



MINISTRY OF EDUCATION AND SCIENCE OF THE RUSSIAN FEDERATION
Federal state autonomous educational institution
of higher education
«Far Eastern Federal University»
(FEFU)

SCHOOL OF BIOMEDICINE

«AGREED»

Head of education program
«General medicine»



(signature) Khotimchenko Yu.S.
(Full name)
«09» of July 2019

«APPROVED»

Director of the Department of Clinical
Medicine



(signature) Geltser B.I.
(Full name)
«09» of July 2019



WORKING PROGRAM OF EDUCATIONAL PRACTICE (WPET)

Учебная практика «Клиническая практика (Уход за больными хирургического и терапевтического профиля)»

Educational practice “Clinical practical training (Medical & Surgical Patient Care)”

Educational program

Specialty 31.05.01 «General medicine»

Form of study: full time

Vladivostok

2019

ABSTRACT

Учебная практика «Клиническая практика (Уход за больными хирургического и терапевтического профиля)» Educational practice “Clinical practical training (Medical & Surgical Patient Care)” is intended for students enrolled in the educational program 31.05.01 "General Medicine". Discipline is implemented in 1st course in the 2^{sd} semesters, is a basic discipline. The total complexity of the discipline is 108 hours, 3 credits.

In developing the work program of the practical training there were used: the Federal State Educational Standard of Higher Education in the specialty 31.05.01 “General Medicine”, student training curriculum, regulations on the procedure for the practice of students studying at the Federal State Autonomous Educational Institution of Higher Professional Education "Far Eastern Federal University" in higher education programs (for undergraduate programs, specialties, graduate programs), approved by order of October 23, 2015, regulations on the funds of evaluation tools of educational programs of higher education - undergraduate programs, specialties, magistracies of FEFU, approved by the order of the rector of 12.05.2015 No. 12-13-850.

Purpose of Educational practice “Clinical practical training (Medical & Surgical Patient Care)”:

Introducing students to the work of LPU surgical hospitals, consolidate knowledge and skills acquired in the classroom during the training period, the development of practical skills of general care of surgical patients. Synthesis of knowledge and practical skills acquired in the classroom and in the course of practical training, allows you to get a clear idea about the main directions of surgical activity and becomes the basis for the study of clinical surgery on subsequent courses.

Objectives of Educational practice “Clinical practical training (Medical & Surgical Patient Care)”

1. Stimulate interest in their chosen profession;
2. The development of practical skills;
3. The formation of a holistic understanding of the care of surgical patients;
4. Training receptions:
 - Transportation of patients;
 - Health medical staff in surgical clinic,
 - The rules of medical wearing,
 - The rules of work with biological materials, measures of individual protection of medical personnel for invasive procedures,
 - Emergency measures to prevent HIV infection and hepatitis while working with biological fluids,
 - The prevention of nosocomial infections,
 - Immediate and special preparation of patients for routine and emergency operations,
 - Cleaning department, processing equipment,
 - Organization and conduct of nursing in the postoperative period,
 - Care for operating wound, drains, gastric probe and the bladder catheter,
 - Prevention of thrombosis and thromboembolism.
 - Supply of surgical patients in pre- and postoperative period,
 - Enteral, parenteral nutrition,
 - Care for patients after abdominal, thoracic, urological surgery,
 - Care for patients with a tracheostomy tube, with fistulas of the gastrointestinal tract.
 - Organizing and conducting care for trauma patients and patients with thermal lesions,
 - Caring for critically ill patients.
5. The development of skills:
 - Medical wearing,

- Work with biological materials,
- Treatment of hands and donning the medical staff,
- The level of sanitary hand processing, hygienic treatment of hands (disinfection), the level of surgical treatment of hands,
- Surgical clinical care to the patient's body and the common bed rest at different stages of hospital treatment,
- Change of underwear and bed linen,
- Control and sanitization of personal belongings of the patient,
- Sanitary preparation of the patient for surgery,
- Preparation and shaving of the surgical field,
- Statement of cleansing enemas,
- Gastric lavage,
- Bladder catheterization,
- Transporting patients to the operating room and transportation after the surgery ward or intensive care unit,
- Shifting the patient from the operating table onto a gurney and rolling on the bed,
- Prevention of complications and care of the skin, eyes, ears, nose and mouth in critically ill patients,
- Care of the operating wound, drains, gastric probe and the bladder catheter,
- Prevention of pressure ulcers, thrombosis and thromboembolism,
- First aid in emergency and life-threatening conditions (in shock, bleeding, breathing problems, vomiting)
- Environmental protection in the surgical department
- Of the daily and general cleaning of premises surgical hospital (wards, dressing, operational)
- Feeding critical patients,
- Principles of enteral and parenteral nutrition.

Because of studying this discipline, students form the following general professional and professional competencies:

Competence code and wording	Competence formation stages	
<p>PC-10 - the willingness to deliver medical first aid in case of sudden acute diseases and conditions, exacerbation of a chronic disease, which are not life-threatening and do not require emergency medical assistance</p>	Knows	<p>Personal hygiene and types of patient decontamination; fundamentals of safety of patients and own safety; methods of movement and transportation of patients. Dietary habits of patients, has an idea of artificial feeding; principles of delivering a palliative care. Types of fevers and peculiarities of care for patients being in a fever; regimes of a patient; current and potential problems of a patient in the most common therapeutic diseases; control criteria of a patient's state.</p>
	Able	<p>To do patient decontamination on admission to hospital and during a patient's stay in hospital; to change undergarment and bed linen, treat bed sores; collect information on a patients (questioning, examination) and reveal a patient's current, potential and priority problems associated with a disease</p>
	Possesses	<p>Technique of patient decontamination; Feeding technique, bed items sanitation technique</p>
<p>PC-11 -the willingness to assist at the delivering emergency medical care for the patients in the conditions, requiring urgent medical participation;</p>	Knows	<p>Principles of delivering an emergency medical care in therapeutic practice; Basic nursing tasks to settle a patient's problems in the most common therapeutic diseases; methods of use of medicines, has an idea of allergic responses and delivering the first premedical care;</p>
	Able	<p>To assess a patient's potential and priority problems associated with a disease; to care for patients of different age and with different therapeutic pathologies; to formulate a nursing diagnosis, care tasks and to make up a plan of their fulfillment, with implementation of all treatment principles and nursing care;</p>
	Possesses	<p>Skills to use the items of care for patients which are required urgent medical interference; skills of disinfection of medical care materials and items.</p>
<p>PC-13 - the willingness to do a medical assistance in emergency situations, as well as in medical evacuation</p>	Knows	<p>Rules of delivering medical care in emergencies, including medical evacuation of patients and type of evacuation</p>
	Able	<p>To do work of medical attendants in accordance with legal aspects of activity, to carry out medical evacuation of patients</p>
	Possesses	<p>Skills of delivering a primary premedical health care and types of medical evacuation of injured persons</p>

Competence code and wording	Competence formation stages	
PC-22 - the willingness to participate in implementation of new methods and techniques aimed at protection of public health	Knows	New methods and techniques aimed at public health care, including Russian laws as well as the documents for assessment of quality and efficiency of work of healthcare organizations
	Able	To use new methods and techniques aimed at public health care
	Possesses	Basic methods and techniques aimed at public health care

Jobs for people with disabilities are equipped with:

- Braille displays and printers;
- portable devices for reading flat-print texts, scanning and reading machines with a video enlarger with the ability to adjust color spectra;
- magnifying electronic loops and ultrasonic markers.

