



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

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**SCHOOL OF MEDICINE**

**ASSESSMENT FUND**  
**Internal Therapy, Occupational Diseases**  
**Speciality 33.05.01 Pharmacy**

**Vladivostok 2023**

**The list of assessment forms used at various stages of the formation of competencies in the course of mastering the discipline Internal Therapy, Occupational Diseases**

№	Supervised modules / sections / topics of the discipline	Codes and stages of competency formation	Valuation tools - name		
			Current control	Intermediate certification	
1	<b>Module 1.</b> Pulmonology <b>Module 2.</b> Cardiology <b>Module 3.</b> Gastroenterology <b>Module 4.</b> Nephrology <b>Module 5.</b> Rheumatology <b>Module 7.</b> Hematology. <b>Module 1.</b> Occupational diseases <b>Module 2.</b> Physiotherapy and sanatorium-resort treatment.	YK-8.4; ПК-7.1	Knows	OQ-1 Interview	Exam Questions Semester 1 -1-25
			Can	PW-1 Test	PW-1 Test
			Owens	OQ-3 Report, report	OQ-2 Colloquium
2	<b>Module 1.</b> Pulmonology <b>Module 2.</b> Cardiology <b>Module 3.</b> Gastroenterology <b>Module 4.</b> Nephrology <b>Module 5.</b> Rheumatology <b>Module 7.</b> Hematology. <b>Module 1.</b> Occupational diseases <b>Module 2.</b> Physiotherapy and sanatorium-resort treatment.	GPC-7.1. Be able to prescribe treatment based on knowledge of morphological and functional features, physiological conditions and pathological processes in the human body, based on the pharmacodynamics of drugs and the mechanism of action of other therapeutic agents and methods.	Knows	OQ-1 Interview	Exam Questions Semester 1 26-64
			Can	PW-1 Test	PW-1 Test
			Owens	OQ-3 Report, report	OQ-2 Colloquium
3	<b>Module 1.</b> Pulmonology <b>Module 2.</b> Cardiology <b>Module 3.</b> Gastroenterology <b>Module 4.</b> Nephrology <b>Module 5.</b> Rheumatology <b>Module 7.</b> Hematology. <b>Module 1.</b> Occupational diseases <b>Module 2.</b> Physiotherapy and sanatorium-resort treatment.	GPC-7.2 Be able, on the basis of clinical, laboratory and instrumental data, to evaluate and monitor the therapeutic effect and side effects in the appointment of drugs, as well as other therapeutic agents and methods.	Knows	OQ-1 Interview	Exam Questions Semester 1 65-100
			Can	PW-1 Test	PW-1 Test
			Owens	OQ-3 Report, report	OQ-2 Colloquium
4	<b>Module 1.</b> Pulmonology <b>Module 2.</b> Cardiology <b>Module 3.</b> Gastroenterology <b>Module 4.</b> Nephrology <b>Module 5.</b> Rheumatology <b>Module 7.</b> Hematology. <b>Module 1.</b> Occupational diseases <b>Module 2.</b> Physiotherapy and sanatorium-resort treatment.	PC - 4.3 Be able to justify the need and scope of laboratory and instrumental examination of the patient, the need to refer the patient to consultations with specialist doctors	Knows	Poll Test control Presentation	Exam Questions Semester 1 -26-64
			Can	Situational task	PW-1 Test
			Owens	Situational task	OQ-2 Colloquium
5	<b>Module 1.</b> Pulmonology <b>Module 2.</b> Cardiology <b>Module 3.</b> Gastroenterology <b>Module 4.</b> Nephrology	PC - 4.4 Be able to determine the sequence of volume, content and sequence of diagnostic measures, taking into	Knows	Poll Test control Presentation	Exam Questions Semester 1 -65-100

