



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 ACADEMIC DISCIPLINE (WPAD)**

**«Dermatology»**

Educational program

Specialty 31.05.01 «General medicine»

**Form of study: full time**

year 4 semester 8  
lectures 18 hours  
practical classes 54 hours  
laboratory works not provided  
total amount of in-classroom work 72 hours  
independent self-work 36 hours  
control works ()  
credit with rating 8 semester  
exam not provided

The working program is drawn up in accordance with the requirements of the Federal state educational standard of higher education (level of training), approved by the order of the Ministry of education and science of the Russian Federation from 09.02.2016 № 95.

The working program of the discipline was discussed at the meeting of the Department of fundamental and clinical medicine. Protocol No. 8, 09 of July 2019

Author: Associate Professor Singur O.A.

## ANNOTATION

The discipline "Dermatology" is intended for students enrolled in the educational program of higher education 31.05.01 "General medicine", included in the basic part of the curriculum.

Discipline is implemented on 4th year, is obligatory clinical discipline.

Federal state educational standard of higher education in the specialty 31.05.01 "General medicine" (level of training specialty) was used in the development of the working program of this discipline. The total complexity of the discipline is 108 hours, 3 credits.

Discipline "Dermatology" refers to the professional cycle of disciplines.

The course program is based on the medical knowledge obtained by students:

GPC-8 readiness for medical use of drugs and other substances and their combinations in solving professional problems

PC-5 the readiness to collect and to analyze patient complaints, data of its history, the results of laboratory, instrumental, postmortem and other examinations to recognize the incidence or the absence of diseases

PC-6 the ability of determining the patient's basic pathological conditions, symptoms, syndromes, diseases in accordance with the International Statistical Classification of Diseases and problems related to health, the 10th review.

PC-8 the ability to determining the tactics of patient surveillance with different nosological entities.

**The purpose** of the discipline «Dermatology» is to acquire knowledge of etiology, epidemiology, pathogenesis, clinical manifestations, as well as the principles of diagnosis and diagnosis, treatment and prevention of skin diseases, sexually transmitted diseases and infections (STIs).

**Tasks:** acquisition of students' knowledge of etiology, epidemiology, pathogenesis, clinic of skin infectious diseases and chronic dermatoses, STIs;

- teaching students the most important methods of physical examination, allowing timely diagnosis of skin diseases and STIs

- teaching students to recognize clinical signs of skin and venereal diseases during examination of the patient, in determining the severity of the pathological process;

- teaching students the ability to identify the leading clinical signs, symptoms, syndromes of skin diseases and STIs;

- teaching students to choose the best methods of laboratory and instrumental examination of the main skin diseases, STIs and drawing up an algorithm of differential diagnosis;

- training to conduct a full range of medical, rehabilitation and preventive measures among patients with various nosological forms of skin diseases and STIs;

- training students to provide patients with skin diseases and STI first aid in the event of emergency conditions;

- teaching students to choose the optimal schemes of etiotropic treatment of the most common skin diseases and STIs;

- training of students in registration of medical documentation (medical records of inpatient or outpatient patients with skin disease and STIs, certificate of disability, statistical card, etc.);

- familiarization of students with the principles of organization and work of medical institutions that provide assistance to patients with skin diseases and STIs;

- development of skills in the study of scientific literature and official statistical reviews;

- formation of communication skills with dermatological patients and STIs, taking into account ethics and deontology, depending on the identified pathology and characteristics of patients;

- formation of the student's communication skills with the team.

As a result of the study of this discipline, students form the following Common professional (GPC) and professional competence (PC):

| Code and formulation of competence  | Stages of competence formation |   |
|---|--------------------------------|---|
| <p>the readiness for medical use of drugs and other medical substances and their combinations in solving professional problems (GPC – 8)</p>  | Knows                          | <p>classification and main characteristics of drugs, pharmacodynamics and pharmacokinetics, indications and contraindications to the use of drugs, side effects; General principles of design of receptors and formulation of prescription drugs.</p>   |
|   | Is able to                     | <p>to analyze the effect of drugs on the totality of their pharmacological properties and the possibility of their use for therapeutic treatment; prescribe medicines, use various drugs, use the basic antibacterial, antiviral and biological drugs; to assess the possible manifestations of drug overdose and ways to eliminate them; to justify the principles of pathogenetic therapy of the most common diseases.</p>  |
|   | Possesses                      | <p>skills in the use of drugs in the treatment, rehabilitation and prevention of various diseases and pathological conditions.</p>  |
| <p>the readiness to collect and to analyze patient complaints, data of its history, the results of laboratory, instrumental, postmortem and other examinations to recognize the incidence or the absence of diseases (PC – 5)</p> | Knows                          | <p>etiology, diagnosis, treatment and prevention of skin and venereal diseases; clinical picture, features of the course and possible complications diseases that occur in the typical form; modern methods of clinical instrumental diagnosis of patients dermatovenerological profile; features of collection of pathological materials; precautionary measures, basic principles of diagnosis, treatment and rehabilitation of skin and venereal diseases, indications for hospitalization; principles of regular medical observation , rehabilitation patients'; implementation of specific and non-specific prevention of skin diseases, sexually transmitted diseases and infections.</p> |
|   | Is able to                     | <p>to participate in the organization and provision of medical and sanitary-anti-epidemic, preventive and rehabilitation assistance to the population with dermatological diseases; interpret the results of the examination, make a preliminary diagnosis,</p>   |

|  |            |  |
|--|------------|--|
|  |            | <p>outline the scope of additional studies to clarify the diagnosis;</p> <p>formulate a clinical diagnosis;</p> <p>develop a treatment plan taking into account the course of the disease, choose and assign drug therapy, use methods of non-drug treatment, to carry out rehabilitation measures.</p>  |
|  | Possesses  | <p>interpretation of the results of laboratory, instrumental methods of diagnosis of skin and venereal diseases;</p> <p>the algorithm of the preliminary diagnosis with the subsequent direction on an additional examination and medical specialists;</p> <p>algorithm of statement of the developed clinical diagnosis by the patient; algorithm of performance of the main medical diagnostic and medical actions for rendering the first medical care at urgent and life-threatening conditions at skin and venereal diseases.</p> |
| <p>the ability of determining the patient's basic pathological conditions , symptoms, syndromes, diseases in accordance with the International Statistical Classification of Diseases and problems related to health , the 10th review. (PC – 6)</p> | Knows      | <p>General and special research methods in the main sections of dermatology and venereology; basic diagnostic techniques used in the defeat of the skin and mucous membranes.</p>  |
|  | Is able to | <p>To obtain information about the development and course of the disease; to identify possible etiological factors, to apply objective methods of examination of the patient, to identify common and specific signs of dermatological and venereal disease; to assess the severity of the patient; to determine the need and sequence of the use of special research methods (laboratory, x-ray, endoscopic, functional), as well as consultations of narrow specialists, to interpret the data.</p>                                   |
|  | Possesses  | <p>Formed theoretical and practical skills to establish the diagnosis and determine the tactics of management of the patient with skin and venereal disease.</p>   |
| <p>the ability to determining the tactics of patient surveillance with different nosological entities. (PC – 8)</p>  | Knows      | <p>General and special methods of research and treatment in the main sections of dermatology and STIs, modern technologies and equipment</p>   |
|  | Is able to | <p>Apply objective methods of examination of the patient, to identify common and specific signs of dermatological and venereal disease;</p> <p>To determine the indications for hospitalization of the patient, to determine its urgency, to organize hospitalization in accordance with the patient's condition;</p> <p>Determine the indications for outpatient treatment for skin diseases and sexually</p>   |

|  |           |  |
|--|-----------|--|
|  |           | transmitted infections (STIs)  |
|  | Possesses | Knowledge for the purpose of differential diagnosis and establishment of the final clinical diagnosis, and carrying out necessary treatment at skin and venereal diseases, STIs;<br>Knowledge to carry out the necessary control of healing and subsequent follow-up of dermatological and venereal patients . |

## I. STRUCTURE AND CONTENT OF THEORETICAL PART OF THE COURSE (18 hrs.)

**Theme 1.** Introduction to dermatovenerology. Structure and functions of the skin. Structure, pathohistology of the skin and mucous membranes. Etiology, pathogenesis of skin diseases. Methods of diagnosis, principles of treatment, prevention of skin diseases and STIs (2 hours).

**Theme 2.** Infectious skin diseases and parasitic skin diseases. Pyoderma. Scabies. Pediculosis. Etiology, pathogenesis, transmission pathways, clinic, diagnosis and differential diagnosis, principles of treatment and follow-up (2hours).