STRUCTURE AND CONTENT OF PRACTICAL PART OF THE PRACTICE

№	Sections of subject-matter	Types of work	Workload, hours
1	Theme 1. Introduction. to students in a surgical hospital requirement. Organization of the surgical clinic. The concept of aseptic and antiseptic. General questions of ethics in surgery	The survey, testing, reports	6
2	Theme 2. Organization of work in a doctor's surgery receptionist. Transportation of patients from the receiving department to the surgery. Shifting the patient to a wheelchair to the bed. Features of care of elderly and senile age. Moribund for Nursing.	The survey, testing, reports, case studies	6
3	Theme 3. Features sanitary preparation of patients for surgery. Features of patient care in the operating room and dressing room. The methods of care aimed at reducing the risk of wound infections in surgical patients.	The survey, testing, reports, case studies	6
4	Theme 4. Features care and transportation of surgical patients who are in critical condition after anesthesia and surgery. First aid in the event of a collapse, fainting, apparent death.	The survey, testing, reports, case studies	6
5	Theme 5. General care for surgical patients in the postoperative period, bedsore prevention. The methods of care aimed at preventing complications of the respiratory system.	The survey, testing, reports, case studies	6
6	Theme 6. First aid in the event of complications in surgical patients: bleeding from the surgical wound, weakening bandages, vomiting after anesthesia.	The survey, testing, reports, case	6

Fundamentals of bandages.	studies	
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LIST OF EDUCATIONAL LITERATURE AND INFORMATIONAL-METHODICAL REQUIREMENTS FOR THE DISCIPLINE

a) Main literature

1. Nursing Student Book Collection (Cheat Sheet, Priorities, MedSurg, Case Studies), CreateSpace Independent Publishing Platform, 2015), 358 p.
<http://www.studmedlib.ru/book/ISBN9785970428856.html>
2. Nursing School Study Pack (Drug Reference, Labs, Mnemonics, EKG) 4 books for nursing students Kindle Edition, [Jon Haws](#), NRSNG.com | NursingStudentBooks.com , 2015, 598 p.
<https://linksmedicus.com/medicalspecialties/?gclid>
3. Cambridge English for Nursing Pre-intermediate Student's Book with Audio CD (Cambridge Professional English) Cambridge University Press; 1 Pap/Com edition (April 12, 2010)
<http://www.studmedlib.ru/book/ISBN9785970428856.html>

LIST OF INFORMATION TECHNOLOGIES AND SOFTWARE

The location of the computer equipment on which the software is installed, the number of jobs	List of licensed software
Multimedia auditorium Vladivostok Russian island, Ayaks 10, building 25.1, RM. M723 Area of 80.3 m2 (Room for independent work)	Windows Seven enterprise SP3x64 Operating System Microsoft Office Professional Plus 2010 office suite that includes software for working with various types of documents (texts, spreadsheets, databases, etc.); 7Zip 9.20 - free file archiver with a high degree of data compression; ABBYY FineReader 11 - a program for optical character recognition; Adobe Acrobat XI Pro 11.0.00 - software package for creating and viewing electronic publications in PDF; WinDjView 2.0.2 - a program for recognizing and viewing files with the same format DJV and DjVu.

For persons with disabilities and people with disabilities, the choice of places of practice is consistent with the requirement of their accessibility for these students and the practice is carried out taking into account the characteristics of their psychophysical development, individual abilities and health status.

LOGISTICS OF PRACTICAL TRAINING

1. For practical work, as well as for the organization of independent work, students have access to the following laboratory equipment and specialized classrooms that meet the current sanitary and fire regulations, as well as safety requirements during training and scientific and industrial works:

Name of the equipped rooms and rooms for independent work	List of main equipment
Computer class of the School of Biomedicine aud. M723, 15 jobs	Screen with an electric drive 236 * 147 cm Trim Screen Line; DLP Projector, 3000 ANSI Lm, WXGA 1280x800, 2000: 1 EW330U Mitsubishi; The subsystem of specialized fixing equipment CORSA-2007 Tuarex; Video switching subsystem: DVI DXP 44 DVI Pro Extron matrix switcher; DVI extension cable for twisted pair DVI 201 Tx / Rx Extron; Audio switching and sound reinforcement subsystem; ceiling speaker system SI 3CT LP Extron; DMP 44 LC Extron digital audio processor; extension for the control controller IPL T CR48; Wireless LANs for students are provided with a system based on 802.11a / b / g / n access points 2x2 MIMO (2SS). Monoblock HP RgoOpe 400 All-in-One 19.5 (1600x900), Core i3-4150T, 4GB DDR3-1600 (1x4GB), 1TB HDD 7200 SATA, DVD +/- RW, GigEth, Wi-Fi, BT, usb kbd / mse, Win7Pro (64-bit) + Win8.1Pro (64-bit), 1-1-1 Wty
690922, Primorsky Krai, Vladivostok, Russky Island, Saperny Peninsula, Ajax Village, 10, aud. M 422 Multimedia audience	Multimedia audience: Monoblock HP ProOne 400 G1 AiO 19.5 "Intel Core i3-4130T 4GB DDR3-1600 SODIMM (1x4GB) 500GB; Projection Screen Projecta Elpro Electrol, 300x173 cm; Multimedia Projector, 4000 Mitsubishi FD630U, 4000 ANSI Lumen, 1920x1080; Embedding, 4000 Embedded Mitsubishi FD630U, 4000 ANSI Lumen, 1920x1080; Embedded, Embedded, Mitsubishi FD630U, 4000 ANSI Lumen, 1920x1080; Embedded, Embedded, Mitsubishi FD630U, 4000 ANSI Lumen, 1920x1080; Embedded; TLS TAM 201 Stan cables; Avervision CP355AF Document Camera; Sennheiser EW 122 G3 Microphone UHF-band microphone system as part of a wireless microphone and receiver; LifeSizeExpress 220-Codeonly-Non-AES video conferencing codec; Multipix MP-HD718 Network Video Camera; Dual LCD Panels 47 ", Full HD, LG M4716CCBA; Audio switching and sound reinforcement subsystem; central uninterrupted power supply
Reading rooms of the FEFU Scientific Library with open access to the Foundation (Building A -	Monoblock HP RgoOpe 400 All-in-One 19.5 (1600x900), Core i3-4150T, 4GB DDR3-1600 (1x4GB), 1TB HDD 7200 SATA, DVD +/- RW, GigEth, Wi-Fi, BT, usb kbd / mse, Win7Pro (64-bit) + Win8.1Pro (64-bit), 1-1-1 Wty Internet access speed 500

Level 10)	Mbit / s. Jobs for people with disabilities are equipped with braille displays and printers; equipped with: portable devices for reading flat-print texts, scanning and reading machines with a video optimizer with adjustable color spectra; magnifying electronic loops and ultrasonic markers
<p>Accreditation and Simulation Center of the School of Biomedicine</p> <p>690922, Primorsky Krai, Vladivostok, Russky Island, Saperny Peninsula, Ajax Village, 10, aud. M 508a, 510</p>	<p>Medical couch (1 pc.)</p> <p>Simulator for auscultation with an interactive board (1 pc.)</p> <p>Dummy for testing SLS and auscultation (1 pc.)</p> <p>Sam II (1 pc.)</p> <p>Tonometer (2 pcs.)</p> <p>Simulator for auscultation (1 pc.)</p> <p>Spirometer portable (1 pc.)</p> <p>Electrocardiograph (1 pc.)</p> <p>Spirograph (1 pc.)</p> <p>Tonometer (2 pcs.)</p> <p>Set with dotted electrodes for recording EEG in the system 10-20 "MCScap-26" (1 pc.)</p> <p>Medical couch (2 pcs.)</p>



THE MINISTRY OF EDUCATION AND SCIENCE OF THE RUSSIAN FEDERATION
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SCHOOL OF BIOMEDICINE

**METHODOLOGICAL SUPPORT OF
INDEPENDENT WORK OF STUDENTS**

**Учебная практика «Клиническая практика (Уход за больными хирургического и
терапевтического профиля)»**
Educational practice “Clinical practical training (Medical & Surgical Patient Care)”
Educational program
Specialty 31.05.01 «General medicine»
Form of study: full time

**Vladivostok
2018**

STUDENTS' INDIVIDUAL WORK

Methodological recommendations for preparation and performance of a practical training

1. A practical training shall be carried out during the course of training at the main clinical sites.
2. The course of a practical training shall be supervised by the department's staff.
3. A practical training shall begin with a seminar in the field of the practical training and end with a test.
4. The main mandatory document of the practical training performance shall be the Journal.
5. During the course of a practical training first year students of major 31.05.01 "Medical care" shall be mastering the professional competences.
6. The practical training supervisor shall be a department's teaching assistant in charge of practical training; the officer in charge of practical training at a clinical site shall be designated from among its personnel by the head of the healthcare organization (a nurse, head nurse, matron).

