



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



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(Full name)
«09» of July 2019



WORKING PROGRAM OF EDUCATIONAL PRACTICE (WPET)

**Учебная практика «Практика по получению первичных профессиональных умений
и навыков, в том числе первичных умений и навыков научно-исследовательской
деятельности»**

Educational practice «Primary professional and research training»

Education program
Specialty 31.05.01 «General medicine»
Form of study: full time

Vladivostok

2019

ABSTRACT

Учебная практика «Практика по получению первичных профессиональных умений и навыков, в том числе первичных умений и навыков научно-исследовательской деятельности» - Educational practice «Primary professional and research training» is intended for students enrolled in the educational program 31.05.01 "General Medicine". Discipline is implemented in 1st course in the 1st 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.

Purposes of the “Educational practice «Primary professional and research 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.

Objectives of the “Educational practice «Primary professional and research training»

- to stimulate interest in the selected profession;
- to develop practical skills in the area of prophylactic and epidemiological measures aimed at the prevention of infectious diseases, carrying out of basic

manipulations and procedures for care for therapeutic patients of different age and with different diseases when they are in hospital, job arrangement and determination of functional responsibilities of paramedical personnel of healthcare organizations;

- to teach the methods of fulfillment of a hospital hygiene and infection control in healthcare organizations and care for therapeutic patients;
- acquiring the practical skills by students in care for surgical patients;
- to study of activity management of paramedical personnel and medical attendants;
- to study and acquiring of skills to carry out various types of patient decontamination;
- to study of principles of storage and use of pharmaceuticals;
- teaching students to deliver premedical care;
- familiarization of students with principles of arrangement and work of treatment sections of clinical hospitals;
- formation of skills of communication with patients with due account for ethical and deontological peculiarities of surgical pathology;
- formation of a creative approach to the treatment process and its participants (patients, their relatives, paramedical personnel and medical attendants, physicians);
- formation of student's skills of communication in a team;
- formation of a holistic idea of nursing as a component of the treatment process.
- formation of a humanistic position and world outlook.

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

Competence code and wording	Competence formation stages	
PC-10 - the willingness to deliver medical first aid in case of sudden acute diseases and conditions,	Knows	How to provide first aid in case of accidents and injuries
	Able to	provide first aid in case of accidents and injuries

Competence code and wording	Competence formation stages	
exacerbation of a chronic disease , which are not life-threatening and do not require emergency medical assistance	Possesses	Skills to provide first aid in case of accidents and injuries
PC-11 – the willingness to assist at the delivering emergency medical care for the patients in the conditions, requiring urgent medical participation;	Knows	How to assist at the delivering emergency medical care in case of accidents and injuries
	Able to	Assist at the delivering emergency medical care in case of accidents and injuries
	Possesses	Skills to assist at the delivering emergency medical care in case of accidents and injuries
PC-13 – the willingness to do a medical assistance in emergency situations, as well as in medical evacuation	Knows	Basics of providing medical assistance in emergency situations
	Able to	Provide medical assistance in emergency situations
	Possesses	Use means for first aid in emergencies
PC-19 - the ability to organize medical aid in case of emergencies, including medical evacuations	Knows	How to organize first aid in case of accidents and injuries
	Able to	Organize first aid in case of accidents and injuries
	Possesses	Skills to organize first aid in case of accidents and injuries
PC-21 - the ability to participate in researches	Knows	Basics of providing medical research
	Able to	Collect information for medical research
	Possesses	collecting information for medical research under the supervision of a teacher

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 THEORETICAL AND PRACTICAL PARTS OF THE PRACTICE

Module “Fundamentals of care for therapeutic patients”

