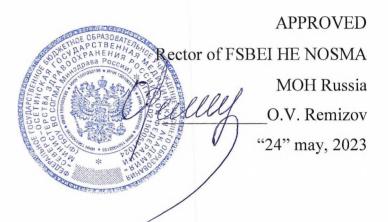
№ ЛД-16 ИН

Federal State Budgetary Educational Institution of Higher Education «North-Ossetia State Medical Academy» of the Ministry of Healthcare of the Russian Federation



EDUCATIONAL TRAINING PROGRAM OF DISCIPLINE

"Outpatient therapy. Training simulation course 2"

the main professional educational program of higher education - specialty program in the specialty 31.05.01 General Medicine, partially implemented in English, approved in May 24, 2023

Form of education	Full-time	
The period of development	6	
Department of Internal Medicine № 3		

When developing the work program, the disciplines are based on:

- 1. Federal State Educational Standard of Higher Education for the specialty 31.05.01 Medical Care, approved by the Ministry of Education and Science of the Russian Federation on Febrary 9, 2016 №. 95
- 2. The curriculum of the MPEP HE in the specialty 31.05.01 Medical care

ЛД-16-04-18ИН

ЛД-16-05-19ИН

ЛД-16-06-20ИH, approved by the Academic Council of the Federal State Budgetary Educational Institution of the Ministry of Higher Education NOSMA of the Ministry of Health of the Russian Federation on May 24, 2023, Protocol №. 8

The working program of the discipline was approved at the meeting of the Department of Internal Diseases №. 3 of May 15, 2023, Protocol No. 10

The working program of the discipline was approved at the meeting of the centralcoordinating Educational and Methodological Council of May 23, 2023, Protocol No.5.

The working program of the discipline was approved by the Academic Council Federal State Educational Institution of Higher Education NOSMA of the Ministry of Health of the Russian Federation of "24" may, 2023, Protocol № 8.

Developers:	
Developers:	
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Content of the work program

- 1. name of discipline:
- 2. a list of intended learning outcomes for the discipline associated with the planned results of educational programs;
- 3. indication of the place of discipline in the structure of the educational program;
- 4. the amount of discipline in credits indicating the number of academic or astronomical hours allocated for contact work of students with the teacher (by type of training) and for independent work of students;
- 5. the content of the discipline, structured by topics (sections) with an indication of the number of academic or astronomical hours allotted to them and types of training sessions;
- 6. the list of educational and methodological support for independent work of students in the discipline;
- 7. Fund evaluation funds for intermediate certification of students in the discipline;
- 8. the list of basic and additional educational literature necessary for the development of the discipline;
- 9. list of resources of information and telecommunication network "Internet "(hereinafter-the "Internet"), necessary for the development of the discipline;
- 10. guidelines for students on the development of the discipline;
- the list of information technologies used in the implementation of the educational process in the discipline, including a list of software and information reference systems (if necessary);
- 12. description of the material and technical base necessary for the implementation of the educational process in the discipline.
- 13. Conducting educational activities using e-learning and distance learning technologies.

1. Name of discipline-polyclinic therapy

${\bf 2. \ List \ of \ planned \ learning \ outcomes \ for \ discipline \ and \ the \ results \ of \ the \ development \ of \ the \ educational \ program}$

NoNo		The content of the	the The learning outcomes of the		
p/p		discipline (or part	part		
thereof)					
			know	can	master
1	2	3			
1	EC-8	Practical activity of the district therapist of the polyclinic (Organizational, preventive, medical and diagnostic activities. Rehabilitation in ambulatory conditions. Prophylactic medical examination. Medical and social expertise. The procedure for prescribing prescriptions by the district therapist. Oncological alertness in the work of a polyclinic therapist) Practical activity of a district polyclinic therapist (Organizational, preventive, medical and diagnostic activities. Rehabilitation in ambulatory conditions. Prophylactic medical examination. Medical and social expertise. The procedure for prescribing prescriptions by the district therapist. Cancer alertness in the therapist's work	Cultural and moral foundations of functioning of social groups in society and medical organizations, basic principles of deontology and standards of professional ethics	Interpret moral, cultural, and intellectual achievements, and understand the rational side of other cultures	Methods of conducting discussions with colleagues, patients and relatives of patients,
1	EPC -1	Practical activity of the district therapist of the polyclinic (Organizational, preventive, medical and diagnostic activities. Rehabilitation in ambulatory conditions. Prophylactic medical	Basics of studying and collecting scientific and medical information, research methods	Independently work with literary and informational sources of scientific and medical information	Apply the capabilities of modern information technologies to solve professional tasks

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		examination.			
		Medical and social			
		expertise.			
		The procedure for prescribing prescriptions			
		by the district therapist.			
		Oncological alertness in			
		the work of a polyclinic			
		therapist) Practical			
		activity of a district			
		polyclinic therapist			
		(Organizational,			
		preventive,			
		medical and diagnostic			
		activities.			
		Rehabilitation in			
		ambulatory conditions.			
		Prophylactic medical examination.			
		Medical and social			
		expertise.			
		The procedure for			
		prescribing prescriptions			
		by the district therapist.			
		Cancer alertness in the			
		therapist's work			
		Practical activity of the	deontological and	Follow the rules of	methods of medical
		district therapist of the	ethical skills of	medical ethics and	ethics and
		polyclinic	working in a	deontology; solve a	deontology;
		(Organizational,	polyclinic	set of problems related to the	
		preventive, medical and diagnostic		relationship between	
		activities.		the doctor and the	
		Rehabilitation in		patient.	
		ambulatory conditions.		P	
		Prophylactic medical			
		examination.			
		Medical and social			
		expertise.			
		The procedure for			
	EDC 4	prescribing prescriptions			
1	EPC -4	by the district therapist. Oncological alertness in			
		the work of a polyclinic			
		therapist) Practical			
		activity of a district			
		polyclinic therapist			
		(Organizational,			
		preventive,			
		medical and diagnostic			
		activities.			
		Rehabilitation in			
		ambulatory conditions. Prophylactic medical			
		examination.			
		Medical and social			
1	1				
1		experuse.			
		expertise. The procedure for			

		T	T	T	
		prescribing prescriptions			
		by the district therapist.			
		Cancer alertness in the			
		1 1			
1	EPC -6	therapist's work Practical activity of the district therapist of the polyclinic (Organizational, preventive, medical and diagnostic activities. Rehabilitation in ambulatory conditions. Prophylactic medical examination. Medical and social expertise. The procedure for prescribing prescriptions by the district therapist. Oncological alertness in the work of a polyclinic therapist) Practical activity of a district polyclinic therapist (Organizational, preventive, medical and diagnostic activities. Rehabilitation in ambulatory conditions. Prophylactic medical examination. Medical and social expertise. The procedure for	- maintaining standard accounting and reporting medical documentation in an outpatient clinic;	- Maintain an outpatient medical record - Draw up medical documentation that the district therapist deals with	- skills in maintaining medical record
		prescribing prescriptions by the district therapist. Cancer alertness in the			
		therapist's work			
1	EPC -8	Practical activity of the district therapist of the polyclinic (Organizational, preventive, medical and diagnostic activities. Rehabilitation in ambulatory conditions. Prophylactic medical examination. Medical and social expertise. The procedure for prescribing prescriptions by the district therapist. Oncological alertness in the work of a polyclinic	- the main classes of medicines used for various diseases in outpatient practice - mechanisms of action, indications, contraindications, possibilities of combined treatment of the main nosological forms in outpatient practice	- prescribe treatment to an outpatient patient and write prescriptions for the main medications used in outpatient practice - Evaluate the effectiveness and safety of the treatment	- methods and skills of prescribing medicines in accordance with the diagnosis - the skill of drawing up a treatment plan for a specific patient

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1	EPC-9	therapist) Practical activity of a district polyclinic therapist (Organizational, preventive, medical and diagnostic activities. Rehabilitation in ambulatory conditions. Prophylactic medical examination. Medical and social expertise. The procedure for prescribing prescriptions by the district therapist. Cancer alertness in the therapist's work Practical activity of the district therapist of the polyclinic (Organizational, preventive, medical and diagnostic activities. Rehabilitation in ambulatory conditions. Prophylactic medical examination. Medical and social expertise. The procedure for prescribing prescriptions by the district therapist. Oncological alertness in the work of a polyclinic therapist) Practical activity of a district polyclinic therapist (Organizational, preventive, medical and diagnostic activities. Rehabilitation in ambulatory conditions. Prophylactic medical examination. Medical and social expertise. Rehabilitation in ambulatory conditions. Prophylactic medical examination. Medical and social expertise.	- The main changes that occur in diseases of internal organs in outpatient patients with various diseases.	- identify the main symptoms and syndromes of diseases and explain their pathogenesis - assess the severity of the patient's condition	- interpretation of the results of laboratory and instrumental studies - rules of referral for inpatient treatment and emergency hospitalization
		Medical and social			
1	PC-1	Practical activity of the district therapist of the polyclinic (Organizational,	- factors that shape human health - basics of preventive	- Carry out activities with the population of the attached area for primary and	- methods of primary and secondary prevention of

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		preventive,	medicine,	secondary	diseases
		medical and diagnostic	- modern methods of	prevention of the	- modern methods of
		activities.	sanitary and	most common	sanitary and
		Rehabilitation in	educational work in	diseases that require	educational work
		ambulatory conditions.	a polyclinic, fight	therapeutic	
		Prophylactic medical	against bad habits,	treatment (based on	
		examination.	alcoholism, drug	evidence-based	
		Medical and social	addiction,	medicine)	
		expertise.	promotion of a	Promote a healthy	
		The procedure for	healthy lifestyle	lifestyle	
		prescribing prescriptions		, and the second	
		by the district therapist.			
		Oncological alertness in			
		the work of a polyclinic			
		therapist) Practical			
		activity of a district			
		polyclinic therapist			
		(Organizational,			
		preventive,			
		medical and diagnostic			
		activities.			
		Rehabilitation in			
		ambulatory conditions.			
		Prophylactic medical			
		examination.			
		Medical and social			
		expertise.			
		The procedure for			
		prescribing prescriptions			
		by the district therapist.			
		Cancer alertness in the			
		therapist's work			
		Practical activity of the	- organization of	- Conduct medical	- skills of working
		district therapist of the	preventive measures	examinations, issue	with the population
		polyclinic	aimed at improving	primary and current	during periodic
		(Organizational,	the health of the	documentation,	preventive
		preventive,	population	evaluate the	examinations and
		medical and diagnostic	documents	effectiveness of	medical
		activities.	regulating medical	medical	examinations of the
		Rehabilitation in	examinations in the	examinations	population as a
		ambulatory conditions.	Russian Federation		General practitioner
		Prophylactic medical			1
		examination.			
		Medical and social			
1	DC 2	expertise.			
1	PC-2	The procedure for			
		prescribing prescriptions			
		by the district therapist.			
		Oncological alertness in			
		the work of a polyclinic			
		therapist) Practical			
		activity of a district			
		polyclinic therapist			
		(Organizational,			
		preventive,			
		medical and diagnostic			
		activities.			
		Rehabilitation in			

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1	PC-6	ambulatory conditions. Prophylactic medical examination. Medical and social expertise. The procedure for prescribing prescriptions by the district therapist. Cancer alertness in the therapist's work Practical activity of the district therapist of the polyclinic (Organizational, preventive, medical and diagnostic activities. Rehabilitation in ambulatory conditions. Prophylactic medical examination. Medical and social expertise. The procedure for prescribing prescriptions by the district therapist. Oncological alertness in the work of a polyclinic therapist) Practical activity of a district polyclinic therapist (Organizational, preventive, medical and diagnostic activities. Rehabilitation in ambulatory conditions. Prophylactic medical examination. Medical and social expertise. The procedure for prescribing prescriptions by the district therapist.	-International statistical classification of diseases (ICD)	- use an algorithm for making a diagnosis (main, concomitant, complication), taking into account the International statistical classification of diseases; - perform basic diagnostic measures to identify urgent and life-threatening conditions	- skills to determine the patient's main pathological conditions, syndromes, symptoms of diseases in accordance with ICD-10
		Cancer alertness in the therapist's work	the de	Has the least	models de Com
1	PC-7	Practical activity of the district therapist of the polyclinic (Organizational, preventive, medical and diagnostic activities. Rehabilitation in ambulatory conditions. Prophylactic medical examination. Medical and social	-the documents regulating carrying out of examination of temporary and permanent disability of the Russian Federation	- Use the legal guidelines for the examination of working capacity; determine the cause of temporary disability, recovery criteria, and restoration of working capacity - Timely identify the signs of disability,	- methods for determining signs of temporary and permanent disability, - registration of documents certifying temporary and permanent disability (disability certificate, referral for medical and social expertise)

