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

	Approved by
Deputy Rector for	r Academic Affairs
	_E.V. Konovalova
" 16 " June 3	2022 Record No. 6

Obstetrics

Syllabus

Department Obstetrics, gynecology and perinatology

s310501-ЛечДелоИн-21-1.pli.xml Specialty 31.05.01 General Medicine Curriculum

Qualification **General Practitioner**

Form of education **Full-time**

Total (in credits) 12

Total academic hours 432 Control:

including: Exam, A term

Credit/Mark, 9th, B terms 316 Contact

Self-study 89 Control hours 27

Distribution of hours of discipline per semester

Academic year (Term)	4 (2)		5 (1)	5 (1)		5 (2)		6 (1)		Total	
Weeks	12 4\6		17 2\6	17 2\6		14 4\6		17 4\6			
Types of classes	Cur	Syl	Cur	Syl	Cur	Syl	Cur	Syl	Cur	Syl	
Lectures	16	16	20	20	20	20	20	20	76	76	
Practical	64	64	64	64	48	48	64	64	240	240	
Interactive	80	80	84	84	68	68	84	84	316	316	
Contact	80	80	84	84	68	68	84	84	316	316	
Self-study	28	28	24	24	13	13	24	24	89	89	
Control hours					27	27			27	27	
Total	108	108	108	108	108	108	108	108	432	432	

The Syllabus is compiled by:	
Candidate of Medical Sciences, Associate Professor, Ivannikov S.E.	
Doctor of Medicine, Professor, Belotserkovtseva L.D	

The Syllabus

Obstetrics

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 the course is the student's clinical training: the formation of knowledge about the etiology, pathogenesis and clinic of obstetric pathologies, clinical thinking in the diagnostics of obstetric and 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 diagnostics of diseases, determination of therapeutic tactics for managing patients with various nosological forms, mastering the practical skills necessary for conducting a

	2. COURSE OVERVIEW
Course code (in curriculum)	Б1.О.04.43
2.1 Assumed background:	
Chemistry	
Latin Language	
Biology	
Philosophy	
Histology, Embryology,	Cytology
Introduction to Specialit	ty. Ethics and Deontology (Bioethics)
Human Anatomy	
Hominal Physiology	
Biochemistry	
Microbiology, Virology	
Immunology	
Pharmacology	
Pathologic Anatomy	
General Surgery	
Internal Diseases Propaga	edeutics
Public Health and Healt	hcare. Economy of Public Healthcare
2.2 Post requisite courses a	and practice:
Paediatric Gynecology	
Perinatology	
Professional Practice, O	bstetrician and Gynecologist Assistant

3. COMPETENCES UPON COMPLETION OF THE COURSE (MODULE)

- PC-1.1: Demonstrates knowledge in etiology, pathogenesis, diagnostic criteria (clinical subjective, physical, laboratory, instrumental, identifes 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
- PC-3.2: Makes an inital and clinical diagnosis in accordance with the International Statistical Classification of Diseases and Related Health Problems X XI revisions and current clinical classifications
- 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-4.1: Observes and manages physiological pregnancy, delivery
- PC-4.2: Demonstrates the ability and readiness to manage a pregnant woman with diseases during pregnancy and in the postpartum period together with an obstetrician-gynecologist
- 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:

- 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;
- principles of choosing type and scope of surgical help;
- principles of postoperative treatment of patients, prevention of postoperative complications, recovery treatment, physical therapy, therapeutic physical training and medical control, basis of a rational diet in the postoperative period;
- principles of therapeutic and surgical treatment of pathological pregnancies, childbirth and postnatal period;
- principles of rendering emergency aid (obstetric bleedings, eclampsy);
- indications to episiotomy;
- indications to planned and emergency Cesarean section;
- treatment of women in childbirth after Cesarean section.

3.2 be able to:

3.2.1 - estimate efficiency of medical examination;

- analyze key performance indicators of medical and preventive treatment institution;
- conduct scientific research in the professional field;
- keep medical documentation of various types in medical organizations;
- prescribe medicines to treat 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 research:
- carry out the main and additional methods of research in order to specify the diagnosis;
- carry out episiotomy;
- process and remove seams of a crotch and anterior abdominal wall;
- prevent lactostasis, treat cracks of nipples;
- collect tool kit for carrying out diagnostic curettement and medical abortion;
- reveal the most frequent complications of pregnancy, childbirth and the postnatal period;
- render the main diagnostic and medical manipulations to pregnant women, women in labor and women in childbirth.

