

Khanty-Mansiysk Autonomous Okrug-Ugra
"Surgut State University"

Approved by
Deputy Rector for Academic Affairs

_____E.V. Konovalova
“ 16 ” June 2022, Record No. 6

Gynecology

Syllabus

Department	Obstetrics, gynecology and perinatology		
Curriculum	s310501-ЛечДелоИн-21-1.pli.xml Specialty 31.05.01 General Medicine		
Qualification	General Practitioner		
Form of education	Full-time		
Total (in credits)	4		
Total academic hours	144	Control:	
including:			
Contact	112	Credit 7,8	
Self-study	32		

Academic year (Term)	4 (1)		4 (2)		Total	
	Cur	Syl	Cur	Syl		
Weeks	16 4\6		12 4\6			
Types of	Cur	Syl	Cur	Syl	Cur	Syl
Lectures	8	8	8	8	16	16
Practical	48	48	48	48	96	96
Interactive	56	56	56	56	11	11
Contact	56	56	56	56	11	11
Self-study	16	16	16	16	32	32
Total	72	72	72	72	14	14

The Syllabus is compiled by:

Candidate of Medical Sciences, Associate Professor, Ivannikov S.E. _____

Doctor of Medicine, Professor Belotserkovtseva L.D. _____

The Syllabus

Gynecology

Developed in accordance with Federal State Educational
Standard:

Federal State Educational Standard of higher education in the specialty 31.05.01 General medicine (Order of the
Ministry of Education and Science of the Russian Federation on August, 12, 2020 №988)

Based on the Curriculum:

31.05.01 GENERAL MEDICINE

Specialization: General Medicine

Approved by the Academic Council of Surgut State University, “ 16 ” June 2022, Record No. 6

The Syllabus was approved by the department

Obstetrics, gynecology and perinatology

Head of Department, Doctor of Medicine, Professor Belotserkovtseva L.D.

1. COURSE OBJECTIVES	
1.1	The aim of mastering the course is the clinical preparation of the student: the skills of maintaining medical records, clinical thinking in the diagnosis of gynecological pathology based on symptoms, syndromes of diseases, nosological forms in accordance with the International Statistical Classification of Diseases and Related Health Problems, X revision, differential diagnosis of diseases, determination of the therapeutic tactics of managing patients with various nosological forms, mastering the practical skills necessary for the management of gynecological patients.

2. COURSE OVERVIEW	
Course code (in curriculum)	Б1.О.04.44
2.1 Assumed background knowledge:	
	Chemistry
	Latin Language
	Biology
	Philosophy
	Histology, Embryology, Cytology
	Bioethics
	Human Anatomy
	Hominal Physiology
	Biochemistry
	Microbiology, Virology
	Immunology
	Pharmacology
	Pathologic Anatomy
	Clinical Pathologic Anatomy
	General Surgery
	Internal Diseases Propaedeutics
	Public Health and Healthcare, Economy of Public Health
2.2 Post requisites:	
	Paediatric Gynecology
	Perinatology
	Professional Practice, Obstetrician and Gynecologist assistant
	Obstetrics

3. COMPETENCES UPON COMPLETION OF THE COURSE (MODULE)
PC-1.1 : Demonstrates knowledge in etiology, pathogenesis, diagnostic criteria (clinical - subjective, physical, laboratory, instrumental, identifies the patient's common pathological conditions, symptoms, disease syndromes and diagnoses nosological forms according to the International Statistical Classification of Diseases and Related Health Problems, X - XI revisions
PC-1.2 : Carries out diagnostics, evaluates the prognosis (short-, medium- and long-term course) of the disease, identifies acute complications and complications of chronic diseases
PC-3.1: Examines the patient (handles the patient's complaints, anamnesis, physical data based on the examination results, determines the necessary examination plan, evaluates the parameters of laboratory, instrumental, pathological and anatomical and other methods in order to diagnose diseases, assesses the prognosis (short-, medium- , long-term) of its course and outcomes

PC-3.2: Makes an initial and clinical diagnosis in accordance with the International Statistical Classification of Diseases and Health Problems X - XI revisions and current clinical classifications
PC-3.3: Carries out early and differential diagnostics of diseases
PC-3.4: Provides routing and management of patients based on the current legislation (standards, procedures for the provision of medical care, Clinical guidelines)
PC-5.1: Demonstrates knowledge of the mechanisms and methods applied in pharmacotherapy, medical nutrition, medical devices and methods of non-drug treatment, palliative and personalized medical care
PC-5.2: Provides various categories of patients with outpatient treatment, treatment in hospitals and high-tech medical care (HMC) centers applying drugs, medical devices and medical nutrition, according to clinical pattern and current procedures, standards of medical care, Clinical guidelines (treatment protocols)
PC-5.4: Demonstrates knowledge of side effects of drugs, methods and duration of their use; assesses the effectiveness and safety of pharmacotherapy, medical nutrition and non-drug treatment, medical nutrition of palliative care
PC-8.2: Keeps medical records, including the electronic format

By the end of the course students must:

3.1	know:
	<ul style="list-style-type: none"> - interrelation of functional systems of an organism and levels of their regulation. - organization and performance of medical examination of women, analysis of its efficiency. - general principles of statistical methods of processing medical documentation. - standard documentation accepted in health care of the Russian Federation (laws of the Russian Federation, technical regulations, international and national standards, orders, recommendations, terminology, operating international classifications) and also documentation for assessment of quality and overall performance of the medical organizations; - clinical symptomatology and pathogenesis of the main processes of the complications of pregnancy, delivery and the postnatal period, their prevention, diagnostics and treatment, clinical symptomatology of borderline case-studies of pregnant women, women in labor and women in childbirth. - basis of supervising pregnancy, childbirth and the postnatal period, the principles of medication and non-drug therapy, physical therapy, physiotherapy measures and medical control, the indications to an operational childbirth; - basis of rational nutrition and a diet therapy during pregnancy, in the postnatal period and in the lactation period; - modern methods of clinical and laboratory diagnostics and treatment in compliance with standards and clinical protocols in obstetric practice; - principles of medication therapy and non-drug therapy, physical therapy, therapeutic physical training and medical control, the indications to surgical treatment; - principles of postoperative treatment of patients, prevention of postoperative complications, recovery treatment, physical therapy, therapeutic physical training and medical control, basis of rational diet therapy in the postoperative period; - clinical symptomatology and pathogenesis of the main processes of gynecologic pathology of women during various age periods, their prevention, diagnostics and treatment; - principles of drug and non-drug therapy, physical therapy, therapeutic physical training and medical control, the indications for surgical treatment; - modern methods of clinical and laboratory diagnostics and treatment in gynecologic practice of case-studies which do not demand surgical treatment in compliance with standards and clinical protocols;
3.2	be able to:

