws of the Russian Federation and moral principles.

5. List the categories of bacilli carriers according to Gromashevsky:

1. Healthy;
2. Sick;

3. Immunized;
4. Convalescent;
6. Latent;
7. Mixed.

6. Which of the following can be caused by low air humidity in the surgical department?

1. Dryness of the mucous membranes of the upper respiratory tract;
2. Hoarseness of voice;
3. Dry cough;
4. Amnesia;
5. Collapse.

7. List the measures aimed at maintaining optimal sound conditions in the wards:

1. Don't slam doors;
2. Do not talk in the wards or in the corridor;
3. Do not talk only in the wards;
4. Wear soft shoes;
5. Wear a white robe;
6. Talk quietly;
7. Do not rattle dishes or equipment;
8. Avoid visiting relatives.

8. General cleaning of the ward is carried out:

1. 1 time per week;
2. 1 time per month;
3. 1 time every 3 days;
4. 1 time every 10 days;
5. Such cleaning is not carried out in the wards.

9. Define the postoperative period:

1. The length of time from the start of the operation until the patient is discharged from the hospital;
2. The length of time from the end of the operation to the end of rehabilitation of the patient;
3. The length of time from the moment the patient arrives from the operating room to the ward until discharge;
4. The length of time from the end of the operation until you speak from a patient from the hospital.

10. Specify the timing of planned operations:

1. The first 1-6 hours after admission;
2. The first 1-3 days after admission;
3. 1-7 days after admission;
4. Any time after admission;
5. There are no planned operations.

TASK: A patient with an intestinal fistula loses about 1.5 liters of intestinal contents per day, it is collected in a separate container. What do you propose to do with it?

OPTION No. 13

1. List the types of operations that cannot be performed for pustular skin lesions:

1. Planned operations;
2. Planned and urgent operations;
3. Emergency operations;
4. Any operations.

2. List the measures aimed at preventing bedsores:

1. Early activation of patients;

2. Change of bed linen;
3. Exception to strict bed rest in a hospital;
4. Elimination of folds in bed linen;
5. Lining of rubber circles.

3. Name the main method of preventing the abandonment of foreign bodies when performing abdominal operations:

1. Use only large napkins during operations;
2. Using shiny new tools;
3. Fixation of napkins during surgery with metal rings and clamps;
4. Strict accounting of the materials and tools used before and after surgery;
5. The use of laparoscopic surgical techniques interventions.

4. Give the most accurate definition of artificial nutrition:

1. Introduction of nutrients into the human body intravenously or subcutaneously;
2. Introduction of synthesized arts into the human body vein nutrients;
3. Introduction of nutrients into the human body using probes, parenterally;
4. Lack of possibility of essential nutrients entering the patient's body physiologically.

5. List the scope of activities carried out by nurses when preparing a patient for emergency surgery:

1. Catheterization of the subclavian vein;
2. Gastric lavage;
3. Intravenous administration of solutions;
4. Premedication in the presence of a doctor;
5. Novocaine blockades;
6. Shaving hair.

6. Who gives permission to transport patients from the hospital?rational?

1. Surgeon;
2. Anesthesiologist;
3. Operating room nurse;
4. Nurse;
5. The patients themselves.

7. How does vomit enter the respiratory tract?new ways?

1. Attack of coughing;
2. Stopping breathing;
3. Blueness of the skin and mucous membranes;
4. Violation of the nature and rhythm of breathing;
5. Increased blood pressure;
6. A drop in blood pressure.

8. List the required volume of manipulations performed by the nurse when caring for the urinary system in the first hours after surgery:

1. Installation of a permanent urinary catheter;
2. Providing patients with containers for collecting urine;
3. Timely processing and emptying of urinals;
4. Recording the volume, color and smell of urine excreted;
5. Prescription of diuretics.

9. List measures that improve ventilation lungs after surgery:

1. The use of therapeutic exercises;
2. Early activation of patients;
3. Strict bed rest;
4. Inflating rubber balloons;
5. The use of breathing exercises.