**Theme 3. Allergodermatosis.** Dermatitis, Eczema. A toxicoderma. Itching dermatosis. Etiology, pathogenesis, clinic, diagnosis and differential diagnosis, principles of treatment (2 hours).

**Theme 4. Viral dermatoses.** Herpes simplex. Herpes zoster. HPV. Molluscum contagiosum. **Mycoses.** Keratomycosis. Dermatomycosises. Microsporia. Trichophytosis. Candidiasis. Deep mycoses Etiology, pathogenesis, clinic, diagnosis and differential diagnosis, principles of treatment. Dispensary observation (2 hours).

**Theme 5.** Lichens. Psoriasis. Red flat lichen. Etiology, pathogenesis, clinic, diagnosis and differential diagnosis, principles of treatment. Dispensary accounting (2 hours).

**Theme 6.** Autoimmune diseases of the skin. During's Dermatitis. Pemphigus. Scleroderma, lupus Erythematosus. Dermatomyositis (2 hours).

**Theme 7.** STIs. Syphilis primary. The secondary syphilis. The General course of syphilis. Clinic, complications of primary syphilis. Classification, clinical features of secondary syphilis ( 2 hours).

**Theme 8.** STIs. Syphilis tertiary, congenital. Clinic, for tertiary syphilis. Classification, clinical features of congenital syphilis. Principles of treatment, dispensary observation (2 hours).

**Theme 9.** STIs. Gonorrhoea, chlamydia, trichomoniasis. Dermatological markers of HIV infection. Classification, clinic, diagnosis, principles of treatment, dispensary observation of patients with gonorrhoea, chlamydia, trichomoniasis. Clinic of dermatological markers of HIV infection (2 hours).

## **II. STRUCTURE AND CONTENT OF PRACTICAL COURSE PART (54 hours)**

### **Lesson 1. Structure and functions of the skin (6 hours).**

Structure, pathohistology, functions of the skin and mucous membranes, skin appendages. Primary and secondary morphological elements. Status specialis, Status localis. Methods of diagnosis and principles of treatment, prevention of skin diseases and STI.

### **Lesson 2. Infectious and parasitic skin diseases (6 hours).**

Pyoderma. Etiology, pathogenesis, clinic, differential diagnostics, principles of treatment. Scabies, pediculosis. Etiology, pathogenesis, pathways of infection, modern clinical features, differential diagnosis. Principles of diagnosis and treatment.

### **Lesson 3. Allergodermatitis (6 hours).**

Dermatitis, Eczema. A toxicoderma. Itching dermatosis. Etiology, pathogenesis, clinic, diagnosis and differential diagnosis, principles of treatment.

**Lesson 4. Viral dermatoses. Mycoses (6 hours).**

Herpes simplex. Herpes zoster. HPV. Molluscum contagiosum. Keratomycosis. Dermatomycoses. Microsporia. Trichophytosis. Candidiasis. Deep mycoses. Etiology, pathogenesis, clinical features, diagnosis and differential diagnosis, treatment principles. Dispensary observation.

**Lesson 5. Leheny (6 hours).**

Psoriasis. Red flat lichen. Etiology, pathogenesis, clinic, diagnosis and differential diagnosis, principles of treatment. Clinical account.

**Lesson 6. Autoimmune skin diseases (6 hours).**

During's Dermatitis. Pemphigus. Scleroderma, lupus Erythematosus. Dermatomyositis. Etiology, pathogenesis, clinic, diagnosis and differential diagnosis, principles of treatment. Features of follow-up.

**Lesson 7. STIs. Syphilis primary. Syphilis secondary (6 hours).**

The General course of syphilis. Clinic, complications of primary syphilis. Classification, clinical features of secondary syphilis.

**Lesson 8. STIs. Syphilis tertiary, congenital (6 hours).**

Clinic, for tertiary syphilis. Classification, clinical features of congenital syphilis. Principles of treatment, dispensary observation.

**Lesson 9. STIs. Gonorrhea, chlamydia, trichomoniasis. Dermatological markers of HIV infection (6 hours).**

Classification, clinic, diagnosis, principles of treatment, dispensary observation of patients with gonorrhea, chlamydia, trichomoniasis. Clinic of dermatological markers of HIV infection.



### **III. TRAINING AND METHODOLOGICAL SUPPORT OF INDIVIDUAL WORK OF STUDENTS**

The working program of an academic discipline (WPAD) presents the main content of lectures and lessons, evaluation tools: terms and concepts necessary for mastering the discipline.

Educational and methodological support of independent work of students in the discipline "Dermatology" is presented in Appendix 1 and includes:

schedule of independent work on the discipline, including the approximate standards of time to perform for each task;

characteristics of tasks for independent work of students and guidelines for their implementation;

requirements for the presentation and execution of the results of independent work;

evaluation criteria for individual work

In the course of mastering the course "Dermatology" students have to do a lot of individual work, which includes preparation for seminars and writing a history of the disease (Medical History).

Practical classes help students to learn more deeply the educational material, to acquire skills in working with the history of the disease, photo tasks, patients.

Plans of practical classes, their subjects, recommended literature, the purpose and objectives of its study are reported by the teacher in introductory classes or in the curriculum in this discipline.

Before you begin to study the topic, you should be familiar with the main issues of the plan of practical training and a list of recommended literature.

Starting preparation for practical training, it is necessary, first of all, to refer to the lecture notes, sections of textbooks and manuals to get a General idea of the place and importance of the topic in the course. Then work with additional literature, make notes on recommended sources.

In the process of studying the recommended material, it is necessary to understand the construction of the studied topic, to highlight the main provisions, to trace their logic and thus to understand the essence of the studied problem.

It is necessary to keep records of the studied material in the form of an abstract, which, along with visual, includes motor memory and allows you to accumulate an individual Fund of auxiliary materials for rapid repetition of the read, to mobilize the accumulated knowledge. The main forms of recording: plan (simple and detailed), statements, abstracts.

In the process of preparation, it is important to compare sources, think over the studied material and build an algorithm of actions, carefully consider your oral presentation.

In the practical lesson, each participant should be ready to speak on all the issues raised in the plan, to be as active in their consideration. The speech should be convincing and reasoned, simple reading of the abstract is not allowed. It is important to form an understanding of the issue, to show clinical thinking, the ability to justify and draw the right conclusions from what has been said. At the same time, you can refer to the notes of the abstract and lectures, directly to the primary sources, use the knowledge of monographs and publications, facts and observations of modern life, etc.

A student who has not had time to speak at the practical lesson, may present to the teacher to check the prepared abstract and, if necessary, to answer the questions of the teacher on the topic of practical training to obtain a credit score on this topic.

#### IV. CONTROL OF ACHIEVEMENT OF COURSE GOALS

| № p/p | Controlled modules / sections / themes of academic discipline | Codes and stages of the formation of competencies  |       | Evaluation tools - name |   |
|-------|---|--|-------|-------------------------|---|
|       |   |  |       | currentcontrol          | intermediate evaluation                     |
| 1     | Section 1. Theme 1. General dermatology                       | GPC-8 readiness for medical use of drugs and other substances and their combinations in solving professional | Knows | EO-1 Interview          | Questions of final control 8 semester -1-10 |

|   |   |  |            |  |  |
|---|---|--|------------|--|--|
|   |   | problems   | Is able to | PW-1<br>Test   | PW-1<br>Test                                   |
|   |   |  | Possesse   | EO-3<br>Phototask                                    | EO2<br>Colloquium                              |
| 2 | Section 2.<br>Theme 1. Venereal diseases.<br>Theme 2. Sexually transmitted infections (STIs).   | PC-5 readiness to collect patient complaints, his / her medical history, examination results, laboratory, instrumental, patho-anatomical and other studies in order to recognize the condition or establish the presence or absence of the disease.) | Knows      | EO-1<br>Interveiw                                    | Questions of final control<br>8 semester 11-40 |
|   |   |  | Is able to | PW-1<br>Test   | PW-1<br>Test                                   |
|   |   |  | Possesses  | EO-3<br>Exaination of the patient status description | EO-2<br>Exam                                   |
| 3 | Section 1.<br>Theme 1. General dermatology<br>Section 2.<br>Theme 1. Venereal diseases.<br>Theme 2. Sexually transmitted infections (STIs). | PC-6 the ability to determine the patient's basic pathological conditions, symptoms, disease syndromes, nosological forms in accordance with The international statistical classification of diseases and health-related problems, X revision.       | Knows      | EO-1<br>Interveiw                                    | Questions of final control<br>8 semester 11-40 |
|   |   |  | Is able to | PW-1<br>Test   | PW-1<br>Test                                   |
|   |   |  | Possesses  | EO-3<br>Exaination of the patient status description | EO-2<br>Exam                                   |
| 4 | Section 1.<br>Theme 1. General dermatology<br>Section 2.<br>Theme 1. Venereal diseases.<br>Theme 2. Sexually transmitted infections (STIs). | PC-8 ability to determine the tactics of management of patients with different nosological forms   | Knows      | EO-1<br>Interveiw                                    | Questions of final control<br>8 semester 11-40 |
|   |   |  | Is able to | PW-1<br>Test   | PW-1<br>Test                                   |
|   |   |  | Possesses  | EO-3<br>Exaination of the patient status description | EO-2<br>Exam                                   |

Control and methodological materials, as well as criteria and indicators which are necessary for the evaluation of knowledge and skills, and characterizing the stages of the formation of competencies in the process of mastering the educational program are presented in Appendix 2.

