Federal State Budgetary Educational Institution of
Higher Education
"North Ossetian State Medical Academy" of the
Ministry of Health of the Russian Federation
(FSBEI HE NOSMA of the Ministry of Health of the Russian Federation)

Department of Internal Medicine No. 3

## METHODOLOGICAL RECOMMENDATIONS

according TO THE PROGRAM OF INDUSTRIAL PRACTICE

PRACTICAL TRAINING PROGRAM PRACTICAT TRAINING IN OBTAINING PROFESSIONAL SKILLS AND PROFESSIONAL EXPERIENCE, INCLUDING RESEARCH AND DEVELOPMENT

(ASSISTANT DOCTOR OF THE AMBULATOR-POLICLINICAL DEPARTMENT)M, partially implemented in English

the main professional educational program of higher education – the specialty program in the specialty 31.05.01 General medicine, approved on 30.03.2022.

The guidelines are intended for students of the 5th year of the Faculty of Medicine in order to help them pass industrial practice in the specialty 31.05.01. "General medicine", reflect the requirements of the Federal State Educational Standard and are compiled in accordance with the "Regulations on industrial practice of students of higher Educational Institutions of the Russian Federation".

## **Developers:**

Head of the Department, Doctor of Medical Sciences
Associate Professor, candidate of medical Sciences
Associate Professor, candidate of medical Sciences
Z. S. Brtsieva

S.A. Ktsoeva Associate Professor, candidate of medical Sciences

L.M. Khutieva Associate Professor, candidate of medical Sciences

N.N. Burduli

**The purpose** of practical training in the 5th year of the Faculty of Medicine is to consolidate and expand the theoretical knowledge obtained at the Departments of Public Health, Internal Diseases No. 2,3; to acquire the skills of practical and organizational work necessary for the implementation of the activities of a district general practitioner; to acquire skills in diagnosing and providing emergency care at the pre-hospital stage in acute diseases and urgent conditions

#### **Practice tasks:**

- familiarization of students with the organization of outpatient care to the population in a polyclinic
- acquisition of practical and organizational skills necessary for the implementation of the activities of the district general practitioner
- consolidation and deepening of knowledge about the diagnosis of diseases of the therapeutic profile, the organization of the treatment process and monitoring of the course of treatment
- familiarity with the main documentation of the polyclinic, acquisition of skills in its design

#### **Structure and content of the practice**

Industrial practice in the 5th year of the Faculty of Medicine takes place at the end of the spring examination session in the 10th semester (2 weeks, 14 working days) in outpatient clinics (polyclinics) as assistants to district doctors. Students work 6 hours a day with a 6-day working week.

Having started the internship, the student draws up a Diary of industrial practice

Students should keep a daily diary, which reflects: the types and volume of work performed, the methods of medical manipulations performed. Every day the diary is certified by the signature of the head of the department

On the last day of practice, the student draws up a summary report. the department gives a brief description of the student's work, in which it evaluates the volume and quality of the work performed, the knowledge and practical skills acquired during the practice, the student's integrity, the ability to comply with the basic principles of medical ethics and deontology. The diary is signed by the responsible managers for the production practice: the assistant manager from the Academy and the basic manager from the medical institution and is certified by the seal of the medical institution.

#### PRACTICE CONTENT

|                     | Practice sections                    | types of work in practice, including      | number | of |
|---------------------|--------------------------------------|---|--------|----|
| $N_{\underline{0}}$ |                                      | independent work of students              | hours  |    |
| 1                   | structure of outpatient care for the | - acquaintance with all departments of    | 2      |    |
|                     | population of the Russian Federation | the polyclinic                            |        |    |
| 2                   | medical work                         | - reception of patients in the polyclinic | 80     |    |
|                     |                                      | - visiting patients at home               |        |    |
|                     |                                      | - work in a day hospital, a hospital at   |        |    |
|                     |                                      | home                                      |        |    |
|                     |                                      | - participation in the work of            |        |    |
|                     |                                      | specialized offices                       |        |    |
| 3                   | preventive work                      | - participation with professional         | 10     |    |
|                     |                                      | examinations.                             |        |    |
|                     |                                      | participation in vaccinations             |        |    |
|                     |                                      | sanitary and educational work             |        |    |
| 4                   | registration of medical              | filling in and maintaining medical        | 10     |    |
|                     | documentation                        | records:                                  |        |    |
|                     |                                      | - outpatient card                         |        |    |
|                     |                                      | - statistician. coupons                   |        |    |