№	Lecture theme	Hours
1.	Significance of general care for patients. Basic principles of medical deontology, ethics, bioethics. Fundamentals of nutritional therapy of patients.	2
2.	Follow-up and care for patients with respiratory impairment. Care for patients being in a fever.	2
3.	Follow-up and care for patients with impaired circulation.	2
4.	Follow-up and care for patients with digestive disorders.	2
5.	Follow-up and care for patients with urinary disorders.	2
6.	Peculiarities of care for elderly and seriously ill patients.	2

№	Sections of subject-matter SM	Types of work	Workload, hours	Forms of in-process assessment
1.	Fundamentals of general care for patients in a therapeutics unit. Therapeutic and protective regimen. Transportation of patients.	Introductory practical study Students' individual work in units under a teacher's control.	10	Test check
2.	Feeding of patients. Concept of dietary therapy. Thermometry: types, methods, importance. Fever types. Simplest physiotherapeutic procedures.	Practical study, feeding of patients. Students' individual work under a teacher's control.	10	Case study
3.	Fundamentals of care for seriously ill patients in a therapeutics unit Hemodynamic parameters monitoring. Hair, nails, oral and nasal cavity care. Change of undergarments and bed linen. Prevention of bed-sores.	Practical study. Students' individual work in units under a teacher's control. Procedures for postoperative care.	10	Demonstration of practical skills

Module “Fundamentals of care for surgical patients”

№	Lecture theme	Hours
1.	Concept of surgery and surgical treatment methods. Achievements of present-day surgery.	2
2.	Concept of hospital infection, infecting ways and sources. Hospital infection prevention: aseptic method in surgery.	2
3.	Arrangement of work of a surgical block and surgical department. Aseptics.	2
4.	Clinical hygiene of a patient's environment.	2
5.	Arrangement of and care for patients after scheduled and emergency operations.	2

№	Sections of subject-matter	Types of work	Workload, hours	Forms of in-process assessment
1.	Concept of general care in surgery and its elements. Structure of a	Introductory practical study Students'	12	Test check

	surgical hospital. Clinical hygiene and functions of medical personnel of every rank in caring for patients. Arrangement of and care in an admission and diagnostic department of a surgical hospital. Transportation of surgical patients. Clinical hygiene of a patient's environment in a surgical hospital.	individual work in units under a teacher's control.		
2.	Clinical hygiene and arrangement, sanitary provision of a surgical patient with food. Clinical hygiene of environment in a surgical department.	Practical study, feeding of patients. Students' individual work under a teacher's control.	10	Case study
3.	Surgical block and principles job arrangement in a surgical block. Sanitary and hygienic regime in a surgical block. Arrangement of and care for patients in a resuscitation and intensive care unit. Arrangement of and care for unconscious patients. Resuscitation fundamentals. Arrangement of and care for patients after scheduled and emergency abdominal operations. Arrangement of and care for patients after thoracic operations.	Practical study. Students' individual work in units under a teacher's control. Procedures for postoperative care.	10	Demonstration of practical skills

VOLUME OF PRACTICAL TRAINING B2.U.1 «Primary professional and research training»:

Form of training activity	Hours / credits	
	Module №1 «Base general duty nursing therapeutic patient»	Module №2 «Base general duty nursing surgical patient»
Classroom studies (total), include:	42	42
- lectures	12	10
- practice	30	32
Students' Individual Work (SIW), include:	12	12
- training to lessons	8	8
- training to current control	4	4

Amount: Total hours:	54	54
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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
<p>Multimedia auditorium Vladivostok Russian island, Ayaks 10, building 25.1, RM. M723 Area of 80.3 m2 (Room for independent work)</p>	<p>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.</p>

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

- 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:

MODULE 1 THERAPY

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; Aversion 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 - Level 10)	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 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
Accreditation and Simulation Center of the School of Biomedicine 690922, Primorsky Krai, Vladivostok, Russky Island, Saperny Peninsula, Ajax Village, 10, aud. M 508a, 510	Medical couch (1 pc.) Simulator for auscultation with an interactive board (1 pc.) Dummy for testing SLS and auscultation (1 pc.) Sam II (1 pc.) Tonometer (2 pcs.) Simulator for auscultation (1 pc.) Spirometer portable (1 pc.) Electrocardiograph (1 pc.) Spirograph (1 pc.) Tonometer (2 pcs.) Set with dotted electrodes for recording EEG in the system 10-20 "MCScap-26" (1 pc.) Medical couch (2 pcs.)