	<b>Module 5.</b> Rheumatology <b>Module 7.</b> Hematology. <b>Module 1.</b> Occupational diseases <b>Module 2.</b> Physiotherapy and sanatorium-resort treatment.	account the standards of medical care.	Can	Situational task	PW-1 Test
			Owens	Situational task	OQ-2 Colloquium
	<b>Module 1.</b> Pulmonology <b>Module 2.</b> Cardiology <b>Module 3.</b> Gastroenterology <b>Module 4.</b> Nephrology <b>Module 5.</b> Rheumatology <b>Module 7.</b> Hematology. <b>Module 1.</b> Occupational diseases <b>Module 2.</b> Physiotherapy and sanatorium-resort treatment.	PC-5.1 Know the etiology, pathogenesis and pathomorphology, clinical picture, differential diagnosis, features of the course, complications and outcomes of diseases of internal organs	Knows	Poll Test control Presentation	Exam Questions Semester 1 -26-64
			Can	Situational task	PW-1 Test
			Owens	Situational task	OQ-2 Colloquium
	<b>Module 1.</b> Pulmonology <b>Module 2.</b> Cardiology <b>Module 3.</b> Gastroenterology <b>Module 4.</b> Nephrology <b>Module 5.</b> Rheumatology <b>Module 7.</b> Hematology. <b>Module 1.</b> Occupational diseases <b>Module 2.</b> Physiotherapy and sanatorium-resort treatment.	PC-5.2 Be able to carry out early diagnosis of diseases of internal organs	Knows	Poll Test control Presentation	Exam Questions Semester 1 -65-100
			Can	Situational task	PW-1 Test
			Owens	Situational task	OQ-2 Colloquium
	<b>Module 1.</b> Pulmonology <b>Module 2.</b> Cardiology <b>Module 3.</b> Gastroenterology <b>Module 4.</b> Nephrology <b>Module 5.</b> Rheumatology <b>Module 7.</b> Hematology. <b>Module 1.</b> Occupational diseases <b>Module 2.</b> Physiotherapy and sanatorium-resort treatment.	PC-7.2 Is able to prescribe medicines, medical devices and therapeutic nutrition, taking into account the diagnosis, age and clinical picture of the disease in accordance with the current procedures for the provision of medical care, clinical recommendations (protocols of speech) on the provision of medical care, taking into account the standards of medical care	Knows	Poll Test control Presentation	Exam Questions Semester 1 -26-64
			Can	Situational task	PW-1 Test
			Owens	Situational task	OQ-2 Colloquium

Scale for assessing the level of achievement of learning outcomes for the current and intermediate certification in the discipline Internal Therapy, Occupational Diseases

Points (rating score)	Levels of achievement of learning outcomes		Requirements for the formed competencies
	Current and intermediate certification	Intermediate certification	

100 – 86	Elevated	«"credit" / "excellent"	The student freely and confidently finds reliable sources of information, operates with the information provided, has excellent skills in analyzing and synthesizing information, knows all the main methods for solving problems provided for by the curriculum, knows typical mistakes and possible difficulties in solving a particular problem, and is able to choose and effectively apply appropriate method for solving a specific problem
85 – 76	Base	"credit" / good	The student in most cases is able to identify reliable sources of information, process, analyze and synthesize the proposed information, choose a method for solving the problem and solve it. Makes single serious mistakes in solving problems, experiences difficulties in rare or difficult cases of solving problems, does not know typical mistakes and possible difficulties in solving a particular problem
75 – 61	Threshold	"credit" / "satisfactory"	The student makes mistakes in determining the reliability of information sources, is able to correctly solve only typical, most common problems in a particular area (process information, choose a method for solving a problem and solve it)
60 – 0	Level	"not credit" / "not satisfactory"	The student does not know a significant part of the program material, makes significant mistakes, performs practical work uncertainly, with great difficulty.

## **Evaluation tools for current certification**

Control tests are intended for students studying the course " Propaedeutics in Internal Medicine".

When working with tests, it is proposed to choose one answer option from three to four offered. At the same time, the tests are not the same in their complexity. Among the proposed there are tests that contain several options for correct answers. The student must indicate all the correct answers.

Tests are designed for both individual and collective decision. They can be used in both classroom and self-study. The selection of tests necessary for the control of knowledge in the process of intermediate certification is made by each teacher individually.

The results of the test tasks are evaluated by the teacher on a five-point scale for attestation or according to the "pass" - "fail" system. The grade "excellent" is given with the correct answer to more than 90% of the tests proposed by the teacher. Rating "good" - with the correct answer to more than 70% of the tests. Grade "satisfactory" - with the correct answer to 50% of the proposed tests.