Methodological recommendations on organizing the practical training

In the course of practical training at the units the students strengthen their theoretical knowledge acquired at the practical studies, master practical skills of patient care, carry out the observation and care of patients with acute and chronic therapeutic and surgical conditions and injuries. They perform simple medical procedures (apply suction cups, mustard plasters, compresses), implement tasks insuring the observance of aseptic and antiseptic rules, requirements for instrument and material sterilization.

During the course of a practical training, each student shall keep a journal recording the amount of work completed and practical skills mastered.

Students' individual work in the course of a practical training shall be performed at the units under supervision of the teacher and hospital's medical personnel.

Studying the course books is deemed a kind of training activity within the practical training and shall be done in the allotted number of hours.

Each student has access to the library stock of the Federal State Autonomous Educational Institution of Higher Professional Education “Far East Federal University” and the department.

There have been some methodological recommendations developed on the practical training «Clinical» (Medical and surgical patient care) for the students: Diary of Practical Training which includes viz. “Practical Training Journal Template”, “Student’s Training and Research Activity (STRA) Card”.

In the course of a practical training the students shall conduct a self-reliant STRA on the subject of “The incidence of overweight among high blood pressure patients”, health educative activities in the form of health letters or health educative talks with the patients, fill out the STRA Cards (5 per each student), Practical Training Journals and submit an STRA Summary, the letters on health educative activity conducted specifying the subjects of the health letters or talks with patients (the size of audience specified), filled-out Practical Training Journals of “Medical and surgical patient care”.

The task of preparing a Practical Training Journal and STRA Summary promotes the skills of filling out medical reporting documents, of arranging preventive measures at all work stages of the medical attendants, and of research and health educative activities.

Working at the units of a multi-faceted hospital supervised by a teacher and medical personnel a student develops his/her sense of community and social skills.

The training promotes the students’ patient interaction skills with due regard to ethical and deontological peculiarities of the medical condition and patients themselves. The individual work with patients promotes the professional manner of conduct, carefulness, and diligence.

In the end of the course of practical training intermediate knowledge assessment shall be carried out by means of testing, checking of the practical aptitudes, interviewing about the results of the practical training with assessment of

the Practical Training Journal kept.

The problems touched upon during the practical training “Medical and surgical patient care” are included in the Final State Examination.

Practical Training Diary keeping rules

1. The Diary is an official document of the practical training passed. The writing in it must be intelligible, literate, in the medical parlance.

2. Records in the Diary must be put daily at the end of the working day summarizing all the work done in the hospital’s divisions.

3. The record of work done shall be certified by a nurse’s signature (the desk nurse, procedure room nurse, dressing room nurse, etc.).

4. In the beginning of a Practical Training Summary a brief description of the unit should be given, viz. the specialization of the unit, the number of beds, the unit’s staffing, availability of auxiliary rooms, etc.).

5. Upon the completion of the practical training, the student must fill out an End of Assignment Consolidated Numeric Report.

6. The health educative work shall be carried out by means of talking, making health letters; scope, place and time of the work carried out shall be recorded in the Journal and certified by the immediate practical training supervisor’s signature.

7. In the course of the practical training all the students shall conduct STRA preparing the corresponding essay or fill out STRA Cards that should be presented to the supervising teaching assistant for check along with the Journal.

The student’s individual work is a practical training in the form of student’s individual work supervised by a teacher.

List of themes of essays:

1. Definition of the care of surgical patients.
2. The importance of nursing in surgery.
3. Basic principles of ethics of care in the surgical clinic.
4. Therapeutic and protective regime surgical departments.
5. Body Health medical staff.

6. Hair care, oral, nasal.
7. Hand Care medical staff.
8. Health personal clothing of medical personnel in the surgical clinic.
9. Wearing apparel and Medical Care: medical gown, cap, spare shoes.
10. Rules and hygiene of wearing a gauze mask.
11. Rules of conduct of medical staff in the dressing, handling, operation unit.
12. Nosocomial (hospital) infection.
13. Equipment receiving-diagnostic department.
14. Sanitization of the surgical department.
15. The surgical patient transport to the station.
16. Disinfection air sources of ultraviolet radiation.
17. Treatment and disinfection of medical equipment, medical diagnostic equipment, racks, cabinets, dressing tables, couches, wheelchairs.
18. The surgical patient's body Health with the free mode.
19. The surgical patient's body Health with bed rest.
20. Sanitization of the oral cavity in surgical patients with bed rest.
21. Rubbing or washing the patient in bed.
22. Integrated prevention of pressure ulcers in patients with bed rest.
23. Sanitation and disinfection baths and bathroom facilities.
24. Shift in patients with a free mode.
25. Change of underwear in patients with bed rest.
26. Treatment and disinfection of mattresses, blankets and pillows.
27. Nutrition of surgical patients.
28. Features of care after abdominal surgery.
29. Care of patients with lesions of the musculoskeletal system.
30. Features of care for patients with gastrostomy, cystostomy, tracheostomy.
31. Care of patients in critical condition.
32. Features of care for patients with burns and frostbite.
33. Features of care for patients with injuries of the thorax.
34. Features of care for urological patients.
35. Features of care for cancer patients.



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SCHOOL OF BIOMEDICINE

FUND ASSESSMENT TOOLS

**Учебная практика «Клиническая практика (Уход за больными хирургического и
терапевтического профиля)»**
Educational practice “Clinical practical training (Medical & Surgical Patient Care)”
Educational program
Specialty 31.05.01 «General medicine»
Form of study: full time

Vladivostok 2018

Passport of the Fund Assessment Tools is filled in accordance with the Regulations on the Funds of Evaluation Tools of Educational Programs of Higher Education - Bachelor's Programs, Specialties, FEFU Magistrates, approved by order of the Rector on 12/05/2015 No. 12-13-850.

Competence code and wording	Competence formation stages	
PC-10 - the willingness to deliver medical first aid in case of sudden acute diseases and conditions, exacerbation of a chronic disease, which are not life-threatening and do not require emergency medical assistance	Knows	Personal hygiene and types of patient decontamination; fundamentals of safety of patients and own safety; methods of movement and transportation of patients. Dietary habits of patients, has an idea of artificial feeding; principles of delivering a palliative care. Types of fevers and peculiarities of care for patients being in a fever; regimes of a patient; current and potential problems of a patient in the most common therapeutic diseases; control criteria of a patient's state.
	Able to	To do patient decontamination on admission to hospital and during a patient's stay in hospital; to change undergarment and bed linen, treat bed sores; collect information on a patients (questioning, examination) and reveal a patient's current, potential and priority problems associated with a disease
	Possesses	Technique of patient decontamination; Feeding technique, bed items sanitation technique
PC-11 -the willingness to assist at the delivering emergency medical care for the patients in the conditions, requiring urgent medical participation;	Knows	Principles of delivering an emergency medical care in therapeutic practice; Basic nursing tasks to settle a patient's problems in the most common therapeutic diseases; methods of use of medicines, has an idea of allergic responses and delivering the first premedical care;
	Able to	To assess a patient's potential and priority problems associated with a disease; to care for patients of different age and with different therapeutic pathologies; to formulate a nursing diagnosis, care tasks and to make up a plan of their fulfillment, with implementation of all treatment principles and nursing care;
	Possesses	Skills to use the items of care for patients which are required urgent medical interference; skills of disinfection of medical care materials and items.
PC-13 - the willingness to do a medical assistance in emergency situations, as	Knows	Rules of delivering medical care in emergencies, including medical evacuation of patients and type of evacuation

Competence code and wording	Competence formation stages	
well as in medical evacuation	Able to	To do work of medical attendants in accordance with legal aspects of activity, to carry out medical evacuation of patients
	Possesses	Skills of delivering a primary premedical health care and types of medical evacuation of injured persons
PC-22 - the willingness to participate in implementation of new methods and techniques aimed at protection of public health	Knows	New methods and techniques aimed at public health care, including Russian laws as well as the documents for assessment of quality and efficiency of work of healthcare organizations
	Able to	To use new methods and techniques aimed at public health care
	Possesses	Basic methods and techniques aimed at public health care