MODULE 2 SURGERY

Name of the equipped rooms and rooms for independent work	List of main equipment
690922, Primorsky Krai, Vladivostok, island Russian, the Saperny Peninsula, the Ajax Village, 10, RM. M 516	Class of topographic anatomy and operative surgery Set of surgical large (1 PC.) Package d / disposal CL. B (yellow) with screed, 50*60 cm Needles W 204/3 DS 70 (130) Disposable robe (sleeve: knitted cuff) Disposable gloves, non-sterile (size M) Disposable, non-sterile gloves (size S) Disposable, non-sterile gloves (size L) Pointed scissors (2 PCs.) Spatula neurosurgical 2-sided small (2 PCs) Suture Polyester braided M 3.5 (0) a coil of 10 meters PR-VA Russia Dacron braided white M 3 (2/0) 200 meters' tape, PR-VA Russia Functional model of the knee joint "luxury" (1 PC) Model of knee joint, 12 parts (1 PC) Posters of the abdominal cavity – plastic) - laminated Chest posters (plastic) - laminated Fake hernia (1 PC) Dummy brush (collapsible) (1 PC) Laryngoscope intubation (1 PC)
690922, Primorsky Krai, Vladivostok, island Russian, the Saperny Peninsula, Ajax Village 10, RM. M 421	Multimedia audience: Monoblock Lenovo C360G-i34164G500UDK; projection Screen Projecta Elpro Electrol, 300x173 cm; Multimedia projector, Mitsubishi FD630U, 4000 ANSI Lumen 1920 x 1080; Flush interface with automatic retracting cables TLS TAM 201 Stan; Avervision CP355AF; lavalier Microphone system UHF band Sennheiser EW 122 G3

	<p>composed of a wireless microphone and receiver; Codec of videoconferencing LifeSizeExpress 220 - Codeconly - Non-AES; Network camera Multipix MP-HD718; Two LCD panel, 47", Full HD, LG M4716CCBA; Subsystem of audiocommentary and sound reinforcement; centralized uninterrupted power supply</p>
<p>Reading rooms of the Scientific library of the University open access Fund (building a - 10)</p>	<p>Monoblock HP Loope 400 All-in-One 19.5 in (1600x900), Core i3-4150T, 4GB DDR3-1600 (1x4GB), 1TB HDD 7200 SATA, DVD+/-RW,GigEth,wifi,BT,usb kbd/mse,Win7Pro (64-bit)+Win8.1Pro(64-bit),1-1-1 Wty Speed Internet access 500 Mbps. Jobs for people with disabilities equipped with displays and Braille printers.; equipped with: portable reading devices flatbed texts, scanning and reading machines videovelocitly with adjustable color spectrums; increasing electronic loops and ultrasonic marker</p>



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SCHOOL OF BIOMEDICINE

**METHODOLOGICAL SUPPORT OF
INDEPENDENT WORK OF STUDENTS**

**Учебная практика «Практика по получению первичных профессиональных умений
и навыков, в том числе первичных умений и навыков научно-исследовательской
деятельности»**

Educational practice «Primary professional and research training»

Education 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 EP 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 «Primary professional and research 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 **«Primary professional and research training»/**

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 «**Primary professional and research training**» 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.