## **Sample test tasks**

### **Examples of test tasks.**

1. The main methods of examination of the patient include
  - a. examination, inquiry
  - b. inspection, percussion, auscultation
  - c. inspection, questioning, palpation, percussion, auscultation
  - d. inspection, questioning, palpation, percussion, auscultation,  
tes laboratory

ts

2. The patient's passive position is

- a. position on the affected side
- b. being on bed rest
- c. a position in which the patient is unable to change this position
- d. healthy side position

3. Vesicular respiration is formed

- a. in the bronchi
- b. in the alveoli
- c. into the trachea
- d. in the lung cavities

4. When bronchitis is determined

- a. vesicular breathing
- b. amphoric respiration
- c. weakened vesicular breathing
- d. hard breathing.

5. Wheezing is formed

- a. in the alveoli
- b. in the bronchi
- c. in the pleural cavity
- d. in bronchi, trachea, alveoli

1. The patient has daily fluctuations in body temperature within 36.6-40.2°C. An increase in temperature is preceded by severe chills; decrease is accompanied by debilitating sweating. Specify the type of temperature curve:

- a) febris intermittens;
- b) febris continua;
- c) febris recurrens;
- d) febris hectica.

7. With bronchitis auscultated

- a. crepitus
- b. wheezing
- c. pleural rub
- d. crepitus and wheezing

8. Give a description of the "Stokes collar":

a) the face is puffy, cyanotic, there is a sharp swelling of the veins of the neck, pronounced cyanosis and swelling of the neck;

b) there is a pronounced cyanosis of the lips, tip of the nose, chin, ears, cyanotic flush of the cheeks;

c) face deathly pale with a grayish tint, sunken eyes, pointed nose, drops of cold profuse sweat on the forehead;

d) puffy, pale face, swelling under the eyes, swollen eyelids, narrow palpebral fissures;

9. If there is a cavity in the lung that communicates with the bronchus, auscultate

- a. hard breathing
- b. weakened vesicular breathing
- c. amphoric respiration
- d. increased vesicular respiration.

10. Give a description of the "face of Hippocrates":

- a) the face is puffy, cyanotic, there is a sharp swelling of the veins of the neck, pronounced cyanosis and swelling of the neck;
- b) there is a pronounced cyanosis of the lips, tip of the nose, chin, ears, cyanotic flush of the cheeks;
- c) face deathly pale with a grayish tint, sunken eyes, pointed nose, drops of cold profuse sweat on the forehead;
- d) puffy, pale face, swelling under the eyes, swollen eyelids, narrow palpebral fissures;

11. Explain the origin of the decrease in skin turgor, detected during a general examination:

- a) hemorrhagic syndrome;
- b) dehydration of the body;
- c) sideropenic syndrome;
- d) violation of the synthetic function of the liver.

12. Explain the origin of angular stomatitis and skin cracks detected during a general examination:

- a) hemorrhagic syndrome;
- b) dehydration of the body;
- c) hyperestrogenemia;
- d) sideropenic syndrome;

13. With obstructive atelectasis, breathing

- a. bronchial
- b. enhanced vesicular
- c. tough d. absent

14. The boundaries of dullness of percussion sound with right-sided hydrothorax are located

- a. horizontal line to the right
- b. on the oblique line of Damuaso on the left
- c. horizontally on both sides
- d. on the oblique line of Damoiseau on the right.

15. With compression atelectasis, auscultated

- a. weakened bronchial breathing
- b. increased vesicular breathing
- c. no breathing
- d. hard breathing
- e. mixed breathing.



16. Explain the origin of gynecomastia in men, detected during a general examination:

- a) hemorrhagic syndrome;
- b) dehydration of the body; c) hyperestrogenemia;
- d) sideropenic syndrome;

17. Crepitus is formed

- a. in the alveoli
- b. in the large bronchi
- c. in small bronchi
- d. into the trachea

18. With emphysema, breathing is auscultated

- a. vesicular
- b. bronchial;
- c. amphoric;
- d. weakened vesicular;

19. The most possible auscultatory picture of the lungs in focal pneumonia

- a. bronchial breathing
- b. vesicular breathing
- c. bronchovesicular breathing
- d. amphoric respiration
- e. metallic breath.

20. Auscultation data for lung abscess in the stage of emptying

- a. weakened vesicular breathing
- b. enhanced vesicular
- c. bronchial breathing
- d. amphoric respiration

21. Bronchophony with emphysema

- a. intensify
- b. weaken
- c. won't change at all
- d. not defined
- e. will sharply intensify.

22. Changes in bronchophony and voice trembling in lung diseases are unambiguous.

Correct answer:

- a. No
- b. Sometimes
- c. Yes
- d. with increased voice trembling, bronchophony weakens

e. with the weakening of voice trembling, bronchophony increases.