The scale of assessment the level of formation of competences

Code and formulation of competence	Stages of the formation of competencies		Criteria	Indicators	Points
PC-10 - the willingness to deliver medical first aid in case of sudden acute diseases and conditions, exacerbation of a chronic disease, which are not life-threatening and do not require emergency medical assistance	Knows (threshold level)	Personal hygiene and types of patient decontamination; fundamentals of safety of patients and own safety; methods of movement and transportation of patients. Dietary habits of patients, has an idea of artificial feeding; principles of delivering a palliative care. Types of fevers and peculiarities of care for patients being in a fever; regimes of a patient; current and potential problems of a patient in the most common therapeutic diseases; control criteria of a patient's state.	Knowledge of personal hygiene and types of patient decontamination; fundamentals of safety of patients and own safety; methods of movement and transportation of patients; dietary habits of patients, has an idea of artificial feeding; principles of delivering a palliative care; types of fevers and peculiarities of care for patients being in a fever; regimes of a patient; current and potential problems of a patient in the most common therapeutic diseases; control criteria of a patient's state.	Formed and structured systematic knowledge of personal hygiene and types of patient decontamination; fundamentals of safety of patients and own safety; methods of movement and transportation of patients; dietary habits of patients, has an idea of artificial feeding; principles of delivering a palliative care; types of fevers and peculiarities of care for patients being in a fever; regimes of a patient; current and potential problems of a patient in the most common therapeutic diseases; control criteria of a patient's state.	65-71

	Is able to (advanced)	To do patient decontamination on admission to hospital and during a patient's stay in hospital; to change undergarment and bed linen, treat bed sores; collect information on a patients (questioning, examination) and reveal a patient's current, potential and priority problems associated with a disease	Ability to do patient decontamination on admission to hospital and during a patient's stay in hospital; to change undergarment and bed linen, treat bed sores; collect information on a patients (questioning, examination) and reveal a patient's current, potential and priority problems associated with a disease	Ready and can to do patient decontamination on admission to hospital and during a patient's stay in hospital; to change undergarment and bed linen, treat bed sores; collect information on a patients (questioning, examination) and reveal a patient's current, potential and priority problems associated with a disease	71-84
	Possesses (high)	Technique of patient decontamination; Feeding technique, bed items sanitation technique	Formed skills of patient decontamination; feeding, bed items sanitation	Skills surely to perform patient decontamination; feeding, bed items sanitation	85-100
PC-11 – the willingness to assist at the delivering emergency medical care for the patients in the conditions, requiring urgent medical participation;	Knows (threshold level)	Principles of delivering an emergency medical care in therapeutic practice; basic nursing tasks to settle a patient's problems in the most common therapeutic diseases; methods of use of medicines, has an idea of allergic responses and delivering the first premedical care;	Knowledge of principles of delivering an emergency medical care in therapeutic practice; basic nursing tasks to settle a patient's problems in the most common therapeutic diseases; methods of use of medicines, has an idea of allergic responses and delivering the first premedical care;	Formed and structured systematic knowledge of principles of delivering an emergency medical care in therapeutic practice; basic nursing tasks to settle a patient's problems in the most common therapeutic diseases; methods of use of medicines, has an idea of allergic responses and delivering the first premedical care;	65-71
	Is able to (advanced)	To assess a patient's potential and priority problems associated with a disease; to care for patients of different age and with different therapeutic pathologies; to formulate a nursing diagnosis, care tasks and to make up a plan of their fulfillment, with implementation of all treatment principles and nursing care;	Ability to assess a patient's potential and priority problems associated with a disease; to care for patients of different age and with different therapeutic pathologies; to formulate a nursing diagnosis, care tasks and to make up a plan of their fulfillment, with implementation of all treatment principles and nursing care;	Ready and can to assess a patient's potential and priority problems associated with a disease; to care for patients of different age and with different therapeutic pathologies; to formulate a nursing diagnosis, care tasks and to make up a plan of their fulfillment, with implementation of all treatment principles and	71-84

				nursing care;	
	Possesses (high)	Skills to use the items of care for patients which are required urgent medical interference; skills of disinfection of medical care materials and items.	Formed skills to use the items of care for patients which are required urgent medical interference; skills of disinfection of medical care materials and items.	Skills surely to use the items of care for patients which are required urgent medical interference; skills of disinfection of medical care materials and items.	85-100
PC-13 – the willingness to do a medical assistance in emergency situations, as well as in medical evacuation	Knows (threshold level)	Rules of delivering medical care in emergencies, including medical evacuation of patients and type of evacuation	Knowledge of rules of delivering medical care in emergencies, including medical evacuation of patients and type of evacuation	Formed and structured systematic knowledge of rules of delivering medical care in emergencies, including medical evacuation of patients and type of evacuation	65-71
	Is able to (advanced)	To do work of medical attendants in accordance with legal aspects of activity, to carry out medical evacuation of patients	Ability to do work of medical attendants in accordance with legal aspects of activity, to carry out medical evacuation of patients	Ready and can to do work of medical attendants in accordance with legal aspects of activity, to carry out medical evacuation of patients	71-84
	Possesses (high)	Skills of delivering a primary premedical health care and types of medical evacuation of injured persons	Formed skills to deliver a primary premedical health care and types of medical evacuation of injured persons	Skills surely to deliver a primary premedical health care and types of medical evacuation of injured persons	85-100
PC-22 - the willingness to participate in implementation of new methods and techniques aimed at protection of public health	Knows (threshold level)	New methods and techniques aimed at public health care, including Russian laws as well as the documents for assessment of quality and efficiency of work of healthcare organizations	Knowledge of new methods and techniques aimed at public health care	Formed and structured systematic knowledge of new methods and techniques aimed at public health care	65-71
	Is able to (advanced)	To use new methods and techniques aimed at public health care	Ability to use new methods and techniques aimed at public health care	Ready and can to use new methods and techniques aimed at public health care	71-84
	Possesses (high)	Basic methods and techniques aimed at public health care	Formed skills for use new methods and techniques aimed at public health care	Skills surely for use new methods and techniques aimed at public health care	85-100

Description of the final performance rating procedure specifying all the requirements imposed on a student.

1. The in-process students' performance rating shall be carried out during the class. The teacher gives a test evaluating the initial and final level of the students' knowledge, asks them to recite on the topic of the class. The teacher evaluates each student's individual performance with respect to the purpose and objectives of the practical study.
2. The intermediate performance rating shall be carried out during the final monitoring classes in care for patient with diseases of different organs and systems.
3. The monitoring of the students' individual extramural work shall be carried out during the final classes and the pass/fail examination.
4. At the end of the therapeutic patient care course there shall be the pass/fail examination, which includes a test of the final level of the students' knowledge, a test of practical skills and theoretical knowledge.

The resulting evaluation at the pass/fail examination shall be made with due regard to the level of mastering the practical skills, the level of theoretical knowledge and aptitudes.

The criteria of test results evaluation:

1. *excellent* –90% -100% answers correct;
2. *good* –80% -89% answers correct;
3. *satisfactory* –70% -79% answers correct

A list of questions for preparation to the pass/fail examination

(the full extent):

1. Types of medical care.
2. The concept of patient care.
3. Active, passive and forced position of the patient
4. Events nursing.
5. Measurement of the body temperature.
6. Oral Care
7. Skin Care.
8. Assessment of respiratory and sputum.

9. Assessment of the cardiovascular system.
10. Blood pressure and its measurement.
11. Assessment of the digestive system.
12. Post-operative care of patients.
13. Hygiene treatment arms.
14. Gastric lavage: technology, reading.
15. Enema. Definition. Cleansing enema.
16. Laxative enema.
17. Siphon enema.
18. Medicinal and nutritional drip enema.
19. Prevention of airborne infection.
20. Dressing material, its properties.
21. Signs of arterial, venous, and capillary bleeding.
22. Methods temporary stop external bleeding.
23. RAP with external bleeding.
24. RAP with nosebleeds, bleeding from the ear, after tooth extraction.
25. Methods affected transportation.
26. Signs of terminal states (predagoniya, agony, clinical death).
27. Technique ventilation "mouth to mouth" and "mouth-to-nose".
28. Technique chest compressions.