Students' individual work including research activities

Pos. No.	Title of the section, subject topics	Form of students' individual work	Hours	Means of performance rating	The result of training, competences established
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Section 1. The operation management principles for hospitals specialized in therapy			6		
1.	Operation management of healthcare institutions.	Studying the educational materials (basing on the notes of the content of course and research books) and preparing seminar and practical study essays for participation in (discussion sessions and professional simulation games)	4	Recitation, test	PC-10, PC -11, PC -13, PC -19, PC -21
2.	Rules of patient sanitization.	Making notes of the content of course books. Individual work with tests	1 1	Recitation, test	PC-10, PC -11, PC -13, PC -19, PC -21
II. Section 2. Care for an in-patient			16		
3.	The difficulties of a therapeutic patient and the constituents of care. The notion of nursing process.	Studying the educational materials (basing on the notes of the content of course and research books) and preparing seminar and practical study for participation in discussion sessions and professional simulation games	4	Recitation, test	PC-10, PC -11, PC -13, PC -19, PC -21
4.	Basic rules of nursing care. Feeding of patients.	Studying the educational materials (basing on the notes of the content of course and research books) and preparing seminar and practical study essays for participation in discussion sessions and professional simulation games	4	Recitation, test	PC-10, PC -11, PC -13, PC -19, PC -21
5.	Rules of patient sanitization.	Making notes of the content of course books.	2	Recitation, test	PC-10, PC -11, PC -13, PC -19, PC -21
Studying the educational materials (basing on the notes of the content of course and research books)			2		

6.	The principles and rules of patient safe relocation	Studying the educational materials (basing on the notes of the content of course and research books)	2	Recitation, test	PC-10, PC -11, PC -13, PC -19, PC -21
Simulation and analysis of specific difficult situations			2		
7.	Preparation to the pass/fail examination	Keeping the Practical Training Journal	1		PC-10, PC -11, PC -13, PC -19, PC -21
Work with tests and self-evaluation questionnaire			1		
Total:			24		



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FUND ASSESSMENT TOOLS

**Учебная практика «Практика по получению первичных профессиональных умений
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Educational practice «Primary professional and research training»

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Specialty 31.05.01 «General medicine»
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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	How to provide first aid in case of accidents and injuries
	Able to	provide first aid in case of accidents and injuries
	Possesses	Skills to provide first aid in case of accidents and injuries
PC-11 – the willingness to assist at the delivering emergency medical care for the patients in the conditions, requiring urgent medical participation;	Knows	How to assist at the delivering emergency medical care in case of accidents and injuries
	Able to	Assist at the delivering emergency medical care in case of accidents and injuries
	Possesses	Skills to assist at the delivering emergency medical care in case of accidents and injuries
PC-13 – the willingness to do a medical assistance in emergency situations, as well as in medical evacuation	Knows	Basics of providing medical assistance in emergency situations
	Able to	Provide medical assistance in emergency situations
	Possesses	Use means for first aid in emergencies
PC-19 - the ability to organize medical aid in case of emergencies, including medical evacuations	Knows	How to organize first aid in case of accidents and injuries
	Able to	Organize first aid in case of accidents and injuries
	Possesses	Skills to organize first aid in case of accidents and injuries
PC-21 - the ability to participate in researches	Knows	Basics of providing medical research
	Able to	Collect information for medical research
	Possesses	collecting information for medical research under the supervision of a teacher