10. List measures to prevent thrombosis in patients in the postoperative period:

1. Physiotherapy;
2. Long-term adherence to strict bed rest;
3. Early motor activity;
4. Bandaging the lower extremities with elastic bandages;
5. Prescription of anticoagulants;
6. Bandaging the upper limbs with elastic bandages;
7. Artificial ventilation.

TASK:In a 68-year-old patient after surgery for intestinal obstruction of tumor etiology, pus was found in the postoperative wound on the 7th day, and the skin sutures were partially removed. After coughing, the edges of the wound separated. Under the bandage, loops of intestine are pressed into the wound. What happened? What are your actions as a ward nurse?

OPTION No. 14

1. In the general ward of the surgical department, it is mandatory must be:

1. Beds;
2. Wardrobe;
3. TV;
4. Bedside tables;
5. Fridge.

2. What should be understood as nosocomialinfection?

1. Infection of patients with the types of microbes that live in a given medical institution;
2. Infection of patients with those types of microbes that live in this medical institution, but only no deaths;
3. Infection of patients with those types of microbes that live in this medical institution, but only from doctors and medical staff.

3. Euthanasia is...

1. A set of unintentional actions or inactions, when leading to the death of the patient or worsening of the disease;
2. Intentional harm to the health or life of a patient;
3. Purposefully leading to the death of a patient, doomed a severe incurable disease;
5. There is no correct definition.

4. List the requirements for shoes in a surgical department:

1. Shoes should be waterproof and lightweight;
2. Shoes should not cause noise;
3. The shoes should fit tightly throughout the entire length of the foot;
4. Orthopedic shoes are required.

5. List the factors influencing the environmental hygiene of the surgical department:

1. Heat;
2. Low temperature;
3. Polluted water;
4. Radiation;
5. Harmful fumes.

6. What kind of cleaning should be done in surgical rooms?

1. Planned;
2. Unscheduled;
3. Current;
4. Hourly;
5. General;
6. There are no cleaning services.

7. What stages are identified in the postoperative period?

1. Treatment period;
2. Rehabilitation period;
3. Early postoperative period;
4. Late postoperative period;
5. Period of diagnosis of postoperative complications;
6. Discharge period.\

8. Specify the permissible amount of physical activity painnykh at semi-bed rest:

1. It is allowed to lie only in a supine position;
2. You are allowed to walk to the dining room and to the toilet;
3. You are allowed to stand up and walk around the department without restrictions;
4. Allowed only to lie down and sit;
5. It is only allowed to lie on your back and side, move limbs in bed.

9. List the activities necessary for skin carecoverings of patients:

1. Daily wiping of the skin with a solution of boric alcohol;
2. Daily skin treatment with sodium benzyl benzoate;
3. General hygienic baths in satisfactory condition;
4. If there is sulfur discharge, clean the ear canal;
5. Avoid cutting nails due to the risk of finger infection;
6. Completely exclude treatment of the genitals and perineum.

10. Indicate the most effective method of emptying stomach after surgery:

1. Inducing artificial vomiting;
2. Installation of a nasogastric tube;
3. Prescription of drinking plenty of fluids;
4. Prescribing special medications;
5. Lowering the head below the level of the lower limbs.

TASK: In a patient operated on for purulent pleurisy, already on the 2nd day the drainage tube from the pleural cavity stopped flowing exudate. What's happened? What are your actions as a ward nurse?