23. Distant dry rales occur when

- a. cardiac asthma
- b. lobar pneumonia
- c. bronchial asthma
- d. bronchiectasis

24. Dullness of percussion sound is noted with a. emphysema

- b. bronchitis
- c. bronchial asthma
- d. pneumothorax.

25. Quincke's edema is:

- a. swelling of the papillary layer of the skin in the form of rashes and itchy blisters
- b. accumulation of edematous fluid in the cavities
- c. allergic swelling of the skin, subcutaneous tissue, mucous membranes
- d. dense swelling in which pressure does not leave a trace

26. Sudden increase in arterial hypertension and severe headache in patient leg with acute glomerulonephritis are harbingers of development:

- a. renal eclampsia
- b. nephrotic syndrome
- c. acute renal failure
- d. uremic coma

27. The cause of biliary colic is:

- a. stretching of the Glisson capsule of the liver
- b. spasm of the smooth muscles of the gallbladder and bile ducts on contact with the stone
- c. dysfunction of the sphincter of Oddi
- d. inflammation of the gallbladder wall

28. What variant of hepatic coma will develop with massive necrosis of hepatocytes:

- a. shunt
- b. porto-caval
- c. mixed
- d. hepatocellular

29. The development of what emergency condition can be thought of when a patient with a lung abscess suddenly develops chest pain, cyanosis, shortness of breath and cough:

- a. spontaneous pneumothorax
- b. broncho-obstructive syndrome
- c. pulmonary edema
- d. pulmonary hemorrhage

30. A sudden significant increase in blood pressure, accompanied by headache, dizziness, nausea, vomiting is:

- a. cardiac asthma
- b. collapse
- c. hypertensive crisis
- d. fainting

**Intermediate attestation of students** in the discipline is carried out in accordance with the local regulations of the Far Eastern Federal University and is mandatory.

The discipline provides for an oral exam in the 5th, 6th semester, as well as testing at each practical lesson.

### **Questions for the exam**

1. Propaedeutics of internal diseases. Content and characteristics of the discipline. Basic methods of patients examination: physical, instrumental, laboratory.

2. The basic sections of case history and rules of fulfillment. Basic structural parts of anamnesis (passport data, complaints of patient, review of systems, life history).

3. Method of leadthrough of general inspection of a patient. Determination of the general condition of a patient, estimation of the state of consciousness and position.

4. Body built and basic criteria of normal types of constitutions. Skin, its properties (color, elasticity, humidity, temperature, elements of rash, nevi, scars) and pathological changes; an estimation of the state of hair and nails. Subcutaneous fat tissue (degree of development, distribution, types of obesity).

5. Lymphatic nodes examination. Characteristic of normal lymphatic nodes.

6. Complaints of patients with lung diseases.

7. Physiologic and pathologic forms of the chest, their criteria.

8. Method of leadthrough of static and dynamic inspection of a thorax.

9. Rate and depth of breathing: normal and pathological. Types of respiration.

Rhythm of breathing. Normal and pathologic rhythms of breathing

10. Sequence of leadthrough of palpation of thorax, determination of the vocal fremitus, and semiologic estimation of results.

11. Percussion. Definition. Physical basics of percussion Types of percussion and their characteristic.

12. Percussion sounds and their characteristics. Technique of comparative percussion of lungs.

13. Technique of topographic percussion of the lungs. Diagnostic value of topographic percussion of the lungs.

14. Auscultation, definition of auscultation. Physical bases of auscultation. General rules for auscultation.

15. Vesicular breath sounds, characteristic. Changes of the vesicular breath sounds.

16. Bronchial breath sounds, characteristic. Pathological bronchial breath sounds.

16. Classification of adventitious sounds. Crackles, characteristic and mechanism of appearance.

17. Wheezes, characteristic and mechanism of appearance. 1 Rhonchi, characteristic and mechanism of appearance.

18. Pleural rub, characteristic and mechanism of appearance. Differential diagnostic of crackles, rhonchi and pleural rub.