3.2.1	<ul style="list-style-type: none"> - estimate efficiency of medical examination; - analyze key performance indicators of medical and preventive treatment institutions; - conduct scientific research in the professional field; - keep medical documentation of various types in the medical organizations; - prescribe medicines against certain diseases and pathological processes of pregnant and gynecologic patients according to the features of their pharmacodynamics and pharmacokinetics; - interpret results of laboratory and instrumental methods of research; - establish the diagnosis according to the International classification of diseases on the basis of the main and additional methods of a research; - carry out the main and additional methods of a research in order to specify the diagnosis; - carry out episiotomy; - process and remove seams of a crotch and anterior abdominal wall, - prevent and treat complications of gynecological diseases; - identify the most frequent complications of gynecological diseases;
3.3	have skills of:
	<ul style="list-style-type: none"> - abstract thinking, analysis; - methods of keeping medical registration and reporting documentation in the medical organizations; - algorithm of establishing the developed clinical diagnosis to patients on the basis of the International Classification of Diseases; - algorithm of performance of the main medical diagnostic instrumental methods of research; - algorithm of performance of additional medical diagnostic instrumental methods of research; - algorithm of emergency medical help;

4. STRUCTURE AND CONTENTS

Class Code	Part and topic /class type/	Term / Ac. year	Academic hours	Competences	Literature	Interactive	Notes
1	Section 1.						
1.1	Inflammatory diseases of pelvic organs. /Lecture/	7	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4	L1.1 L1.2	0	
1.2	Amenorrhea. Hypomenstrual syndrome /Lecture/	7	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4	L1.1 L1.2	0	

1.3	Abnormal uterine bleeding at different ages. Endometrial hyperplasia. /Lecture/	7	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4	L1.1 L1.2	0	
1.4	Pathology of the cervix. /Lecture/	7	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4	L1.1 L1.2	0	
1.5	Organization of work of obstetric-gynecological outpatient and inpatient care in the Russian Federation. Clinical and laboratory methods for examining patients. /Practical classes/	7	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	Oral quiz
1.6	Organization of work of obstetric-gynecological outpatient and inpatient care in the Russian Federation. Clinical and laboratory methods for examining patients. /Self-study/	7	1	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	
1.7	Instrumental examination methods in gynecology. /Practical classes/	7	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	Oral quiz. Practical skills.
1.8	Instrumental examination methods in gynecology. /Self-study/	7	1	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	

1.9	Developmental anomalies and abnormal positions of the female genital organs. /Practical classes/	7	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	Oral quiz. Practical skills.
1.10	Developmental anomalies and abnormal positions of the female genital organs. /Self-study/	7	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	
1.11	Inflammatory diseases of the female genital organs of the lower genital tract. /Practical classes/	7	4	PC-1.1 PC-3.2 PC-3.4 PC-3.3 PC-8.2	L1.1 L1.2	0	Oral quiz. Practical skills. Test.
1.12	Inflammatory diseases of the female genital organs of the lower genital tract. /Self-study/	7	2	PC-1.1 PC-3.2 PC-3.4 PC-3.3 PC-8.2	L1.1 L1.2	0	
1.13	Inflammatory diseases of pelvic organs. /Practical classes/	7	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	Oral quiz. Practical skills. Test. Case-study.
1.14	Inflammatory diseases of pelvic organs. /Self-study/	7	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	

1.15	Neurohumoral regulation of the menstrual cycle. Menstrual irregularities. /Practical classes/	7	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	Oral quiz. Practical skills. Test.
1.16	Neurohumoral regulation of the menstrual cycle. Menstrual irregularities. /Self-study/	7	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	
1.17	Amenorrhea and hypomenstrual syndrome. /Practical classes/	7	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	Oral quiz. Practical skills.
1.18	Amenorrhea and hypomenstrual syndrome. /Self-study/	7	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	
1.19	Abnormal uterine bleeding (age-related). /Practical classes/	7	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	Oral quiz. Practical skills. Test. Case-study.
1.20	Abnormal uterine bleeding (age-related). /Self-study/	7	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	

1.21	Premenstrual syndrome. Estrogen deficiency states. /Practical classes/	7	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	Oral quiz. Practical skills. Test.
1.22	Polycystic ovary syndrome. Congenital dysfunction of the adrenal cortex. /Practical classes/	7	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	Oral quiz. Practical skills. Test.
1.23	Polycystic ovary syndrome. Congenital dysfunction of the adrenal cortex. /Self-study/	7	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	
1.24	Myoma of the uterus. Clinical conference. /Practical classes/	7	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	Oral quiz. Practical skills. Case-study.
1.25	Infertile marriage. Final lesson (test) /Practical classes/	7	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	Oral quiz. Practical skills. Case-study.
1.26	/Test/	7	0	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	Case-study.

1.27	/Credit/	7	0	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	Oral quiz. Practical skills
2.	Section 2.					0	
2.1	Myoma of the uterus. Genital endometriosis. /Lecture/	8	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4	L1.1 L1.2	0	
2.2	Tumours and tumour-like formations of the ovaries. /Lecture/	8	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4	L1.1 L1.2	0	
2.3	Anomalies in the development and position of the female genital organs. /Lecture/	8	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4	L1.1 L1.2	0	
2.4	Emergencies in gynecology. /Lecture/	8	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4	L1.1 L1.2	0	
2.5	Supervision of gynecological patients. /Practical classes/	8	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4	L1.1 L1.2	0	Oral quiz. Practical skills.

2.6	Genital endometriosis. /Practical classes/	8	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4	L1.1 L1.2	0	Oral quiz. Practical skills. Test.
2.7	Genital endometriosis. /Self-study/	8	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4	L1.1 L1.2	0	
2.8	Emergencies in gynecological practice. /Practical classes/	8	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4	L1.1 L1.2	0	Oral quiz. Practical skills. Case-study.
2.9	Emergencies in gynecological practice. /Self-study/	8	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4	L1.1 L1.2	0	
2.10	Endometrial hyperplastic processes. Endometrial cancer. /Practical classes/	8	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4	L1.1 L1.2	0	Oral quiz. Practical skills. Case-study.
2.11	Endometrial hyperplastic processes. Endometrial cancer. /Self-study/	8	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	

2.12	Background and precancerous diseases, cervical cancer. /Practical classes/	8	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	Oral quiz. Practical skills. Test.
2.13	Background and precancerous diseases, cervical cancer. /Self-study/	8	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	
2.14	Benign tumours and tumour-like formations of the ovaries. Ovarian cancer. /Practical classes/	8	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	Oral quiz. Practical skills. Test. Case-study.
2.15	Benign tumours and tumour-like formations of the ovaries. Ovarian cancer. /Self-study/	8	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	
2.16	Organization of cancer care. Trophoblastic diseases. Mammary cancer. /Practical classes/	8	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	Oral quiz. Practical skills.
2.17	Organization of cancer care. Trophoblastic diseases. Mammary cancer. /Self-study/	8	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	

2.18	Preoperative preparation and management of the postoperative period in gynecological patients. /Practical classes/	8	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	Oral quiz. Practical skills.
2.19	Preoperative preparation and management of the postoperative period in gynecological patients. /Self-study/	8	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	
2.20	Minimally invasive surgery in gynecology. /Practical classes/	8	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	Oral quiz.
2.21	Minimally invasive surgery in gynecology. /Self-study/	8	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	
2.22	Women's consultation. Rehabilitation methods for gynecological patients. Pregravid preparation. /Practical classes/	8	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	Oral quiz. Practical skills.
2.23	Practical skills credit. /Practical classes/	8	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	Practical skills. Test