## **V. LIST OF EDUCATIONAL LITERATURE AND INFORMATIONAL-METHODICAL REQUIREMENTS FOR THE DISCIPLINE**

### **Primary**

1. Atlas of Dermatology, Dermatopathology and Venereology / Springer Nature Switzerland AG 2018  
<https://link.springer.com/referencework/10.1007/978-3-319-45134-3#editorsandaffiliations>
2. Iatrogenic Dermatologic Conditions / pringer International Publishing Switzerland 2017 [https://link.springer.com/chapter/10.1007/978-3-319-44824-4\\_19](https://link.springer.com/chapter/10.1007/978-3-319-44824-4_19)
3. Immunohistology of Leukemia Cutis and Histiocytic Tumors / Springer, Cham 2016 [https://link.springer.com/chapter/10.1007/978-3-319-30590-5\\_11](https://link.springer.com/chapter/10.1007/978-3-319-30590-5_11)

### **Electronic resources**

1. Каталог Российской государственной библиотеки <http://aleph.rsl.ru>
2. Научная электронная библиотека <http://elibrary.ru/>
3. Научно-образовательный портал: <http://www.med-edu.ru/>
4. Российское общество дерматовенерологов и косметологов  
<http://www.rodv.ru>

### **The list of resources of the information-telecommunication network “Internet”**

1. ЭБС «Консультант студента» <http://studmedlib.ru>
2. ЭБС «Университетская библиотека online» <http://www.biblioclub.ru/>
3. Бизнес-энциклопедия. «Медицинский менеджмент», «Стандарты и качество услуг в здравоохранении» <http://www.handbooks.ru>
4. КонсультантПлюс. Версия «ПРОФ (Законодательство)»: версия «Медицина и фармацевтика» - локальная сеть библиотеки ТГМУ
5. Тихоокеанский медицинский журнал  
<http://lib.vgmu.ru/journal/?name=pmj>
6. БД компании EBSCO Publishing
7. (Medline, Medline with Full Text, Health Source Nursing/Academic

Edition, Health Source Consumer Edition, Green FILE  
)<http://web.ebscohost.com/>

8. Реферативная БД Медицина ВИНТИ. <http://www2.viniti.ru/>
9. Электронная библиотека Российской национальной библиотеки: фонд авторефератов диссертаций <http://leb.nlr.ru/search/>
10. Сводный каталог периодики и аналитики по медицине MedArt. <http://ucm.sibtechcenter.ru/>
11. Медицинская литература <http://www.medbook.net.ru/>
12. Единое окно доступа" к образовательным ресурсам <http://window.edu.ru/>

#### **IV. METHODOLOGICAL RECOMMENDATIONS ON THE COMPLETING THE DISCIPLINE**

The purpose of the practical classes is to consolidate the knowledge gained by students in lectures, the modeling of practical situations, and also to test the effectiveness of students' independent work.

Practical lesson usually includes interviewing students for seminars. This allows the teacher to recognize the level of students' knowledge of lecture course materials, basic textbooks, knowledge of current problems and the current situation in the modern educational space. Further, the ability of students to apply their theoretical knowledge to solving practical problems is revealed.

It is advisable to begin the preparation for the practical lesson by repeating the material of the lectures. It should be borne in mind that the lecture course is limited in time and does not allow the lecturer to consider in detail all aspects of the issue being studied. Therefore, it is required to independently expand knowledge of both theoretical and practical nature. At the same time, the lectures provide a good guide for the student to search for additional materials, since they set a certain structure and logic for studying a particular question

When working independently, the student should first of all study the material presented in the recommended literature and / or teacher's educational literature and monographs. It is necessary to draw students' attention to the fact that not only

basic textbooks are included in the library list, but also more in-depth sources on each theme of the course. A consistent study of the subject allows the student to form a stable theoretical base.

An important part of the preparation for the practical class is the work of students with scientific and analytical articles that are published in specialized periodicals. They allow you to broaden your horizons and get an idea of current problems, possible ways to solve them and / or trends in the area under study.

The final step of preparing a student for practical training should be the acquaintance with the results of scientific research relevant to each topic.

### **LIST OF INFORMATION TECHNOLOGIES AND SOFTWARE**

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

In order to provide special conditions for the education of persons with disabilities all buildings are equipped with ramps, elevators, lifts, specialized places equipped with toilet rooms, information and navigation support signs.

### **V. MATERIAL AND TECHNICAL SUPPORT OF DISCIPLINE**

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 applicable sanitary and fire regulations, as well as safety requirements for educational and research and production work:

| <b>Name of equipped premises and rooms for independent work</b>   | <b>List of basic equipment</b>   |
|---|--|
| 690922, Primorsky Krai, Vladivostok, island Russian, the Saperny Peninsula, the village of ayaks, 10, RM. M 422 | Multimedia audience:<br>AIO PC HP ProOne 400 G1 AiO 19.5" Intel Core i3-4130T 4GB DDR3-1600 SODIMM (1x4GB)500GB; Screen projection 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; Aversion CP355AF; lavalier Microphone system UHF band Sennheiser EW 122 G3 composed of a wireless microphone and receiver; Codec of videoconferencing LifeSizeExpress 220 - Codeonly - Non-AES; Network camera Multipix MP-HD718; Two 47 " LCD panels, Full HD, LG M4716CCBA; audio commutation and sound amplification Subsystem; centralized uninterruptible power supply |
| 690033, Vladivostok, ul. Gamarnika, 18V   | Regional clinical dermatovenerologic hospital  |

### **Clinical bases:**

Medical Center of the Federal State Autonomous Educational Institution of Higher Education "Far Eastern Federal University»

State Autonomous Health Care Institution "Regional Clinical Skin and Venereal Clinic".



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**

**TRAINING AND METHODOLOGICAL SUPPORT  
INDEPENDENT WORK OF TRAINEES**

in discipline «**Dermatology**»  
Educational program  
Preparation for 31.05.01. General Medicine  
**Form of training full-time**

**Vladivostok  
2016**



Individual work includes:

1. Library and homework with educational literature and lecture notes,
2. Preparation for practical exercises,
3. Performance of an individual task
4. Preparation of the essay
5. Preparation for testing and control interview.

The procedure for the performance of individual work by students is determined by the schedule of individual work on the academic discipline.