|   |   | - control card of dispensary observation - disability certificate - referrals for medical and social expertise - health resort cards - extracts from the outpatient card  |    |
|---|---|---|----|
| 5 | dispensary work                         | - participation in dispensary examinations  | 10 |
| 6 | examination of the temporary disability | During the examination of patients, conduct an examination of temporary disability – determine its cause and type, indicate the need to issue a document on temporary disability, its term, criteria for recovery and restoration of working capacity | 10 |
| 7 | prescribing                             | - writing prescriptions (regular and preferential)  | 10 |
| 8 | emergency care                          | - working at an ambulance station   | 36 |

## The method of receiving a patient in a polyclinic

- 1. Before inviting the patient to the office, check whether everything is ready for you to receive the patient (the presence of a stethophonendoscope, tonometer, medical thermometer, spatulas). Don't forget to wash your hands.
- 2. Call the patient to the office (nurse) and invite him to sit at the table (address the patient in You). Pay attention to the patient's gait, facial expression, and manner of speaking.
- 3. Specify the last name, first name, patronymic and age of the patient, place of work, position and compare this data with the entry on the cover of the outpatient card
- 4. Find out the purpose of the visit to you. If there are complaints about the state of health, listen to them, if necessary, detail them. Highlight the main complaints that characterize the defeat of certain organs and systems, as well as general complaints related to the manifestation of intoxication, asthenization. If necessary, during the conversation, give the patient a thermometry.
- 5. Ask about the causes of the disease, its onset (time, manifestations), the course, the treatment carried out, its effect on well-being.
- 6. Purposefully collect basic data from the history of life, information about past diseases, including viral hepatitis, allergic history. During the conversation with the patient, continue to observe his behavior, pay attention to the appearance, posture, severity of shortness of breath, color of the face, lips. Count your pulse. Measure your blood pressure.
- 7. Ask the patient to undress to the waist. While the patient is undressing, look at his outpatient card, a list of updated diagnoses. At the same time, start recording complaints and anamnesis data in the outpatient card.
- 8. As soon as the patient has undressed, continue to examine him. Evaluate the posture, constitution, color of the skin, their moisture content; examine the conjunctiva; evaluate the development of muscles, the condition of the joints. If there are significant deviations in height, weight, ask the nurse to perform anthropometry and weighing of the patient; palpate the peripheral lymph nodes, mammary glands; examine the tongue, pharynx, exclude pathological pulsation of large blood vessels, an increase in the thyroid gland.
- 9. After the general examination, proceed to a detailed examination of the system, which, according to complaints and anamnesis, can be most affected by the pathological process. This system should be examined in a sufficiently complete volume (including examination, palpation, percussion, auscultation). Other organs and systems are examined according to the following scheme: in the patient's sitting or standing position, perform a lung examination. Listen to the heart (preferably in a standing and lying

position, and in some cases-on the left side). Check for edema on the lower extremities. In the supine position, perform palpation of the abdomen (soreness, condition of the liver, spleen). Specify the character of the chair. In a sitting or standing position, check the Pasternatsky symptom.

- 10. Find out the presence of concomitant pathology that may be important for the management of the patient.
- 11. After completing the examination, ask the patient to get dressed, at the same time continue to record the results of the examination in the outpatient card, indicating the main data on the state of the system concerned, all detected deviations from the norm. Briefly describe the norm on the part of other systems. The result of understanding the data obtained should be your diagnosis (presumed), a plan for additional studies and therapeutic and diagnostic measures. Give instructions to the nurse about filling out referrals for tests and other tests, and other documents.
- 12. Following the rules of medical ethics of medical deontology, conduct a conversation with the patient about his disease, planned additional studies, prescribed treatment.
- 13. Give recommendations to the patient regarding the ability to work ( if necessary, issue a certificate of disability or a certificate). Tell the patient about the procedure for taking medications, conducting other health-improving activities. Set a deadline for a second appearance or a home visit to the patient. Before leaving the patient, say goodbye to him.
- 14. Complete the entries in the outpatient card, specify your diagnosis, additional studies, prescribed treatment, sick leave number (reference), and the period for which it was issued. Specify the date of the reappearance at the reception (or home visit). Clearly sign the outpatient card and other documents.
- 15. When clarifying the diagnosis (in case of repeated patient appearances), fill in the statistical ticket and enter the diagnosis in the list of updated diagnoses in the outpatient card. In acute respiratory infections, angina, influenza stat. the ticket is filled in at the first inspection.
- 16. When the patient is re-examined, the outpatient chart reflects the dynamics of well-being and condition, the implementation of the regime, the tolerability of drugs and the compliance of their administration with the intended purpose. The effectiveness of treatment is evaluated, if necessary, its correction is made, a note is made about the extension of b and the subsequent appearance at the reception or closure of sick leave with the indication of preventive and labor recommendations.