2.24	Final lesson. /Practical classes/	8	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	Oral quiz.
2.25	/Test/	8	0	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	Case history
2.26	/Credit/	8	0	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	L1.1 L1.2	0	Oral quiz. Practical skills. Case-study

5. ASSESSMENT TOOLS

5.1. Tests and tasks

Supplement 1

5.2. Topics for written papers

Supplement 1

5.3. ASSESSMENT TOOLS

Supplement 1

5.4. List of assessment tools

Oral quiz, practical skills, tests, case – study, case history

6. COURSE (MODULE) RESOURCES

6.1. Recommended Literature

6.1.1. Core

	Authors	Title	Pu	Quantity
L1.1	V.E. Radzinskiy	Gynecology: student's book	Mo sco w: GE OT	1
L1.2	V.E. Radzinskiy	Gynecology: student's book	Mo sco w: GE	1

6.1.2. Supplementary

	Authors	Title	Publish.,	Quantity
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6.3.1 Methodical development				
	Authors	Title	Publish.,	Quantity

6.2. Internet resources	
32	FreeMedicalJournals
34	PubMedCentral
6.3.1 Software	
6.3.1.1	Operational system Microsoft, applied programs pack Microsoft Office
6.3.1.2	Internet access (Wi-Fi)
6.3.2 Information Referral systems	
6.3.2.1	E-data bases: RSL, Orbicon, Medline.
6.3.2.2	Student Consultant http://www.studmedlib.ru

8. Course manuals	
Supplement 2	

ASSESSMENT TOOLS

Syllabus Supplement

GYNECOLOGY

Qualifications

Specialist

Specialty

31.05.01 – General Medicine

Form of education

Full-time

Designer
Department

Obstetrics, gynecology and perinatology

Graduate
Department

Internal diseases

Sample tasks and tests

Stage I: Formative assessment.

Sample tasks. Section 1.

Topic ‘Organization of work of obstetric-gynecological outpatient and inpatient care in the Russian Federation. Clinical and laboratory methods for examining patients’.

Task 1. Points for oral quiz

1. Principles of organization of a gynecological hospital.
2. The main indicators of the activity of health care facilities.
3. Basic normative documents regulating the work of gynecological hospitals.
4. Rules for maintaining medical records.

Topic ‘Instrumental examination methods in gynecology’.

Task 1. Points for oral quiz

1. Colposcopy.
2. Ultrasound examination in gynecology.
3. Hysterosalpingography.
4. Hysteroscopy.
5. Diagnostic laparoscopy.

Task 2. List of practical skills:

1. Technique of examination of the cervix using mirrors.
2. Technique for taking fingerprints.
3. Assessment of the state of the parameters during vaginal examination.

Topic ‘Developmental anomalies and abnormal positions of the female genital organs’

Task 1. Points for oral quiz

1. Classification of developmental anomalies and abnormal positions of the female genital organs.
2. Reasons for formation, clinical manifestations.
3. Diagnostic methods.
4. Modern surgical techniques for the correction of malformations.
5. Modern possibilities of rehabilitation after surgical treatment.
6. Prolapse of the female genital organs. Stress urinary incontinence in women

Task 2. List of practical skills:

1. Technique of examination of the cervix using mirrors.
2. Probing of the uterine cavity.

Topic ‘Inflammatory diseases of the female genital organs of the lower genital tract’.

Task 1. Points for oral quiz

1. The composition of the normal microflora of the genital tract
2. Defense mechanisms preventing the activation of microflora
3. Features of inflammatory diseases at the present time
4. Etiology of nonspecific inflammatory diseases of the female genital organs
5. Ways of propagation
6. Factors contributing to infection
7. Classification of inflammatory diseases

Task 2. List of practical skills:

1. The technique of taking smears from the genital tract (vagina and cervical canal) and urethra for flora and degree of purity.
2. The method of sampling material from the genital tract for sowing on flora and antibiotic sensitivity.

Task 3. Sample Questions for Tests with Answers

1. The predominantly sexual route of transmission is characteristic for:
 - A. chlamydia
 - B. herpes simplex virus
 - C. trichomonas
2. In the inflammatory diseases of the female genital organs, the following is noted:
 - A. predominance of associations of microorganisms
 - B. increase in the number of anaerobes
 - C. the presence of chlamydia and mycoplasma
3. The characteristic clinical manifestations of nonspecific vulvovaginitis should be considered everything except:
 - A. Whiter;
 - B. Itching of the perineum and vagina;
 - C. Dyspareunia;
 - D. Acyclic spotting;
 - E. All these symptoms are characteristic of vulvovaginitis.
4. A normal vaginal environment is maintained by everything except:
 - A. pH = 4.5
 - B. Doderlein chopsticks
 - C. estrogen
 - D. E. Coli
 - E. lactic acid
5. Colpitis:
 - A. chlamydial etiology is a common disease in women of reproductive age
 - B. trichomonas etiology is usually diagnosed by bacteriological method
 - C. trichomonas etiology is successfully treated with metronidazole drugs
 - D. candidal etiology usually has no characteristic clinical symptoms
 - E. candidal etiology may be an indication for the use of canesten

Answers to the test

No. Answer

- 1 A, C
- 2 A, B
- 3 A, B, C
- 4 D
- 5 C, E

Topic 'Inflammatory diseases of the pelvic organs'.

Task 1. Points for oral quiz

1. Clinic PID
2. Rehabilitation of patients with MHOT
3. Pelvioperitonitis - clinic, diagnostics, treatment
4. Complications of PID
5. Prevention of PID
6. What is postpartum sepsis.
7. Forms of postpartum sepsis.
8. Stages of septic shock.

Task 2. List of practical skills:

1. The technique of taking smears from the genital tract (vagina and cervical canal) and urethra for flora and degree of purity.
2. The method of sampling material from the genital tract for sowing on flora and antibiotic sensitivity.

Task 3. Sample Questions for Tests with Answers

1. Formed purulent-inflammatory formation of appendages is an indication for:
 - A. puncture of the formation through the posterior vaginal fornix, emptying the purulent cavity and the administration of antibiotics into it;
 - B. surgical treatment;
 - C. pyrogenal therapy;
 - D. gonovaccine therapy;
 - E. electrophoresis of zinc by the abdominal-sacral technique.
2. Pelvioperitonitis of gonorrhoeal etiology is characterized by:
 - A. Tendency to form adhesions and adhesions;
 - B. Process limitation is more often noted;
 - C. The presence of symptoms of peritoneal irritation in the lower abdomen;
 - D. Correct answers a) and c);
 - E. All answers are correct;
3. Specify the main differential diagnostic signs of acute inflammation of the uterine appendages:
 - A. Delayed menstruation, cramping pains in the lower abdomen, profuse bloody discharge from the genital tract with clots, negative symptoms of peritoneal irritation;
 - B. Menstrual function is not impaired, pain from the epigastric region move to the right iliac region, nausea, vomiting, subfebrile condition, positive symptoms of peritoneal irritation in the hypogastric region;
 - C. Delayed menstruation, paroxysmal pain in the lower abdomen, spotting spotting from the genital tract, a weakly positive Shchetkin-Blumberg symptom in the hypogastric region;
 - D. Menstrual function is often not impaired, constant pain in the lower abdomen, subfebrile condition or febrile body temperature, weakly positive or negative Shchetkin-Blumberg symptom;
 - E. Intermenstrual bleeding, acute pain in the lower abdomen, positive symptom of Shchetkin-Blumberg;
4. Inflammation of the female genital tract:
 - A. in 60% of cases proceed in the form of an acute process
 - B. is more often caused by mono-pathogens
 - C. has a pathogenic connection with steroid contraception
 - D. tends to increase the incidence
 - E. does not differ in the frequency of acute and chronic forms in different age groups
5. The etiology of inflammatory diseases of the female genital area can be established:
 - A. with histological examination of the endometrium
 - B. at cytological examination of punctate from the "Douglas pocket"
 - C. during ultrasound examination
 - D. with hysteroscopy
 - E. using a monolayer of cell culture