Testing items for the preliminary assessment (examples):

Please, choose the right answer:

Define asepsis

* A set of activities aimed at the prevention of infection in the wound tissue and the patient's body.

B. A set of measures aimed at combating the infection in humans.

Tests intermediate control:

At what temperature (in degrees Celsius) sterilized instruments in a heat sterilizer

- A 120 °.
- B. 150 °.
- B. * 180 °.
- G. 200 °.
- D. 220 °.

Situational clinical problem (examples):

Boy, 13 years, drive in the nail, missed and struck himself a blow with a hammer on the index finger of the left hand. Instantly there were severe pain in the finger, reflex gentle limited mobility in it and blue skin on its back surface.

What kind of help you will render a child?

The standard response to the problem

It should be immediately put a finger under a stream of cold water from the tap and hold to numb the skin. If there is no cooling jets, the bruised finger dipped in cold water, covered snow or ice. After cooling finger will dry, inspected, checked the possibility of movement in it. Cooling to repeat until pain subsides and improve movement. After cooling, if there is no abrasion, no patch is applied. Subsequently, the child should be examined by a surgeon.

9. FORMS OF ASSESSMENT (BASED ON TRAINING RESULTS)

Upon completion of the practical training a student provide a training manager with a completed report card and charts of students educational and research activities (5 pcs or an abstract). The training manager from the FEFU department holds an interview based on results of the practical training. Based on results of a successful interview and performance of all tasks related to the practical training, the student gets a credit, which can be assessed by points.

Basic assessment criteria of practical training

- Proper and correct execution of all necessary documents;

- Positive reference given by the immediate training manager from a healthcare organization;
- Clear-cut and competent answers to questions of the training manager from the department at the stage of interviewing based on practical training results.

TEST CHECK OF PRACTICAL TRAINING

“Clinical (Medical and surgical patient care) for specialty “Medical care”

1. Medical deontology studies:

- a) relations between a physician and a patient
- +b) wide range of issue of duty, morality and professional ethics of medical specialists
- c) iatrogenic diseases
- d) patient care measures

2. Relation of the notion “care” and “treatment” to each other:

- a) care and treatment are different notions; treatment is carried out by a physician, care is carried out by paramedical personnel and medical attendants
- b) care and treatment are identical notions, because the both notions set sights on achievement of recovery of a patient
- +c) care is an integral component part of treatment
- r) care is not necessary condition for adequate treating measures

3. Iatrogenic diseases are:

- +a) sick condition stipulated by activity of healthcare workers
- b) sick condition stipulated by fear of one or another disease
- c) sick condition stipulated by relatives’ influence
- d) sick condition stipulated by a need to perform medical and diagnostic procedure

4. A patient without referral documents visited the admission office, suddenly felt badly. What are your actions:

- +a) to examine a patient, provide a patient with a necessary medical aid and decide on further actions

- b) to call an ambulance
- c) to send a patient for referral documents
- d) to leave a patient and call a doctor

5. With what diseases a patient can be admitted without medical documents:

- +a) myocardial infarction
- b) scheduled admission
- c) examination
- d) presence of chronic diseases of digestive system

6. Patient is brought to an admission office being unconscious , without documents , not accompanied by relatives. What a nurse should do in addition to completion of all documentation:

- a) to notify a polyclinic stating a diagnosis
- +b) to send a telephonogram to a police office, describing a patient's appearance and clothes
- c) inform his relatives
- d) not to take any actions

7. What aid should be given to a patient in pulmonary edema:

- a) to put in a semi-sitting position
- b) to provide inhalation of oxygen and ethyl alcohol vapor mix
- c) to call a doctor on duty
- +d) all the above listed

8. What is Zimnitsky test:

- +a) study of daily urine amount and specific gravity in 8 portions (every 3 hours)
- b) study of urine minute volume
- c) determination of glucose in urine daily volume
- d) quantitative test of formed elements in urine

9. What Pevzner diet number should be observed by a patient in ulcer:

- +a) №1
- b) №7
- c) №10

d) №9

10. A morning temperature in a patient has been being maintained within 38.0-38.5 °C for 2 weeks, and evening one - within 36.5-36.9 °C. What kind of fever has the patient:

+a) remittent

b) hectic

c) inverse, atypical

d) intermittent

11. What are symptoms of gastric bleeding:

a) “coffee ground” vomiting, black tarry stool (melena)

b) decrease of blood pressure, abnormal sweating

c) skin pallor

+d) all the above listed

12. Preparation of a patient for irrigoradiography:

a) in the morning at the day of examination, not to have breakfast, cleansing enema in the morning

b) in the evening on the day before examination - cleansing enema, in the morning at the day of examination not to have breakfast

+c) to keep a special diet for 3-5 days before examination, not to have dinner on the day before examination, to administer a cleansing enema; not to have breakfast at the day of examination, to administer a second cleansing enema

d) special preparation is not required

13. What signs are typical for chest pain associated with pleura damage:

+a) increased pains in deep breathing and cough;

b) skin pallor

c) decrease of blood pressure

d) increase of temperature

14. What is not contradiction for using a hot compress:

+a) local inflammatory processes in skin and subcutaneous fiber

b) high fever

- c) empyesis
- d) skin disintegration

15. What measure should be taken in the initial stage of bed sores formation:

- a) to use difference biologically active ointments
- b) to perform surgical treatment
- +c) to treat the skin with 1% brilliant green solution, strong potassium permanganate solution, 5-10% iodine solution
- d) to use oxygen therapy

16. List the rules of using a pocket inhalation device:

- a) keeping a can at a distance to press its bottom and then to inhale
- +b) to inhale and simultaneously press the can bottom, to hold breathing for some second
- c) to inhale, hold breathing for some seconds, then to inhale
- d) to inhale, press the can bottom and inhale

17. What amount of washing fluid should be prepared for administration of a siphon enema:

- a) 1-1,5 L
- b) 50-100 ml
- c) 5-6 L
- +d) 10-12 L

18. What is tachycardia:

- a) pulse rate 60-80 beats/minute
- +b) increase of cardiac beats more than 80 beats/minute
- c) decrease of cardiac beats less than 60 beats/minute
- d) non-rhythmic pulse

19. What is a oxygen percentage in oxygen therapy:

- a) 100%
- b) 20%
- +c) 40-60%
- d) less 40%

20. What is negative diuresis:

- +a) patient discharges urine for a day much less than he consumes liquid
- b) patient discharges for a day with urine 70-80% of consumed liquid
- c) patient discharges urine for a day more than consumed liquid
- d) amount of consumed and discharged urine is approximate equal

21. Patient, after frequent venous punctures of the same vein, developed a pain, redness, infiltration along the vein, subfebrile temperature. What is a patient's complication:

- a) hematoma
- b) embolia
- +c) thrombophlebitis
- d) infiltrate

22. What measures should be taken in postoperative period to reduce negative aftereffects of narcosis:

- +a) oxygen therapy
- b) abundant drinking
- c) catheterization of urinary bladder
- d) siphon enema

23. Examination of skin and taking temperature of admitted patients in order to rule out an infection with the purpose of observing the epidemiological regime is carried out by:

- +a) physician of reception ward
- b) nurse of reception ward
- c) nurse of hospital department
- d) medical attendants

24. What is a relation of presses to the chest and inhalations if closed-chest cardiac massage and artificial lung ventilation are performed by one person:

- a) in every 10-12 presses - two inhalations
- b) in every 4-5 presses - one inhalation

- c) in every press - one inhalation
- +d) in every 15 presses - one inhalation

25. What is a relation of presses to the chest and inhalations if closed-chest cardiac massage and artificial lung ventilation are performed by two persons:

- +a) in every 10-12 presses - two inhalations
- b) in every 4-5 presses - one inhalation
- c) in every press - one inhalation
- d) in every 15 presses - one inhalation

26. What Pevzner diet should be prescribed to diabetic patient:

- a) №3
- +b) №9
- c) №8
- d) №1

27. How urine should be collected for Nechiporenko test:

- a) within a day in every 3 hours
- b) within 10 hours (from evening till morning)
- c) singly for 3 hours
- +d) average morning urine portion