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)	How to provide first aid in case of accidents and injuries	Knowledge of providing first aid in case of accidents and injuries	Formed and structured systematic knowledge of providing first aid in case of accidents and injuries	65-71
	Is able to (advanced)	provide first aid in case of accidents and injuries	Ability to provide first aid in case of accidents and injuries	Ready and can to provide first aid in case of accidents and injuries	71-84
	Possesses (high)	Skills to provide first aid in case of accidents and injuries	Formed skills to provide first aid in case of accidents and injuries	Skills surely to provide first aid in case of accidents and injuries	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)	How to assist at the delivering emergency medical care in case of accidents and injuries	Knowledge of how to assist at the delivering emergency medical care in case of accidents and injuries	Formed and structured systematic knowledge of how to assist at the delivering emergency medical care in case of accidents and injuries	65-71
	Is able to (advanced)	Assist at the delivering emergency medical care in case of accidents and injuries	Ability to assist at the delivering emergency medical care in case of accidents and injuries	Ready and can to assist at the delivering emergency medical care in case of accidents and injuries	71-84
	Possesses (high)	Skills to assist at the delivering emergency medical care in case of accidents and injuries	Formed skills to assist at the delivering emergency medical care in case of accidents and injuries	Skills surely to assist at the delivering emergency medical care in case of accidents and injuries	85-100
PC-13 – the willingness to do a medical assistance in emergency situations, as well as in medical evacuation	Knows (threshold level)	Basics of providing medical assistance in emergency situations	Knowledge of basics of providing medical assistance in emergency situations	Formed and structured systematic knowledge	65-71
	Is able to (advanced)	Provide medical assistance in emergency situations	Ability to provide medical assistance in emergency situations	Ready and can to provide medical assistance in emergency situations	71-84
	Possesses (high)	Use means for first aid in emergencies	Formed skills to use means for first aid in emergencies	Skills surely to use means for first aid in emergencies	85-100

PC-19 - the ability to organize medical aid in case of emergencies, including medical evacuations	Knows (threshold level)	How to organize first aid in case of accidents and injuries	Knowledge of organization of first aid in case of accidents and injuries	Formed and structured systematic knowledge of organization of first aid in case of accidents and injuries	65-71
	Is able to (advanced)	Organize first aid in case of accidents and injuries	Ability to organize first aid in case of accidents and injuries	Ready and can to organize first aid in case of accidents and injuries	71-84
	Possesses (high)	Skills to organize first aid in case of accidents and injuries	Formed skills to organize first aid in case of accidents and injuries	Skills surely to organize first aid in case of accidents and injuries	85-100
PC-21 - the ability to participate in researches	Knows (threshold level)	Basics of providing medical research	Knowledge of basics of providing medical research	Formed and structured systematic knowledge of basics of providing medical research	65-71
	Is able to (advanced)	Collect information for medical research	Ability to collect information for medical research	Ready and can to collect information for medical research	71-84
	Possesses (high)	collecting information for medical research under the supervision of a teacher	Formed skills for collecting information for medical research under the supervision of a teacher	Skills surely for collecting information for medical research under the supervision of a teacher	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. The history of nursing in Europe and Russia. The role of F. Nightingale as the founder of nursing. Pioneer Sisters of Mercy in Russia.
2. The philosophy of nursing. The basics of medical ethics and deontology.
3. The nursing process and its stages.
4. The safe hospital environment. The main terms and notions. The statutory regulation of safe hospital environment. Infection control and infection safety. Hospital-acquired infection (HAI) agents. Diseases pertaining to HAI. HAI transmission factors and routes. Monitoring and safety measures in HAI prevention.
5. The levels of hand hygiene for a healthcare practitioner. The directions for gloves use.
6. HAI prevention. Disinfection and sterilization. Their types and methods. The levels of disinfection.
7. Disinfectants. The directions for use. The disinfectant classes. Description of the main disinfectants. The safe handling of disinfectants instructions. Medical first aid when disinfectant poisoning.
8. Disinfection regimes. Glassware, dressing, janitorial supplies disinfection.
9. The special aspects of sanitary ware disinfection. Treatment of different

surfaces. Disinfection of medical appliances.

10. Disinfectant suitability inspection. Requirements as to disinfection equipment, storage and preparation of chlorine-containing agents and solutions. Disinfecting solution preparation techniques.

11. The peculiarities of hospital rooms sanitary cleaning. The procedure room overall cleaning.

12. Sanitary and hygienic cleaning of the hospital's dietetic department and diners.

13. Hospital linen service regime. Patient's personal hygiene. Prophylactic disinfection at medical and preventive treatment institutions (MPTIs). Monitoring the quality of the concurrent and terminal disinfection.