When detecting diseases, a doctor of any specialty must ensure that:

- 1. A statistical ticket for registering final (clarified diagnoses ) form No. 025-12 /u -04
- 2. Outpatient card-form No. 025/u -04 the main medical and accounting document of the patient being treated on an outpatient basis and at home. The sheet for recording updated diagnoses is an integral part of the outpatient medical record. Rules for filling in:
- \* Mandatory filling in of the passport part
- Before each entry, you must put a date, as well as a mark "at home" or " on an outpatient basis»
- \* The diagnosis is written in Russian or in the language of the relevant national education
- It is mandatory to indicate the scheduled additional examination
- Data from references and other documents are recorded in the map
- \* Accurately indicate the date of disability and the time of discharge of the patient to work
- \* An annual epicrisis is issued for a patient who is registered at a dispensary. It should reflect: the appointment of visits for observation and their implementation to patients, the appointment and implementation of courses of anti-relapse treatment, the dynamics of clinical and paraclinical indicators, the number and duration of exacerbations of the underlying disease, the number of days of disability, the conclusion on the state of health (improvement, deterioration, without changes); removed from the register (reason for withdrawal)
- 3. Control card of dispensary observation-form No. 030/u -04

If necessary, the doctor fills out certificates of temporary disability (students, students, workers, employees), medical certificates ( medical professional expert opinion), a certificate of disability, a referral to the medical and social expertise bureau, prescriptions are written.

When referring a patient to a spa treatment, a certificate is first issued for obtaining a permit-form No. 07/u - 04. Its validity period is 6 months. The certificate is of a preliminary informational nature, does not replace the health resort card and is presented to the patient together with the application for the allocation of a

permit for health resort treatment at the place where the permit is provided (social insurance fund or trade union committees of enterprises). After receiving the permit, the attending physician fills in and issues the patient a health resort card-No. 072/u -04 (see appendix).

The results of the following studies are entered in the health resort card, regardless of the type of disease

- \* Clinical analysis of blood, urine
- \* Chest X-ray examination (if more than 6 months have passed since the last X-ray examination)
- ECG
- \* In some cases, to clarify the diagnosis immunological, biochemical, X-ray methods of research
- \* Gynecologist's report (for women)

For the main or concomitant diseases-the conclusion of the diagnosis of the relevant specialists

## Sample design of the "Diary of industrial practice"

The title page contains: the student's last name, first name, patronymic, group number, faculty, full name of the medical institution and department where the practice takes place, address, last name and initials of the chief doctor, head of the department, senior nurse, their signatures, the dates of the beginning and end of the practice. The title page of the diary is certified by the round seal of the medical institution.

Sample cover page

## PRODUCTION PRACTICE DIARY

| ''Assista                                  | nt to a primary care physician | in an outpatient clinic"                  |
|--|--------------------------------|---|
|  |                                | -   |
|  |                                |   |
|  |                                |   |
|  |                                |   |
| Chief physician                            |                                |   |
|  | Last name                      | (signed)                                  |
| Head of the Department                     |                                |   |
|  | Last name                      | (signed)                                  |
| Start of practice «»<br>End of practice «» | 20 г.                          |   |
| End of practice « »                        | <del>20 z.</del>               |   |
|  |                                | t on the signature of the chief physician |

#### **RULES FOR KEEPING A DIARY**

On the first day of work in the polyclinic, a brief description of the hospital and the department is given (the structure of the hospital, medical and diagnostic capabilities; characteristics of the department: population, passport of the site, the number of dispensary patients, the work schedule of the district doctor, etc.)).