		expertise.		predict the group,	
		The procedure for		and issue	
		prescribing prescriptions		documents to be	
		by the district therapist.		sent to the medical	
		Oncological alertness in		and social expertise	
		the work of a polyclinic		Bureau	
		therapist) Practical			
		activity of a district			
		polyclinic therapist			
		(Organizational,			
		preventive,			
		medical and diagnostic			
		activities.			
		Rehabilitation in			
		ambulatory conditions.			
		Prophylactic medical examination.			
		Medical and social			
		expertise.			
		The procedure for			
		prescribing prescriptions			
		by the district therapist.			
		Cancer alertness in the			
		therapist's work			01.11
		Practical activity of the	- indications for	- determine whether	Skills in determining
		district therapist of the	hospitalization of	patients have	the management
		polyclinic	patients with the	indications for	tactics of patients
		(Organizational,	most frequent	hospitalization,	with various
		preventive,	diseases of internal	issue a referral for	nosological forms
		medical and diagnostic	organs, including	hospitalization of	
		activities.	indications for	the patient	
		Rehabilitation in	emergency		
		ambulatory conditions.	hospitalization		
		Prophylactic medical	principles of		
		examination.	management of		
		Medical and social	patients with the		
		expertise.	most common		
		The procedure for	diseases		
		prescribing prescriptions			
		by the district therapist.			
	PC-8	Oncological alertness in			
1	FC-6	the work of a polyclinic			
		therapist) Practical			
		activity of a district			
		polyclinic therapist			
		(Organizational,			
		preventive,			
		medical and diagnostic			
		activities.			
		Rehabilitation in			
		ambulatory conditions.			
		Prophylactic medical			
		examination.			
		Medical and social			
		expertise.			
		The procedure for			
		prescribing prescriptions			
		by the district therapist.			
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		Cancer alertness in the			
					1.11
1	PC-9	therapist's work Practical activity of the district therapist of the polyclinic (Organizational, preventive, medical and diagnostic activities. Rehabilitation in ambulatory conditions. Prophylactic medical examination. Medical and social expertise. The procedure for prescribing prescriptions by the district therapist. Oncological alertness in the work of a polyclinic therapist) Practical activity of a district polyclinic therapist (Organizational, preventive, medical and diagnostic activities. Rehabilitation in ambulatory conditions. Prophylactic medical examination. Medical and social expertise. The procedure for prescribing prescriptions by the district therapist. Cancer alertness in the	- indications for the management and treatment of patients with various nosological forms in outpatient and day hospital settings - criteria for referral to hospital	- prescribe therapy to patients with various nosological forms in outpatient and day hospital settings - select patients for hospitalization	- skills in managing therapeutic patients in outpatient and day-care settings
		therapist's work		1 110	
1	PC-11	Practical activity of the district therapist of the polyclinic (Organizational, preventive, medical and diagnostic activities. Rehabilitation in ambulatory conditions. Prophylactic medical examination. Medical and social expertise. The procedure for prescribing prescriptions by the district therapist. Oncological alertness in the work of a polyclinic therapist) Practical activity of a district	- principles and methods of emergency measures in urgent situations of major diseases of internal organs (respiratory arrest, circulatory arrest, collapse, shock)	- detect life- threatening disorders (acute blood loss, respiratory failure, cardiac arrest, coma, shock); - perform anti-shock and resuscitation measures. provide medical care to patients with urgent pathology of internal organs in an emergency.	- the method of performing the main medical diagnostic and therapeutic measures to provide first aid in emergency conditions (ASTHMA attacks, hypertensive crises, angina attacks, myocardial infarction.allergic reaction)

		polyclinic therapist (Organizational, preventive, medical and diagnostic activities. Rehabilitation in ambulatory conditions. Prophylactic medical examination. Medical and social expertise. The procedure for prescribing prescriptions by the district therapist. Cancer alertness in the therapist's work Practical activity of the	-the method of formation of skills	-to assess the habitat	- basic skills of
1	PC- 16	district therapist of the polyclinic (Organizational, preventive, medical and diagnostic activities. Rehabilitation in ambulatory conditions. Prophylactic medical examination. Medical and social expertise. The procedure for prescribing prescriptions by the district therapist. Oncological alertness in the work of a polyclinic therapist) Practical activity of a district polyclinic therapist (Organizational, preventive, medical and diagnostic activities. Rehabilitation in ambulatory conditions. Prophylactic medical examination. Medical and social expertise. The procedure for prescribing prescriptions by the district therapist. Cancer alertness in the therapist's work	of a healthy lifestyle	factors and health risk of the population - prepare proposals for adoption by local authorities of the necessary measures on elimination of the revealed harmful factors of the external environment	collecting and medical and statistical analysis of information on health indicators of the adult population - methods of carrying out a set of preventive measures
1	PC-20	Practical activity of the district therapist of the polyclinic (Organizational, preventive, medical and diagnostic	- a systematic approach to assessing the patient's health status and analyzing medical information	- evaluate medical information about the patient - use the principles of evidence-based	- skills and methods of analyzing medical information
	<u> </u>	and	1 Carear Information	1 51 5 Tablice dasea	1

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		activities. Rehabilitation in ambulatory conditions. Prophylactic medical examination. Medical and social expertise. The procedure for prescribing prescriptions by the district therapist. Oncological alertness in the work of a polyclinic therapist) Practical activity of a district polyclinic therapist (Organizational, preventive, medical and diagnostic activities. Rehabilitation in ambulatory conditions. Prophylactic medical examination. Medical and social expertise. The procedure for prescribing prescriptions by the district therapist. Cancer alertness in the therapist's work	from the perspective of evidence-based medicine - maintaining	medicine in the interests of the patient - Maintain an	- skills in
2	EPC -6	Influenza and other ARVI. Sore throats are purulent.	standard accounting and reporting medical documentation in a medical institution;	outpatient medical record - Draw up medical documentation that the district therapist deals with	maintaining medical records
2	EPC -8	Influenza and other ARVI. Sore throats are purulent.	- the main classes of medicines used in these cases diseases in outpatient practice - mechanisms of action, indications, contraindications, possibilities of combined treatment of the main nosological forms in outpatient practice	- prescribe treatment to an outpatient patient and write prescriptions for the main medications used in outpatient practice - Evaluate the effectiveness and safety of the treatment	- methods and skills of prescribing medicines in accordance with the diagnosis - the skill of drawing up a treatment plan for a specific patient
2	EPC-9	Influenza and other ARVI. Sore throats are purulent.	- The main changes that occur in diseases of internal organs in outpatient patients with various diseases.	- identify the main symptoms and syndromes of diseases and explain their pathogenesis - assess the severity of the patient's condition	- interpretation of the results of laboratory and instrumental studies - rules of referral for inpatient treatment and emergency hospitalization

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2	ПК -6	Influenza and other ARVI. Sore throats are purulent.	-International statistical classification of diseases (ICD)	- use an algorithm for making a diagnosis (main, concomitant, complication), taking into account the International statistical classification of diseases; - perform basic diagnostic measures to identify urgent and life-threatening conditions	- skills to determine the patient's main pathological conditions, syndromes, symptoms of diseases in accordance with ICD-10
2	PC-7	Influenza and other ARVI. Sore throats are purulent.	-the issues of temporary disability in acute respiratory disease, influenza, septic sore throat criteria of recovery and rehabilitation	- use legal guidelines for medical and labor expertise, determine the cause of temporary disability, - criteria for recovery and restoration of working capa	skills of conducting medical and labor expertise in this disease
2	PC-9	Influenza and other ARVI. Sore throats are purulent.	- indications for the management and treatment of patients with assigned nosological forms in outpatient and day hospital settings - criteria for referral to hospital	- prescribe therapy to patients with these nosological forms in outpatient and day hospital settings - select patients for hospitalization	- skills in managing patients with acute respiratory infections. Flu. The child in an outpatient and day hospital
3	EPC-6	Pneumonia (clinic, diagnosis, treatment, medical and labor expertise, medical examination)	- maintaining standard accounting and reporting medical documentation in a medical institution;	 Maintain an outpatient medical record Draw up medical documentation that the district therapist deals with 	- skills in maintaining medical records
3	EPC-8	Pneumonia (clinic, diagnosis, treatment, medical and labor expertise, medical examination)	- the main classes of medicines used in these cases diseases in outpatient practice - mechanisms of action, indications, contraindications, possibilities of combined treatment of the main nosological forms in outpatient practice	- prescribe treatment to an outpatient patient and write prescriptions for the main medications used in outpatient practice - Evaluate the effectiveness and safety of the treatment	- methods and skills of prescribing medicines in accordance with the diagnosis - the skill of drawing up a treatment plan for a specific patient
3	EPC-9	Pneumonia (clinic, diagnosis, treatment, medical and labor	- The main changes that occur in diseases of internal	- identify the main symptoms and syndromes of	- interpretation of the results of laboratory and

		expertise, medical	organs in outpatient	diseases and explain	instrumental studies
		experuse, medical examination)	patients with various diseases.	their pathogenesis - assess the severity of the patient's condition	- rules of referral for inpatient treatment and emergency hospitalization
3	PC-6	Pneumonia (clinic, diagnosis, treatment, medical and labor expertise, medical examination)	-International statistical classification of diseases (ICD)	- use an algorithm for making a diagnosis (main, concomitant, complication), taking into account the International statistical classification of diseases; - perform basic diagnostic measures to identify urgent and life-threatening conditions	- skills to determine the patient's main pathological conditions, syndromes, symptoms of diseases in accordance with ICD-10
3	PC-7	Pneumonia (clinic, diagnosis, treatment, medical and labor expertise, medical examination)	- issues of temporary disability in pneumonia - criteria for recovery and restoration of working capacity	- use legal guidelines for medical and labor expertise, - determine the cause of temporary disability, - criteria for recovery and restoration of working capa	- skills of conducting medical and labor expertise in this disease
3	PC-9	Pneumonia (clinic, diagnosis, treatment, medical and labor expertise, medical examination)	- indications for the management and treatment of patients with assigned nosological forms in outpatient and day hospital settings - criteria for referral to hospital	- prescribe therapy to patients with these nosological forms in outpatient and day hospital settings - select patients for hospitalization	- skills in managing patients with acute respiratory infections. Flu. The child in an outpatient and day hospital
4	EPC-6	Acute and chronic bronchitis (clinic, diagnosis, treatment, medical and labor expertise, medical examination)	features of registration of a medical card of an outpatient patient;	Fill out the card of an outpatient patient with acute and chronic bronchitis	- skills in maintaining medical records in the clinic
4	EPC-9	Acute and chronic bronchitis (clinic, diagnosis, treatment, medical and labor expertise, medical examination)	modern methods of clinical, laboratory, and instrumental examination of patients with acute and chronic bronchitis	conduct a patient survey; collect complaints, medical history, life history, conduct a physical examination of the patient, - assess the severity of the patient's condition, indications for outpatient treatment	methods of General clinical examination of the patient - interpretation of the results of laboratory and instrumental diagnostic methods

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4	PC-6	Acute and chronic bronchitis (clinic, diagnosis, treatment, medical and labor expertise, medical examination)	- main pathological symptoms and syndromes of acute and chronic bronchitis - algorithm for making a diagnosis based on ICD,	identify the main pathological symptoms and syndromes of diseases in patients, - use an algorithm for making a diagnosis based on ICD,	algorithm for making a preliminary diagnosis with subsequent referral refer the patient to the appropriate specialist doctor using the detailed clinical diagnosis algorithm
4	PC-7	Acute and chronic bronchitis (clinic, diagnosis, treatment, medical and labor expertise, medical examination)	- issues of temporary disability, criteria for recovery and restoration of working capacity	- use legal guidelines for medical and labor expertise, determine the cause of temporary disability, criteria for recovery and restoration of working capacity	- skills of conducting medical and labor expertise in this disease
4	PC-9	Acute and chronic bronchitis (clinic, diagnosis, treatment, medical and labor expertise, medical examination)	principles of therapeutic treatment in accordance with the diagnosis, the algorithm for choosing drug and non-drug therapy.	assess the need to choose an outpatient or inpatient treatment regimen, prescribe and conduct adequate therapeutic treatment in accordance with the diagnosis, using the principles of evidence-based medicine	- the method of prescribing adequate therapy in accordance with the diagnosis
5	EPC-6	Bronchial asthma (clinic, diagnosis, treatment, medical and labor expertise, medical examination)	features of registration of a medical card of an outpatient patient;	Fill out the card of an outpatient patient with acute and chronic bronchitis	- skills in maintaining medical records in the clinic
5	EPC-9	Bronchial asthma (clinic, diagnosis, treatment, medical and labor expertise, medical examination)	modern methods of clinical, laboratory, and instrumental examination of patients with Bronchial asthma	conduct a patient survey; collect complaints, medical history, life history, conduct a physical examination of the patient, - assess the severity of the patient's condition, indications for outpatient treatment	methods of General clinical examination of the patient - interpretation of the results of laboratory and instrumental diagnostic methods
5	PC-6	Bronchial asthma (clinic, diagnosis, treatment, medical and labor expertise, medical examination)	- main pathological symptoms and syndromes of acute and chronic bronchitis - algorithm for making a diagnosis based on ICD,	identify the main pathological symptoms and syndromes of diseases in patients, - use an algorithm for making a diagnosis based on	algorithm for making a preliminary diagnosis with subsequent referral refer the patient to the appropriate specialist doctor