28. What is proctosigmoidoscope:

- +a) examination of mucosa of rectum and sigmoid
- b) contrast study of bowel
- c) digital rectal examination
- d) X-Ray of bowel

29. A morning temperature in a patient has been being maintained within 36.0-36.5 °C for 2 weeks, and evening one - within 37.5-38.0 °C. What kind of fever has the patient:

- a) remittent
- b) hectic
- c) inverse, atypical

+d) intermittent

30. What method of administration of medicines is enteral:

- a) external use of medicines
- b) use of medicines with the aid of injections
- +c) administration of medicines perorally, under tongue, rectally
- d) inhalation administration of medicines

31. Can bed sores appear in a patient's forced sitting position:

- a) no, as far as bed sores appear only when a patient is in supine, prone or lateral position;
- +b) yes, within sitting bones;
- c) no, as far as in a sitting position there is a great layer of subcutaneous fat and muscular tissue between bony prominence and bedding.
- d) yes, within heel bones

32. What aid should be given to a patient in case of bronchial asthma attack:

- a) to take temperature
- +b) to put in a semi-sitting position and provide a flow of fresh air
- c) to provide a flow of fresh air
- d) to bring a patient in bed

33. List the figure of normal arterial pressure:

- +a) less than 139 and 89 mmHg
- b) 145 and 90 mmHg
- c) 155 and 95 mmHg
- г) 140 и 90 мм рт ст

34. What kind of aid to the patient should be administered when he/she is having precordialgia?

- a) the patient should be seated or laid down giving him/her complete rest;
- b) applying tourniquets to the extremities;
- +c) ordering him/her to take 1 pill of nitroglycerine sublingually and 30 – 40 drops of Corvalol;
- d) laying some hot-water bags by his/her extremities.

35. Which is the right way to measure the pulse at the radial artery?

- +a) embracing the region of the radiocarpal joint so that the finger I rest on the dorsal side of the forearm, and the fingers II – IV feel the radial artery pushing it to the radial bone, first – on both arms;
- b) embracing the region of the radiocarpal joint so that the fingers II – IV rest on the dorsal side of the forearm, and the finger I feel the radial artery pushing it to the radial bone;
- c) positioning the arm in such a way so that the finger I feel the radial artery pushing it to the radial bone;
- d) positioning the arm in any way.

36. List contradictions to gastric lavage:

- a) poisoning
- +b) myocardial infarction
- c) narrowing of exit portion of stomach
- d) subfebrile temperature

37. What is polyuria:

- a) frequent urination
- +b) increase of daily urine amount more than 2 liters
- c) decrease of daily urine amount less than 500 ml
- d) difficult urination

38. What measures of patient care should be taken in the third stage of fever when critical dropping of body temperature is experienced?

- a) lifting the footboard;
- b) applying cold compress to the forehead, sponging or lavaging the mouth cavity with water;
- c) the patient should not be covered with a warm blanket, sponged or bathed, the ward – aired so that no draught is created;
- +d) laying hot-water bags round the patient, giving him/her some strong sweet tea.

39. What are the contraindications for hot-water bag application to the abdominal region?

- a) the active ulcer pains;
- b) the intestinal colic;
- c) the low-grade fever;
- +d) suspect of an acute surgical abdominal disease.

40. Which of the following is an adverse effect of the intravenous injection?

- a) the abscess;
- +b) the thrombophlebitis;
- c) the low-grade fever;
- d) the infiltration.

41. How should the patient be prepared for an endoscopic examination of the stomach?

- +a) no breakfast the day of the examination, the latest meal the day before – no later than 9 pm, the dental prostheses removed, showing at the endoscopy room with a towel;
- b) a cleansing enema in the evening and morning 2 hours before the examination, the latest meal the day before – no later than 9 pm;
- c) keeping to a special diet for 3 – 5 days prior to the examination, the day of the examination – no breakfast, a cleansing enema;
- d) no special preparation required.

42. How often must the cold wet compress be changed?

- a) every 2 – 3 minutes;
- +b) as it dries up;
- c) every 10 – 15 minutes;
- d) it should be left for 1 – 1.5 hour.

43. Name the main transmission routes of a hospital-acquired infection.

- +a) the airborne route;
- b) the parenteral route;
- c) the direct contact;
- d) the oral route.

44. How should a patient be prepared for a fecal occult blood test?

- +a) omitting ferrous food and medicines for three days, if there is gum bleeding within this period – no cleaning of the teeth with a brush;
- b) keeping to a strict diet for three days so that the chemical makeup of the food is known, cleansing enemata;
- c) no special preparation required;
- d) a cleansing enema and laxative administration;

45. Which Pevzner diet should be prescribed to a patient with chronic glomerunephritis?

- +a) No. 7
- b) No. 8
- c) No. 5
- d) No. 9

46. What is stranguria?

- a) the urinary difficulty;
- b) the frequent urination;
- c) the low output of urine;
- +d) the painful urination.

47. For 2 weeks the patient's body temperature in the morning persists within 36.0 – 36.5 °C, in the evening – within 39.5 – 40.0 °C. What type of fever does the patient have?

- a) the remittent fever;
- +b) the hectic fever;
- c) the inverse fever;
- d) the intermittent fever.

48. Should the patient with nosebleed be recommended to throw back his/her head?

- a) yes, as this helps stop bleeding;
- b) this should be recommended in the case of a very intensive nosebleed;

+c) no, as this will not stop the bleeding; the blood will run down the nasopharynx's posterior wall, which will hinder the correct assessment of the dynamics of bleeding;

d) yes, as this will alleviate the patient's condition.

49. Why when performing expired air ventilation one should hold the patient's head back?

a) so that the resuscitator's mouth could easily access the patient's nose or mouth;

b) to facilitate the clear airway;

+c) to create well-sealed connection of the resuscitator's mouth and the patient's nose (or mouth) when performing the ventilation;

d) to enable maximal air intake.

50. What are the typical complaints when affected by a respiratory condition?

a) fever;

b) retrosternal pains relieved by nitroglycerin;

+c) cough

d) vertigo.

51. What kind of aid should be administered to a patient in gastric hemorrhage:

a) to lay a patient down into a bed with a foot board perched

b) to give a cold drinking

+c) to put an ice bag on upper abdomen

d) to wash a ventricle

52. A patient has occipital headache, seeing dark spots in his (her) vision, sicchasia, head noises. What are your actions:

+a) to measure an arterial tension

b) to lay a patient down into a bed with a foot board perched

c) to lay a patient down into a bed with a headboard perched

d) to give a nitroglycerine sublingually

53. What nursing measures should be taken in the second stage of febris (the stage of maximum temperature maintenance):

- a) to warm a patient, to cover him (her) with hot-water bags
- +b) to keep watch over the pulse frequency, breathing rhythm and arterial tension state
- c) to keep watch over the central nervous system state
- d) to perform oral care

54. What is a bradycardia:

- a) a pulse frequency of 60-80 beats per minute
- b) increase of cardiac beat frequency to more than 80 beats per minute
- +c) deceleration of cardiac beat to less than 60 beats per minute
- d) unrhythmic pulse

55. What complications are connected with the violation of aseptic and antiseptic regulations in carrying out of injections:

- a) air and fat embolism
- b) allergic reactions
- +c) progression of post-injection infiltrates and apostems
- d) temperature rise

56. For semilying patient it is allowed:

- a) to seat on a chair near the bed
- b) to walk upstairs
- c) to walk along the hallway
- +d) to get up and walk around the ward

57. What is not a counterindication to a cleansing enema from among the following:

- +a) coprostitia
- b) enterorrhagia
- c) malignant neoplasms of a straight intestine
- d) roentgen examination of urinary organs