### Schedule of independent work on the academic discipline

| №<br>р/р              | Name of the module of discipline  | Types of individual work  | Total<br>hours |
|-----------------------|-----------------------------------|---|----------------|
| 1                     | 3                                 | 4   | 5              |
| <b>4 год обучения</b> |                                   |   |                |
| 1.                    | General Dermatology               | writing medical history, preparation for classes, preparation for testing, preparation for current control, for final certification | 4              |
| 2.                    | Infection skin diseases           | writing medical history, preparation for classes, preparation for testing, preparation for current control, for final certification | 4              |
| 3.                    | Mycosis                           | writing medical history, preparation for classes, preparation for testing, preparation for current control, for final certification | 4              |
| 4.                    | Allergodermatosis                 | writing medical history, preparation for classes, preparation for testing, preparation for current control, for final certification | 4              |
| 5.                    | Autoimmune skin diseases          | writing medical history, preparation for classes, preparation for testing, preparation for current control, for final certification | 4              |
| 6.                    | Lichens                           | writing medical history, preparation for classes, preparation for testing, preparation for current control, for final certification | 4              |
| 7.                    | STIs. Syphilis primary, secondary | writing medical history, preparation for classes, preparation for testing, preparation for current control, for final               | 4              |

|    |  |   |   |
|----|--|---|---|
|    |  | certification   |   |
| 8. | STIs. Syphilis is tertiary, congenital.  | writing medical history, preparation for classes, preparation for testing, preparation for current control, for final certification | 4 |
| 9. | STIs. Gonorrhoea, chlamydia, trichomoniasis. Dermatological markers of HIV infection | writing medical history, preparation for classes, preparation for testing, preparation for current control, for final certification | 4 |

### **Topics of reports and abstracts**

Not provided



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**

**FUND ASSESSMENT TOOLS**

**«Dermatology»**

Educational program

Preparation for 31.05.01. General Medicine

**Form of training full-time**

**Vladivostok  
2016**

## 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.

| Code and of formulation competence  | Stages of competence formation |   |
|---|--------------------------------|---|
| GPC-8 readiness for medical use of drugs and other substances and their combinations in solving professional problems   | Knows                          | classification and main characteristics of drugs, pharmacodynamics and pharmacokinetics, indications and contraindications to the use of drugs, side effects; General principles of design of receptors and formulation of prescription drugs.  |
|   | Is able to                     | to analyze the effect of drugs on the totality of their pharmacological properties and the possibility of their use for therapeutic treatment; prescribe medicines, use various drugs, use the basic antibacterial, antiviral and biological drugs; to assess the possible manifestations of drug overdose and ways to eliminate them; to justify the principles of pathogenetic therapy of the most common diseases.   |
|   | Possesses                      | skills in the use of drugs in the treatment, rehabilitation and prevention of various diseases and pathological conditions.   |
| PC-5 readiness to collect patient complaints, his / her medical history, examination results, laboratory, instrumental, patho-anatomical and other studies in order to recognize the condition or establish the presence or absence of the disease. | Knows                          | etiology, diagnosis, treatment and prevention of skin and venereal diseases;<br>clinical picture, features of the course and possible complications<br>diseases that occur in the typical form;<br>modern methods of clinical instrumental diagnosis of patients<br>dermatovenerological profile;<br>features of collection of pathological materials;<br>precautionary measures,<br>basic principles of diagnosis, treatment and rehabilitation of skin and venereal diseases,<br>indications for hospitalization;<br>principles of regular medical observation ,<br>rehabilitation patients';<br>implementation of specific and non-specific prevention of skin diseases, sexually transmitted diseases and infections. |
|   | Is able to                     | to participate in the organization and provision of medical and sanitary-<br>anti-epidemic, preventive and rehabilitation assistance to the population with   |

|  |            |  |
|--|------------|--|
|  |            | <p>dermatological diseases;<br/>interpret the results of the examination, make a preliminary diagnosis,<br/>outline the scope of additional studies to clarify the diagnosis;<br/>formulate a clinical diagnosis;<br/>develop a treatment plan taking into account the course of the disease, choose and assign<br/>drug therapy, use methods of non-drug treatment, to carry out rehabilitation measures.</p>   |
|  | Possesses  | <p>interpretation of the results of laboratory, instrumental methods of diagnosis of skin and venereal diseases;<br/>the algorithm of the preliminary diagnosis with the subsequent direction on<br/>an additional examination and medical specialists;<br/>algorithm of statement of the developed clinical diagnosis by the patient; algorithm of performance of the main medical diagnostic and medical actions for rendering the first medical care at urgent and life-threatening conditions at skin and venereal diseases.</p> |
| PC-6 the ability to determine the patient's basic pathological conditions, symptoms, disease syndromes, nosological forms in accordance with The international statistical classification of diseases and health-related problems, X revision. | Knows      | <p>General and special research methods in the main sections of dermatology and venereology;<br/>basic diagnostic techniques used in the defeat of the skin and mucous membranes.</p>  |
|  | Is able to | <p>To obtain information about the development and course of the disease; to identify possible etiological factors, to apply objective methods of examination of the patient, to identify common and specific signs of dermatological and venereal disease; to assess the severity of the patient; to determine the need and sequence of the use of special research methods (laboratory, x-ray, endoscopic, functional), as well as consultations of narrow specialists, to interpret the data.</p>                                 |
|  | Possesses  | <p>Formed theoretical and practical skills to establish the diagnosis and determine the tactics of management of the patient with skin and venereal disease.</p>   |
| PC-8 ability to determine the tactics of management of patients with different nosological forms   | Know       | <p>General and special methods of research and treatment in the main sections of dermatology and STIs, modern technologies and equipment</p>   |
|  | Is able to | <p>Apply objective methods of examination of the patient, to identify common and specific signs of dermatological and venereal disease;<br/>To determine the indications for hospitalization of the patient, to determine its urgency, to organize hospitalization in accordance with the patient's condition;<br/>Determine the indications for outpatient treatment for skin diseases and sexually transmitted infections (STIs)</p>   |
|  | Possesses  | <p>Knowledge for the purpose of differential diagnosis and establishment of the final clinical diagnosis, and</p>  |

|  |  |  |
|--|--|--|
|  |  | <p>carrying out necessary treatment at skin and venereal diseases, STIs;</p> <p>Knowledge to carry out the necessary control of healing and subsequent follow-up of dermatological and venereal patients</p> |
|--|--|--|

## CONTROL OF ACHIEVEMENT OF COURSE GOALS

| № p/p | Controlled modules / sections / themes of academic discipline   | Codes and stages of the formation of competencies  |            | Evaluation tools - name                               |  |
|-------|---|--|------------|---|--|
|       |   |  |            | currentcontrol  | intermediate evaluation                        |
| 1     | Section 1.<br>Theme 1. General dermatology  | GPC-8 readiness for medical use of drugs and other substances and their combinations in solving professional problems  | Knows      | EO-1<br>Interview                                     | Questions of final control<br>8 semester -1-10 |
|       |   |  | Is able to | PW-1<br>Test  | PW-1<br>Test                                   |
|       |   |  | Possesse   | EO-3<br>Phototask                                     | EO2<br>Colloquium                              |
| 2     | Section 2.<br>Theme 1. Venereal diseases.<br>Theme 2. Sexually transmitted infections (STIs).   | PC-5 readiness to collect patient complaints, his / her medical history, examination results, laboratory, instrumental, patho-anatomical and other studies in order to recognize the condition or establish the presence or absence of the disease.) | Knows      | EO-1<br>Interview                                     | Questions of final control<br>8 semester 11-40 |
|       |   |  | Is able to | PW-1<br>Test  | PW-1<br>Test                                   |
|       |   |  | Possesses  | EO-3<br>Examination of the patient status description | EO-2<br>Exam                                   |
| 3     | Section 1.<br>Theme 1. General dermatology<br>Section 2.<br>Theme 1. Venereal diseases.<br>Theme 2. Sexually transmitted infections (STIs). | PC-6 the ability to determine the patient's basic pathological conditions, symptoms, disease syndromes, nosological forms in accordance with The international statistical classification of diseases and health-related problems, X revision.       | Knows      | EO-1<br>Interview                                     | Questions of final control<br>8 semester 11-40 |
|       |   |  | Is able to | PW-1<br>Test  | PW-1<br>Test                                   |
|       |   |  | Possesses  | EO-3<br>Examination of the patient status description | EO-2<br>Exam                                   |
| 4     | Section 1.<br>Theme 1. General dermatology<br>Section 2.<br>Theme 1. Venereal diseases.   | PC-8 ability to determine the tactics of management of patients with different nosological forms   | Knows      | EO-1<br>Interview                                     | Questions of final control<br>8 semester 11-40 |
|       |   |  | Is able to | PW-1<br>Test  | PW-1<br>Test                                   |
|       |   |  | Possesses  | EO-3  | EO-2   |

|  |  |  |  |   |      |
|--|--|--|--|---|------|
|  | Theme 2. Sexually transmitted infections (STIs). |  |  | Examination of the patient status description | Exam |
|--|--|--|--|---|------|