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				ICD,	using the detailed
					clinical diagnosis
5	PC-7	Dramahial anthony (alimia	- issues of		algorithm - skills of
3	PC-/	Bronchial asthma (clinic, diagnosis, treatment,	temporary disability,	- use legal guidelines for	conducting medical
		medical and labor	criteria for recovery	medical and labor	and labor expertise
		expertise, medical	and restoration of	expertise, determine	in this disease
		examination)	working capacity	the cause of	
			,	temporary disability,	
				criteria for recovery	
				and restoration of	
				working capacity	
5	PC-9	Bronchial asthma (clinic,	principles of	assess the need to	- the method of
		diagnosis, treatment,	therapeutic	choose an outpatient	prescribing adequate
		medical and labor	treatment in	or inpatient	therapy in
		expertise, medical	accordance with the	treatment regimen,	accordance with the
		examination)	diagnosis, the algorithm for	prescribe and conduct adequate	diagnosis
			choosing drug and	therapeutic	
			non-drug therapy.	treatment in	
			non drug merupy.	accordance with the	
				diagnosis, using the	
				principles of	
				evidence-based	
				medicine	
6	EPC-6	HYPERTENSIVE	features of	Fill out the card of	- skills in
		SYNDROME (with	registration of a	an outpatient patient	maintaining medical
		analysis of	medical card of an	with acute and	records in the clinic
		hypertension) Causes of possible increase in	outpatient patient;	chronic bronchitis	
		blood PRESSURE:			
		functional diseases, GB.			
		Symptomatic Symptomatic			
		hypertension			
		(vasorenal, endocrine,			
		cerebral). Possibilities of			
		examination in a			
		polyclinic to identify the			
		causes of arterial			
		hypertension, the role of modern non-invasive			
		methods of examination.			
		The differential			
		diagnosis of			
		neurocirculatory			
		dystonia, hypertension,			
		renovascular and renal			
		hypertension			
6	EPC - 9	HYPERTENSIVE	modern methods of	conduct a patient	methods of General
		SYNDROME (with	clinical, laboratory,	survey; collect	clinical examination
		analysis of hypertension) Causes of possible	and instrumental examination of	complaints, medical history, life history,	of the patient
		increase in blood	patients with	conduct a physical	- interpretation of the results of
		PRESSURE: functional	hypertension	examination of the	laboratory and
		diseases, GB.		patient,	instrumental
		Symptomatic		- assess the severity	diagnostic methods
		hypertension (vasorenal,		of the patient's	
		endocrine, cerebral).		condition,	
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		Possibilities of		indications for	
		examination in a		outpatient treatment	
		polyclinic to identify the			
		causes of arterial			
		hypertension, the role of			
		modern non-invasive			
		methods of examination.			
		The differential diagnosis			
		of neurocirculatory			
		dystonia, hypertension,			
		renovascular and renal			
	D.C. (hypertension		11 10 1	1 1.1 0
6	PC-6	HYPERTENSIVE	- main pathological	identify the main	algorithm for
		SYNDROME (with	symptoms and	pathological	making a
		analysis of hypertension)	syndromes of	symptoms and	preliminary
		Causes of possible	arterial	syndromes of	diagnosis with
		increase in blood	hypertension, NCD,	diseases in patients,	subsequent referral
		PRESSURE: functional	and symptomatic	- use an algorithm	refer the patient to
		diseases, GB.	arterial hypertension	for making a	the appropriate
		Symptomatic	-algorithm for -	diagnosis based on	specialist doctor
		hypertension (vasorenal,	making a diagnosis	ICD,	using the detailed
		endocrine, cerebral).	based on ICD,		clinical diagnosis
		Possibilities of	,		algorithm
		examination in a			
		polyclinic to identify the			
		causes of arterial			
		hypertension, the role of			
		modern non-invasive			
		methods of examination.			
		The differential diagnosis			
		of neurocirculatory			
		dystonia, hypertension,			
		renovascular and renal			
		hypertension			
6	PC-7	HYPERTENSIVE	- issues of	- use legal	- skills of
		SYNDROME (with	temporary disability,	guidelines for	conducting medical
		analysis of hypertension)	criteria for recovery	medical and labor	and labor expertise
		Causes of possible	and restoration of	expertise, determine	in this disease
		increase in blood	working capacity	the cause of	
		PRESSURE: functional		temporary disability,	
		diseases, GB.		criteria for recovery	
		Symptomatic		and restoration of	
		hypertension (vasorenal,		working capacity	
		endocrine, cerebral).		2 cap accept	
		Possibilities of			
		examination in a			
		polyclinic to identify the			
		causes of arterial			
		hypertension, the role of			
		modern non-invasive			
		methods of examination.			
		The differential diagnosis			
		of neurocirculatory			
		dystonia, hypertension,			
		renovascular and renal			
		hypertension			
6	PC-9	HYPERTENSIVE	principles of	assess the need to	- the method of
L		SYNDROME (with	therapeutic	choose an outpatient	prescribing adequate

Causes of possible increase in blood PRESSURE: functional diseases, GB. Symptomatic hypertension (vasorenal, endocrine, cerebral). Possibilities of examination in a polyclinic to identify the causes of arterial hypertension, the role of modern non-invasive methods of examination. The differential diagnosis of neurocirculatory dystonia, hypertension, renovascular and renal hypertension Causes of possible increase in blood pressure in urgent situations of PRESSURE: functional diseases, GB. Symptomatic choosing drug and non-drug therapy. accordance with the diagnosis of choosing drug and non-drug therapy. treatment regimen, prescribe and conduct adequate therapeutic treatment in accordance with the diagnosis, using the principles of evidence-based medicine accordance with the diagnosis of evidence-based medicine by principles of evidence-based medicine - the method of threatening disorders (acute blood loss, respiratory failure, cardiac arrest, coma, shock); emergency conditions (analysis of homestoneign	traatmant in	or innoticet	thorony
increase in blood PRESSURE: functional diseases, GB. Symptomatic hypertension (vasorenal, endocrine, cerebral). Possibilities of examination in a polyclinic to identify the causes of arterial hypertension, the role of modern non-invasive methods of examination. The differential diagnosis of neurocirculatory dystonia, hypertension, renovascular and renal hypertension Causes of possible increase in blood PRESSURE: functional diseases, GB. Symptomatic diagnosis, the algorithm for choosing drug and non-drug therapy. or evidence-based medicine prescribe and conduct adequate therapeutic treatment in accordance with the diagnosis, using the principles of evidence-based medicine or evidence-based medicine - the method of threatening disorders (acute blood loss, respiratory failure, cardiac arrest, coma, shock); - perform anti- conduct adequate therapeutic treatment in accordance with the diagnosis or evidence-based medicine - the method of performing the m medical diagnosti and therapeutic measures to provi first aid in emergency conditions (analysis of hypertension) Causes of possible	treatment in accordance with the	or inpatient treatment regimen,	therapy in accordance with the
diseases, GB. Symptomatic hypertension (vasorenal, endocrine, cerebral). Possibilities of examination in a polyclinic to identify the causes of arterial hypertension, the role of modern non-invasive methods of examination. The differential diagnosis of neurocirculatory dystonia, hypertension, renovascular and renal hypertension Causes of possible increase in blood PRESSURE: functional diseases, GB. Symptomatic diseases, GB. Choosing drug and non-drug therapy. choosing the principles of evidence-based medicine - the method of performing the medical diagnosts in urgent situations of major diseases of internal organs (respiratory arrest, circulatory arrest, circulatory arrest, circulatory arrest, circulatory arrest, circulatory arrest, condations (treatment in accordance with the diagnosts of evidence-based medicine - the method of examination treatment in accordance with the diagnosis of evidence-based medicine - the method of examination accordance with the diagnosis of evidence-based medicine - the method of examination accordance with the diagnosis of evidence-based medicine - the method of examination accordance with the diagnosis of evidence-based medicine - the method of examination accordance with the diagnosis of evidence-based medicine - the method of examination accord						
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hypertension (vasorenal, endocrine, cerebral). Possibilities of examination in a polyclinic to identify the causes of arterial hypertension, the role of modern non-invasive methods of examination. The differential diagnosis of neurocirculatory dystonia, hypertension, renovascular and renal hypertension SYNDROME (with analysis of hypertension) Causes of possible increase in blood prRESSURE: functional diseases, GB. Symptomatic Symptomatic Accordance with the diagnosis, using the principles of evidence-based medicine accordance with the diagnosis, using the principles of evidence-based medicine accordance with the diagnosis, using the principles of evidence-based medicine accordance with the diagnosis, using the principles of evidence-based medicine accordance with the diagnosis, using the principles of evidence-based medicine - the method of emergency measures disorders (acute blood loss, respiratory failure, eardiac arrest, coma, first aid in emergency conditions (·		l -	
endocrine, cerebral). Possibilities of examination in a polyclinic to identify the causes of arterial hypertension, the role of modern non-invasive methods of examination. The differential diagnosis of neurocirculatory dystonia, hypertension, renovascular and renal hypertension SYNDROME (with analysis of hypertension) Causes of possible increase in blood PRESSURE: functional diseases, GB. Symptomatic endocrine, cerebral). diagnosis, using the principles of evidence-based medicine - detect life- threatening emethod of performing the m disorders (acute blood loss, respiratory failure, cardiac arrest, coma, shock); perform anti-				non-drug therapy.		
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polyclinic to identify the causes of arterial hypertension, the role of modern non-invasive methods of examination. The differential diagnosis of neurocirculatory dystonia, hypertension, renovascular and renal hypertension 6 PC-11 HYPERTENSIVE SYNDROME (with analysis of hypertension) Causes of possible increase in blood PRESSURE: functional diseases, GB. Symptomatic medical diagnost medical diagnostic measures, cardiac arrest, coma, first aid in emergency conditions (
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dystonia, hypertension, renovascular and renal hypertension 6 PC-11 HYPERTENSIVE SYNDROME (with analysis of hypertension) Causes of possible increase in blood PRESSURE: functional diseases, GB. Symptomatic circulatory arrest, Symptomatic dystonia, hypertension, renovascular and renal hypertension, renovascular and renal and renal hypertension and renal hypertension and hypertension and hypertension and hypertension and threatening disorders (acute blood loss, respiratory failure, cardiac arrest, coma, first aid in emergency conditions (
renovascular and renal hypertension 6 PC-11 HYPERTENSIVE SYNDROME (with analysis of hypertension) Causes of possible increase in blood PRESSURE: functional diseases, GB. Symptomatic renovascular and renal hypertension - principles and method of threatening disorders (acute blood loss, respiratory failure, cardiac arrest, coma, first aid in emergency arrest, shock); emergency - the method of performing the medical diagnostic and therapeutic measures to proving the medical diagnostic and therapeutic measures to proving the medical diagnostic and therapeutic measures to proving the measures to proving the measures to proving the medical diagnostic and therapeutic measures to proving the measur			•			
hypertension 6 PC-11 HYPERTENSIVE - principles and SYNDROME (with analysis of hypertension) Causes of possible increase in blood PRESSURE: functional diseases, GB. Symptomatic - principles and threatening performing the medical diagnostic and therapeutic measures blood loss, respiratory failure, cardiac arrest, coma, first aid in emergency arrest, shock); emergency conditions (
6 PC-11 HYPERTENSIVE SYNDROME (with analysis of hypertension) Causes of possible increase in blood PRESSURE: functional diseases, GB. Symptomatic - principles and methods of methods of threatening disorders (acute blood loss, respiratory failure, cardiac arrest, coma, first aid in emergency arrest, conditions (
SYNDROME (with analysis of hypertension) Causes of possible in urgent situations increase in blood PRESSURE: functional diseases, GB. Symptomatic SYNDROME (with methods of emergency measures in urgent situations of major diseases of in urgent situations of major diseases of emergency measures to proving the medical diagnostic and therapeutic measures to proving the medical diagnostic and the medical diagnostic an	6 Po	PC-11	* 1	- principles and	- detect life-	- the method of
Causes of possible in urgent situations of major diseases of PRESSURE: functional diseases, GB. Symptomatic in urgent situations of major diseases of internal organs cardiac arrest, coma, first aid in emergency conditions (`			performing the main
increase in blood PRESSURE: functional diseases, GB. Symptomatic of major diseases of internal organs (respiratory arrest, shock); Circulatory arrest, perform anti- respiratory failure, cardiac arrest, coma, first aid in emergency conditions (`	medical diagnostic
PRESSURE: functional diseases, GB. (respiratory arrest, Symptomatic circulatory arrest, coma, cardiac arrest, coma, shock); emergency conditions (•		·	
diseases, GB. (respiratory arrest, shock); emergency conditions (
Symptomatic circulatory arrest, perform anti- conditions (_	1	
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						ASTHMA attacks,
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Possibilities of measures. angina attacks,						
examination in a provide medical care myocardial					1 -	
			1 1			infarction.allergic
causes of arterial urgent pathology of hypertension, the role of internal organs in an						reaction)
modern non-invasive emergency.						
methods of examination.					emergency.	
The differential diagnosis						
of neurocirculatory			of neurocirculatory			
dystonia, hypertension,						
renovascular and renal						
hypertension 7 EPC-6 Pain syndrome in the features of Fill out the card of - skills in	7 5	EDC. 6	• •	features of	Fill out the card of	- skills in
	' E	2r C-0	· ·			maintaining medical
			` `	. –		records in the clinic
coronary heart disease) outpatient patient; chronic bronchitis			,			
Variants of coronary			•			
heart disease according			heart disease according			
to the world health						
organization						
classification, most often			-			
found in the practice of a polyclinic therapist						
	7 F	EPC-9		modern methods of	conduct a natient	methods of General
	' '				_	clinical examination
analysis of coronary heart and instrumental complaints, medical of the patient			,			
disease) examination of history, life history, - interpretation of			disease)		history, life history,	- interpretation of
Variants of coronary patients with conduct a physical the results of	1 1		X7 ' , C	1 41 4 141		