Answers to the Test

No. Answer

- 1 B
- 2 E
- 3 D
- 4 D
- 5 A

Task 4. An example of a case-study with a standard answer

CASE-STUDY 1

Patient M., 23 years old, was admitted to the gynecological department with complaints of pain in the lower abdomen for 3 days, more to the right, radiating to the right thigh; an increase in body temperature up to 38.5 0C. From the anamnesis: menstrual function is not impaired. Sexual life from 15 years old, with frequent changes of sexual partners. There are 2 pregnancies in the anamnesis, both ended in medical abortions. After the second medical abortion, the complication is endometritis. At this time, she uses an IUD as a contraception. Gynecological diseases: chronic inflammation of the uterine appendages, post-

abortion endometritis. On examination: the skin and mucous membranes of a physiological color, clean. In the lungs, vesicular breathing, no wheezing. Heart sounds are clear, rhythmic. BP 110/70 mm Hg, pulse 102 beats / min, rhythmic, body temperature 38.40C. The abdomen is of normal shape, not swollen. On palpation of the abdomen, there is local pain in the right iliac region and above the bosom, local protective tension of the rectus abdominis muscles. Weakly positive symptoms of peritoneal irritation in this area. Intestinal peristalsis is heard in all departments.

When conducting ultrasound, on the right, in the projection of the appendages, a sausage-shaped formation of 5.5x3.5 cm is visualized. The content is homogeneous, hypoechoic. The right ovary is visualized near the formation. Dimensions: 3.8x3.2x2.7cm. No free fluid was found in the posterior space.

1. Preliminary diagnosis.
2. With what diseases it is necessary to carry out differential diagnosis.
3. Modern principles of treatment of patients with this pathology.

Sample answers to the problem:

1. Chronic endometritis, exacerbation against the background of the IUD. Pyosalpinx on the right.
2. Acute appendicitis, torsion of the legs of the ovarian tumor, ectopic.
3. Removal of the IUD. Antibacterial therapy with broad spectrum antibiotics, anti-inflammatory therapy, fluid therapy. Transvaginal puncture of the formation of the right appendages under the control of ultrasound scanning, aspiration of the contents, if necessary, drainage.

Topic ‘Neurohumoral regulation of the menstrual cycle. Menstrual irregularities’.

Task 1. Points for oral quiz

1. Anatomy of the female reproductive system.
2. Physiology of the female reproductive system.
3. Neurohumoral regulation of the female reproductive system.
4. Ovarian-menstrual cycle.
5. Violations of the menstrual cycle.

Task 2. List of practical skills:

1. Interpretation of functional diagnostics tests in the dynamics of the menstrual cycle in case of menstrual irregularities.

Task 3. Sample Questions for Tests with Answers

1. The main criterion for a two-phase menstrual cycle is:
 - A. Correct rhythm of menstruation;
 - B. Time of the onset of the first menstruation;
 - C. The peculiarities of the formation of menstrual function during puberty;
 - D. Ovulation;
 - E. All of the above.
2. The precursors of estrogen in the ovaries are:
 1. Prostaglandins F2a and E2;
 2. Androgens;
 3. Inhibin;
 4. Progesterone.
 - A. Answers 1, 2, 3 are correct.
 - B. Answers 1, 3 are correct.
 - C. Answers 2, 4 are correct.
 - D. Only answer 4 is correct.
 - E. All answers are correct.
3. After ovulation, the egg retains the ability to fertilize during:
 - A. 6 hours;
 - B. 12 - 24 hours;
 - C. 3 - 5 days;
 - D. 10 days
4. Anovulatory menstrual cycles are normal:

1. During puberty;
 2. During the premenopausal period;
 3. During lactation;
 4. In the winter.
- A. Answers 1, 2, 3 are correct.
 - B. Answers 1, 3 are correct.
 - C. Answers 2, 4 are correct.
 - D. Answer 4 is correct.
 - E. All answers are correct.
5. Anovulatory menstrual cycles are normal:
 1. During puberty;
 2. During the premenopausal period;
 3. During lactation;
 4. In the winter.
 - A. Answers 1, 2, 3 are correct.
- Test

Test. Analysis of a case history (4 course, 1st term)

The student is given a case history for independent analysis. The student must make a report on a clinical case according to the scheme, prepare a literature reference on the nosology being analyzed.

The main stages of the analysis of a clinical case:

Title page (separate page)

1. Passport part.
2. Complaints: basic and found during the survey on organ systems.
3. Anamnesis of the underlying and concomitant diseases.
4. Life history.
5. Data of an objective study of the patient (with comments).
6. Justification of the preliminary diagnosis and its formulation (with comments).
7. Survey plan. (with comments).
8. Data of laboratory and instrumental studies, conclusions of consultants. (with comments).
9. Final clinical diagnosis (justification and formulation).
10. Differential diagnosis. (with comments).
11. Treatment of the patient and its justification in the form of a table. (with comments).
12. Epicrisis. (with comments).
13. Literature references.
14. List of used literature.

Sample tasks. Section 2.

Topic 'Supervision of gynecological patients'.

Task 1. Points for oral quiz

Surveying gynecological patients.
 General examination.
 Special gynecological examination.

Task 2. List of practical skills:

1. Conducting a vaginal-abdominal examination on a dummy. Execution technique, interpretation of results.
2. Technique of examination of the cervix using mirrors.

Topic 'Genital endometriosis'.

Task 1. Points for oral quiz

1. Modern concepts of endometriosis.
2. Epidemiology, etiology, pathogenesis of endometriosis.
3. Classification of endometriosis.
4. External endometriosis.
5. Internal endometriosis.
6. The clinical picture of adenomyosis.
7. The clinical picture of endometrial ovarian cysts.
8. Diagnosis of endometriosis (transvaginal echography, hysteroscopy, laparoscopy).
9. Infertility and endometriosis.
10. Principles of surgical treatment of internal and external endometriosis.

Task 2. List of practical skills:

1. Conducting a vaginal-abdominal examination on a dummy. Execution technique, interpretation of results.
2. Technique of examination of the cervix using mirrors.