### The scale of assessment the level of formation of competences

| Code and formulation of competence  | Stages of the formation of competencies |  | Criteria   | Indicators  | Credits |
|---|---|--|--|---|---------|
| GPC-8 readiness for medical use of drugs and other substances and their combinations in solving professional problems   | Knows                                   | classification and main characteristics of drugs, pharmacodynamics and pharmacokinetics, indications and contraindications to the use of drugs, side effects; General principles of design of receptors and formulation of prescription drugs.   | Knows the basics of clinical pharmacology  | Classification, mechanism of action, indications and contraindications to prescription of drugs | 65-71   |
|   | Is able to                              | to analyze the effect of drugs on the totality of their pharmacological properties and the possibility of their use for therapeutic treatment; prescribe medicines, use various drugs, use the basic antibacterial, antiviral and biological drugs; to assess the possible manifestations of drug overdose and ways to eliminate them; to justify the principles of pathogenetic therapy of the most common diseases.  | Able to use drugs for therapeutic treatment  | Recommendations of drugs for etiotropic, pathogenetic and symptomatic treatment of diseases     | 71-84   |
|   | Possesses                               | skills in the use of drugs in the treatment, rehabilitation and prevention of various diseases and pathological conditions.  | has the skills of prescribing medicines for the purpose                                    | Preparation of treatment plan   | 85-100  |
| . PC-5 readiness to collect patient complaints, his / her medical history, examination results, laboratory, instrumental, patho-anatomical and other studies in order to recognize the condition or establish the presence or absence of the disease. | Knows                                   | etiology, diagnosis, treatment and prevention of skin and venereal diseases; clinical picture, features of the course and possible complications diseases that occur in the typical form; modern methods of clinical instrumental diagnosis of patients dermatovenerological profile; features of collection of pathological materials; precautionary measures, basic principles of diagnosis, treatment and rehabilitation of skin and venereal diseases, indications for hospitalization; principles of regular medical observation , rehabilitation patients'; implementation of specific and non-specific prevention of skin diseases, sexually transmitted diseases and | Knows etiology, epidemiology, pathogenesis, clinical picture of skin and venereal diseases | Classification, etiology, epidemiology, pathogenesis, clinical symptoms of infectious diseases  | 65-71   |

|   |            |   |   |   |        |
|---|------------|---|---|---|--------|
|   |            | infections.   |   |   |        |
|   | Is able to | to participate in the organization and provision of medical and sanitary-anti-epidemic, preventive and rehabilitation assistance to the population with dermatological diseases; interpret the results of the examination, make a preliminary diagnosis, outline the scope of additional studies to clarify the diagnosis; formulate a clinical diagnosis; develop a treatment plan taking into account the course of the disease, choose and assign drug therapy, use methods of non-drug treatment, to carry out rehabilitation measures. | . Formulate a preliminary diagnosis. Recommend laboratory and instrumental examinations. Outline a treatment plan and preventive measures | Appointment of a preliminary plan of examination and treatment of diseases.                                     | 71-84  |
|   | Possesses  | interpretation of the results of laboratory, instrumental methods of diagnosis of skin and venereal diseases; the algorithm of the preliminary diagnosis with the subsequent direction on an additional examination and medical specialists; algorithm of statement of the developed clinical diagnosis by the patient; algorithm of performance of the main medical diagnostic and medical actions for rendering the first medical care at urgent and life-threatening conditions at skin and venereal diseases.                           | He has the skills to formulate a clinical diagnosis, according to ICD. Taking into account the results of the survey.                     | Formulation of the clinical diagnosis. Appointment of a plan of examination, treatment and preventive measures. | 85-100 |
| PC-6 the ability to determine the patient's basic pathological conditions, symptoms, disease syndromes, nosological forms in accordance with The international statistical classification of diseases and health-related problems, X revision | Knows      | General and special research methods in the main sections of dermatology and venereology; basic diagnostic techniques used in the defeat of the skin and mucous membranes.  | Clinical symptoms and syndromes of skin and venereal diseases   | Клинические критерии кожных и венерических заболеваний  | 65-71  |
|   | Is able to | To obtain information about the development and course of the disease; to identify possible etiological factors, to apply objective methods of examination of the patient, to identify common and specific signs of dermatological and venereal disease; to assess the severity of the patient; to determine the need and sequence of the use of special research methods (laboratory, x-ray, endoscopic, functional), as well as consultations of narrow specialists, to interpret the data.   | Identify symptoms and syndromes of dermatovenerological diseases  | Diagnosis of syndromes of skin and venereal diseases, sexually transmitted infections                           | 71-84  |
|   | Possesses  | Formed theoretical and practical skills to establish the diagnosis and determine the tactics of management  | Skills to identify and determine the  | Detailed clinical diagnosis   | 85-100 |



|  |            |   |   |   |        |
|--|------------|---|---|---|--------|
|  |            | of the patient with skin and venereal disease.  | pathological conditions of skin and venereal patients                                     | according to modern ICD   |        |
| PC-8 ability to determine the tactics of management of patients with different nosological forms | Knows      | General and special methods of research and treatment in the main sections of dermatology and STIs, modern technologies and equipment   | Methods of treatment of skin and venereal diseases, indications for prescription of drugs | Methods of etiotropic, pathogenetic and symptomatic therapy of STIs, skin and venereal diseases | 65-71  |
|  | Is able to | Apply objective methods of examination of the patient, to identify common and specific signs of dermatological and venereal disease; To determine the indications for hospitalization of the patient, to determine its urgency, to organize hospitalization in accordance with the patient's condition; Determine the indications for outpatient treatment for skin diseases and sexually transmitted infections (STIs) | Formulate a list of therapeutic measures in accordance with the situation                 | Justification of the type of care and treatment for a particular patient                        | 71-84  |
|  | Possesses  | Knowledge for the purpose of differential diagnosis and establishment of the final clinical diagnosis, and carrying out necessary treatment at skin and venereal diseases, STIs; Knowledge to carry out the necessary control of healing and subsequent follow-up of dermatological and venereal patients .   | Skills of providing medical care for dermatovenereological diseases                       | The purpose of the treatment to the specific patient  | 85-100 |

*\* Criterion - a sign by which to judge the difference between the state of one phenomenon from another. The criterion is broader than the indicator, which is an integral element of the criterion and characterizes its content. The criterion expresses the most common feature by which the evaluation, comparison of real phenomena, qualities, processes. And the degree of manifestation, quality formation, certainty of criteria is expressed in specific indicators. The criterion is a tool, a necessary assessment tool, but the assessment itself is not. The functional role of the criterion is in determining or not determining the essential features of the object, phenomenon, quality, process, etc.  
The indicator acts in relation to the criterion as a particular to the General.  
The indicator does not include a universal dimension. It reflects the individual properties and characteristics of the cognizable object and serves as a means of accumulation of quantitative and qualitative data for criteria generalization. The main characteristics of the concept of "indicator" are the specificity and diagnostic, which implies its availability for observation, accounting and recording, and also allows us to consider the indicator as a more specific in relation to the criterion, and hence the meter of the latter.*

## Questions to assess preliminary competencies

1. The structure of the skin
2. Blood supply and innervation of the skin.

3. Receptor apparatus.
4. Skin function.
5. Skin appendages, structure, functions.
6. Histological structure of the skin layers.
7. Functions of the mucous membrane.
8. Hypersensitivity reactions type I-IV.
9. Phagocytosis.
10. Antibiotic resistance.
11. Microscopic and bacteriological methods of diagnosis.
12. Histopathological changes in the epidermis, the dermis and the hypodermis
13. Exogenous and endogenous causes of disease.
14. Principles of patient diagnosis
15. Principles of internal therapy

**Control tests are designed for students studying the course "Dermatology".**

Tests are necessary both for the control of knowledge in the process of the current interim certification, and for the assessment of knowledge, the result of which can be set off.

When working with tests, the student is asked to choose one answer out of three or four proposed. At the same time, the tests vary in their complexity. Among the proposed there are tests that contain several options for correct answers. The student must provide all correct answers.

Tests are designed for both individual and collective solutions. They can be used in the process and classroom, and independent work. The selection of tests necessary for the control of knowledge in the process of interim certification is made by each teacher individually.

Results of performance of test tasks are estimated by the teacher on a five-point scale for certification or on system "zachet" - "not zachet". The score "excellent" is set with the correct answer to more than 90% of the tests offered by the teacher. Score "good" - with the correct answer to more than 70% of the tests.

Assessment "satisfactory" - with the correct answer to 50% of the tests offered to the student.