Records should be short, clear, and reflect the entire amount of work performed, indicating the number of manipulations performed. The nature and scope of work is determined by the profile of the department.

The diary, in addition to daily practical activities, reflects the sanitary and educational work of the student, participation in conferences, etc.

The diary is certified **daily** by the signature of **the immediate supervisor-deputy the chief physician or the head physician department.** When summing up the results of the production practice, the total number of manipulations is summed up and placed in the corresponding columns of the summary report. It also reflects the achieved level of implementation of practical skills.

The summary report on the work done is certified by the signature of the basic manager – the chief physician of the medical and preventive institutions and the seal of the medical institution

| Date        | Content of the completed work  |
|-------------|--|
|             | On the day of the start of the production practice, a brief description of the medical               |
|             | facility, department and therapeutic area is given.  |
| 04.07.12    | Further:   |
| 8.30-12.00  | I conducted an appointment in the polyclinic together with the local general                         |
|             | practitioner:  |
|             | 12 patients were admitted : for the disease -8, professional examination-4                           |
|             | By disease: primary 5 (ARVI-3, acute bronchitis -2); repeated 3 (ARVI-2,                             |
|             | hypertension -1)   |
|             | Issued: sheets of disability -3,   |
|             | health resort card -5  |
|             | referral for hospitalization - 1   |
|             | referral for examination - 3   |
|             | the medical and social expertise mailing list (Form No. 88) - 1.                                     |
|             | B Patient Aliev M. N., 27 years old. Complaints of sore throat when swallowing,                      |
|             | increased body temperature to 38.00 C., weakness.  |
|             | Ill for 2 days. Objectively: the condition is unsatisfactory, $t = 37.60 \text{ S}$ , the pharynx is |
|             | hyperemic, the tonsils are enlarged, there is a white plaque in the lacunae. By                      |
|             | organs: in the lungs, vesicular breathing; heart: tones of sufficient sonority, the                  |
|             | rhythm is correct, ps 90 in 1 min, blood pressure 120 \ 75 mm Hg; the abdomen is                     |
|             | soft, painless on palpation.   |
|             | Diagnosis: lacunar angina  |
|             | Exam: 1) smear from the pharynx on BL  |
|             | 2) consultation with an infectious disease specialist  |
|             | Treatment: 1) Amoxicillin 1g x 2 times a day for 5-7 days  |
|             | 2) Paracetamol 0.5 x 2 p per day for 2-3 days  |
|             | 3)Local: "Tantum Verde" spray, 2 times a day   |
|             | The patient is incapacitated.  |
|             | Issued sick leave № 000123789 from 4.07 to 8.07.12.  |
| 12.00-14.30 | Visited 2 patients at home (Full name, diagnosis)  |
|             | Student  |
|             | Head of Department   |

## SUMMARY REPORT ON THE WORK DONE

| No | Type of work performed                                     | Level of    | Quantity |
|----|--|-------------|----------|
|    |  | development |          |
| 1  | Accepted patients in the clinic:                           |             |          |
|    | • At the reception   | III         |          |
|    | • At home  |             |          |
|    | Active at home   |             |          |
| 2  | Examined dispensary patients                               | IV          |          |
| 3  | Examined at professional examinations                      | IV          |          |
| 4  | Work in a day hospital (examined patients)                 |             |          |
| 5  | Participation in the work of specialized offices of the    | III         |          |
|    | therapeutic profile ( cardiologist, pulmonologist,         |             |          |
|    | gastroenterologist, endocrinologist, rheumatologist, etc.) |             |          |
| 6  | Participation in the work of the medical commission of the | III         |          |
|    | polyclinic   |             |          |
| 7  | Filling in and maintaining medical records:                | IV          |          |
|    | • outpatient card (f. No. 25)                              |             |          |
|    | • statistical card (f-025 \ y)                             |             |          |
|    | • control card of dispensary observation (f30\y)           |             |          |
|    | referral to medical and social expertise                   |             |          |
| 8  | Registration of disability certificates                    | IV          |          |
| 9  | Issued health resort cards                                 | IV          |          |
| 10 | ECG recording, transcription, and evaluation               | III         |          |
| 11 | First aid in the case of                                   | III         |          |
|    | • fainting   |             |          |
|    | * hypertensive crisis                                      |             |          |
|    | * angina pectoris  |             |          |
|    | myocardial infarction                                      |             |          |
|    | * pulmonary edema  |             |          |
|    | • an attack of bronchial asthma                            |             |          |
|    | anaphylactic shock   |             |          |
| 12 | Participation in conferences                               | IV          |          |

## LEVELS OF MASTERY OF PRACTICAL SKILLS:

- I. Have an idea, be professionally oriented, know the indications. II. Take part, evaluate. III. Perform under supervision.