Task 3. Sample Questions for Tests with Answers

1. Endometriosis
 - A. develops due to lack of estrogens
 - B. occurs only in women and is not described in men.
 - C. ovary is an indication for conservative treatment
 - D. is characterized by significant changes in the state of the immunological system
 - E. is accompanied by impaired liver, pancreas, or thyroid function
2. Echographic signs of internal endometriosis are:
 - A. Echo-negative cystic inclusions in the myometrium;
 - B. Increase in the anteroposterior size of the body of the uterus;
 - C. Asymmetry of the thickness of the anterior and posterior walls of the uterus;
 - D. Hyperechoic rim around the cystic inclusions in the myometrium;
 - E. Everything is true.
3. Adenomyosis
 - A. can be combined with uterine fibroids;
 - B. is rarely accompanied by menstrual irregularities;
 - S. is revealed during histological examination of endometrial scraping;
 - D. is diagnosed by hysteroscopy and hystero-graphy;
 - E. responds well to conservative therapy;
1. For conservative therapy of endometriosis, everything is used except:
 - A. Synthetic progestins;
 - B. Danazol preparations;
 - C. Estrogens;
 - D. Androgens.
2. It is advisable to use hysterosalpingography for the diagnosis of internal endometriosis:
 - A. Immediately after menstruation;
 - B. Before menstruation;
 - C. On the 14-15th day of the menstrual cycle;
 - D. On the 22nd-23rd day of the menstrual cycle.

Answers to the Test

No. Answer

- 1 D, E
- 2 E
- 3 A, D
- 4 C
- 5 A

Topic 'Emergencies in gynecological practice'.

Task 1. Points for oral quiz

1. 'Sharp abdomen' in gynecological practice.
3. Management tactics for patients with torsion of the cyst pedicle or ovarian tumor.
5. Indications, conditions and contraindications for emergency laparoscopic and laparotomy operations.
6. Malnutrition of the uterine fibroids node;
7. Nascent myomatous node;
8. Rupture of the ovarian cyst;
9. Differential diagnosis of the 'acute abdomen' syndrome in gynecology.
10. Emergency care for malnutrition of uterine fibroids.
11. Emergency conditions due to ovarian pathology. The concept of ovarian apoplexy, a form of apoplexy. Treatment.
12. Rupture of pyosalpinx, pyovarum, tuboovarial abscess.
13. Pelvioperitonitis and diffuse peritonitis.

Task 2. List of practical skills:

1. Conducting a vaginal-abdominal examination on a dummy. Execution technique, interpretation of results.
2. Technique of examination of the cervix using mirrors.
3. Culdocentesis.

Task 3. An example of a case-study with a standard answer

CASE-STUDY 1

Patient K., 36 years old, was delivered to the admission department of the city hospital by an ambulance team.

Complaints of cramping pain in the lower abdomen for 3 days; profuse bleeding from the genital tract for 5 days; general weakness; dizziness.

From the anamnesis: Menstruation from the age of 14, for 5-6 days, after 26-27 days, moderate, painless. For the last 4 years, she notes that menstruation has become abundant and prolonged up to 10-12 days. For the last year, cramping pains during menstruation have been troubling. The last period started 5 days ago. Childbirth - 1, abortion - 3, no miscarriages.

Gynecological diseases: cervical erosion - DEC, post-abortion endometritis.

Objectively: General condition of moderate severity. The skin and visible mucous membranes are pale, clean. The tongue is moist and clean. In the lungs there is vesicular breathing, no wheezing. Heart sounds are muffled, rhythmic. BP 100/60 mm Hg Art., Ps 90 beats / min satisfactory filling and tension. T-36.7 C. The abdomen is soft, moderately painful with deep palpation above the bosom. Active peristalsis. Symptoms of peritoneal irritation are negative. Physiological functions are normal.

Gynecological examination: The external genitals are formed correctly. Female pattern hair growth.

In the mirrors: The mucous membranes are pale pink, not eroded. A rounded formation is clearly defined in the vagina

red with a diameter of up to 5 cm, in places with areas of hemorrhage and yellow bloom. Discharge bloody, profuse.

PV The vagina of a woman giving birth. In the vagina, a rounded formation of a dense consistency with a diameter of up to 5 cm is determined. The cervix is smoothed, the external pharynx passes 4 cm. The body of the uterus is slightly enlarged in size, dense consistency, limited in mobility, painful on palpation. The area of the appendages is intact on both sides.

UAC Hb - 68 g / l, er - $2.1 \cdot 10^9 / l$, Ht - 28%, $1 - 9.6 \cdot 10^9 / l$, tr- $180 \cdot 10^9 / l$..

Questions: 1. Establish a preliminary diagnosis.

2. What additional examination methods need to be performed to clarify the diagnosis?

3. Medical tactics.

Sample answer to the problem

1. The nascent submucous myomatous node.
2. Ultrasound, Doppler, Hysteroscopy.
3. Pain relief. Infusion therapy. Antianemic therapy. Removal of the myomatous node through the vagina.

CASE-STUDY 2

Patient K., 24 years old, was admitted to the gynecological department with complaints of pain in the lower abdomen for 3 days, more to the right, radiating to the right thigh; an increase in body temperature is up to 38 ° C. From the anamnesis: menstrual function is not impaired. Sexual life has started from 17 years old, with frequent changes of sexual partners. Two pregnancies in the anamnesis, both ended in medical abortions. After the second medical abortion, the complication is endometritis. Currently, she uses an IUD as a contraception. Gynecological diseases: chronic inflammation of the uterine appendages, post-abortion endometritis. On examination: the skin and mucous membranes are of a physiological colour, clean. In the lungs there is vesicular breathing, no wheezing. Heart sounds are clear, rhythmic. BP 110/70 mm Hg. Art., pulse 102 beats / min, rhythmic, body temperature 38.2 ° C. The abdomen is of normal shape, not swollen. On palpation of the abdomen, there is local pain in the right iliac region and above the bosom, local protective tension of the rectus abdominis muscles. Weakly positive symptoms of peritoneal irritation in this area. Intestinal peristalsis is heard in all departments.

When conducting ultrasound, on the right, in the projection of the appendages, a formation of 5.0x3.5 cm of a sausage-like shape is visualized. The content is homogeneous, hypoechoic. The right ovary is visualized near the formation. Dimensions: 3.6x3.0x2.5cm. No free fluid was found in the posterior space.

1. Preliminary diagnosis.
2. With what diseases it is necessary to carry out differential diagnostics.
3. Your tactics.

Sample answer to the problem

1. Exacerbation of chronic endometritis against the background of the IUD. Pyosalpinx on the right.
2. Acute appendicitis, torsion of the leg of the ovarian tumor.
3. Removal of the IUD. Antibacterial therapy with broad spectrum drugs, anti-inflammatory therapy, infusion therapy. Transvaginal puncture of the formation of the right appendages under the control of ultrasound scanning, aspiration of the contents, if necessary, drainage.

Test. Writing a clinical case history (4 course, 2nd term).

Writing a clinical case history

The student independently chooses the nosological form, develops and protects the medical history according to the proposed scheme.

The main stages of writing an educational history:

Title page (separate page)

15. Passport part.
16. Complaints: basic and found during the survey on organ systems.
17. Anamnesis of the main and concomitant diseases.
18. Anamnesis of life.
19. Data of an objective study of the patient.
20. Justification of the preliminary diagnosis and its formulation.
21. Survey plan.
22. Data of laboratory and instrumental studies, the conclusions of consultants.
23. Final clinical diagnosis (justification and formulation).
24. Differential diagnosis.
25. Treatment of the patient and its rationale.
26. Prognosis.
27. Prevention (primary and secondary).
28. Epicrisis.
29. Diary of supervision.
30. List of used literature.