		heart disease according to the world health organization classification, most often found in the practice of a polyclinic therapist	coronary heart disease	examination of the patient, - assess the severity of the patient's condition, indications for outpatient treatment	laboratory and instrumental diagnostic methods
7	PC-6	Pain syndrome in the left half of the chest (with analysis of coronary heart disease) Variants of coronary heart disease according to the world health organization classification, most often found in the practice of a polyclinic therapist	- main pathological symptoms and syndromes of coronary heart disease - algorithm for making a diagnosis based on ICD,	identify the main pathological symptoms and syndromes of diseases in patients, - use an algorithm for making a diagnosis based on ICD,	algorithm for making a preliminary diagnosis with subsequent referral refer the patient to the appropriate specialist doctor using the detailed clinical diagnosis algorithm
7	PC-7	Pain syndrome in the left half of the chest (with analysis of coronary heart disease) Variants of coronary heart disease according to the world health organization classification, most often found in the practice of a polyclinic therapist	- issues of temporary disability, criteria for recovery and restoration of working capacity	- use legal guidelines for medical and labor expertise, determine the cause of temporary disability, criteria for recovery and restoration of working capacity	- skills of conducting medical and labor expertise in this disease
7	PC-9	Pain syndrome in the left half of the chest (with analysis of coronary heart disease) Variants of coronary heart disease according to the world health organization classification, most often found in the practice of a polyclinic therapist	principles of therapeutic treatment in accordance with the diagnosis, the algorithm for choosing drug and non-drug therapy.	assess the need to choose an outpatient or inpatient treatment regimen, prescribe and conduct adequate therapeutic treatment in accordance with the diagnosis, using the principles of evidence-based medicine	- the method of prescribing adequate therapy in accordance with the diagnosis
7	PC-11	Pain syndrome in the left half of the chest (with analysis of coronary heart disease) Variants of coronary heart disease according to the world health organization classification, most often found in the practice of a polyclinic therapist	- principles and methods of carrying out emergency measures in the stroke	- provide medical assistance to patients with an angina attack in an emergency.	methods of performing basic medical diagnostic and therapeutic measures to provide first aid in emergency conditions (angina attack)
8	EPC-6	Early symptoms of myocardial infarction. Tactics of the General practitioner in case of suspected acute	features of registration of a medical card of an outpatient patient;	Fill out the card of an outpatient patient with acute and chronic bronchitis	- skills in maintaining medical records in the clinic

		myocardial infarction. Pre-hospital care. Management tactics for patients with myocardial infarction after discharge from the hospital.			
8	EPC-9	Early symptoms of myocardial infarction. Tactics of the General practitioner in case of suspected acute myocardial infarction. Pre-hospital care. Management tactics for patients with myocardial infarction after discharge from the hospital.	modern methods of clinical, laboratory, and instrumental examination of patients with acute myocardial infarction	conduct a patient survey; collect complaints, medical history, life history, conduct a physical examination of the patient, - assess the severity of the patient's condition, indications for outpatient treatment	methods of General clinical examination of the patient - interpretation of the results of laboratory and instrumental diagnostic methods
8	PC-6	Early symptoms of myocardial infarction. Tactics of the General practitioner in case of suspected acute myocardial infarction. Pre-hospital care. Management tactics for patients with myocardial infarction after discharge from the hospital.	- main pathological symptoms and syndromes of acute myocardial infarction - algorithm for making a diagnosis based on ICD,	identify the main pathological symptoms and syndromes of diseases in patients, - use an algorithm for making a diagnosis based on ICD,	algorithm for making a preliminary diagnosis with subsequent referral refer the patient to the appropriate specialist doctor using the detailed clinical diagnosis algorithm
8	PC-7	Early symptoms of myocardial infarction. Tactics of the General practitioner in case of suspected acute myocardial infarction. Pre-hospital care. Management tactics for patients with myocardial infarction after discharge from the hospital.	- issues of temporary disability, criteria for recovery and restoration of working capacity	- use legal guidelines for medical and labor expertise, determine the cause of temporary disability, criteria for recovery and restoration of working capacity	- skills of conducting medical and labor expertise in this disease
8	PC-9	Early symptoms of myocardial infarction. Tactics of the General practitioner in case of suspected acute myocardial infarction. Pre-hospital care. Management tactics for patients with myocardial infarction after discharge from the hospital.	principles of therapeutic treatment in accordance with the diagnosis, the algorithm for choosing drug and non-drug therapy.	assess the need to choose an outpatient or inpatient treatment regimen, prescribe and conduct adequate therapeutic treatment in accordance with the diagnosis, using the principles of evidence-based medicine	- the method of prescribing adequate therapy in accordance with the diagnosis
8	PC-11	Early symptoms of myocardial infarction. Tactics of the General	- principles and methods of carrying out emergency	- provide medical assistance to patients with an	methods of performing basic medical diagnostic

9	EPC-6	practitioner in case of suspected acute myocardial infarction. Pre-hospital care. Management tactics for patients with myocardial infarction after discharge from the hospital. Myocarditises. Diagnostics, treatment,	measures in case of suspicion on the acute myocardial infarction features of registration of a	acute myocardial infarction Fill out the card of an outpatient patient	and therapeutic measures to provide first aid in emergency conditions (acute myocardial infarction) - skills in maintaining medical
		medical and labor expertise in a polyclinic. Medical examination, secondary prevention	medical card of an outpatient patient;	with acute and chronic bronchitis	records in the clinic
9	EPC-9	Myocarditises. Diagnostics, treatment, medical and labor expertise in a polyclinic. Medical examination, secondary prevention	modern methods of clinical, laboratory, and instrumental examination of patients with Myocarditises	conduct a patient survey; collect complaints, medical history, life history, conduct a physical examination of the patient, - assess the severity of the patient's condition, indications for outpatient treatment	methods of General clinical examination of the patient - interpretation of the results of laboratory and instrumental diagnostic methods
9	PC-2	Myocarditises. Diagnostics, treatment, medical and labor expertise in a polyclinic. Medical examination, secondary prevention	- principles of medical examination of patients with myocarditis	-conduct medical examination of patients with this pathology - issue documentation on medical examination	- the method of dispensary observation of patients with this disease
9	PC-6	Myocarditises. Diagnostics, treatment, medical and labor expertise in a polyclinic. Medical examination, secondary prevention	- main pathological symptoms and syndromes of Myocarditises - algorithm for making a diagnosis based on ICD,	identify the main pathological symptoms and syndromes of diseases in patients, - use an algorithm for making a diagnosis based on ICD,	algorithm for making a preliminary diagnosis with subsequent referral refer the patient to the appropriate specialist doctor using the detailed clinical diagnosis algorithm
9	PC-7	Myocarditises. Diagnostics, treatment, medical and labor expertise in a polyclinic. Medical examination, secondary prevention	- issues of temporary disability, criteria for recovery and restoration of working capacity	- use legal guidelines for medical and labor expertise, determine the cause of temporary disability, criteria for recovery and restoration of working capacity	- skills of conducting medical and labor expertise in this disease
9	PC-9	Myocarditises. Diagnostics, treatment, medical and labor expertise in a polyclinic. Medical examination,	principles of therapeutic treatment in accordance with the diagnosis, the	assess the need to choose an outpatient or inpatient treatment regimen, prescribe and	- the method of prescribing adequate therapy in accordance with the diagnosis

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10	EPC-6	secondary prevention	algorithm for choosing drug and non-drug therapy.	conduct adequate therapeutic treatment in accordance with the diagnosis, using the principles of evidence-based medicine Fill out the card of	- skills in
10	EPC-0	Cardiomyopathies. Tactics of the General practitioner of the polyclinic when establishing a diagnosis	registration of a medical card of an outpatient patient;	an outpatient patient with acute and chronic bronchitis	maintaining medical records in the clinic
10	EPC-9	Cardiomyopathies. Tactics of the General practitioner of the polyclinic when establishing a diagnosis	modern methods of clinical, laboratory, and instrumental examination of patients with Cardiomyopathies.	conduct a patient survey; collect complaints, medical history, life history, conduct a physical examination of the patient, - assess the severity of the patient's condition, indications for outpatient treatment	methods of General clinical examination of the patient - interpretation of the results of laboratory and instrumental diagnostic methods
10	PC-6	Cardiomyopathies. Tactics of the General practitioner of the polyclinic when establishing a diagnosis	- main pathological symptoms and syndromes of Cardiomyopathies. - algorithm for making a diagnosis based on ICD,	identify the main pathological symptoms and syndromes of diseases in patients, - use an algorithm for making a diagnosis based on ICD,	algorithm for making a preliminary diagnosis with subsequent referral refer the patient to the appropriate specialist doctor using the detailed clinical diagnosis algorithm
10	PC-7	Cardiomyopathies. Tactics of the General practitioner of the polyclinic when establishing a diagnosis	- issues of temporary disability, criteria for recovery and restoration of working capacity	- use legal guidelines for medical and labor expertise, determine the cause of temporary disability, criteria for recovery and restoration of working capacity	- skills of conducting medical and labor expertise in this disease
10	PC-9	Cardiomyopathies. Tactics of the General practitioner of the polyclinic when establishing a diagnosis	principles of therapeutic treatment in accordance with the diagnosis, the algorithm for choosing drug and non-drug therapy.	assess the need to choose an outpatient or inpatient treatment regimen, prescribe and conduct adequate therapeutic treatment in accordance with the diagnosis, using the principles of evidence-based	- the method of prescribing adequate therapy in accordance with the diagnosis

				medicine	
11	EPC-6	Congestive heart failure Treatment in a polyclinic. Indications for hospitalization	features of registration of a medical card of an outpatient patient;	Fill out the card of an outpatient patient with acute and chronic bronchitis	- skills in maintaining medical records in the clinic
11	EPC-9	Congestive heart failure Treatment in a polyclinic. Indications for hospitalization	modern methods of clinical, laboratory, and instrumental examination of patients with Congestive heart failure.	conduct a patient survey; collect complaints, medical history, life history, conduct a physical examination of the patient, - assess the severity of the patient's condition, indications for outpatient treatment	methods of General clinical examination of the patient - interpretation of the results of laboratory and instrumental diagnostic methods
11	PC-6	Congestive heart failure Treatment in a polyclinic. Indications for hospitalization	- main pathological symptoms and syndromes of Congestive heart failure algorithm for making a diagnosis based on ICD,	identify the main pathological symptoms and syndromes of diseases in patients, - use an algorithm for making a diagnosis based on ICD,	algorithm for making a preliminary diagnosis with subsequent referral refer the patient to the appropriate specialist doctor using the detailed clinical diagnosis algorithm
11	PC-7	Congestive heart failure Treatment in a polyclinic. Indications for hospitalization	- issues of temporary disability, criteria for recovery and restoration of working capacity	- use legal guidelines for medical and labor expertise, determine the cause of temporary disability, criteria for recovery and restoration of working capacity	- skills of conducting medical and labor expertise in this disease
11	PC-9	Congestive heart failure Treatment in a polyclinic. Indications for hospitalization	principles of therapeutic treatment in accordance with the diagnosis, the algorithm for choosing drug and non-drug therapy.	assess the need to choose an outpatient or inpatient treatment regimen, prescribe and conduct adequate therapeutic treatment in accordance with the diagnosis, using the principles of evidence-based medicine	- the method of prescribing adequate therapy in accordance with the diagnosis
12	EPC-6	Abdominal pain syndrome. Dyspeptic syndrome	features of registration of a medical card of an outpatient patient;	Fill out the card of an outpatient patient with acute and chronic bronchitis	- skills in maintaining medical records in the clinic
12	EPC-9	Abdominal pain syndrome. Dyspeptic syndrome	modern methods of clinical, laboratory, and instrumental	conduct a patient survey; collect complaints, medical	methods of General clinical examination of the patient

			examination of patients with Abdominal pain syndrome.	history, life history, conduct a physical examination of the patient, - assess the severity of the patient's condition, indications for outpatient treatment	- interpretation of the results of laboratory and instrumental diagnostic methods
12	PC-6	Abdominal pain syndrome. Dyspeptic syndrome	- main pathological symptoms and syndromes of Abdominal pain syndrome. - algorithm for making a diagnosis based on ICD,	identify the main pathological symptoms and syndromes of diseases in patients, - use an algorithm for making a diagnosis based on ICD,	algorithm for making a preliminary diagnosis with subsequent referral refer the patient to the appropriate specialist doctor using the detailed clinical diagnosis algorithm
12	PC-7	Abdominal pain syndrome. Dyspeptic syndrome	- issues of temporary disability, criteria for recovery and restoration of working capacity	- use legal guidelines for medical and labor expertise, determine the cause of temporary disability, criteria for recovery and restoration of working capacity	- skills of conducting medical and labor expertise in this disease
13	EPC-6	Gastroesophageal reflux disease. Chronic gastritis peptic Ulcer of the stomach and duodenum-diagnosis, treatment, medical and labor expertise, medical examination in a polyclinic	features of registration of a medical card of an outpatient patient;	Fill out the card of an outpatient patient with acute and chronic bronchitis	- skills in maintaining medical records in the clinic
13	EPC-9	Gastroesophageal reflux disease. Chronic gastritis peptic Ulcer of the stomach and duodenumdiagnosis, treatment, medical and labor expertise, medical examination in a polyclinic	modern methods of clinical, laboratory, and instrumental examination of patients with Gastroesophageal reflux disease	conduct a patient survey; collect complaints, medical history, life history, conduct a physical examination of the patient, - assess the severity of the patient's condition, indications for outpatient treatment	methods of General clinical examination of the patient - interpretation of the results of laboratory and instrumental diagnostic methods
13	PC-2	Gastroesophageal reflux disease. Chronic gastritis peptic Ulcer of the stomach and duodenum- diagnosis, treatment, medical and labor	- principles of medical examination of patients with gastroesophageal disease, chronic gastritis, peptic ulcer	- conduct medical examination of patients with this pathology - issue documentation on	- the method of dispensary observation of patients with this disease