ANSWERS ("COLLOQUIUM – CARE")

OPTION 1 1 – A 2 – A 3 – 1 2 4 6 4 – 1 2 5 5 – A B 6 – 1 7 – 4 8 – 1 9 – 1 2 3 4 10 – 3	OPTION 5 1 – 1 3 4 2 – 3 6 3 – 1 2 3 5 6 4 – 1 3 4 5 – 1 6 – 3 7 – 1 2 4 8 – 1 3 4 5 9 – 3 4 10 – 2
OPTION 2 1 – 1 2 3 2 – 1 3 4 3 – 4 4 – 4 5 – 1 2 4 5 6 – 1 2 3 4 7 – 3 8 – 1 3 4 5 9 – 5 10 – 1 4 5	OPTION 6 1 - D 2 - D 3 - A 4 - G 5 B 6 - D 7 - G 8-B 9 - B 10 - G

OPTION 3

1-12
2-124
3-4
4-3456
5-4
6-3
7-124
8-3
9-3
10-1

OPTION 4

1-ABD
2-AB
3-B
4-B
5-VG
6-AGD
7-G
8-ADD
9-B
10-V

OPTION 9

1-12356
2-12
3-1246
4-12356
5-134
6-123
7-1467
8-1
9-4
10-4

OPTION 10

eleven
2-14568
3-1246
4-4
5-3
6-134
7-134
8-3
9-135
10-4

OPTION 11

1-1245
2-136
3-3
4-134
5-36
6-13
7-12
8-146
9-12345
10-145

OPTION 7

1-134
2-1235
3-124
4-4
5-124
6-1257
7-5
8-14710
9-145
10-12568

OPTION 8

1-ABD
2-VDD
3-25
4-B
5B
6-B
7-VDD
8-ABDD
9-B
10-ABD

OPTION 12

1-12367
2-12
3-1246
4-12356
5-134
6-123
7-1467
8-1
9-4
10-4

OPTION 13

eleven
2-1245
3-4
4-3
5-2346
6-2
7-134
8-234
9-1245
10-1345

OPTION 14

1-14
2-1
3-3
4-12
5-ALL
6-135
7-34
8-2
9-14
10-2

Table of contents

No.	Name of the controlled section (topic) of the discipline/module	Code of competence (stage) being formed	Number of tests (total)	p. from ___ to ___
1	2	3	4	5
View control	Ongoing progress monitoring/interim assessment			
1.	Incoming control of the level of training of students	OPK-1 OPK-6	14	
2.	Design, equipment and equipment of a surgical clinic.	OPK-1 OPK-6	14	
3.	Organization of the work of the surgical department.	OPK-1 OPK-6	14	
4.	Medical deontology of students in the surgical department.	OPK-1 OPK-6	14	
5.	Clinical food hygiene of medical personnel in the surgical department.	OPK-1 OPK-6	14	
6.	Personal hygiene of medical personnel.	OPK-1 OPK-6	14	

7.	Clinical environmental hygiene in wards, corridors and utility rooms of the surgical department.	OPK-1 OPK-6	14	
8.	Clinical environmental hygiene in the operating and dressing unit.	OPK-1 OPK-6	14	
9.	Safety precautions for patient care in surgical departments.	OPK-1 OPK-6	14	

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Departmentsurgical diseases No. 1

FacultyMedicinal

Course 1

DisciplineIntroductory practice (care for surgical patients)

Ticket to test No. 1

1. Sanitary and hygienic regime in the operating unit and wards of the surgical department.
2. What safety precautions should be observed when transporting surgical patients?
3. What signs indicate the presence of suppuration in a postoperative wound? What should be done in these cases?

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Departmentsurgical diseases No. 1

FacultyMedicinal

Course 1

DisciplineIntroductory practice (care for surgical patients)

Ticket to test No. 2

1. Methods to combat air pollution and infection.
2. What is included in the concept of personal hygiene? Basic conditions for maintaining personal hygiene.
3. What complications from postoperative wounds and body cavities can develop in operated patients?

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Departmentsurgical diseases No. 1

FacultyMedicinal

Course 1

DisciplineIntroductory practice (care for surgical patients)

Ticket to test No. 3

1. Rules for cleaning the ward. What types of wet cleaning do you know?
2. What sources and ways of spreading infection do you know? Methods to combat air pollution and infection.
3. Features of care and monitoring of patients with intestinal fistulas.