14. Disinfection of items of patient care, its types.

15. Prevention of occupational contagion at the procedure room.

16. MPTI waste collection, storage and disposal. The classes of waste. The waste collection and disposal system. The directions for use of waste containers.

17. The stages of treatment of medical appliances. Disinfection of medical instruments, syringes.

18. Pre-sterilization cleaning. The manual method.

19. Pre-sterilization cleaning quality monitoring. Phenolphthalein and azopiramide test.

20. The notion of sterilization. The methods and means of sterilization.

21. The notion of autoclaving. The air sterilizer operation procedure.

22. Monitoring sterility. The methods of sterility monitoring. Sterility indication.

23. Preparing and laying up the dressing materials for sterilization.

24. The specific lay-up for covering the sterile work surface. Putting on the sterile scrubs.

25. Covering the sterile work surface. Preparation of the sterile dish for the use of the sterile work surface.

26. The safe environment for the patient and personnel. The main terms and notions. Therapeutic and protective regimen, its constituents and significance. Types of motion behavior regimens and positioning in bed. The tilting bed.
27. Safely transporting patients in critical condition inside the healthcare institution. The basics of ergonomics and biomechanics.
28. Safely transporting patients in critical condition inside the healthcare institution. Methods of repositioning patients in critical condition.
29. Safely transporting patients in critical condition inside the healthcare institution. Holding a patient in critical condition, helping him/her to walk and positioning him/her in bed.
30. Patient intake. The main terms and notions. Hospital anti-pediculosis arrangements.
31. Types of manual anti-pediculosis scalp treatment.
32. Performing hygienic bath or shower.
33. Anthropometry. Measuring the patient's body weight.
34. Measuring the patient's height. Measuring the chest circumference.
35. Patient's personal hygiene. The main notions. Preparing and changing the linen for a patient in critical condition by means of the lengthwise and crosswise methods. Changing the underwear and clothes of a patient in critical condition.
36. The special aspects of skin care of a patient in critical condition. Prevention of pressure ulcers. Pressure ulcer risk assessment. The daily food ration for prevention of pressure ulcers.
37. Oral, ocular, nasal, otic care.
38. Hair care for patients in critical condition by traditional means and using modern techniques.
39. Perineal and genital care for patients in critical condition.
40. The main terms and notions of pharmacotherapy. Arranging medicine supply to the treatment division of an MPTI.
41. The principles of care for cardiovascular, respiratory, digestive, urinary

patients.

42. The principles of urgent premedical care. The rules of cardiopulmonary resuscitation.

Testing items for the preliminary assessment (examples):

Please, choose the right answer:

1. What is the correlation between the notions of “patient care” and “patient treatment”?

- a) the care and the treatment are different things; the treatment is done by a doctor; and the care – by the paramedical personal and medical attendants;
- b) the care and the treatment are one and the same thing, as both treatment and care aim at recovery of the patient.
- c) the care is an indispensable part of the treatment

2. What does the notion of “special care” mean?

- a) the care that is done with special attention;
- b) the care that is done within a special environment;
- c) the care that is done at presence of certain specialists;
- d) the care that suggests additional measures dictated by the specificity of the condition.

3. Who is in charge of the general patient care?

- a) the patient’s relatives;
- b) the paramedical personnel and medical attendants;
- c) all the medical personnel and the patient’s relatives, each one executing certain functions in the process of care.

4. What is the subject of medical deontology?

- a) the relationship between the doctor and the patient;
- b) a wide range of issues pertaining to the duty, morality and professional ethics of healthcare practitioners;
- c) iatrogenic conditions.

5. A nurse misrecognized two look-alike vials and instead of heparin injected

a large dose of insulin (which can quickly lower the blood sugar), which resulted in extreme deterioration of the patient's condition (hypoglycemic coma). What should the nurse's action be considered as?