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		expertise, medical examination in a	disease	medical examination	
		polyclinic			
13	PC-6	Gastroesophageal reflux disease. Chronic gastritis peptic Ulcer of the stomach and duodenumdiagnosis, treatment, medical and labor expertise, medical examination in a polyclinic	- main pathological symptoms and syndromes of gastroesophageal disease, chronic gastritis, peptic ulcer disease - algorithm for making a diagnosis based on ICD,	identify the main pathological symptoms and syndromes of diseases in patients, - use an algorithm for making a diagnosis based on ICD,	algorithm for making a preliminary diagnosis with subsequent referral refer the patient to the appropriate specialist doctor using the detailed clinical diagnosis algorithm
13	PC-7	Gastroesophageal reflux disease. Chronic gastritis peptic Ulcer of the stomach and duodenumdiagnosis, treatment, medical and labor expertise, medical examination in a polyclinic	- issues of temporary disability, criteria for recovery and restoration of working capacity	- use legal guidelines for medical and labor expertise, determine the cause of temporary disability, criteria for recovery and restoration of working capacity	- skills of conducting medical and labor expertise in this disease
13	PC-9	Gastroesophageal reflux disease. Chronic gastritis peptic Ulcer of the stomach and duodenumdiagnosis, treatment, medical and labor expertise, medical examination in a polyclinic	principles of therapeutic treatment in accordance with the diagnosis, the algorithm for choosing drug and non-drug therapy.	assess the need to choose an outpatient or inpatient treatment regimen, prescribe and conduct adequate therapeutic treatment in accordance with the diagnosis, using the principles of evidence-based medicine	- the method of prescribing adequate therapy in accordance with the diagnosis
14	EPC-6	Biliary dyskinesia, chronic non-calculous cholecystitis diagnosis, treatment, medical and labor expertise, medical examination in a polyclinic	features of registration of a medical card of an outpatient patient;	Fill out the card of an outpatient patient with acute and chronic bronchitis	- skills in maintaining medical records in the clinic
14	EPC-9	Biliary dyskinesia, chronic non-calculous cholecystitis diagnosis, treatment, medical and labor expertise, medical examination in a polyclinic	modern methods of clinical, laboratory, and instrumental examination of patients with chronic non-calculous cholecystitis, Biliary dyskinesia	conduct a patient survey; collect complaints, medical history, life history, conduct a physical examination of the patient, - assess the severity of the patient's condition, indications for outpatient treatment	methods of General clinical examination of the patient - interpretation of the results of laboratory and instrumental diagnostic methods
14	PC-2	Biliary dyskinesia, chronic non-calculous	- principles of medical examination	- conduct medical examination of	- the method of dispensary

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		cholecystitis diagnosis,	of patients with	patients with this	observation of
		treatment, medical and	chronic non-	pathology	patients with this
		labor expertise, medical	calculous	- issue	disease
		examination in a polyclinic	cholecystitis, Biliary dyskinesia	documentation on medical examination	
14	PC-6	Biliary dyskinesia,	- main pathological	identify the main	algorithm for
* '	" " "	chronic non-calculous	symptoms and	pathological	making a
		cholecystitis diagnosis,	syndromes of	symptoms and	preliminary
		treatment, medical and	chronic non-	syndromes of	diagnosis with
		labor expertise, medical	calculous	diseases in patients,	subsequent referral
		examination in a	cholecystitis, Biliary	- use an algorithm	refer the patient to
		polyclinic	dyskinesia	for making a	the appropriate
			algorithm for	diagnosis based on	specialist doctor
			making a diagnosis	ICD,	using the detailed
			based on ICD,		clinical diagnosis
					algorithm
14	PC-7	Biliary dyskinesia,	- issues of	- use legal	- skills of
		chronic non-calculous	temporary disability,	guidelines for	conducting medical
		cholecystitis diagnosis,	criteria for recovery	medical and labor	and labor expertise
		treatment, medical and	and restoration of	expertise, determine	in this disease
		labor expertise, medical examination in a	working capacity	the cause of temporary disability,	
		polyclinic		criteria for recovery	
		poryenine		and restoration of	
				working capacity	
14	PC-9	Biliary dyskinesia,	principles of	assess the need to	- the method of
		chronic non-calculous	therapeutic	choose an outpatient	prescribing adequate
		cholecystitis diagnosis,	treatment in	or inpatient	therapy in
		treatment, medical and	accordance with the	treatment regimen,	accordance with the
		labor expertise, medical	diagnosis, the	prescribe and	diagnosis
		examination in a	algorithm for	conduct adequate	
		polyclinic	choosing drug and	therapeutic	
			non-drug therapy.	treatment in accordance with the	
				diagnosis, using the	
				principles of	
				evidence-based	
				medicine	
15	EPC-6	Chronic pancreatitis,	features of	Fill out the card of	- skills in
		diagnosis, treatment,	registration of a	an outpatient patient	maintaining medical
		medical and labor	medical card of an	with acute and	records in the clinic
		expertise, medical	outpatient patient;	chronic bronchitis	
		examination in a			
1.5	EDC	polyclinic			
15	EPC-9	Chronic pancreatitis, diagnosis, treatment,	modern methods of clinical, laboratory,	conduct a patient survey; collect	methods of General clinical examination
		medical and labor	and instrumental	complaints, medical	of the patient
		expertise, medical	examination of	history, life history,	- interpretation of
		examination in a	patients with	conduct a physical	the results of
		polyclinic	Chronic pancreatitis	examination of the	laboratory and
				patient,	instrumental
				- assess the severity	diagnostic methods
				of the patient's	
				condition,	
				indications for	
1.7	DC 2	<u> </u>		outpatient treatment	.1 .1 .0
15	PC-2	Chronic pancreatitis,	- principles of	- conduct medical	- the method of
	1	diagnosis, treatment,	medical examination	examination of	dispensary

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		medical and labor expertise, medical examination in a polyclinic	of patients with Chronic pancreatitis	patients with this pathology - issue documentation on medical examination	observation of patients with this disease
15	PC-6	Chronic pancreatitis, diagnosis, treatment, medical and labor expertise, medical examination in a polyclinic	- main pathological symptoms and syndromes of Chronic pancreatitis -algorithm for making a diagnosis based on ICD,	identify the main pathological symptoms and syndromes of diseases in patients, - use an algorithm for making a diagnosis based on ICD,	algorithm for making a preliminary diagnosis with subsequent referral refer the patient to the appropriate specialist doctor using the detailed clinical diagnosis algorithm
15	PC-7	Chronic pancreatitis, diagnosis, treatment, medical and labor expertise, medical examination in a polyclinic	- issues of temporary disability, criteria for recovery and restoration of working capacity	- use legal guidelines for medical and labor expertise, determine the cause of temporary disability, criteria for recovery and restoration of working capacity	- skills of conducting medical and labor expertise in this disease
15	PC-9	Chronic pancreatitis, diagnosis, treatment, medical and labor expertise, medical examination in a polyclinic	principles of therapeutic treatment in accordance with the diagnosis, the algorithm for choosing drug and non-drug therapy.	assess the need to choose an outpatient or inpatient treatment regimen, prescribe and conduct adequate therapeutic treatment in accordance with the diagnosis, using the principles of evidence-based medicine	- the method of prescribing adequate therapy in accordance with the diagnosis
16	EPC-6	Irritable bowel syndrome-diagnosis, treatment, medical and labor expertise, medical examination in a polyclinic	features of registration of a medical card of an outpatient patient;	Fill out the card of an outpatient patient with acute and chronic bronchitis	- skills in maintaining medical records in the clinic
16	EPC-9	Irritable bowel syndrome- diagnosis, treatment, medical and labor expertise, medical examination in a polyclinic	modern methods of clinical, laboratory, and instrumental examination of patients with Irritable bowel syndrome	conduct a patient survey; collect complaints, medical history, life history, conduct a physical examination of the patient, - assess the severity of the patient's condition, indications for outpatient treatment	methods of General clinical examination of the patient - interpretation of the results of laboratory and instrumental diagnostic methods
16	PC-2	Irritable bowel syndrome- diagnosis, treatment,	- principles of medical examination	- conduct medical examination of	- the method of dispensary

		medical and labor expertise, medical examination in a polyclinic	of patients with Irritable bowel syndrome	patients with this pathology - issue documentation on medical examination	observation of patients with this disease
16	PC-6	Irritable bowel syndrome- diagnosis, treatment, medical and labor expertise, medical examination in a polyclinic	- main pathological symptoms and syndromes of Irritable bowel syndrome - algorithm for making a diagnosis based on ICD,	identify the main pathological symptoms and syndromes of diseases in patients, - use an algorithm for making a diagnosis based on ICD,	algorithm for making a preliminary diagnosis with subsequent referral refer the patient to the appropriate specialist doctor using the detailed clinical diagnosis algorithm
16	PC-7	Irritable bowel syndrome- diagnosis, treatment, medical and labor expertise, medical examination in a polyclinic	- issues of temporary disability, criteria for recovery and restoration of working capacity	- use legal guidelines for medical and labor expertise, determine the cause of temporary disability, criteria for recovery and restoration of working capacity	- skills of conducting medical and labor expertise in this disease
16	PC-9	Irritable bowel syndrome- diagnosis, treatment, medical and labor expertise, medical examination in a polyclinic	principles of therapeutic treatment in accordance with the diagnosis, the algorithm for choosing drug and non-drug therapy.	assess the need to choose an outpatient or inpatient treatment regimen, prescribe and conduct adequate therapeutic treatment in accordance with the diagnosis, using the principles of evidence-based medicine	- the method of prescribing adequate therapy in accordance with the diagnosis
17	EPC-6	Non-specific ulcerative colitis and Crohn's disease in the practice of a polyclinic therapist	features of registration of a medical card of an outpatient patient;	Fill out the card of an outpatient patient with acute and chronic bronchitis	- skills in maintaining medical records in the clinic
17	EPC-9	Non-specific ulcerative colitis and Crohn's disease in the practice of a polyclinic therapist	modern methods of clinical, laboratory, and instrumental examination of patients with Nonspecific ulcerative colitis and Crohn's disease	conduct a patient survey; collect complaints, medical history, life history, conduct a physical examination of the patient, - assess the severity of the patient's condition, indications for outpatient treatment	methods of General clinical examination of the patient - interpretation of the results of laboratory and instrumental diagnostic methods
17	PC-2	Non-specific ulcerative colitis and Crohn's disease in the practice of	- principles of medical examination of patients with	- conduct medical examination of patients with this	- the method of dispensary observation of

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		a polyclinic therapist	Non-specific	pathology	patients with this
			ulcerative colitis and	- issue	disease
			Crohn's disease	documentation on	
				medical examination	
17	PC-6	Non-specific ulcerative	- main pathological	identify the main	algorithm for
		colitis and Crohn's	symptoms and	pathological	making a
		disease in the practice of	syndromes of Non-	symptoms and	preliminary
		a polyclinic therapist	specific ulcerative	syndromes of	diagnosis with
			colitis and Crohn's	diseases in patients,	subsequent referral
			disease	- use an algorithm	refer the patient to
			-algorithm for	for making a	the appropriate
			making a diagnosis	diagnosis based on	specialist doctor
			based on ICD,	ICD,	using the detailed
					clinical diagnosis
17	PC-7	Non anasifia ulas matica	- issues of		algorithm - skills of
1 /	PC-/	Non-specific ulcerative colitis and Crohn's		- use legal	conducting medical
		disease in the practice of	temporary disability, criteria for recovery	guidelines for medical and labor	and labor expertise
		a polyclinic therapist	and restoration of	expertise, determine	in this disease
		a poryennie merapist	working capacity	the cause of	in this disease
			working capacity	temporary disability,	
				criteria for recovery	
				and restoration of	
				working capacity	
17	PC-9	Non-specific ulcerative	principles of	assess the need to	- the method of
		colitis and Crohn's	therapeutic	choose an outpatient	prescribing adequate
		disease in the practice of	treatment in	or inpatient	therapy in
		a polyclinic therapist	accordance with the	treatment regimen,	accordance with the
			diagnosis, the	prescribe and	diagnosis
			algorithm for	conduct adequate	
			choosing drug and	therapeutic	
			non-drug therapy.	treatment in	
				accordance with the	
				diagnosis, using the	
				principles of	
				evidence-based	
				medicine	
18	EPC-6	Urinary syndrome in	features of	Fill out the card of	- skills in
		the practice of a	registration of a	an outpatient patient	maintaining medical
		polyclinic therapist	medical card of an	with acute and	records in the clinic
10	EDC	TT 1 1 1 1	outpatient patient;	chronic bronchitis	4.1.00
18	EPC-9	Urinary syndrome in the	modern methods of	conduct a patient	methods of General
		practice of a polyclinic	clinical, laboratory, and instrumental	survey; collect	clinical examination
		therapist	examination of	complaints, medical history, life history,	of the patient
			patients with	conduct a physical	- interpretation of the results of
			Urinary syndrome	examination of the	laboratory and
			ormary syndrome	patient,	instrumental
				- assess the severity	diagnostic methods
				of the patient's	
				condition,	
				indications for	
				outpatient treatment	
18	PC-6	Urinary syndrome in the	- main pathological	identify the main	algorithm for
		practice of a polyclinic	symptoms and	pathological	making a
		therapist	syndromes of	symptoms and	preliminary
		_	Urinary syndrome	syndromes of	diagnosis with
		į.	-algorithm for	diseases in patients,	subsequent referral