Stage II. Midterm assessment (credit). 7th, 8th terms.

Midterm assessment is carried out in the form of credit. Tasks for the credit include points for oral quiz and tests.

7th term

Tasks for competence assessment «Knowledge»	Task type
<p>Theoretical questions for the test:</p> <ol style="list-style-type: none"> 1. Congenital hyperplasia of the adrenal cortex (Adrenogenital syndrome). Etiology. Pathogenesis. Clinic. Diagnostics. The use of hormonal tests. Treatment. Prognosis. 2. Prolapse of the female genital organs. Stress urinary incontinence in women. Causes. Classification. Diagnostics. Modern methods of correction. 3. Anomalies in the development of internal genital organs. Etiology. Pathogenesis. Clinic. Diagnostics. Correction methods. Prognosis. 4. Bacterial vaginosis. Etiology. Clinic. Diagnostics. Treatment. 5. Infertile marriage. Etiology. Classification. The main stages of the examination of an infertile couple. Treatment principles. 6. Anovulatory (endocrine) infertility. Diagnostics. Stages of treatment. Modern methods of stimulating ovulation. 7. Tubal-peritoneal infertility. Classification. Diagnostics. Modern methods of treatment. Prognosis. 8. Violation of the menstrual cycle: primary amenorrhea. Etiology and pathogenesis. Classification. The main nosological forms. Diagnostics. Treatment principles. 9. Violation of the menstrual cycle: secondary amenorrhea, hypomenstrual syndrome. Etiology and pathogenesis. Classification. Diagnostics. Treatment principles. 10. Vulvovaginitis of specific etiology. Etiology, pathogenesis. Clinical manifestations. Diagnostic methods. Treatment. Prevention. 11. Vulvovaginitis of non-specific etiology. Etiology, pathogenesis. Clinical manifestations. Diagnostic methods. Treatment. Prevention. 12. Cyst and abscess of the Bartholin gland. Etiology, pathogenesis. Clinic. Diagnostic methods. Treatment. 13. Acute and chronic cervicitis. Etiology, pathogenesis. Clinic. Diagnostic methods. Treatment. 14. Acute and chronic endometritis. Etiology. Pathogenesis. Clinic. Diagnostics. Treatment. 15. Acute and chronic salpingo-oophoritis. Etiology. Pathogenesis. Clinic. Diagnostics. Treatment. 16. Pelvioperitonitis. Etiology. Pathogenesis. Clinic. Diagnostics. Treatment. 17. Myoma of the uterus. Etiology and pathogenesis. Classification. The clinical picture depending on the localization of the myomatous nodes. Diagnostics. Modern methods of conservative and surgical treatment. 	<p>-theoretical</p>

<p>18. Perimenopause. Climacteric syndrome. Pathogenesis. Classification. Clinic. Diagnostic methods. Modern principles of treatment of climacteric syndrome.</p> <p>19. Hormone replacement therapy. Indications for appointment. Contraindications Dosage forms, modes of administration.</p> <p>20. Premenstrual syndrome. Pathogenesis. Clinical forms. Diagnostics. Treatment.</p> <p>21. Polycystic ovary syndrome. Etiology, pathogenesis. Clinic. Diagnostics. Methods of conservative and surgical treatment.</p>	
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Tasks for competence assessment «Abilities»	Task type
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<p>List of practical skills:</p> <ol style="list-style-type: none"> 1. Bacteriological and bacterioscopic research methods in obstetric and gynecological practice. Indications, technique. 2. Examination of women using vaginal speculum. Bimanual vaginal-abdominal, rectal-abdominal examination. Indications. Conditions. Execution technique. Evaluation of results. 3. Vaginoscopy. Features of the examination of girls using a vaginoscope, vaginal speculum. Indications. Conditions. Execution technique. Evaluation of results. 4. The introduction of an intrauterine contraceptive. Contraindications, conditions, technique, complications. 5. Methods for assessing the patency of the fallopian tubes. Indications, technique, evaluation of results, complications. 6. Diagnostic curettage of the uterus. Indications, contraindications, conditions, technique, complications. 7. Tests of functional diagnostics in the assessment of the ovarian-menstrual cycle: basal temperature, examination of cervical mucus. Execution technique. Interpretation of the results. 8. Colpocytological examination. Indications, technique of execution, evaluation of results. 9. Determination of the degree of cleanliness of the vagina. Indications. Execution technique. Interpretation of the results. 10. Examination and palpation of the mammary glands, technique. Evaluation of results. 11. Cytological research method in gynecological practice. Indications, technique. Interpretation of the results. 12. Female pelvic floor, muscles and fascia, their role. 	-practical
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8th term

Tasks for competence assessment «Knowledge»	Task type
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<p>Theoretical questions:</p> <ol style="list-style-type: none"> 1. Apoplexy of the ovary. Etiology. Pathogenesis. Features of the clinical picture. Modern diagnostic methods, differential diagnostics. Treatment. 2. Ectopic pregnancy. Etiology. Pipe rupture clinic, diagnostics. Tubal abortion. Clinic. Diagnostics. Differential diagnosis. Surgical treatment methods. 	-theoretical
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<p>3. Genital endometriosis. Modern concepts of etiology and pathogenesis. The main symptoms and syndromes of internal endometriosis. Diagnostics. Treatment.</p> <p>4. External genital endometriosis. The main symptoms and syndromes. Diagnostics. Treatment.</p> <p>5. Hyperplastic processes of the endometrium. Etiology. Pathogenesis. Clinic. Diagnostics. Modern methods of treatment.</p> <p>6. Benign ovarian tumors. Risk factors. Classification. Clinic. Diagnostic methods. Treatment. Complications.</p> <p>7. Tumor-like formations of the ovaries. Classification. Clinic. Diagnostic methods. Treatment.</p> <p>8. Emergency conditions in gynecology: perforation of purulent tubo-ovarian formations. Diagnostics. Differential diagnosis with acute surgical pathology. Treatment.</p> <p>9. Emergency conditions in gynecology: torsion of the leg of the ovarian tumor, rupture of the cyst (tumor) of the ovary. Diagnostics. Differential diagnosis. Treatment.</p> <p>10. Cancer of the cervix. At-risk groups. Etiology and pathogenesis. Classifications. Clinic. Diagnostics. Prognosis. Prevention methods.</p> <p>11. Endometrial cancer. Epidemiology. Risk factors. Classification. Clinical and pathogenetic variants. Treatment principles. Prognosis.</p> <p>12. Ovarian cancer. At-risk groups. Classification. Clinic. Diagnostics. Treatment principles. Forecast. Prevention.</p> <p>13. Background and precancerous diseases of the cervix. Modern classification. Etiology and pathogenesis. Modern methods of screening and diagnostics of cervical pathology. Methods of treatment and prevention.</p> <p>14. Trophoblastic disease: cystic drift, chorionic carcinoma. Etiology and pathogenesis. Classification. Modern approaches to diagnosis and treatment.</p> <p>15. Diseases of the mammary glands: benign dysplasias, benign nodules. Etiology. Pathogenesis. Classifications. Modern methods of diagnosis and treatment. Prevention. The role of the obstetrician-gynecologist in the detection of breast cancer.</p>	
<p>Tasks for competence assessment «Skills»</p>	<p>Task type</p>
<p>List of practical skills:</p> <ol style="list-style-type: none"> 1. 1. Bacteriological and bacterioscopic research methods in obstetric and gynecological practice. Indications, technique. 2. Examination of women using vaginal speculum. Bimanual vaginal-abdominal, rectal-abdominal examination. Indications. Conditions. Execution technique. Evaluation of results. 3. Hysteroscopy and hysteroresectoscopy. Endometrial biopsy. Indications, contraindications, conditions, technique, complications. 	<p>-practical</p>