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Departmentsurgical diseases No. 1

FacultyMedicinal

Course 1

DisciplineIntroductory practice (care for surgical patients)

Ticket to test No. 4

1. The role of junior medical personnel in preventing the abandonment of foreign bodies during abdominal operations.
2. What techniques are used to prevent bedsores?
3. Under what conditions does urinary leakage occur? Their signs. Your actions.

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Departmentsurgical diseases No. 1

FacultyMedicinal

Course 1

DisciplineIntroductory practice (care for surgical patients)

Ticket to test No. 5

1. Features of changing underwear and bed linen in surgical patients.
2. Hygienic requirements for feeding patients.
3. What kind of observation and care is needed for patients with purulent processes in the abdominal cavity and chest cavity?

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the Russian Federation**

Departmentsurgical diseases No. 1

FacultyMedicinal

Course 1

DisciplineIntroductory practice (care for surgical patients)

Ticket to test No. 6

1. How patients are transported from the ward to the operating room.
2. Construction of the surgical department.
3. Features of care and monitoring of patients with intestinal fistulas.

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the Russian Federation**

Departmentsurgical diseases No. 1

FacultyMedicinal

Course 1

DisciplineIntroductory practice (care for surgical patients)

Ticket to test No. 7

1. The structure of the reception department, its functions, organization of work.
2. The concept of medical deontology. Deontology of caring for surgical patients.
3. What respiratory complications may occur in patients after surgery? Measures for their prevention and treatment.

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the Russian Federation**

Departmentsurgical diseases No. 1

FacultyMedicinal

Course 1

DisciplineIntroductory practice (care for surgical patients)

Ticket to test No. 8

1. Definition of food hygiene.
2. Bacillary carriage and its significance.
3. What complications from the nervous system are possible in patients after surgery? What are your actions when they occur? Prevention measures.

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the Russian Federation**

Departmentsurgical diseases No. 1

FacultyMedicinal

DisciplineIntroductory practice (care for surgical patients)

Course 1

Ticket to test No. 9

1. Diets used in surgical patients.
2. How is sanitary treatment of surgical patients carried out?
3. What complications from the urinary system are possible in patients after surgery? What are your actions when they occur?

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the Russian Federation**

Departmentsurgical diseases No. 1

FacultyMedicinal

DisciplineIntroductory practice (care for surgical patients)

Course 1

Ticket to test No. 10

1. The scope of care and monitoring of the patient performed after transporting the patient from the operating room?
2. Peculiarities of nutrition of patients after operations on the abdominal organs.
3. What sources and ways of spreading infection do you know?

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the Russian Federation**

Departmentsurgical diseases No. 1

FacultyMedicinal

DisciplineIntroductory practice (care for surgical patients)

Course 1

Ticket to test No. 11

1. What complications from postoperative wounds and body cavities can develop in operated patients?
2. What is the reason for the division of the surgical department into “clean” and “purulent” sides?
3. Name the types of operating room cleaning.

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the Russian Federation**

Departmentsurgical diseases No. 1

FacultyMedicinal

DisciplineIntroductory practice (care for surgical patients)

Course 1

Ticket to test No. 12

1. What complications from the digestive system are possible in the first hours after surgery? Measures for their prevention and treatment.
2. Rules for the care, application and change of colostomy bags.
3. What is the main method of monitoring sterility in operating rooms and dressing rooms?

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the Russian Federation**

Departmentsurgical diseases No. 1

FacultyMedicinal

Course 1

DisciplineIntroductory practice (care for surgical patients)

Ticket to test No. 13

1. What complications from the urinary system are possible in the first hours after surgery? What are your actions during their development?
2. Hygienic working conditions in the operating room and dressing room.
3. Ways to change bed linen.

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the Russian Federation**

Departmentsurgical diseases No. 1

FacultyMedicinal

Course 1

DisciplineIntroductory practice (care for surgical patients)

Ticket to test No. 14

1. How are patients transferred from the operating table to a stretcher?
2. What is eventration? What kind of patient care should be provided during eventration?
3. Basic principles of preventing nosocomial infections.