			T		
			making a diagnosis based on ICD,	- use an algorithm for making a diagnosis based on ICD,	refer the patient to the appropriate specialist doctor using the detailed clinical diagnosis algorithm
18	PC-7	Urinary syndrome in the practice of a polyclinic therapist	- issues of temporary disability, criteria for recovery and restoration of working capacity	- use legal guidelines for medical and labor expertise, determine the cause of temporary disability, criteria for recovery and restoration of working capacity	- skills of conducting medical and labor expertise in this disease
18	PC-9	Urinary syndrome in the practice of a polyclinic therapist	principles of therapeutic treatment in accordance with the diagnosis, the algorithm for choosing drug and non-drug therapy.	assess the need to choose an outpatient or inpatient treatment regimen, prescribe and conduct adequate therapeutic treatment in accordance with the diagnosis, using the principles of evidence-based medicine	- the method of prescribing adequate therapy in accordance with the diagnosis
19	EPC-6	Management of patients with urinary tract infection in outpatient settings	features of registration of a medical card of an outpatient patient;	Fill out the card of an outpatient patient with acute and chronic bronchitis	- skills in maintaining medical records in the clinic
19	EPC-9	Management of patients with urinary tract infection in outpatient settings	modern methods of clinical, laboratory, and instrumental examination of patients with urinary tract infection	conduct a patient survey; collect complaints, medical history, life history, conduct a physical examination of the patient, - assess the severity of the patient's condition, indications for outpatient treatment	methods of General clinical examination of the patient - interpretation of the results of laboratory and instrumental diagnostic methods
19	PC-2	Management of patients with urinary tract infection in outpatient settings	- principles of medical examination of patients with urinary tract infection	- conduct medical examination of patients with this pathology - issue documentation on medical examination	- the method of dispensary observation of patients with this disease
19	PC-6	Management of patients with urinary tract infection in outpatient settings	- main pathological symptoms and syndromes of urinary tract infection -algorithm for	identify the main pathological symptoms and syndromes of diseases in patients, - use an algorithm	algorithm for making a preliminary diagnosis with subsequent referral refer the patient to

19	PC-7	Management of patients	making a diagnosis based on ICD,	for making a diagnosis based on ICD,	the appropriate specialist doctor using the detailed clinical diagnosis algorithm - skills of
		with urinary tract infection in outpatient settings	temporary disability, criteria for recovery and restoration of working capacity	guidelines for medical and labor expertise, determine the cause of temporary disability, criteria for recovery and restoration of working capacity	conducting medical and labor expertise in this disease
19	PC-9	Management of patients with urinary tract infection in outpatient settings	principles of therapeutic treatment in accordance with the diagnosis, the algorithm for choosing drug and non-drug therapy.	assess the need to choose an outpatient or inpatient treatment regimen, prescribe and conduct adequate therapeutic treatment in accordance with the diagnosis, using the principles of evidence-based medicine	- the method of prescribing adequate therapy in accordance with the diagnosis
20	EPC-6	Chronic renal failure- tactics of a General practitioner at the outpatient stage	features of registration of a medical card of an outpatient patient;	Fill out the card of an outpatient patient with acute and chronic bronchitis	- skills in maintaining medical records in the clinic
20	EPC-9	Chronic renal failure- tactics of a General practitioner at the outpatient stage	modern methods of clinical, laboratory, and instrumental examination of patients with Chronic renal failure	conduct a patient survey; collect complaints, medical history, life history, conduct a physical examination of the patient, - assess the severity of the patient's condition, indications for outpatient treatment	methods of General clinical examination of the patient - interpretation of the results of laboratory and instrumental diagnostic methods
20	PC-2	Chronic renal failure- tactics of a General practitioner at the outpatient stage	- principles of medical examination of patients with Chronic renal failure	- conduct medical examination of patients with this pathology - issue documentation on medical examination	- the method of dispensary observation of patients with this disease
20	PC-6	Chronic renal failure- tactics of a General practitioner at the outpatient stage	- main pathological symptoms and syndromes of Chronic renal failure -algorithm for making a diagnosis based on ICD,	identify the main pathological symptoms and syndromes of diseases in patients, - use an algorithm for making a diagnosis based on	algorithm for making a preliminary diagnosis with subsequent referral refer the patient to the appropriate specialist doctor

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				ICD,	using the detailed
					clinical diagnosis
20	PC-7	Chronic renal failure-	- issues of	11	algorithm - skills of
20	PC-7	tactics of a General	temporary disability,	- use legal guidelines for	conducting medical
		practitioner at the	criteria for recovery	medical and labor	and labor expertise
		outpatient stage	and restoration of	expertise, determine	in this disease
			working capacity	the cause of	
				temporary disability,	
				criteria for recovery	
				and restoration of	
				working capacity	
20	PC-9	Chronic renal failure-	principles of	assess the need to	- the method of
		tactics of a General practitioner at the	therapeutic treatment in	choose an outpatient	prescribing adequate therapy in
		outpatient stage	accordance with the	or inpatient treatment regimen,	accordance with the
		outpatient stage	diagnosis, the	prescribe and	diagnosis
			algorithm for	conduct adequate	anagnosis
			choosing drug and	therapeutic	
			non-drug therapy.	treatment in	
				accordance with the	
				diagnosis, using the	
				principles of	
				evidence-based medicine	
21	EPC-6	Anemic syndrome in the	features of	Fill out the card of	- skills in
		practice of a polyclinic	registration of a	an outpatient patient	maintaining medical
		therapist (with analysis	medical card of an	with acute and	records in the clinic
		of iron deficiency	outpatient patient;	chronic bronchitis	
		anemia, B12 deficiency			
		anemia, aplastic,			
		hemolytic anemia, anemia in chronic			
		diseases)			
		uiseases)			
21	EPC-9	Anemic syndrome in the	modern methods of	conduct a patient	methods of General
		practice of a polyclinic	clinical, laboratory,	survey; collect	clinical examination
		therapist (with analysis	and instrumental	complaints, medical	of the patient
		of iron deficiency anemia,	examination of	history, life history,	- interpretation of
		B12 deficiency anemia,	patients with anemias	conduct a physical examination of the	the results of
		aplastic, hemolytic anemia, anemia in	aneimas	patient,	laboratory and instrumental
		chronic diseases)		- assess the severity	diagnostic methods
				of the patient's	
				condition,	
				indications for	
	DC 2	A 1 1 1 1		outpatient treatment	4 4 1 2
21	PC-2	Anemic syndrome in the	- principles of medical examination	- conduct medical examination of	- the method of
		practice of a polyclinic therapist (with analysis	of patients with	patients with this	dispensary observation of
		of iron deficiency anemia,	anemias	pathology	patients with this
		B12 deficiency anemia,	WILLIAMS	- issue	disease
		aplastic, hemolytic		documentation on	
		anemia, anemia in		medical examination	
		chronic diseases)			
21	PC-6	Anemic syndrome in the	- main pathological	identify the main	algorithm for
		practice of a polyclinic	symptoms and	pathological	making a
		therapist (with analysis	syndromes of	symptoms and	preliminary

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		of iron deficiency anemia, B12 deficiency anemia, aplastic, hemolytic anemia, anemia in chronic diseases)	anemias -algorithm for making a diagnosis based on ICD,	syndromes of diseases in patients, - use an algorithm for making a diagnosis based on ICD,	diagnosis with subsequent referral refer the patient to the appropriate specialist doctor using the detailed clinical diagnosis algorithm
21	PC-7	Anemic syndrome in the practice of a polyclinic therapist (with analysis of iron deficiency anemia, B12 deficiency anemia, aplastic, hemolytic anemia, anemia in chronic diseases)	- issues of temporary disability, criteria for recovery and restoration of working capacity	- use legal guidelines for medical and labor expertise, determine the cause of temporary disability, criteria for recovery and restoration of working capacity	- skills of conducting medical and labor expertise in this disease
21	PC-9	Anemic syndrome in the practice of a polyclinic therapist (with analysis of iron deficiency anemia, B12 deficiency anemia, aplastic, hemolytic anemia, anemia in chronic diseases)	principles of therapeutic treatment in accordance with the diagnosis, the algorithm for choosing drug and non-drug therapy.	assess the need to choose an outpatient or inpatient treatment regimen, prescribe and conduct adequate therapeutic treatment in accordance with the diagnosis, using the principles of evidence-based medicine	- the method of prescribing adequate therapy in accordance with the diagnosis
22	EPC-6	Joint syndrome in the practice of a polyclinic therapist (with analysis of rheumatoid arthritis, reactive arthritis, seronegative arthritis, gout, osteoarthritis)	features of registration of a medical card of an outpatient patient;	Fill out the card of an outpatient patient with acute and chronic bronchitis	- skills in maintaining medical records in the clinic
22	EPC-9	Joint syndrome in the practice of a polyclinic therapist (with analysis of rheumatoid arthritis, reactive arthritis, seronegative arthritis, gout, osteoarthritis)	modern methods of clinical, laboratory, and instrumental examination of patients with Joint syndrome	conduct a patient survey; collect complaints, medical history, life history, conduct a physical examination of the patient, - assess the severity of the patient's condition, indications for outpatient treatment	methods of General clinical examination of the patient - interpretation of the results of laboratory and instrumental diagnostic methods
22	PC-2	Joint syndrome in the practice of a polyclinic therapist (with analysis of rheumatoid arthritis, reactive arthritis, seronegative arthritis, gout, osteoarthritis)	- principles of medical examination of patients with Joint syndrome	- conduct medical examination of patients with this pathology - issue documentation on medical examination	- the method of dispensary observation of patients with this disease
22	PC-6	Joint syndrome in the practice of a polyclinic	- main pathological symptoms and	identify the main pathological	algorithm for making a

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		therapist (with analysis of rheumatoid arthritis, reactive arthritis, seronegative arthritis, gout, osteoarthritis)	syndromes of Joint syndrome -algorithm for making a diagnosis based on ICD,	symptoms and syndromes of diseases in patients, - use an algorithm for making a diagnosis based on ICD,	preliminary diagnosis with subsequent referral refer the patient to the appropriate specialist doctor using the detailed clinical diagnosis algorithm
22	PC-7	Joint syndrome in the practice of a polyclinic therapist (with analysis of rheumatoid arthritis, reactive arthritis, seronegative arthritis, gout, osteoarthritis)	- issues of temporary disability, criteria for recovery and restoration of working capacity	- use legal guidelines for medical and labor expertise, determine the cause of temporary disability, criteria for recovery and restoration of working capacity	- skills of conducting medical and labor expertise in this disease
22	PC-9	Joint syndrome in the practice of a polyclinic therapist (with analysis of rheumatoid arthritis, reactive arthritis, seronegative arthritis, gout, osteoarthritis)	principles of therapeutic treatment in accordance with the diagnosis, the algorithm for choosing drug and non-drug therapy.	assess the need to choose an outpatient or inpatient treatment regimen, prescribe and conduct adequate therapeutic treatment in accordance with the diagnosis, using the principles of evidence-based medicine	- the method of prescribing adequate therapy in accordance with the diagnosis
23	EPC-6	Diffuse connective tissue diseases in the practice of a polyclinic therapist	features of registration of a medical card of an outpatient patient;	Fill out the card of an outpatient patient with acute and chronic bronchitis	- skills in maintaining medical records in the clinic
23	EPC-9	Diffuse connective tissue diseases in the practice of a polyclinic therapist	modern methods of clinical, laboratory, and instrumental examination of patients with Diffuse connective tissue diseases	conduct a patient survey; collect complaints, medical history, life history, conduct a physical examination of the patient, - assess the severity of the patient's condition, indications for outpatient treatment	methods of General clinical examination of the patient - interpretation of the results of laboratory and instrumental diagnostic methods
23	PC-2	Diffuse connective tissue diseases in the practice of a polyclinic therapist	- principles of medical examination of patients with Diffuse connective tissue diseases	- conduct medical examination of patients with this pathology - issue documentation on medical examination	- the method of dispensary observation of patients with this disease
23	PC-6	Diffuse connective tissue diseases in the practice of a polyclinic therapist	- main pathological symptoms and syndromes of Diffuse connective	identify the main pathological symptoms and syndromes of	algorithm for making a preliminary diagnosis with

			tissue diseases - algorithm for making a diagnosis based on ICD,	diseases in patients, - use an algorithm for making a diagnosis based on ICD,	subsequent referral refer the patient to the appropriate specialist doctor using the detailed clinical diagnosis algorithm
23	PC-7	Diffuse connective tissue diseases in the practice of a polyclinic therapist	- issues of temporary disability, criteria for recovery and restoration of working capacity	- use legal guidelines for medical and labor expertise, determine the cause of temporary disability, criteria for recovery and restoration of working capacity	- skills of conducting medical and labor expertise in this disease
23	PC-9	Diffuse connective tissue diseases in the practice of a polyclinic therapist	principles of therapeutic treatment in accordance with the diagnosis, the algorithm for choosing drug and non-drug therapy.	assess the need to choose an outpatient or inpatient treatment regimen, prescribe and conduct adequate therapeutic treatment in accordance with the diagnosis, using the principles of evidence-based medicine	- the method of prescribing adequate therapy in accordance with the diagnosis