### Examples of test tasks

1. List the histopathological, proliferative processes in the epidermis:
  - A) dyskeratosis
  - B) granulosa
  - C) sponsored
  - D) acantholysis
  - E) acanthosis
2. Wickham grid observed at:
  - A) discoid lupus erythematosus
  - B) scabies
  - C) red flat lichen
  - D) pink Gill lichen
  - D) secondary recurrent syphilis
3. Infection with scabies can occur when:
  - A) during the insect bite
  - B) when shaking hands
  - C) in case of sexual contact
  - D) in contact with infected objects
  - D) the nature
4. The streptococcal is not true:
  - (A) simple deprivation of face
  - B) sycosis
  - C) slit-like impetigo
  - D) ring-shaped impetigo
  - E) hidradenitis

5. In normal psoriasis, the favorite and most frequent localization of rashes are all areas except:

- (A) extensor surfaces of the limbs
- B) scalp
- C) sacrum area
- D) flexion of the legs
- D) the area of the elbows and knees

6. Specify the place of typical localization of scabies in adults:

- A) interdigital folds of brushes
- B) scalp
- C) face and neck
- D) palms and soles
- E) stomach

7. Which primary morphological element precedes erosion:

- (A) nodule
- B) tubercle
- C) blister
- D) node
- E) none of the above

8. For the defeat of the scalp with microsporia is characteristic:

- A) hair breakage at a height of 1-2mm
- B) complete hair loss
- C) hair breakage at a height of 5-8mm
- D) green glow of the foci in the rays of the wood lamp
- E) all characteristic

9. When tuberculosis leprosy affected:

- A) Central nervous system
- B) musculoskeletal system
- C) leather
- D) peripheral nervous system
- D) gastrointestinal tract

10. Granulosa is observed at:

- (A) hives
- B) pityriasis versicolor
- C) red flat lichen
- D) vulgar pemphigus
- D) secondary syphilis

11. In the course of morphea, it is possible to allocate stage:

- (A) edema
- B) follicular hyperkeratosis
- (C) infiltration
- G) of induration
- E) atrophy

12. Specify the main clinical signs of simple dermatitis:

- (A) clear boundaries
- B) compliance of the area of the lesion of the area of the stimulus
- C) pain and burning
- D) asymmetry of the lesion
- E) all of the above

13. Specify the clinical signs of eczema in the acute stage:

- (A) erythema
- B) lichenification

- C) microvesicles
- D) microerosion
- E) getting wet

14. Seborrheic eczema is characterized by:

- (A) severe itching
- B) the beginning of the process with the scalp
- C) flaky greasy yellow scales
- D) development of depigmentation
- E) defeat of extremities

15. In the group of itchy dermatoses included:

- A) limited itching
- B) atopic dermatitis
- C) scabies
- D) pruritus
- E) trichophytosis

16. The favus cause:

- (A) viruses
- B) the simplest  
In mushrooms
- D) ticks
- E) chlamydia

17. A typical chancre is:

- (A) ulcer
- B) erosion
- C) daddy
- D) node

D) spot

18. Complications of the chancre does not apply:

(A) gangrene

B) phimosis

C) inductive edema

D) paraphymosis

19. The varieties of pustular syphilis include:

(A) acne

B) smallpox

C) impetiginous

D) rupioid

E) all of the above

20. Gummas differentialsa with:

A) psoriasis

B) scrofuloderma

C) pemphigus

D) herpes

E) favus

21. Pathognomonic signs of early congenital syphilis:

A) a Gumma of the skin

B) high "Olympic" forehead

C) diffuse papular infiltration

D) pemphigus

D) osteochondritis

22. Pathognomonic sign of late congenital syphilis:

(A) hydrocephalus

- B) saber-like shins
- C) parenchymal keratitis
- D) papular angina
- D) Gumma of the skin

23. Gonococcus strikes:

- A) stratified squamous keratinizing epithelium
- B) transitional epithelium
- C) cylindrical epithelium
- D) multilayer flat non-keratinizing
- E) all of the above

24. Signs of urethral stricture are the following:

- (A) discharge from the urethra
- B) difficulty urinating
- C) the urinary flow
- G) the extension of the time urination
- E) scarring of the urethra according to urethroscopy

25. Bone lesions characteristic of early congenital syphilis include:

- A) degree p-W osteochondritis
- B) deforming arthrosis, C) osteoporosis, D) osteosclerosis, D) osteomyelitis

26. List the histopathological, proliferative processes in the epidermis:

- ( A) acanthosis
- B) spongiosis
- C) granulosa
- D) acantholysis
- E) hyperkeratosis

27. Morphological element, which is based on acantholysis, epidermolysis:



- (A) tubercle
- B) bubble
- C) blister
- D) nodule
- D) spot

28. Simple contact dermatitis is characterized by all of the above, except:

- (A) clear boundaries of the process
- B) localization in places of contact with the stimulus
- C) tubercles
- D) hyperemia
- E) burning, soreness

29. The streptococcal is not true:

- A) ring-shaped impetigo
- B) simple shingles
- C) sycosis
- D) slit-like impetigo
- E) ektima

30. The main forms of athlete's foot:

- (A) dyshydrotic
- B) spotted
- C) squamous
- D) surface
- E) intertriginous

31. CPL characterize the symptoms:

- A) severe itching
- B) hemispherical papules
- C) umbilical Central West

- D) polygonal papules
- E) abundant peeling

32. Fixed erythema is a manifestation of:

- (A) skin tuberculosis
- B) syphilis
- C) allergic vasculitis
- G) drug reaction
- E) psoriasis

33. In patients with tuberculosis lupus are detected:

- (A) yellowish-red bumps
- B) expressed the density of the elements
- C) soft consistency
- D) the phenomenon of "Apple jelly" in diascopy»
- E) positive sample with potassium iodide

34. When you boil in the stage of infiltration appoint:

- A) aniline dyes
- B) bandages with Ichthyol
- C) ointments with corticosteroids
- D) lotions with 2% boric acid solution
- E) alcohol compresses

35. Ulcer in zoonotic leishmaniasis:

- A) Small steep
- B) deep with steep edges
- C) around the ulcer infiltration area
- D) detachable ulcers serous-purulent, abundant
- D) detachable ulcer thick, yellow-green

36. For deep trihofitii is typical :

- A) General malaise, fever
- B) the presence of inflammatory infiltrates
- C) " honeycombs»
- D) spontaneous authorization
- E) all of the above is true

37. Pink lichen Gibert is characterized by symptoms:

- (A) spots of round or oval shape
- B) flat papules
- C) intense itching
- D) development of the medallion symptom»
- D) peeling thin scales atrophic – "symptom papyrus paper»

38. Acute epidermal necrolysis is characterized by:

- A) often sudden onset after taking medication
- B) the appearance of painful diffuse erythema
- C) deep ulcers
- D) positive Nikolsky's sign
- E) the appearance of flabby bubbles

39. With a progressive period of psoriasis appear:

- (A) small papules prone to peripheral growth
- B) peeling in the Central part of the Papula
- C) peeling only on the edge of the papule
- D) scant peeling on the entire surface of the papule
- D) positive symptoms Auspitz and Kebnera

40. When diskoidna lupus erythematosus identifies the following characteristics:

- (A) erythema

- B) muscle weakness
- C) hyperkeratosis
- D) linear arrangement of elements
- E) atrophy

41. Atopic dermatitis is characterized by:

- A) pronounced itching
- B) red dermography
- C) foci of lichenification
- G) white dermographism
- E) dry skin

42. The rash of secondary syphilis fresh:

- (A) non-abundant
- B) abundant
- C) grouped
- D) dim color

43. Shortening of the incubation period of syphilis is observed when:

- A) the development of a single hard chancre
- B) a giant chancre
- C) bipolar arrangement of chancres
- D) a chancre – amygdalite
- E) inductive edema

44. The greatest diagnostic value in the recognition of aortic syphilitic aneurysm is:

- (A) auscultatory study
- B) percussion
- C) x-ray

45. With early congenital syphilis, the skin may be:

- (A) diffuse infiltration
- B) angioedema
- C) hives
- D) Gumma
- E) pemphigus.