- IV. Perform independently.

## STUDENT'S EDUCATIONAL AND RESEARCH WORK DURING PRACTICE

# (the nature of the work performed, its assessment, participation in the student educational and methodological conference)

| During   | the period of practical tra | ining as an "assi | stant to the distr | rict general practiti | oner", an educ   | cational |
|----------|-----------------------------|-------------------|--------------------|-----------------------|------------------|----------|
| and      | methodological              | project           | was                | prepared              | on               | the      |
| topic:«_ |                             |                   |                    |                       |                  |          |
|          |                             |                   |                    |                       |                  | »,       |
| as well  | as the abstract: «          |                   |                    |                       |                  |          |
|          |                             |                   |                    |                       |                  | ».       |
|          |                             |                   |                    |                       |                  |          |
| Particip | ated in in the student educ | ational and metho | odological confe   | rence and made a re   | eport on the top | ic:      |
| <u> </u> |                             |                   |                    |                       |                  |          |
|          |                             |                   |                    |                       |                  | »        |
|          |                             |                   |                    |                       |                  |          |
|          |                             |                   |                    |                       |                  |          |
|          |                             |                   |                    |                       |                  |          |
|          |                             |                   |                    | <del></del>           |                  |          |
|          |                             |                   |                    |                       |                  |          |
|          |                             |                   |                    |                       |                  |          |
|          |                             |                   |                    |                       |                  |          |
|          |                             |                   |                    |                       |                  |          |
|          |                             |                   |                    |                       |                  |          |

**Note:** the educational and research work is made out in the form of an educational and methodological project and an abstract.

### Sample subject of the student's educational and research work:

- 1. Analysis of the annual report of the district therapist
- 2. Features of the diagnosis and treatment of patients on an outpatient basis with diseases of a therapeutic profile (any diseases can be selected -30-40 patients)
- 3. Dispensary observation of chronic patients at the therapeutic site (for 2 years)
- 4. Medical examination of the working population (additional medical examination of the organized population) on the example of one enterprise
- 5. The effectiveness of medical examinations at the therapeutic site (for 2 years)
- 6. Preventive work on the site (for 2 years)
- 7. Dynamics of morbidity with temporary disability in the therapeutic area for 3 years
- 8. Dispensary observation of disabled people and participants of the Great Patriotic War in the therapeutic area
- 9. Dynamics of the level of morbidity at the site by nosology for 2 years
- 10. Analysis of the work of the day hospital for 1 year

Report on sanitary and educational work

| report on summary and educational work |   |          |  |  |
|--|---|----------|--|--|
| №                                      | Name of events  | Quantity |  |  |
| i/i                                    |   |          |  |  |
| 1.                                     | Lectures (conversations) on sanitary and educational topics were held: 1.  2. |          |  |  |
| 2.                                     | Participation in the issues of sanitary bulletins                             |          |  |  |
| 3.                                     | Participation in the production of stands                                     |          |  |  |
| 4.                                     | Participation in production meetings  |          |  |  |
| 5.                                     | Other types of work   |          |  |  |

| Signature of the basic head of the production practice |             |         |
|--|-------------|---------|
|  | (signature) | seal    |
| Direct Basic Practice                                  |             |         |
| Manager  |             |         |
|  | (sign       | ature)  |
| Direct   |             |         |
| Assistant-Head of the practice                         |             |         |
|  | (sign       | nature) |

## Sample topics of conversations with patients on sanitary and educational work:

- 1. Prevention of cardiovascular diseases
- 2. Prevention and treatment of hypertension
- 3. Regimen and rehabilitation treatment after myocardial infarction
- 4. Chronic lung diseases-treatment and prevention
- 5. Bad habits and fighting them
- 6. Prevention and treatment of helminthiasis
- 7. Prevention of gastrointestinal diseases
- 8. Prevention of viral hepatitis
- 9. Giving up smoking