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the Russian Federation**

Departmentsurgical diseases No. 1

FacultyMedicinal

Course 1

DisciplineIntroductory practice (care for surgical patients)

Ticket to test No. 15

1. Sanitary and hygienic regime in the wards of the surgical department.
2. The device of various types of colostomy bags.
3. What observation and care of the postoperative wound and drainages is necessary in the first hours after surgery? Complications? Your actions?

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the Russian Federation**

Departmentsurgical diseases No. 1

FacultyMedicinal

Course 1

DisciplineIntroductory practice (care for surgical patients)

Ticket to test No. 16

1. How is sanitary treatment of surgical patients carried out?
2. Hygienic requirements for feeding patients.
3. How are patients transferred from the operating table to a stretcher?

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the Russian Federation**

Departmentsurgical diseases No. 1

FacultyMedicinal

Course 1

DisciplineIntroductory practice (care for surgical patients)

Ticket to test No. 17

1. Features of hygienic preparation for emergency surgical interventions.
2. The role of junior medical personnel in preventing the abandonment of foreign bodies during abdominal operations.
3. Methods to combat air pollution and infection.

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the Russian Federation**

Departmentsurgical diseases No. 1

FacultyMedicinal

Course 1

DisciplineIntroductory practice (care for surgical patients)

Ticket to test No. 18

1. Deontology of caring for surgical patients.
2. What position in bed should patients take after surgery in the first hours? In the future?
3. How much assistance should a patient receive to combat intestinal paresis?

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the Russian Federation**

Departmentsurgical diseases No. 1

FacultyMedicinal

DisciplineIntroductory practice (care for surgical patients)

Course 1

Ticket to test No. 19

1. Basic principles of preventing nosocomial infections.
2. Peculiarities of nutrition of patients after operations on the abdominal organs.
3. Rules for the care, application and change of colostomy bags.

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the Russian Federation**

Departmentsurgical diseases No. 1

FacultyMedicinal

DisciplineIntroductory practice (care for surgical patients)

Course 1

Ticket to test No. 20

1. Basic provisions of medical deontology.
2. What signs indicate the presence of suppuration in a postoperative wound? What should be done in these cases?

3. What are the harmful effects of noise on the human body?

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Departmentsurgical diseases No. 1

FacultyMedicinal

Course 1

DisciplineIntroductory practice (care for surgical patients)

Ticket to test No. 21

1. How is bacterial carriage detected among medical staff and patients?
2. Injuries caused by violations of safety regulations and operating rules for electrical equipment.
3. Features of changing underwear in surgical patients.

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the Russian Federation**

Departmentsurgical diseases No. 1

FacultyMedicinal

Course 1

DisciplineIntroductory practice (care for surgical patients)

Ticket to test No. 22

1. Design and organization of the treatment room.
2. What kind of observation and care is needed for patients with purulent processes in the abdominal cavity and chest cavity?

3. Ways and methods of combating environmental pollution and infection in the surgical department?

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Departmentsurgical diseases No. 1

FacultyMedicinal _____

Course 1

DisciplineIntroductory practice (care for surgical patients)

Ticket to test No. 23

1. Organization of the operation of the surgical dressing unit.
2. What are the safety precautions for shaving the surgical field during various pathological processes?
3. Peculiarities of nutrition of patients after operations on the abdominal organs.

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the Russian Federation**

Departmentsurgical diseases No. 1

FacultyMedicinal _____

Course 1

DisciplineIntroductory practice (care for surgical patients)

Ticket to test No. 24

1. The structure of the reception department, its functions, organization of work.
2. List the basic skin care techniques?

3. Under what conditions does urinary leakage occur? Their signs. Your actions.

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the Russian Federation**

Departmentsurgical diseases No. 1

FacultyMedicinal

DisciplineIntroductory practice (care for surgical patients)

Course 1

Ticket to test No. 25

1. Setting up a nurse's station.
2. What is a surgical patient regimen and what does it mean for the nurse?
3. How to properly transport surgical patients from the operating room?