46. The position of the back of the urethra in gonorrhoea is characterized by:

- (A) frequent urination
- B) pain at the end of urination
- C) lack of any sensation
- D) turbid urine in 1 Cup
- E) turbid urine in 2 cups

47. In the treatment of urethritis caused by yeast-like fungi, it is most advisable to use:

- (A) kanamycin
- B) gentamicin
- C) diflucan
- D) tinidazole
- E) nystatin

48. Bacterial vaginosis is characterized by the following features:

- A) detection of key cells
- B) the alkaline reaction of the secretions
- C) amine odors during the sample with 10% KOH solution

49. The pathognomonic symptom of early congenital syphilis is:

- A) the tubercles of the skin of the trunk

- B) labyrinth deafness
- C) skin gums
- D) saber-like shins
- D) buttock skull

50. Vaginal Gardnerella most sensitive to drugs:

- (A) groups of aminoglycosides
- B) tetracycline groups
- C) metronidazole groups
- G) the group of cephalosporin

51. Hyperkeratosis is thickening.:

- (A) epidermis
- B) spiny layer
- C) granular layer
- D) Horny

52. The assessment of morphological elements provides for the determination of:

- A) sizes and colors
- B) forms and configurations
- C) consistency
- D) surface, bottom, content, boundaries
- E) all of the above

53. Substance sensitizing actions cause all except:

- A) contact simple dermatitis
- B) allergic dermatitis
- C) eczema
- D) hives
- E) toxicoderma

54. Seborrheic dermatitis is characterized by:
- A) the appearance of vesicles and bubbles
  - B) the appearance of lichenoid papules
  - C) development of depigmentation
  - G) peeling greasy scales in the erythematous - squamous lesions
  - D) defeat of the ulnar and popliteal folds
55. For herpes simplex is characterized by all but:
- (A) erythema
  - B) edema
  - C) groups of bubbles
  - D) vegetation
  - E) erosion
56. When streptococcal impetigo can not be assigned:
- A) aniline dyes
  - B) ointments with antibiotics
  - C) ointments in corticosteroids
  - G) UFO
  - E) pastes with antibiotics
57. Complex treatment of vitiligo includes everything except:
- (A) photosensitizing agents
  - B) treatment of concomitant diseases
  - C) elimination of psycho-emotional disorders
  - D) external use of white mercury ointment
  - E) elimination of adverse physical and chemical effects on the skin
58. When pseudoformicaleo in the inflammatory process involved:

- (A) exocrine sweat glands
- B) apocrine sweat glands
- C) hair follicles
- D) all of the above
- E) none of the above

59. For multi-colored lichen characteristic:

- A) chronic course
- B) presence of spots
- C) acute inflammation
- D) bran peeling
- E) eroded

60. For favus is not typical:

- ( A) presence of crusts ( skutulls )
- B) formation of papules
- C) scar atrophy
- D) "mouse" smell from the scalp
- D) atrophy of hair

61. With atopic dermatitis is almost not combined:

- (A) psoriasis
- B) hay fever
- C) bronchial asthma
- D) neurasthenia
- E) none of the above

62. For microscopy of smooth skin is characterized by all of the above, except:

- (A) erythematous-squamous foci
- B) fuzzy boundaries and fast resolution ( spontaneous)



- C) bubbles on the edge of the centers
- D) peeling
- E) involvement in the process of pubic hair

63. For dermatosis Duhring not typical:

- A) pronounced itching of the skin
- B) hypersensitivity to iodine preparations
- C) polymorphism of the rash
- D) presence of acantholytic cells
- D) pronounced symptom of Nikolsky

64. The group of itchy dermatoses includes:

- A) local itching
- B) universal itching
- C) atopic dermatitis
- D) scabies
- D) KPL

65. In the progressive stage of psoriasis, it is undesirable to prescribe:

- (A) antihistamines
- B) UFO and 12
- C) sodium thiosulfate
- D) 1% salicylic ointment
- E) calcium preparations

66. The secondary period of syphilis from the moment of infection begins through:

- A) 1 month
- B) 1 – 2 months

- C) 2 – 3 months
- G) 3 – 4 months
- D) 4 – 5 months

67. Chancre – panaritium is:

- A) erosion or ulceration on the fingers
- B) increased the amount of phalanx without defect, without inflammation
- C) increased the amount of phalanx without defect, inflammation

68. The rash of secondary recurrent syphilis is usually:

- (A) non-abundant
- B) abundant
- C) symmetrical
- D) grouped
- E) have an island-inflammatory color

69. Syphilitic leukoderma differentiates with:

- (A) vitiligo
- B) false leukoderma after some dermatoses
- C) melanism
- D) with all of the above
- D) correct a and b

70. The pathognomonic symptom of early congenital syphilis is:

- A) papular rash
- B) spotted rash
- (C) diffuse infiltration
- D) alopecia
- E) dystrophy

71. Osteochondrites are detected in patients:

- (A) late congenital syphilis
- B) tertiary syphilis
- C) early congenital syphilis
- D) secondary fresh syphilis
- E) secondary recurrent syphilis

72. Gonococcus refers to:

- A) paired gram-negative cocci
- B) paired gram-positive cocci
- In) grammatically coccobacillus
- D) gram-negative coccobacilli

73. The signs of chronic follicular prostatitis are:

- A) foreign body sensation in the rectum
- B) discharge from the urethra
- C) high leukocytosis in the prostate gland secret
- D) nodular seals on the surface of the prostate gland during palpation
- E) all of the above

74. Urethroscopy is contraindicated in:

- A) chronic prostatitis
- B) acute prostatitis
- C) chronic urethritis
- D) impotence

75. When treating urethritis caused by yeast-like fungi, it is most advisable to use:

- A) trihopol
- B) penicillin

- C) nystatin
- D) tinidazole
- E) kanamycin

76. The non-hollow elements include:

- (A) Papula
- B) vesicle
- In a bubble
- D) blister
- E) node

77. Secondary morphological element appearing in dynamics at the site of the vesicle:

- (A) excretion
- B) ulcer
- In the rumen
- D) crack
- E) erosion

78. The drugs intended for external treatment of herpes include:

- (A) oxolinic ointment
- B) zovirax ointment
- C) Vishnevsky ointment
- G) besides the
- E) diphenhydramine ointment

79. For pityriasis lichen are characteristic:

- A) itching of the skin
- B) spotted rash
- C) bran peeling
- D) the tendency of spots to peripheral growth and mergers

E) bubbles in the center of foci

80. Dermatitis during is characterized by symptoms:

(A) pustules

B) the appearance of intense bubbles and bubbles

C) positive Nikolsky's sign

D) eosinophilia

E) ulcers

81. Vegetative pemphigus is characterized by everything except:

A) the appearance of bubbles with serous content

B) the appearance of vegetation on the surface of erosion

C) presence of acantholytic cells

D) fever

D) positive Nikolsky's sign

82. What signs are characteristic of eczema:

A) neuro-allergic nature of the process

B) long-term recurrent course

C) polymorphism of the rash

G) white dermographism

E) presence of tubercles

83. Clinical symptoms of discoid lupus erythematosus:

(A) erythema

B) tightly seated scales

C) petechiae

D) atrophy

E) papules

84. Which of the following elements are found in skin itching:

- (A) erosion
- B) papules
- C) blisters
- D) cracks
- E) combing

85. Red flat lichen is characterized by:

- (A) the presence of polygonal papules
- B) red with purple tint
- C) waxy luster
- D) positive symptom of Wickham
- D) positive symptom Besnier – Meshchersky

86. Hereditary predisposition is important in the occurrence of:

- (A) furunculosis
- B) syphilis
- C) scabies
- D) atopic dermatitis
- E) psoriasis

87. For scabies are characteristic:

- (A) lenticular papules
- B) point-itchy vesicles and papules
- C) petechiae
- D) polygonal papules
- E) blisters

88. Primary morphological element in CPL:

- (A) Papula

B) bubble

Stained

D) scales

E) tubercle

89. Possible causes of allergic dermatitis:

(A) internal medicine

B) medicines for external use

C) household chemical products

D) pollen of flowers

E) canned fish

90. With furunculosis, a mandatory blood test for:

(A) bilirubin

B) residual nitrogen

In) rheumatology test

D) sugar

E) total protein

91. For hemorrhagic vasculitis characterized by clinical forms:

A) plain purple

B) necrotic purple

C) rheumatic purpura

D) all of the above

E) none of the above

92. By the atypical chancre include:

A) wide warts

B) ectima

C) inductive edema

- D) balance
- E) phimosis

93. Syphilitic roseola:

- A) disappears when pressed
- B) yellow-brown color
- C) accompanied by itching
- D) pink-red color
- E) it is allowed to form a scar

94. The formation of yellowish-brown tubercles, soft, testovato consistency, a positive phenomenon of "Apple jelly" is characteristic of:

- (A) tuberculosis lupus
- B) tertiary syphilis
- C) tubercular type of leprosy
- D) actinomycosis
- D) lymphoma of the skin

95. The greatest diagnostic value in the recognition of aortic syphilitic aneurysm is:

- (A) auscultatory study
- B) percussion
- C) x-ray

96. With early congenital syphilis, the skin may be:

- (A) hives
- B) diffuse infiltration
- C) pemphigus
- D) ulcers
- E) gum



97. For the treatment of urethritis caused by yeast-like fungi, it is most advisable to use:

- (A) pimafulcin
- B) kanamycin
- C) abactal
- D) diflucan
- D) tinidazole

98. Bacterial vaginosis is characterized by the following features:

- A) detection of key cells
- B) the alkaline reaction of the secretions
- C) the presence of ulcers on the cervix
- D) the presence of a creamy discharge in the posterior vaginal vault
- E) amine smells when carrying out test with 10% KOH solution

99. The pathognomonic symptom of early congenital syphilis is:

- (A) labyrinth deafness
- B) buttock skull
- C) skin gums
- D) saber-like shins
- E) dementia

100. Trichomonas are most sensitive to drugs:

- (A) groups of aminoglycosides
- B) tetracycline groups
- C) metronidazole groups
- G) the group of cephalosporin

### **Examples of situational tasks**

#### **Situational task №1.**

Nodes are scattered on the skin of the thighs and buttocks of the patient. Are they primary or secondary morphological elements? Their outcome?