3. The place of discipline in the structure of the educational program

Discipline polyclinic therapy refers to the basic part of Block 1 of the Federal state educational system of higher education in the specialty "Medical busineses"

4. The amount of discipline

No	Type of	job	Total	Total		Seme	esters	
No			credits	hours	9	10	11	12
p/p					hours	hours	hours	hours
1	2		3	4	5	6	7	8
1	Contact w	ork of		270	72	48	78	72
	students with							
	teacher	(total),						
	including:							
2	Lectures (L)			56	14	14	14	14
3	Clinical practical			214	58	34	64	58
	learning (` '						
4	Seminar	s(S)	1	-	-	-	-	-
5	Laboratory wo	ork (LW)	-	-	-	-	-	-
6	Independent	work of		126	36	24	30	36
	the student							
7	Type of	Thecredit	-	-	-	-	-	-
	intermediate							
	attestations	the exam	1	36	-	-	-	36

		(e)						
8	TOTAL:	hours	432	432	108	72	108	108
	Total	Credit	12		3	2	3	4
	laboriousness	item						

5. The content of the discipline

№ / p	№ of semest	Name of the topic (section) of the discipline	Types of		tional a	ctivities		Forms of current control	
	er		L	LE	PL	IWS	total	of education performance	
1	2	3	4	5	6	7	8	9	
1	9	Organizational bases of primary medical and preventive care for the adult population of the Russian Federation	2	-	5	2	9	Interview. Analysis of student activity in clinical classes. Testing Situational tasks	
2	9	Medical examination of patients with a therapeutic profile in a polyclinic. Principlesofrehabilitatio nintheoutpatientsetting	-	-	5	2	7	Interview. Analysis of student activity in clinical classes. Testing Situational tasks	
3	9	Clinical and expert work in outpatient practice (examination of temporary and permanent disability)	2		10	4	16	Interview. Analysis of student activity in clinical classes. Testing Situational tasks	
4	9	Features of the course and treatment of somatic diseases in the elderly and senile age	2	-	-	-	2	Interview. Testing	
		Modularlesson	-	-	5	6	11	Testing Situational tasks	
		Outpatient pulmonology							
5	9	Influenza and other acute respiratory viral infections. Anginas	-	-	5	2	7	Interview. Analysis of student activity in clinical classes. Testing Situational tasks.	
6	9	Pneumonia in the practice of the district therapist (clinic, diagnosis, modern standards of treatment, indications for hospitalization, examination of disability, medical examination)	2	-	10	2	14	Interview. Analysis of student activity in clinical classes. Testing Situational tasks.	
7	9	Bronchoobstructive syndrome	2		-	2	4	Interview. Analysis of student activity in	

								clinical classes. Testing Situational tasks.
8	9	Chronic obstructive pulmonary disease in the practice of a polyclinic therapist (clinic, diagnosis, classification)	2	-	5	5	12	Interview. Analysis of student activity in clinical classes. Testing Situational tasks.
9	9	Bronchial asthma in the practice of a polyclinic therapist (classification, clinic, diagnosis)	2	-	8	4	14	Interview. Analysis of student activity in clinical classes. Testing Situational tasks.
10	9	Modular lesson on respiratory diseases Outpatient	-	-	5	7	12	Testing Situational tasks.
		gastroenterology						
11	10	Abdominal pain syndrome and dyspeptic syndrome	2	-	4	2	8	Interview. Analysis of student activity in clinical classes. Testing Situational tasks.
12	10	Gastroesophageal reflux disease in the practice of the district therapist of the polyclinic	2	-	4	2	8	Interview. Analysis of student activity in clinical classes. Testing Situational tasks.
13	10	Chronic gastritis in the practice of the district therapist of the polyclinic	-	-	4	2	6	Interview. Analysis of student activity in clinical classes. Testing Situational tasks.
14	10	Gastric ulcer and duodenal ulcer in the practice of the district therapist of the polyclinic	2	-	4	2	8	Interview. Analysis of student activity in clinical classes. Testing Situational tasks.
15	10	Chronic pancreatitis in the practice of the district therapist of the polyclinic	2	-	4	4	10	Interview. Analysis of student activity in clinical classes. Testing Situational tasks.
16	10	Chronic non-calculous cholecystitis and biliary dyskinesia in the practice of the district therapist of the polyclinic	2	-	4	3	9	Interview. Analysis of student activity in clinical classes. Testing Situational tasks.

17	10	Functional bowel diseases in the practice of the district therapist of the polyclinic	2	-	3	2	7	Interview. Analysis of student activity in clinical classes. Testing Situational tasks.
18	10	Nonspecific ulcerative colitis and Crohn's disease-diagnosis and treatment in a polyclinic	2	-	3,5	3	8,5	Interview. Analysis of student activity in clinical classes. Testing Situational tasks.
19	10	Modular lesson	-	-	3,5	4	7,5	
		Outpatient cardiology						
20	11	General approach to the patient with shortness of breath at the outpatient stage	2	-	6	-	8	Testing Situational tasks.
21	11	Management of patients with arterial hypertension (from general principles to a specific patient).	2	-	10	4	16	Interview. Analysis of student activity in clinical classes. Testing Situational tasks.
22	11	Differential diagnosis of pain in the left half of the chest (with analysis of coronary heart disease)	2	-	15	4	21	Interview. Analysis of student activity in clinical classes. Testing Situational tasks.
23	11	Neurocirculatory dystonia in the practice of the district physician	2	-	6	2	10	Testing Situational tasks.
24	11	Non-coronarogenic myocardial diseases (myocarditis, cardiomyopathy) in outpatient practice	2	-	10	4	16	Interview. Analysis of student activity in clinical classes. Testing Situational tasks.
25	11	Management of patients with heart failure at the outpatient stage	2	-	5,5	4	11,5	Interview. Analysis of student activity in clinical classes. Testing Situational tasks.
26	11	General approach to patients with edema at the outpatient stage	2	-	6	3	11	Testing Situational tasks.

27	11	Modular lesson						Interview.
			-	-	5,5	9	14,5	Analysis of student activity in clinical classes. Testing Situational tasks.
		Outpatient Nephrology						
28	12	Urinary syndrome- differential diagnosis at the outpatient stage	2	-	-	-	2	Testing Situational tasks.
29	12	Urinary tract infections in the practice of a polyclinic therapist	2	-	10	2	14	Interview. Analysis of student activity in clinical classes. Testing Situational tasks.
30	12	Acute and chronic renal failure	-	-	5	3	8	Interview. Analysis of student activity in clinical classes. Testing Situational tasks.
31	12	Acute and chronic glomerulonephritis	2	-	-	3	5	Testing Situational tasks.
		Questions of differential diagnostics						
32	12	Fever of unclear origin in the practice of a polyclinic therapist	2	-	-	2	4	Interview. Analysis of student activity in clinical classes. Testing Situational tasks.
33	12	Anemic syndrome in the practice of the polyclinic therapist (with analysis of iron deficiency anemia, B-12 deficiency, aplastic, hemolytic anemia, anemia in chronic diseases)	2		10	4	16	Interview. Analysis of student activity in clinical classes. Testing Situational tasks.
34	12	Articular syndrome in the practice of the polyclinic therapist (with analysis of rheumatoid arthritis, reactive arthritis, osteoarthritis, gout)	2	-	10	2	14	Interview. Analysis of student activity in clinical classes. Testing Situational tasks.
35	12	Diagnosis and treatment of rheumatic diseases in the practice of the polyclinic therapist	2	-	-	3	5	Testing Situational tasks.

36	12	Diffuse connective tissue diseases in the practice of the polyclinic therapist	-	-	15	5	20	Interview. Analysis of student activity in clinical classes. Testing Situational tasks.
37	12	Certification. The final lesson. Protection of the secondary prevention program for a specific patient with a disease of therapeutic profile. Certification of knowledge, skills and level of acquired competencies in the structure of preparation for intermediate and final control.			8	12	20	Certification of knowledge, skills. Evaluation of the secondary prevention program Testing Situational challenges.
Tota	il:	1	56	-	214	126	432	

${\bf 6. The\ list\ of\ educational\ and\ methodological\ support\ for\ independent\ work\ of\ students\ in\ the\ discipline}$

№/п	№ семестра	Наименование учебно-методической разработки
1	9	1. «Методика приема больных в поликлинике.» Учебно - методическая разработка для самостоятельной подготовки студентов к практическому занятию. Владикавказ, 2020. – ЦМК терапевтических дисциплин.
		2. «Экспертиза временной нетрудоспособности.» Учебно - методическая разработка для самостоятельной подготовки студентов к практическому занятию. Владикавказ, 2020. — ЦМК терапевтических дисциплин. 3. «Экспертиза длительной или постоянной утраты трудоспособности». Учебно- методическая разработка для самостоятельной подготовки студентов к практическому занятию. Владикавказ, 2020. — ЦМК терапевтических дисциплин.
		4. «Организация диспансеризации на участке, оценка ее эффективности, составление плана профилактических мероприятий, анализ заболеваемости с временной утратой трудоспособности. » Учебно - методическая разработка для самостоятельной подготовки студентов к практическому занятию. Владикавказ, 2020. – ЦМК терапевтических дисциплин.
		5. « Разработка программы реабилитации больного на поликлиническом этапе.» Учебно- методическая разработка для самостоятельной подготовки студентов к практическому занятию. Владикавказ, 2020 — ЦМК терапевтических дисциплин.
		6. «Методические рекомендации для выполнения внеаудиторной самостоятельной работы студентов 5 курса лечебного факультета по циклу поликлинической терапии. »Учебно - методическая разработка для самостоятельной подготовки студентов к практическому занятию.

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		Владикавказ, 2020. – ЦМК терапевтических дисциплин.
		7. «Особенности работы участкового терапевта поликлиники с пациентами разных групп населения». Учебно - методическая разработка для самостоятельной подготовки студентов к практическому занятию. Владикавказ, 2020. – ЦМК терапевтических дисциплин.
		8. « Грипп и другие острые респираторные вирусные инфекции. Ангины». Учебно - методическая разработка для самостоятельной подготовки студентов к практическому занятию. Владикавказ, 2020. — ЦМК терапевтических дисциплин.
		9. «Внебольничные пневмонии.»Учебно - методическая разработка для самостоятельной подготовки студентов к практическому занятию. Владикавказ, 2020. – ЦМК терапевтических дисциплин.
		10. « Острые и хронические бронхиты.» Учебно - методическая разработка для самостоятельной подготовки студентов к практическому занятию. Владикавказ, 2020. – ЦМК терапевтических дисциплин.
		11. « Бронхиальная астма». Учебно - методическая разработка для самостоятельной подготовки студентов к практическому занятию. Владикавказ, 2020. – ЦМК терапевтических дисциплин.
2	10	1. « Язвенная болезнь желудка и 12-перстной кишки.» Учебно - методическая разработка для самостоятельной подготовки студентов к практическому занятию. Владикавказ, 2020. – ЦМК терапевтических дисциплин.
		2. «Хронические гастриты.» Учебно - методическая разработка для самостоятельной подготовки студентов к практическому занятию. Владикавказ, 2020. – ЦМК терапевтических дисциплин.
		3. « Хронический бескаменный холецистит и дискинезии желчных путей». Учебно- методическая разработка для самостоятельной подготовки студентов к практическому занятию. Владикавказ, 2020. – ЦМК терапевтических дисциплин.
3	11	1 « Артериальные гипертонии.» Учебное пособие. Рекомендовано УМО по медицинскому и фармацевтическому образованию вузов России – Владикавказ, 2022.
		2. « Синдром болей в левой половине грудной клетки (с разбором ИБС)». Учебно - методическая разработка для самостоятельной подготовки студентов к практическому занятию. Владикавказ, 2020. – ЦМК терапевтических дисциплин.
		3. «Инфаркт миокарда.» Учебно - методическая разработка для самостоятельной подготовки студентов к практическому занятию. Владикавказ, 2020. – ЦМК терапевтических дисциплин.

4. «Миокардиты. Кардиомиопатия гипертрофическая и дилатационная». Учебно - методическая разработка для самостоятельной подготовки студентов к практическому занятию. Владикавказ, 2020. – ЦМК терапевтических дисциплин. «Нейроциркуляторная дистония практике терапевта В поликлиники.»Учебно - методическая разработка для самостоятельной подготовки студентов к практическому занятию. Владикавказ, 2020. – ЦМК терапевтических дисциплин. 6. «Хроническая сердечная недостаточность.» Учебно - методическая разработка для самостоятельной подготовки студентов к практическому занятию. Владикавказ, 2020. – ЦМК терапевтических дисциплин. 4 **12** 1. « Мочевой синдром. Острый и хронический гломерулонефрит». Учебно методическая разработка для самостоятельной подготовки студентов к практическому занятию. Владикавказ, 2020. – ЦМК терапевтических дисциплин. 2. « Пиелонефрит». Учебно - методическая разработка для самостоятельной подготовки студентов к практическому занятию. Владикавказ, 2020. – ЦМК терапевтических дисциплин. 3. « Анемии». Учебно - методическая разработка для самостоятельной подготовки студентов к практическому занятию. Владикавказ, 2020. – ЦМК терапевтических дисциплин. 4. « Ревматоидный артрит, остеоартроз, подагра.» Учебно - методическая разработка для самостоятельной подготовки студентов к практическому занятию. Владикавказ, 2022. – ЦМК терапевтических дисциплин.