- a) a medical misdeed (recklessness, negligence);
- b) a medical error;
- c) an accidental blunder.

6. A diseased with no appointment or referral medical documents came at the hospital's admission office, as he sullenly started to feel unwell. What should be done?

- a) the patient should be examined, given any necessary medical aid and further actions should be outlined;
- b) you should call an ambulance;
- c) direct the patient to get the appointment or referral medical documents.

7. A patient that has been referred to hospital admission is found to have clothes lice at the admission office. What steps should you take?

- a) deny admission to the patient;
- b) provide for a second soap bathing of the patient, send the patient's clothes and underwear to the disinsector;
- c) provide for sanitation that should include haircut, greasing the hair with a disinsectant followed up by hairwash with 10% solution of table vinegar.

8. A diseased came at the admission office ailed by stomach aches. His overall condition is satisfactory. May he take a hygienic bath?

- a) yes;
- b) no;
- c) yes – after assuring that he has no acute surgical disease.

9. A patient suspected to have gastrointestinal bleeding is brought at the admission office (3 hours ago he experienced coffee-grounds vomiting). In the emergency department patient is delivered with suspected gastrointestinal bleeding (3 hours ago vomited the contents of "coffee grounds"). Subjectively,

he is feeling fine, can move on his own. How should this patient be transported into the division?

- a) on foot, attended by a nurse;
- b) in a wheel-chair;
- c) by a wheelbarrow only.

10. What are the duties of the division's head nurse?

- a) performance of the most demanding nursing operations;
- b) supervision of ward nurses, indenting required medicines;
- c) control over the division's supply in hard and soft goods, linen.

Intermediate assessment test tasks (examples):

1. What promotes a spread of nosocomial infections:

- a) infringement of aseptics antiseptics rules in a hospital;
- b) entry of cockroaches and bugs in hospital departments;
- c) presence of lousy patients in hospital department;
- d) visiting patients by their relatives.

2. What disinfection solution is used for moist mopping:

- a) 10% bleaching powder solution;
- b) 1% chloramines solution;
- c) 3% hydrogen peroxide solution;
- d) potassium permanganate solution.

3. Frequency of moist mopping of wards:

- a) every day;
- b) as may be required from time to time;
- c) as may be required from time to time, but at least two time a day.

4. What promotes entry of cockroaches in a hospital department:

- a) untimely removal of food waste and poor cleaning of a nutrition department;
- b) hospital-acquired infections;
- c) insufficient patient decontamination.

5. Why cardiovascular patients suffering from severe respiratory distress are recommended to take a semi-sitting position in bed:

- a) it is convenient to feed in such position;
- b) blood congestion in pulmonary circulation decreases;
- c) reduction of a risk of bed-sores.

6. What is the basic usage of a tilting bed:

- a) enables to provide a patient with the most beneficial and comfortable position;
- b) it can be easily and readily moved;
- c) helps medical personnel to perform their treatment and nursing functions.

7. Frequency of change of patients' undergarment and bed linen:

- a) 1 time every 10 days;
- b) weekly, after taking a bath or a shower;
- c) as the same becomes dirty, but at least 1 time every 10 days.

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

- a) no, as far as bed sores appear only when a patient is in supine, prone or lateral position;
- b) eyes, 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.

9. Why a toilet seat cover cannot be inflated over much:

- a) otherwise it will go out of service quickly;
- b) otherwise it will be too light so to make it steady in a bed;
- c) it should change its shape when a patient moves.