<p>4. Vaginoscopy. Features of the examination of girls using a vaginoscope, vaginal speculum. Indications. Conditions. Execution technique. Evaluation of results.</p> <p>5. The introduction of an intrauterine contraceptive. Contraindications, conditions, technique, complications.</p> <p>6. Methods for assessing the patency of the fallopian tubes. Indications, technique, evaluation of results, complications.</p> <p>7. Diagnostic curettage of the uterus. Indications, contraindications, conditions, technique, complications.</p> <p>8. Colposcopy. Biopsy of the cervix. Indications, technique.</p> <p>9. Tests of functional diagnostics in the assessment of the ovarian-menstrual cycle: basal temperature, examination of cervical mucus. Execution technique. Interpretation of the results.</p> <p>10. Colpocytological examination. Indications, technique of execution, evaluation of results.</p> <p>11. Determination of the degree of cleanliness of the vagina. Indications. Execution technique. Interpretation of the results.</p> <p>12. Examination and palpation of the mammary glands, technique. Evaluation of results.</p> <p>13. Puncture of the posterior fornix of the vagina. Indications, contraindications. Execution technique. Complications.</p> <p>14. Artificial termination of pregnancy by curettage and vacuum aspiration. Conditions, contraindications, technique, complications.</p> <p>15. Cytological research method in gynecological practice. Indications, technique. Interpretation of the results.</p>	
<p>Tasks for competence assessment «Abilities»</p>	<p>Task type</p>
<p>The list of case-studies:</p> <p>Case-study 1</p> <p>A 38-year-old patient consulted an antenatal clinic with complaints of recurrent pain in the lower abdomen, mostly on the left. Menstrual function is not impaired. She has a history of two urgent births and two medical abortions without complications. The patient has chronic inflammation of the uterine appendages, was treated on an outpatient basis. Gynecological status: the vagina is normal, the cervix is not eroded, the external pharynx is slit-like, the uterus is not enlarged in anteflexia, painless; on the right, the appendages are not determined, on the left, an ovoid-shaped formation of 10x12 cm in size with a smooth surface, a tight-elastic consistency, mobile, painless through palpation; deep vaults; mucous discharge.</p> <ol style="list-style-type: none"> 1. What is the most probable diagnosis? 2. What additional examination is advisable to carry out on an outpatient basis? 3. Tactics of the antenatal clinic doctor? <p>Case-study 2</p>	<p>practical</p>

<p>A 15-year-old patient was admitted to the hospital with complaints of bloody discharge from the genital tract, which appeared after a delay of the next menstruation for 3 months. And they continue for 12 days. Anamnesis: sick with chronic tonsillitis, notes frequent nosebleeds. On examination: pale skin, pulse 82 in 1 min., Rhythmic, BP 110/70 mm Hg, peripheral hemoglobin level 90 g / l, hematocrit 28%. The abdomen is soft, painless, the results of a gynecological examination: the external genital organs are developed correctly, hair growth is female, the hymen is intact. At recto-abdominal examination: the uterus is of normal size, dense, painless; the appendages on both sides are not enlarged, the discharge from the genital tract is bloody, moderate.</p> <p>1. At what disease can the described clinical picture be observed? 2. What additional research is necessary for the patient to clarify the diagnosis? 3. What state of the endometrium is possible in this patient?</p>	
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METHODOLOGICAL GUIDELINES FOR LEARNING OUTCOMES ASSESSMENT

Stage: Formative assessment

Formative assessment is a regular checking of student academic progress during the academic term. It is performed in various oral and written forms (quizzes, essays, checking of home assignments, compilation of cases, self-study, colloquiums, and testing). During formative assessment, the teacher monitors the level of student's academic progress according to the curriculum identifying lack of knowledge, or misunderstanding.

The tasks of formative assessment are aligned with the Curriculum and Syllabus.

1. Guidelines for assessing the oral quiz:

In assessing the teacher takes into account:

- knowledge and understanding of the subject matter;
- activity during the class;
- consistency of presentation;
- argumentation of the answer, the level of independent thinking;
- ability to link theoretical and practical principles with future professional activity.

Assessment criteria:

The results are assessed in a four-grading scale: "excellent", "good", "satisfactory", "unsatisfactory".

Type of the task	Assessed competences	Assessment criteria	Grade
Oral quiz:	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	<p>The student demonstrates a comprehensive, systematic and in-depth knowledge of the academic material; has learned the required and additional resources.</p> <p>The student demonstrates a consistent and thorough understanding of the required knowledge, concepts, skills of the</p>	Excellent

		material learned, and their significance for future profession.	
		The student demonstrates a comprehensive knowledge of the academic material; has learned the required and additional resources. The student demonstrates a consistent understanding of the required knowledge, concepts, skills of the material learned, but makes minor errors.	Good
		The student demonstrates basic knowledge necessary for further study; has learned basic recommended literature. The student operates with inaccurate formulating, has difficulties in the independent answers, makes significant mistakes but is able to correct them under the guidance of a teacher.	Satisfactory
		The student does not know the obligatory minimum or demonstrates gaps in knowledge of the academic material, makes major mistakes or gives completely wrong answers.	Unsatisfactory

2. Guidelines for case-study assessment:

Assessment criteria:

The results are assessed in a four-grading scale: “excellent”, “good”, “satisfactory”, “unsatisfactory”.

Type of the task	Assessed competences	Assessment criteria	Grade
Case-study	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	The student correctly and solves the case-study task, demonstrating deep knowledge. There are no errors in logical reasoning and solution, the problem is solved in a rational way. The right answer is obtained, ways are clearly described.	Excellent
		The student correctly solves the case-study task, demonstrating deep knowledge. There are minor errors in logical reasoning and	Good

		solution, the problem is solved in a rational way. The right answer is obtained, ways are clearly described.	
		The student correctly solves the case-study task, demonstrating basic knowledge. There are significant errors in logical reasoning and solution. The student demonstrates difficulties, but still is able to solve a case-study task.	Satisfactory
		The student incorrectly solves the case-study task, makes significant mistakes. The student is not able to solve a case-study.	Unsatisfactory

3. Guidelines for test assessment.

Assessment criteria:

The results are assessed in a four-grading scale: “excellent”, “good”, “satisfactory”, “unsatisfactory”.