58. How to count the breathing rhythm correctly:

- a) ask a patient to breath deep and count the number of movements

+b) to take a patient by the hand like for the sphygmomanometry (in order to divert the patient's attention), and to put the other hand on a breast or upper abdomen and count the number of breath intakes per minute

c) to put the hand on a breast or upper abdomen and count the number of breath intakes per minute

d) performed at random

59. Why is it prohibited to blow up a toilet seat cover too much:

a) it will be broken down quickly

b) it will be difficult to give a steady position to this in the bed

+c) it must change its form when the patient is moving

d) it takes too much time

60. What symptoms are the most common to the renal colic:

+a) sharp pain in lumbar area running along the renal duct to the pelvic area

b) a patient lies on his (her) back

c) lack of urination

d) polyuria

61. Name the measures necessary to control the enteroplegia in postoperative period:

a) oxygenotherapy

b) urinary catheterization

c) change of underwear and bedclothes of a patient

+d) carrying out of a siphon enema

62. Determine the states in which a physiological temperature rise may occur:

+a) food intake

b) psychoemotional stress

c) sleeping

d) virulent diseases

63. Give a nutritional advice to a patient with circulatory deficiency:

a) decrease of the meal taken

+b) restriction of salt intake

- c) mechanical sparing of food
- d) increase of the meal taken

64. Choose a medical syringe and acus for subcutaneous introduction of 1.5 ml of solution:

- a) medical syringe volume - 20 ml, acus length -15 mm
- b) medical syringe volume - 2 ml, acus length - 30 mm
- +c) medical syringe volume - 2 ml, acus length - 15 mm
- d) medical syringe volume - 10 ml, acus length - 15mm

65. What characteristics of hemorrhage are indicative of its pulmonic nature:

- +a) the blood is blood-red and foamy
- b) the blood is dark and caked
- c) such as “spent coffee grounds”
- d) streaks of blood

66. What is the purpose of oxygen watering in oxygen therapy:

- a) compliance with the safety regulations
- +b) prevention of toxic oxygen impact on the organism
- c) prevention of its excessive loss
- d) prevention of pharyngonasal cavity dryness

67. Describe the signs of anginal attack:

- a) pressing and constricting pain
- b) substernal distribution
- c) disappear upon the nitroglycerine administration
- +d) all the signs listed

68. What are the symptoms of gastrointestinal hemorrhage:

- a) vomiting with cakes of dark-cherry blood
- +b) black melanorrhea
- c) light-colored feces
- d) subfebrile temperature

69. What diuresis disorder is called nycturia:

- a) increase of urination frequency

- b) increase of volume of daily urine by more than 2 l
- +c) preponderance of night-time diuresis over daytime diuresis
- d) decrease of volume of daily urine by less than 500 ml

70. The first aid in the sun stroke:

- +a) to carry the injuree to a cool place
- b) measure a temperature
- c) hot drinking
- d) nitroglycerine intake

71. What dietary menu according to Pevsner is administered in hepatic and bile passages disorders:

- a) No. 1
- b) No. 2
- +c) No. 5
- d) No. 9

72. Specified procedure established in a medical institution, the main goal of which is the formation of conducive environment for physical and psychic quietness is:

- +a) therapeutic and protective regimen
- b) hospital regimen
- c) ward regimen
- d) open ward regimen

73. Specify a correct procedure for wards cleaning-up:

- +a) removal of dust from window stools and furniture; cleaning-up of bedside tables; damp sweeping
- b) damp sweeping; removal of dust from window stools and furniture; cleaning-up of bedside tables
- c) cleaning-up of bedside tables; removal of dust from window stools and furniture; damp sweeping
- d) damp sweeping; cleaning-up of bedside tables; removal of dust from window stools and furniture

74. What measures should be taken in urine retention in postoperative period:

- a) oxygenotherapy
- +b) urinary catheterization
- c) siphon enema
- d) change of underwear and bedclothes of a patient

75. When is a nutritional support through the PEG tube being used:

- a) after esophagus operation
- b) in inoperable tumors of the esophagus
- c) in case of food refusal in mental illnesses
- +d) all the cases listed

76. A morning temperature in a patient has been being maintained within 37.5-38.0 °C for 2 weeks, and evening one - within 39.0-39.5 °C. What kind of fever has the patient:

- a) remittent
- b) hectic
- c) misdirected
- +d) continued

77. How to prepare a patient for ultrasonic investigation of organs of the digestive system:

- a) a diet with exclusion of the products causing the aerogenesis, administration of the activated carbon during 2-3 days, investigation is carried out in the fasted state
- b) cleansing enemas should be carried out on the eve and on the day of investigation, a patient should be fasted
- c) special preparation is not required
- +d) investigation is carried out in the fasted state

78. In order to eliminate the acute urinary retention the following is used:

- a) urinary catheterization
- +b) cystostomy
- c) ablution of externalias with warm water
- d) administration of spasmolytics (drotaverine, baralgin)

79. When are the medicinal products being administered per os after meal:

- +a) in their irritant effect on the gastric mucosa
- b) if these medicinal products contribute to digestion
- c) in destructive effect of the gastric acid and ferments on the medicinal product
- d) in diseases of the digestive system

80. What is a forced patient's position:

- a) a patient may easily perform any voluntary movements
- b) active movements are impossible
- +c) position taken by the patient with the purpose of pain feelings reduction
- d) alterations of consciousness

81. Determine the measures necessary for prevention of pulmonic complications in postoperative period:

- a) change of underwear and bedclothes of a patient
- b) siphon enema
- +c) giving a semisitting position
- d) urinary catheterization

82. What nursing measures should be taken in the first stage of febris (the stage of temperature rise):

- a) to give the hot tea
- b) to warm a patient, to cover him (her) with hot-water bags
- +c) to put a cold compress on the forehead
- d) to change an underwear and bedclothes

83. Give a nutritional advice to a patient with recrudescence of the gastric ulcer:

- a) frequent and split meals
- b) organization of fasting days
- +c) mechanical and chemical sparing
- d) restriction of salt intake

84. What are the symptoms of gastrointestinal hemorrhage:

- a) external administration of medicinal products

- b) administration of medicinal products through injections
- +c) any method of administration of medicinal products bypassing the gastrointestinal tract
- d) pulmonary administration of medicinal products

85. What diseases are characterized by the progression of acute respiratory failure:

- a) pulmonary emphysema
- b) gastrointestinal hemorrhage
- +c) blockage of trachea and large bronchi by foreign object
- d) myocardial infarction

86. What is the purpose of pleural puncture:

- a) removal of liquid for medical purpose
- b) removal of liquid for exploratory purpose
- c) administration of medicinal products into pleural cavity
- +d) all the purposes listed

87. What is important in care for a patient with the congestive heart failure:

- +a) control over the dynamics of oedemata
- b) measure a temperature
- c) frequent change of underwear and bedclothes
- d) dietary intervention

88. Medicinal enemas:

- +a) are used for local effect on the straight and sigmoid intestine
- b) are used for treatment of the intestinal obstruction
- c) are at most the small enemas
- d) are used for elimination of coprostasia

89. In pulmonary hemorrhage it is necessary to:

- +a) give the cold drinking
- b) measure the arterial tension
- c) ventilate a room
- d) put an ice bag on abdominal area

90. Criteria for efficacy of closed-chest cardiac massage:

- +a) appearance of pulse on carotid arteries
- b) myosis
- c) decrease of arterial tension
- d) increase of arterial tension

91. What is the purpose of a surgical bed:

- +a) allows to give a patient the most favorable and comfortable position
- b) it may be moved easily and quickly
- c) eases the labor of a medical staff
- d) allows to perform measures on the oral care

92. Intramuscular injections are administered:

- a) into the middle third of the outer side of a hip
- +b) into the upper external quadrant of a breech
- c) into abdominal area
- d) into the upper third of the outer surface of the upper arm

93. What diseases are characterized by the chronic respiratory failure:

- +a) pulmonary emphysema
- b) blockage of trachea by foreign object
- c) thromboembolia of the pulmonary artery
- d) gastrointestinal diseases

94. Transient increase of arterial tension may be observed:

- +a) in physical activities
- b) during meals
- c) during sleeping
- d) in execution of nursing measures

95. What is specific to the chronic cardiac insufficiency:

- a) shortness of breath
- b) oedemata
- c) cyanosis
- +d) all the signs listed

96. What kind of aid should be administered to a patient in syncope:

- a) to give a position with headboard elevated
- +b) to give a position with headboard lowered
- c) to measure a temperature
- d) to measure an arterial tension