10. What measures should be taken in the initial stage of bed sore formation:

- a) to enhance all preventive measures (bed maintenance, change of a patient's position, careful skin cleaning, treatment of affected areas with 1% brilliant green solution)
- b) to use different biologically active ointments
- c) surgical treatment

11. What is parenteral nutrition:

- a) nutrition carried out artificially
- b) administration of fixed-composition mixtures for feeding
- c) administration of different substances for feeding, passing the gastrointestinal tract

12. Why it is recommended to wipe the axilla dry before taking temperature:

- a) for hygienic reasons
- b) to place a thermometer in a more steady position
- c) to avoid understated measurements results

13. Body temperature measured in a patient's axilla is 37,5 C. How such body temperature can be characterized:

- a) as normal
- b) as moderately high fever
- c) as subfebrile temperature

14. What hospital departments should keep medical thermometers:

- a) in cases at the nurse's station
- b) in a container with cotton on the bottom and disinfection solution added
- c) every patient personally.

15. What is represented in a temperature sheet:

- a) graphic representation of a temperature curve
- b) graphic representation of a temperature curve, pulse, breathing rate curves, blood pressure, weight, diuresis
- c) graphic representation of temperature curves, pulse, breathing rate curves, results of doctor's rounds.

16. What patient care measures should be taken at the first stage of fever - shivering:

- a) to give hot tea and cover a patient with a blanket
- b) to lay with hot-water bags
- c) to change bed linen
- d) to plate a cold pack on a patient's head

17. Frequency of change of a wet cold pack:

- a) in 3-5 minutes
- b) as soon as it becomes dry
- c) in 15-20 minutes.

18. When an icepack is used:

- a) internal bleeding
- b) severe headaches and peak-fever delirium
- c) renal colic
- d) for resolution of post-injection infiltrates.

Clinical cases (examples):

1. You are a nurse in admission office. A patient is routinely admitted in a therapeutics department. Receive and register the patient. Determine the body weight, measure the height and chest circumference of the patient.
2. You are a nurse in admission office. A physician prescribed a full decontamination for the patient. While giving a hygienic bath you see that the patient became pale. Your actions. Giving a hygienic bath.
3. Patient A. complains of a strong itch of the hairy part of her head. You found out lice on examination. The patient is upset and ask you tell nobody of her problems. Your actions.

List of themes of abstracts:

1. Medical ethics and deontology in present conditions (biomedical ethics).
2. Healthy lifestyle – base of disease prevention.
3. First aid in emergencies.
4. Peculiarities of care for patients with different pathology.
5. Drug-free treatment methods.
6. Preventive medicine.
7. Prevention of acute allergic diseases.
8. Care for elderly and senile patients.
9. Reasons and factors of premature ageing risk.
10. Peculiarities of responses to a disease and stress of elderly and senile patients.
11. Basic methods of determination of human biological age.

12. Teaching patients and their relatives self-control technique.
13. Teaching patients and their relative self-help.
14. Peculiarities of communication, information collection and fulfillment of stages of nursing process in elderly and senile patients.
15. Peculiarities of work of nurses in nursing departments.
16. Peculiarities of work of nurses in hospices.
17. Operation, storage and safety regulations when handling instruments and electrical equipment

Themes educational and research activities for 1-year students:

1. Transportation of patients. Types of transportation.
2. Sanitary maintenance of healthcare facilities, equipment, implements.
Sanitation of wards, toilet facilities
3. Air processing technologies and disinfection modes.
4. Special clothes and personal protection equipment for personnel in healthcare facilities.
5. Requirements for patient personal hygiene.
6. Lice infestation. Decontamination of lice-infested patients.
7. Care for unconscious patients.
8. Care for patients with respiratory diseases.
9. Care for patients with cardiovascular diseases.
10. Care for patients with digestive disorders.
11. Enema types.
12. Care for serious and agonizing patients, for unconscious patients. Individual constant nursing.

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 questions of final computer testing (addendume 1)

TEST CHECK OF EDUCATIONAL TRAINING

«Primary professional and research training»

for specialty 31.05.01 “General Medicine”

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 «Primary professional and research training»

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

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

When doing the educational practice, 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 «Primary professional and research training»

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

Recommended scope 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 (мм Т ст) _____

Pulse: frequency _____

rhythmicity _____