19. Syndrome of focal consolidation of pulmonary tissue.

20. Syndrome of fluid in pleural cavity 22.Syndrome of air accumulation in pleural cavity. 23.Syndrome of cavity in the lung

21. Syndrome of an atelectasis (obstructor and compression atelectasis).

22. The sputum analysis. Macroscopic examination of sputum. Microscopic examination of sputum.

23. Spirometry, static and dynamic lung volumes. Measurements of peak flow.

24. Pneumonia: causes, risk factors, clinical features, laboratory and instrumental testing by stages of the disease.

25. 28 Pleurisy: causes, clinical features: complaints, physical examination, laboratory and instrumental testing.

26. Bronchial asthma: risk factors, classification, clinical features, physical examination, laboratory and instrumental testing.

27. Emphysema of lungs: causes, risk factors, classification, clinical features, physical examination, laboratory and instrumental testing.

28. Chronic chronic obstructive pulmonary disease: risk factors, classification, clinical features, physical examination, laboratory and instrumental testing.

29. Main complaints of patients with diseases of cardiovascular system and their pathogenesis.

30. General inspection of patients with diseases of cardiovascular system.

31. Inspection and palpation of the apical impulse. Pathological impulses or pulsation and their characteristic.

32. Methods of percussion of the heart. Changes of the borders of the heart in different cardiac diseases.

33. General rules for heart auscultation.

34. Mechanism of formation of the first and second heart sounds

35. Changes of the heart sound loudness.

36. The mechanism of origin of organic valvular murmurs. Classification of murmurs. The mechanism of origin of organic murmurs.

37. Functional murmurs. The mechanism of origin of the functional murmurs. The difference between organic and functional murmurs.

38. Rules and sequence of research of pulse on a radial artery. Determination of basic properties of pulse.

39. Electrocardiographic method of research of cardiac functions. Method of ECG registration and decoding. Clinical and diagnostic value of method of electrocardiography.

40. ECG features of right ventricular hypertrophy. ECG features of left ventricular hypertrophy. 44. Rheumatic fever: causes and pathogenesis, clinical features, laboratory and instrumental testing.

41. 45 Mitral Stenosis: definition, causes, changes of hemodynamics due to mitral stenosis, complaints, physical examination, laboratory and instrumental testing.

42. 46. Mitral regurgitation: definition, causes, changes of hemodynamics due to mitral regurgitation, complaints, physical examination, laboratory and instrumental testing.

47. Infective endocarditis: definition, causes, risk factors, classification, complaints, physical examination, laboratory and instrumental testing, complications.

43. 48. Aortic stenosis: definition, causes, changes of hemodynamics due to aortic stenosis, complaints, physical examination, laboratory and instrumental testing.

44. 49. Aortic regurgitation: definition, causes, changes of hemodynamics due to aortic regurgitation, complaints, physical examination, laboratory and instrumental testing.

50. Arterial hypertension: classification of arterial hypertension, clinical features laboratory and instrumental testing.

45. Arterial Hypertension, Complications. Hypertensive crisis: definition, complaints, physical examination, first aid.

46. Secondary hypertension, classification, clinical features.

47. Ischemic heart disease, risk factors of ischemic heart disease. Classification of ischemic heart disease

48. Stenocardia: clinical features (complaints, physical examination). Grading of stable stenocardia.

49. Stenocardia: laboratory and instrumental testing (ECG, stress testing (exercise and pharmacologic), echocardiography, radionuclide imaging, coronary arteriography).

50. Myocardial infarction: classification, complaints, physical examination.

Myocardial infarction: ECG features, laboratory testing.

51. Heart failure: definition, classification. Heart failure: causes. Systolic dysfunction and diastolic dysfunction: definition, mechanism of appearance.

52. Acute left-sided heart failure (pulmonary edema): Causes, Complaints, Physical examination. Acute right-sided heart failure: Causes, Complaints, Physical examination.

53. Chronic heart failure: Classification, Complaints, Physical examination, investigations.

54. Complaints of patients with diseases of esophagus and stomach.

55. Complaints of patients with diseases of intestine.

56. Syndrom of dyspepsia.

57. Light (superficial) palpation of the abdomen.

58. Deep palpation of the intestine and stomach.

59. Acute gastritis: causes, clinical features (complaints, physical examination, laboratory and instrumental testing).

60. Chronic gastritis: classification of chronic gastritis, clinical features , laboratory and instrumental testing).

61. 67 Gastric ulcer and duodenal ulcer: clinical features: complaints,

physical examination, laboratory and instrumental testing.

62. Complications of gastric and duodenal ulcer.

63. Instrumental testing of intestine (colonoscopy, anoscopy and rigid and flexible sigmoidoscopy, radiological investigations) and pancreas (ultrasound study and CT scanning).