97. To prevent the complications after anesthesia in the early postoperative period it is necessary:

- +a) a constant presence of medical staff near the patient's bed
- b) frequent temperature measuring
- c) change of underwear and bedclothes of a patient
- d) oxygenotherapy

98. Main nursing measures in postoperative period are aimed at:

- a) prevention of complications after anesthesia
- b) prevention of enteroplegia
- c) prevention of pulmonary complications
- +d) all the measures listed

99. Subfebrile temperature is characterized by the temperature rise within:

- a) 39-41°
- b) not higher than 38°
- +c) 38-39°
- d) higher than 41°

100. A hospital regimen does not include:

- a) timely and healthy eating
- b) prescription of additional examination
- c) sanitary and hygiene regimen
- +d) necessary treatment

Answer keys

№	Answer	№	Answer	№	Answer	№	Answer	№	Answer
1	B	21	C	41	A	61	D	81	C
2	C	22	A	42	B	62	A	82	C
3	A	23	A	43	A	63	B	83	C

4	A	24	D	44	A	64	C	84	C
5	A	25	A	45	A	65	A	85	C
6	C	26	B	46	D	66	B	86	D
7	D	27	D	47	B	67	D	87	A
8	A	28	A	48	C	68	B	88	A
9	A	29	C	49	C	69	C	89	A
10	A	30	C	50	C	70	A	90	A
11	D	31	B	51	C	71	C	91	A
12	C	32	C	52	A	72	A	92	B
13	A	33	A	53	B	73	A	93	A
14	A	34	C	54	C	74	B	94	A
15	D	35	A	55	C	75	D	95	D
16	B	36	B	56	D	76	D	96	B
17	D	37	B	57	A	77	D	97	A
18	B	38	D	58	B	78	B	98	D
19	C	39	D	59	C	79	A	99	C
20	A	40	C	60	A	80	C	100	D



THE MINISTRY OF EDUCATION AND SCIENCE OF THE RUSSIAN FEDERATION
Federal State autonomous education institution of higher education
«Far Eastern Federal University»
(FEFU)

SCHOOL OF BIOMEDICINE

DIARY

**Educational practice “Clinical practical training (Medical & Surgical
Patient Care)”**

Educational program

Specialty 31.05.01 «General medicine»

Form of study: full time

Student _____

I year _____ group _____ major _____

Practical training place _____

from _____ till _____

Head of practical training (teacher) _____

Grade of practice _____

20 /20 year

Vladivostok

1. **Goal of the practical training** – mastering knowledge and skills in care for patients in order to acquire practical skills and competences in the sphere of professional physician's activity, as well as preparation for prophylactic, therapeutic and organizational-management activities with acquiring the primary professional knowledge and skills in care for therapeutic patients

2. **When doing the practical training, a student should**

Know:

- Principles of organization of work of medical treatment facilities, arrangement and equipment of hospital treatment sections;
- theoretical framework and present-day concept of nursing, arrangement of work of medical attendants and paramedical personnel;
- principles of infectious safety assurance in medical treatment facilities;
- types of sanitation and ways of transportation of patients;
- types of fever;
- principles of use of medicines;
- peculiarities of follow-up and care for patients with diseases of different systems;
- signs of emergencies;
- peculiarities of follow-up and care for elderly and senile patients;
- principles of teaching the patients and their relatives to know the elements of care, self-care and self-control.

Be able:

- to perform sanitation of a patient on admission in hospital and during stay in hospital;
- to change a patient's undergarment and bed linen, to treat bed sores;
- to perform anthropometry, transportation and feeding of patients;
- to control hemodynamics and breathing parameters, to measure daily diuresis and body temperature;
- to collect patients' biological materials for laboratory studies;
- to use various methods of administration of medicines (in manikins);

- to care for patients of different age with diseases of organs and systems;
- to follow up and care for patients in pre- and postoperative period;
- to provide first aid in emergencies;
- to perform cardiopulmonary resuscitation (in manikins);
- to perform oxygen therapy, gastric lavage, to administer different enemas, to perform catheterization of the urinary bladder using an elastic catheter (in manikins);
- to carry out disinfection and pre-sterilization preparation of medical instruments, materials and means for patient care;
- to wash hands with disinfection solutions;
- to collect, process and systematize literature data.

Possess:

- skills of care for patients with an allowance for their age, nature and severity of disease;
- skills of care for serious and agonizing patients.

4. Grade on training is entered in a student's record-book by a teacher based on results of final test check, results of assessment of practical aptitudes and skills, on the ground of description of a student's work and results of credit interviewing with a teacher.

To describe methods:

- bedpan disinfection
- sanitation of seriously ill patients' oral cavity
- procedure of first aid in vomiting

Theme of sanitary bulletin:

Department	Data	Discussion theme	Listeners

Report on educational and research work of students (ERWS): give brief description educt

CHARACTERISTIC

Student _____ group № _____ Medical care

Far Easter Federal University, take practical training from _____ till _____
201__г. hospital _____

During pass Educational practice “Clinical practical training (Medical & Surgical Patient Care)”

Signature _____

Seal Date _____

Pass/fail practical training exam

1. Schedule _____
2. Test _____
3. Practical training _____
4. Oral interview _____
5. Personal, social and health education _____
6. ERWS _____

FINAL GRADE

Teacher _____

Date _____

Safety induction & emergency training course:

Nurse signature

Data	Content of work	Amount	Signature

Signature

Notice: Entries, in addition to daily practice, reflects health education student, participated in the research work, conferences and others.

Recommended score of works and level of mastering

№	Training sections and their content	Mastering level	Recommended scope	Actually performed
1.	Work on nurse's station			
	Preparation of working disinfection solutions	3	daily	
	Wet cleaning of premises	3	2-3 hours/day	
	Treatment of medical equipment and implements	3	daily	
	Distribution of meal to patients, feeding of seriously ill patients	3	10-12	
	Thermometry, completion of temperature sheet	3	daily	
	Shift of patient, use of tilting bed	3	5-6	
	Measurements of arterial pressure, detection of pulse, recording of examination results	3	daily	
	Change of undergarment of serous patient, intimate washing, giving of bedpan	3	5-6	
	Fulfillment of hygienic manipulations: oral and nasal cleaning, patient intimate washing, change of undergarment and bed linen	3	5-6	
	Fulfillment of simplest procedures: rubbing, dubbing of skin with medicaments, application of compresses	3	8-10	
	Control of sanitary conditions of bed-side chests	3	daily	
	Control of patients' visits	3	daily	
	Gastric lavage with thick probe	2-3	2-3	
	Preparation of a patient for X-Ray examination of gastrointestinal tract	3	2-3	
	Administration of enemas, colonic tube	3	5-6	
2.	Work in admission office			
	Sanitation of patients in admission office	3	5-6	
	Anthropometry of admitted patients	3	10-12	
	Transportation, transfer of a patient	3	5-6	
3	Work in laboratory division:			
	Sanitation of premises and implements	3	According to schedule	
	Preparation of equipment and implements for study	2-3	According to schedule	
	Delivery of biological fluids for research	3	According to schedule	
	Observation of study of blood, urine, stool	2	10-12	
	Completion of medical documentation	2-3	According to schedule	
4	Work in centralized sterilization room:	2-3		
	Preparation of materials for sterilization	3	1 shift	
	Placement of sterilizing dressing boxes	3	1 shift	
	Post-sterilization control	2-3	1 shift	
	Completion of medical documentation	2-3	1 shift	
	Sanitation of	3	1 shift	

Compliance with participation levels: 1 – to know theoretically, 2 – to participate, 3- to fulfill independently

Signature of direct training manager

ERWS CARD «STUDY BODY WEIGHT IN DIFFERENT TYPES OF
THERAPUTIC AND SURGICAL PATOLOGY»

Name. _____

Age _____

Sex _____

Marital status _____

Diagnosis _____

ANTHROPOMORPHIC MEASUREMENT

Growth _____

Weight _____

Waist circumference (WC) _____

Arm circumference (AC) _____

Hip circumference (HC) _____

Chest circumference (CC) _____

Index of Mass Corporal (IMC) _____

HEMODYNAMIC PARAMETER

Blood pressure (mm T ct) _____

Pulse: frequency _____

rhythmicity _____