Type of the task	Assessed competences	Assessment criteria	Grade
Test	PC-1.1	80 – 100%	Excellent
	PC-1.2	66 – 80%	Good
	PC-3.1	46 – 65%	Satisfactory
	PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	Less Than 46%	Unsatisfactory

4. Guidelines for the assessment of practical skills:

Assessment of practical skills based on simulation or participation of third parties may include a demonstration of manipulation, response to the questions of the task;

- assessment of practical skills at the bedside may include a demonstration of detection and / or interpretation of signs, symptoms, methods of examination and treatment;

-the task may include a brief introduction, questions, and list of practical skills for demonstration (according to Curriculum).

In assessing the teacher takes into account:

- knowledge and understanding of the subject matter;
- ability to apply theoretical knowledge into practice;
- the level of formed practical skills;
- reasoning and response style;

- rationale for data selection, additional tests, differential diagnosis and/or choice of treatment, level of clinical thinking.

Assessment criteria:

The results are assessed in a four-grading scale: “excellent”, “good”, “satisfactory”, “unsatisfactory”.

Type of the task	Assessed competences	Assessment criteria	Grade
Practical skills	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	The student correctly demonstrates practical skills on the model with a deep knowledge of the material. There are no mistakes in the demonstration and the used technique. The indications and conditions used in this method are clearly described.	Excellent
		The student demonstrates practical skills on the model with slight inaccuracies. There are insignificant mistakes in the demonstration and the used technique. The indications and conditions used in this method are clearly described.	Good
		The student demonstrates practical skills on the model with inaccuracies. There are significant mistakes in the demonstration and the used technique. The indications and conditions used in this method are clearly described.	Satisfactory
		The student demonstrates practical skills on the	Unsatisfactory

		model with significant mistakes. The indications and conditions used in this method are not described.	
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5. Guidelines for the case history assessment:

In assessing the teacher takes into account:

1. knowledge and understanding of the subject matter;
2. compliance of the case history with the methodological requirements of the department;
3. literacy, logic, and style of writing;
4. reasoning and interpretation of additional survey data;
5. differential diagnosis and/or its rationale, choice of treatment, practical recommendations;
6. level of independent thinking;
7. ability to link theory and practice.

The criteria for case history assessment:

1. The subjective examination of the patient (complaints, anamnesis).
2. The objective examination of the patient.
3. Planning and interpreting additional methods of examination.
4. Differential diagnosis, clinical diagnosis, its rationale.
5. Purpose of treatment.
6. Epicrisis.

Assessment criteria:

The results are assessed in a four-grading scale: “excellent”, “good”, “satisfactory”, “unsatisfactory”.

Type of the task	Assessed competences	Assessment criteria	Grade
Case history	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	The student demonstrates a comprehensive, systematic and deep knowledge of material, the ability to gather complaints, anamnesis, to conduct an objective examination of the patient, to assign additional methods of examination for this pathology, to conduct a differential diagnosis and make diagnosis, prescribe treatment in accordance with modern concepts of medical science, use the main and additional literature.	Excellent
		The student demonstrates a comprehensive and systematic knowledge of material, the ability to gather complaints, anamnesis, to conduct an objective examination of the patient, to assign additional methods of examination for this	Good

		<p>pathology, to conduct a differential diagnosis and make diagnosis, prescribe treatment in accordance with modern concepts of medical science, use the main and additional literature.</p> <p>The student makes single mistakes in medical terminology, single stylistic mistakes and inconsistencies in the text, inaccuracies of subjective or objective examination of the patient. The student demonstrates insufficient ability to use the data of objective examination in the formulation and solving therapeutic and diagnostic problems.</p>	
		<p>The student demonstrates a basic knowledge required for further study, the ability to gather complaints, anamnesis, to conduct an objective examination of the patient, to assign additional methods of examination for this pathology, to conduct a differential diagnosis and make diagnosis, prescribe treatment in accordance with modern concepts of medical science, use the main and additional literature.</p> <p>The student makes multiple mistakes in medical terminology, multiple stylistic mistakes and inconsistencies in the text, errors of subjective or objective examination of the patient. The student demonstrates insufficient ability to use the data of objective examination in the formulation and solving therapeutic and diagnostic problems, but has abilities to eliminate the mistakes under the guidance of a teacher.</p>	Satisfactory
		The student has significant gaps in knowledge of the basic material,	Unsatisfactory

		has made fundamental mistakes in examining a patient, is not able to make a differential diagnosis, assign diagnostic and therapeutic measures for the pathology.	
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Stage: midterm assessment (credit)

Midterm assessment is carried out in the form of credit. Tasks for the credit include one Oral quiz and practical skills

Methodological guidelines for preparation of credit

Requirements for the student:

- to attend classroom classes regularly; skipping classes is not allowed without a good reason;
- in case of missing the lesson, the student must be ready to answer the questions of the teacher on the topic of the class he/she missed;
- to hand over written papers on time and to make sure they are credited;
- preparing for the next class, the student must read the relevant textbooks, manuals, monographs, etc., and be ready to demonstrate their knowledge; student's participation in the discussion is taken into account and assessed;
- in case the student has not mastered the necessary material or has not understood something, he/she should attend consultation sessions;
- preparation for one theoretical question is 5-7 minutes;
- the second stage is the demonstration of a practical skill. The student has to describe indications and conditions and demonstrate technique on the model.

Midterm assessment (credit) are assessed in a 4-grading scale “excellent”, “good”, “satisfactory”, “unsatisfactory”.

Type of the task	Assessed competences	Assessment criteria	Grade
Oral quiz:	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	The student demonstrates a comprehensive, systematic and in-depth knowledge of the academic material; has learned the required and additional resources. The student demonstrates a consistent and thorough understanding of the required knowledge, concepts, skills of the material learned, and their significance for future profession.	Excellent
		The student demonstrates a comprehensive knowledge of the academic material; has learned the required and additional resources. The student demonstrates a consistent understanding of the required knowledge, concepts, skills of the material learned, but makes minor errors.	Good

		<p>The student demonstrates basic knowledge necessary for further study; has learned basic recommended literature.</p> <p>The student operates with inaccurate formulating, has difficulties in the independent answers, makes significant mistakes but is able to correct them under the guidance of a teacher.</p>	Satisfactory
		<p>The student does not know the obligatory minimum or demonstrates gaps in knowledge of the academic material, makes major mistakes or gives completely wrong answers.</p>	Unsatisfactory

Type of the task	Assessed competences	Assessment criteria	Grade
Practical skills	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.3 PC-3.4 PC-5.1 PC-5.2 PC-5.4 PC-8.2	<p>The student correctly demonstrates practical skills on the model with a deep knowledge of the material. There are no mistakes in the demonstration and the used technique. The indications and conditions used in this method are clearly described.</p>	Excellent
		<p>The student demonstrates practical skills on the model with slight inaccuracies. There are insignificant mistakes in the demonstration and the used technique. The indications and conditions used in this method are clearly described.</p>	Good

		<p>The student demonstrates practical skills on the model with inaccuracies. There are significant mistakes in the demonstration and the used technique. The indications and conditions used in this method are clearly described.</p>	<p>Satisfactory</p>
		<p>The student demonstrates practical skills on the model with significant mistakes. The indications and conditions used in this method are not described.</p>	<p>Unsatisfactory</p>