**Task № 2**

When scraping the focus of erythema with follicular keratosis, located on the skin of the cheeks and the back of the nose, the patient felt severe pain. What symptom are we talking about?

**Task № 3**

The patient on the torso profuse spotted rash pink-red color drain character up to 5-15 cm. What is the nature of the spots?

**Task № 4**

The patient has on the skin of the trunk and limbs are itchy pink-red hairless elements of different sizes, bizarre configuration. Elements are quickly destroyed and appear in other areas. What elements are we talking about?

**Task № 5**

On the skin of the patient are scattered white rounded spots of various sizes, their surface slightly flakes. Large spots have scalloped outlines. Nearby are papules and plaques. Is it possible to determine the nature of the spots in the patient (whether they are primary or secondary) ?

**Task №. 6**

At the reception to the doctor turned the patient, who on the skin of the face and scalp are yellowish-green crust. At the site of any morphological elements they were formed?

**Task №7**

On the skin of the patient in the face are grouped asexual elements, towering above the level of the skin, 0.5 x 0.5 cm in size, hemispherical. Among them there are the same size ulcers, covered with crusts, and small scars cyanotic and brown color.

What are the primary morphological elements of the patient?

### **Task № 8**

Histologically, the drug revealed acanthosis, parakeratosis. What morphological element can Express this process clinically?

### **Task № 9**

Histologically, the drug revealed acantholysis. What morphological element of this process can be expressed clinically?

### **Task № 10**

On the face of the patient are numerous erosion size 0, 2x0, 3 cm with rounded shapes. Are they primary or secondary elements? Their outcome?

### **Sample subjects of control questions:**

1. The structure of the skin, blood flow, receptor apparatus. Skin function
2. Skin appendages, structure, functions
3. Classification of morphological elements. Characteristics of morphological elements I and II
4. Histopathological changes in the epidermis, the dermis and the hypodermis
5. Exogenous and endogenous causes of skin diseases
6. Principles of internal medicine for dermatology, drugs
7. External therapy drugs, characteristics of drugs
8. Pyoderma. Characteristics of conditions and predisposing factors. Classification. Characteristics of pathogens. The development of pyoderma in a production environment
9. Clinical forms of staphylococcal pyoderma. Osteoporitic, folliculitis, sycosis, furuncle, carbuncle, hydradenitis
10. Streptoderma. Etiology, classification, clinic, treatment, prevention
11. Scabies. Etiology, ways of transmission, clinical features, treatment. Features of the course of scabies in newborns and the elderly.
12. Pediculosis. Etiology, ways of transmission, clinical features, treatment.
13. Dermatitis. Classification, causes of development

14. Simple contact dermatitis. Etiology, pathogenesis, clinical features depending on the impact factor. Irritant contact dermatitis in a production environment
15. Allergic dermatitis. Etiology, pathogenesis, clinic, treatment. Allergological tests. Industrial allergic dermatitis and its prevention.
16. Toxicoderma. Etiology, clinic, treatment, prevention
17. Lyell and Stevens-Johnson syndrome. Etiology, clinic, treatment, prevention
18. Eczema. Classification, etiology, clinic, treatment, prevention
19. Characteristics of fungi, prevalence in nature, conditions and ways of infection. Classification of mycoses
20. Keratomycosis. Etiology, classification, clinic, treatment, prevention
21. Dermatomycosises. Etiology, classification, clinic, treatment, prevention
22. Candidiasises. Etiology, classification, clinic, treatment, prevention
23. Deep mycoses. Etiology, classification, clinic, treatment, prevention
24. Pseudomys: actinomycosis.
25. Mycoses in terms of production. Clinic, treatment, prevention
26. Itching dermatosis. Prevalence, classification
27. Skin itch. Etiology, pathogenesis, classification, clinic, treatment
28. Prurigo. Etiology, pathogenesis, clinic, treatment
29. Urticaria. Etiology, pathogenesis, classification, clinic, treatment
30. Limited neurodermatitis. Etiology, pathogenesis, clinic, treatment
31. Atopic dermatitis. Etiology, pathogenesis, periods, clinic, treatment
32. Connective tissue diseases. Prevalence, causes of development, classification. Principles of treatment and clinical examination
33. Lupus erythematosus. Clinic, pathogenesis, treatment
34. Scleroderma. Clinic, pathogenesis, treatment
35. Dermatomyositis. Clinic, pathogenesis, treatment
36. Viral dermatoses. Prevalence, classification

37. Herpes simplex. Etiology, pathogenesis, clinic, treatment, atypical forms. Features of the course in HIV-infected
38. Herpes zoster. Etiology, pathogenesis, clinic, treatment. Features of the course in HIV-infected
39. Warts. Etiology, pathogenesis, classification. Features of the course in HIV-infected
40. Genital warts. Clinic, pathogenesis, treatment
41. Molluscum contagiosum. Clinic, pathogenesis, treatment
42. Bubble dermatoses. Prevalence, classification
43. The true pemphigus. Etiology, pathogenesis, classification. Features of diagnosis and treatment
44. Dering's Dermatitis. Etiology, pathogenesis, clinic, diagnosis, treatment
45. Psoriasis. Etiology, classification. Characteristic clinical manifestations typical of psoriasis, the frequency of flow, seasonality
46. Psoriatic erythroderma. Clinic, pathogenesis, treatment
47. Psoriatic arthritis. Clinic, pathogenesis, treatment
48. Pustular psoriasis. Clinic, pathogenesis, differential diagnosis, treatment
49. Red Lichen. Etiology, pathogenesis, typical and atypical forms, differential diagnosis, treatment
50. Characteristics of sexually transmitted diseases
51. Syphilis. History of syphilis in Europe. Etiology, structure and properties of pale Treponema, conditions and ways of transmission. Periods of syphilis and its General course. Immunity in syphilis
52. I period of syphilis. Characteristics, clinical (characteristics, complications and differential diagnosis of the chancre, typical), atypical hard chancre, principles of diagnosis
53. II period of syphilis. Characteristics, clinical manifestations of fresh and recurrent syphilis, principles of diagnosis

54. Differential diagnosis resembling rashes, syphilides papular, pustular syphilides
55. Visceral lesions and lesions of the nervous system in secondary syphilis
56. Latent syphilis. Classification, principles of diagnostics
57. Tertiary period of syphilis. Characteristics, the main manifestations on the skin, mucous lesions, visceral lesions. Clinic of late neurosyphilis
58. Principles of diagnosis of tertiary syphilis. Differential diagnosis with tuberculosis, leishmaniasis, leprosy
59. Congenital syphilis. Classification, the defeat of the fetus and placenta, clinic
60. Principles of serological reactions and their interpretation. Principles of treatment of syphilis, prophylactic medical examination
61. Characteristics of diseases related to STI
62. Gonorrhoea. Structure and properties of gonococcus, incubation period, ways and conditions of transmission. Classification, clinical features, complications. Diagnosis, treatment, medical examination
63. Trichomoniasis. Etiology, clinic, diagnosis, treatment, medical examination
64. Chlamydiosis. Etiology, pathogenesis, clinic, treatment
65. Genital herpes. Etiology, pathogenesis, clinic, treatment
66. Mycoplasmosis. Etiology, pathogenesis, clinic, treatment
67. Candidiasis. Etiology, pathogenesis, clinic, treatment
68. Bacterial vaginosis. Etiology, pathogenesis, clinic, treatment
69. Complications of STIs in men and women.
70. AIDS-associated skin diseases.