7. Fund evaluation funds for intermediate certification of students in the discipline

<i>№</i> /p	List of competencies	№ of semester	Indicator(s) assessments	Evaluation criterion (s)	Grading scale(s)	Name of Federal educational standards
1	2	3	4	5	6	7
1	ЕК-8 ЕРК-1 ЕРК-4 ЕРК-6 ЕРК-8 ЕРК-9 РК-1 РК-2 РК-6 РК-7	9	see the standard for evaluating the quality of education, approved. Order of FSBEI HE NOSMA	see the standard for evaluating the quality of education, approved. Order ofFSBEI HE	see the standard for evaluating the quality of education, approved. Order of FSBEI HE	Interview. Analysis of student activity in clinical classes. Testing Situational tasks.
	PK-8 PK-9 PK-11		of the Ministry of health of	NOSMAof	NOSMAof the	

	DI0 4 /	I	.1 5 '	1 1.1 2	1 1.1 2	
	РК- 16 РК-20		the Russian Federation of 10.07.2018,	health of the Russian Federation of	health of the Russian Federation of	
			no. 264/o	10.07.2018, no. 264/o	10.07.2018, no. 264/o	
2	EK-8 EPK-1 EPK-4 EPK-6 EPK-8 EPK-9 PK-1 PK-2 PK-6 PK-7 PK-8 PK-9 PK-11 PK-20	10	see the standard for evaluating the quality of education, approved. Order of FSBEI HE NOSMA of the Ministry of health of the Russian Federation of 10.07.2018, no. 264/o	see the standard for evaluating the quality of education, approved. Order of FSBEI HE NOSMA of the Ministry of health of the Russian Federation of 10.07.2018, no. 264/o	see the standard for evaluating the quality of education, approved. Order of FSBEI HE NOSMA of the Ministry of health of the Russian Federation of 10.07.2018, no. 264/o	Interview. Analysis of student activity in clinical classes. Testing Situational tasks.
3	EK-8 EPK-1 EPK-4 EPK-6 EPK-8 EPK-9 PK-1 PK-2 PK-6 PK-7 PK-8 PK-9 PK-11 PK-20	11	see the standard for evaluating the quality of education, approved. Order of FSBEI HE NOSMA of the Ministry of health of the Russian Federation of 10.07.2018, no. 264/o	see the standard for evaluating the quality of education, approved. Order of FSBEI HE NOSMA of the Ministry of health of the Russian Federation of 10.07.2018, no. 264/o	see the standard for evaluating the quality of education, approved. Order of FSBEI HE NOSMA of the Ministry of health of the Russian Federation of 10.07.2018, no. 264/o	Interview. Analysis of student activity in clinical classes. Testing Situational tasks.Interim certification
4	ЕК-8 ЕРК-1 ЕРК-4 ЕРК-6	12	see the standard for evaluating	see the standard for evaluating	see the standard for evaluating	Interview. Analysis of student activity in clinical

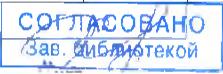
EPK-8 EPK-9 PK-1 PK-2 PK-6 PK-7 PK-8 PK-9 PK-11 PK-16 PK-20	the quality of education, approved. Order ofFSBEI HE NOSMA of the Ministry of health of the Russian Federation of 10.07.2018, no. 264/o	the quality of education, approved. Order ofFSBEI HE NOSMA of the Ministry of health of the Russian Federation of 10.07.2018, no. 264/o	the quality of education, approved. Order ofFSBEI HE NOSMA of the Ministry of health of the Russian Federation of 10.07.2018, no. 264/o	classes. Testing Situational tasks.Interim certification
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8. The list of basic and additional educational literature necessary for the development of the discipline

				Кол-во экз	емпляров	
π/ №	Наименование	Автор (ы)	Год, место издания	в биб- лиотеке	на кафедре	
1	2	3	4	5	6	
		Основная литер	атура			
1.	Поликлиническая терапия: учебник	ред. Б.Я. Барт	М.: Академия, 2005	144	1	
2.	Поликлиническая	Сторожаков	М.: ГЭОТАР	100	1	
	терапия: учебник Г.И., И.И., Алек А.А.		- Медиа, 2011, 2013	«Консультант студента» http://www.studmedlib. ru/book/ISBN97859704 25015.html		
3.	Медико-социальная экспертиза, реабилитация и диспансеризация больных терапевтического профиля в условиях поликлиники.: учебное пособие	Гатагонова Т.М., Кцоева С.А., Бурнацева И.Б. и др.	Владикавказ, 2007	29	3	
4.	Типовые тестовые задания для итоговой государственной аттестации выпускников высших медицинских учебных заведений по специальности «Лечебное дело» в 2-х частях		М.: ГОУ ВУНМЦ МЗ Росздрава, 2004	Ч. 1 – 19 Ч.2 – 19	1	

5.	Руководство по первичной медико- санитарной помощи с приложением на компакт - диске	ред. А.А. Баранов	М.: ГЭОТАР- Медиа, 2006	15	1		
Доп	Дополнительная литература						
	Российский терапевтический справочник (с приложением на компакт-диске)	ред. А.Г. Чучалин	М.: ГЭОТАР- Медиа, 2005	5			
2.	Руководство по медицинской профилактике	ред. Р.Г. Оганов	М.:ГЭОТАР- Медиа, 2007	5 1 «Консультант студента» http://www.studmedlib. ru/book/ISBN59704033 85.html			
3.	Стандарты диагностики и лечения внутренних болезней.	Шулутко П.И., Макаренко С.В.	СПб.: Элби- СПб, 2004	1	1		
4.	Пульмонология: национальное руководство	ред. А.Г. Чучалин	М.:ГЭОТАР – Медиа, 2009	10	1		
5.	Руководство по скорой медицинской помощи	ред. С.Ф. Багненко	М.: ГЭОТАР – Медиа, 2007, 2010	5 «Консультант студента» http://www.studmedlib. ru/book/ISBN97859704 17331.html			
6.	Кардиология: национальное руководство	ред. Ю.Н. Беленков	М.:ГЭОТАР – Медиа, 2007	10	1		
7.	Электрокардиография: учеб.пособие	Мурашко В.В., Струтынский А.В.	М.: МЕДпресс- информ, 2011	11	4		
8.	Гастроэнтерология: национальное руководство	ред. В.Т. Ивашкин	М.:ГЭОТАР – Медиа, 2008.	15	1		
9.	Ревматология: национальное руководство	ред. Е.Л. Насонов	М.:ГЭОТАР – Медиа, 2008.	10	1		
10.	Нефрология: национальное руководство	ред. Н.А. Мухин.	М.:ГЭОТАР- Медиа, 2009.	10	1		
11.	Экспертиза временной нетрудоспособности и медико-социальная экспертиза в амбулаторной практике : учеб.пособие Основы внутренней	Викторова И.А., Гришечкина И.А. Кобалава Ж.Д.,	М.: ГЭОТАР- Медиа, 2015 М.:	«Консультант студента» http://www.studmedlib. ru/book/ISBN97859704 32280.html			

	медицины	Моисеев С. В., Моисеев В. С.	ГЭОТАР- Медиа, 2014.	студента» http://www.studmedlib. ru/book/ISBN97859704
				27729.html
13.	Основы клинической	Чучалин А.Г.,	M.:	«Консультант
	диагностики	Бобков Е.В.	ГЭОТАР-	студента»
			Медиа, 2008	http://www.studmedlib.
				ru/book/ISBN97859704
				07134.html



9. The list of resources of the information and telecommunication network "Internet", necessary for the development of the discipline

- 1. Society of heart failure: http://www.ossn.ru
- 2. National Internet Society of specialists in internal medicine http://www.internist.ru
- 3. Official website of The Russian society of cardiology (RKO): http://www.scardio.ru
- 4.Official website Of the Russian medical society for arterial hypertension (RMOAG): http://www.gipertonik.ru.
- 5.Official website of the Association of rheumatologists of Russia (ARA): http://www.rheumatolog.ru.
- 6.Official website Of the scientific society of nephrologists of Russia: http://nonr.ru.
- 7. Official website of the Russian gastroenterological Association: http://www.gastro.ru.
- 8. Russian medical journal: http://www.rmj.ru
- 9.Journal "Pulmonology": http://www.pulmonology.ru.
- 10.All-Russian medical portal (information on med. books, textbooks, orders, national projects): http://www.bibliomed.ru

10. Methodological guidelines for students on the development of the discipline

Training consists of classroom sessions (396 hours), including lecture course (56 h) and practical classes (208 h), independent work (126 hours) and intermediate certification (36 hours); total -432 hours, which is 12 credits units.

In the process of studying polyclinic therapy, the formation of clinical thinking, medical deontology, mastering skills inexamination of patients and making decisions about the appointment of the necessary treatment, which, of course, it is important for the future doctor, regardless of the scope of its intendedactivities. The discipline "polyclinic therapy" is a clinical onediscipline and is designed to solve the problems of initial questioning and inspection

therapeutic patient, preliminary diagnosis, examination, conducting a differential diagnosis, establishing a detailed clinical diagnosis, determining indications for hospitalization, prescribing treatment, providing emergency services.

Lectures are given by the Professor and associate professors of the Department on the most important topics disciplines and have a problematic nature. When conducting them, the following methods are applied modern information technologies and technical training tools.

Practical classes are held in the training rooms of the Department, offices district doctors. If there are thematic patients, their clinical examination is carried outanalysis.

The number of students in the study group is 14-17 people. Classesthey are provided with the necessary visual table material, tasks, situational tasks. radiographs, test electrocardiograms, echocardiograms, game medical documentation. In course employmentuse the stethoscope, blood pressure monitors, laptop. There are blocks of information toeach section of the program.

During the training, the discipline, students not only achieve them the task of mastering the knowledge and acquire the necessary practical skills, but also develop the abilities, personal qualities that define professional behavior specialist. The main method of training is independent work of a student under the guidance of a teacher.

In accordance with the requirements of Federal state educational standards-3+, the educational process usesactive and interactive forms of classes (problem lectures, lectures-conversations, contextual learning, business games) the Share of classes held inin interactive forms, it makes up at least 15% of the classroom sessions.

Independent work of students provides for the study of the extra-curricular time for a number of program issues, preparation for the current, intermediate, final control of students, implementation of individual training programstasks and monitoring their completion.

Each student is provided with access to the library collections of the Academy andFund of methodological developments of the Department. For each section of the disciplinemethodological recommendations for independent training of students and guidelines for teachers.

Independent work with literature and writing a secondary programprevention forms the ability to analyze medical and social issuesproblems, ability to use natural-scientific, medical-biological and clinical information in practice in various types of professional and socialactivities.

The current control (control of learning a modular unit) is performed at the beginning training (control of the initial level of knowledge), in the course of training (the degree of assimilation individual elements of the discipline) and at the end of classes. Current control is carried out in the form of a set of the following measures:

- -an oral interview on the current material
- -decision of situational tasks
- -test control
- -assess these additional studies assessment of manual actions during examination of the patient
- -estimates of solutions of the ethical problems associated with collecting information onspecific patient and the assessment of subjective and objective dataabout his health.

The control of the module lesson is carried out in several stages:

- test control
- solving a situational problem
- evaluation of additional research data
- oral answer to the teacher's questions

At the end of the study of the discipline an intermediate control is carried outknowledge. Control of students 'knowledge at the end of the 12th semester is carried out in the form of passingthe exam in the volume corresponding to the program. When passing the final assessment examthe resulting annual rating is affected.

Intermediate control (exam) for the discipline includes:

- oral answer to the questions of the exam ticket
- solving a situational problem

Students who are interested in research activities actively participate in the student scientific circle.

11. The list of information technologies used in the implementation of the educational process in the discipline

The educational technologies used in the study of this discipline make up about 15% of the interactive classes of the classroom. Types of educational technologies:

- -Simulation:
- A) non-game simulation technologies: contextual learning
- B) game simulation technology: role-playing business games
- -Non-communication technologies: problem lecture, lecture-talk

Contextual learning is carried out throughout the entire period of teaching the discipline, especially during the independent work of students under the supervision of the teacher-knowledge, skills are given not as a subject for memorization, but as a means of solving professional problems.

12.Description of the material and technical base necessary for the implementation of the educational process in the discipline

N₂/p	Nameofequipment	Quantity	Technicalcondition				
1	2	3	4				
Specialequipment							
1.	Toshibaprojector (multimedia)	1	satisfactory				
2.	-	-	-				
Phantoms							
3.	-	-	-				
Moulages							
4.	-	-	-				
5.	-	-	-				

The department actively uses the center of practical training of students for classes with students of the faculty of medicine in the specialty polyclinic therapy.

13. Conducting educational activities using e-learning and distance learning technologies

In conditions of introduction of restrictive measures (quarantine) associated with an unfavorable epidemiological situation, the threat of the spread of a new coronavirus infection, and other force majeure events that do not allow conducting training sessions in person, it is possible to study this discipline or part of it using e-learning and distance education technologies.

Teaching the discipline in the above situations will be carried out through the development of an electronic course with access to video lectures and interactive course materials: presentations, articles, additional materials, tests and various tasks. When conducting training sessions, current monitoring of academic performance, as well as intermediate certification of students, the Academy's electronic information and educational environment platforms and/or other e-learning systems recommended for use in the Academy, such as Moodle, Zoom, Webinar, etc. can be used.

Lectures can be presented in the form of audio, video files, "live lectures", etc.

Seminars and practical classes can be held on-line in both synchronous and asynchronous modes. Seminars can be held in the form of web conferences.