64. Feces analysis.

65. Chronic pancreatitis: causes, clinical features: complaints, physical examination, laboratory and instrumental testing.

66. The main complaints of patients with diseases of liver and biliary tract.

67. General inspection of patients with liver diseases.

68. Percussion of the liver. Determination of the superior and inferior borders of absolute liver dullness.

69. Bilirubin metabolism, classification and diagnostic of different types of jaundice.

70. The main syndrome in liver and gallbladder diseases: portal hypertension, hepatosplenomegaly, syndrome of hepatocytes cytolysis, hepato-cellular failure, mesenchymal inflammation of liver, hepatorenal syndrome, hemorrhagic syndrome and edemas.

71. Chronic hepatitis, classification of chronic hepatitis. Clinical features of chronic hepatitis, laboratory and instrumental testing..

72. Causes and pathogenesis of liver cirrhosis, classification of liver cirrhosis Clinical features and diagnostics of liver cirrhosis.

73. Causes and pathogenesis of chronic cholecystitis and gallstone disease. Clinical features of chronic cholecystitis: complaints, physical examination, laboratory and instrumental testing).

74. Complaints of patients with diseases of renal system.

75. General inspection of patients with diseases of renal system. Palpation of kidney and urinary bladder. Detection of Pasternatskij sign.

76. Urine analysis: assessment of physical properties (color, appearance, smell, quantity, specific gravity), chemical examination (pH, glucose, ketones, protein, bilirubine, urobilinogen).

77. Urine analysis: microscopical examination (RBC number, WBC number, casts, crystals, bacteria, parasites, epithelial cells).

78. The Zimnitsky functional test. The Nechiporenko urine analysis. Blood test and biochemical blood test, changes of them due to kidney diseases.

79. Main syndromes in diseases of renal system.

80. Acute and chronic pyelonephritis, causes, clinical features (complaints, physical examination, laboratory and instrumental testing).

81. 86 Nephrotic syndrome: causes, clinical features (complaints, physical examination, laboratory and instrumental testing)

82. 87. Causes and pathogenesis of acute glomerulonephritis. Acute glomerulonephritis: clinical features (complaints, physical examination, laboratory and instrumental testing). 88. Chronic glomerulonephritis: classification of chronic

83. glomerulonephritis, clinical features (complaints, physical examination, laboratory and instrumental testing).

84. Acute renal failure: causes, clinical features (complaints, physical examination, laboratory and instrumental testing).

85. Classification of chronic renal failure (chronic renal disease). Causes, clinical features (complaints, physical examination, laboratory and instrumental testing) in patients with initial stages of chronic renal failure (chronic renal disease).

86. Main complaints of patients with diseases of blood.

87. Physical examination of patients with diseases of blood (general inspection, palpation of lymphatic glands, palpation of spleen and liver).

88. Classification of anemia. Iron deficiency anemia: causes, clinical features (complaints, physical examination, laboratory and instrumental testing).

89. Megaloblastic anemia (B12 deficiency anemia): causes, clinical features (complaints, physical examination, laboratory and instrumental testing).

90. Signs and symptoms of acute leukemia (lymphoid and myeloid): clinical features (complaints, physical examination, blood test).

91. Signs and symptoms of chronic leukemia (lymphoid and myeloid): clinical features (complaints, physical examination, blood test).

92. Examination of patients with endocrine diseases: main complaints, data of physical investigation.

93. Diabetes mellitus: classification, causes, risk factors. Clinical features of diabetes mellitus type I and type II (complaints, physical examination, laboratory testing).

94. Palpation of thyroid gland. Degrees of thyroid gland enlargement. Complaints of patients with diffusive toxic goiter. 10. Physical examination of patients with hyperthyroidism. Eye symptoms. Laboratory and instrumental testing.

95. Etiology and pathogenesis of hypothyroidism. Complaints of patients with hypothyroidism. Physical examination of patients with hypothyroidism. Laboratory and instrumental testing.

96. Definition of allergy. Causes of allergy.

Urticaria: clinical features (complaints, physical examination, laboratory and instrumental testing).

97. Quincke's edema: clinical features (complaints, physical examination, laboratory and instrumental testing).

98. Anaphylactic shock: clinical features (complaints, physical examination, laboratory and instrumental testing). First aid in anaphylactic shock.