3.3 have skills of:

- 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 performing the main medical diagnostic instrumental methods of research;
- algorithm of performing additional medical diagnostic instrumental methods of research;
- algorithm of emergency medical help;
- management and reception of normal childbirth;
- filling in the history of childbirth.

				4. STRUCT	TURE AND CONTENTS		
Clas s Code	Part and topic /class type/	Ter m /	Academi c hours	Competence s	Literature	Interactive	Notes
1	Section 1. Physiological	AF					
1.1	Introduction. Modern directions in obstetrics. /Lecture/	8	2	PC-1.1 PC-3.2 PC-3.4 PC-4.1 PC-8.2	L1.1 L1.2	0	
1.2	Physiology of a reproductive system of the woman. /Lecture/	8	2	PC-1.1 PC-3.2 PC-3.4 PC-4.1 PC-8.2	L1.1 L1.2	0	
1.3	Adaptation changes of physiological pregnancy. /Lecture/	8	2	PC-1.1 PC-3.2 PC-3.4 PC-4.1 PC-8.2	L1.1 L1.2	0	
1.4	Modern ideas of formation of the "mother- placenta- foetus" system. /Lecture/	8	2	PC-1.1 PC-3.2 PC-3.4 PC-4.1 PC-8.2	L1.1 L1.2	0	
1.5	Diagnostic methods in obstetrics. /Lecture/	8	2	PC-1.1 PC-3.2 PC-3.4 PC-4.1 PC-8.2	L1.1 L1.2	0	
1.6	Maintaining a normal pregnancy. /Lecture/	8	2	PC-1.1 PC-3.2 PC-3.4 PC-4.1 PC-8.2	L1.1 L1.2	0	
	Maintenance of normal childbirth and the postpartum period. /Lecture/	8	2	PC-1.1 PC-3.2 PC-3.4 PC-4.1 PC-8.2	L1.1 L1.2	0	
1.8	Family planning. Medical genetic counseling. /Lecture/	8	2	PC-1.1 PC-3.2 PC-3.4 PC-4.1 PC-8.2	L1.1 L1.2	0	

1.9	The	8	4	PC-1.1	L1.1 L1.2	0	Oral quiz,
	organization of work of obstetric gynecological service in the			PC-3.2 PC-3.4 PC-4.1 PC-8.2			tests, case- study
	Methods for assessing the hormonal function of the ovaries. /Practical	8	4	PC-1.1 PC-3.2 PC-3.4 PC-4.1 PC-8.2	L1.1 L1.2	0	Essay
	Methods for assessing the hormonal function of the ovaries. /Self-study/	8	2	PC-1.1 PC-3.2 PC-3.4 PC-4.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills, tests
	Methods for assessing the hormonal function of the feto-placenal system.	8	4	PC-1.1 PC-3.2 PC-3.4 PC-4.1 PC-8.2	L1.1 L1.2	0	Oral quiz
1.13	Methods for assessing the hormonal function of the feto-placenal system. /Self-study/	8	2	PC-1.1 PC-3.2 PC-3.4 PC-4.1 PC-8.2	L1.1 L1.2	0	
	Anatomy of the female genital organs. The female pelvis from an obstetric point of view. /Practical	8	4	PC-1.1 PC-3.2 PC-3.4 PC-4.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills
	Anatomy of the female genital organs. The female pelvis from an obstetric point	8	2	PC-1.1 PC-3.2 PC-3.4 PC-4.1 PC-8.2	L1.1 L1.2	0	
	Adaptive changes in a woman's body during physiological pregnancy.	8	4	PC-1.1 PC-3.2 PC-3.4 PC-4.1 PC-8.2	L1.1 L1.2	0	Oral quiz
1.17	Adaptive changes in a woman's body during physiological	8	2	PC-4.1 PC-8.2	L1.1 L1.2	0	
1.18	Methods of examination of pregnant women. /Practical classes/	8	4	PC-1.1 PC-3.2 PC-3.4 PC-4.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills, tests, case- study

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1.19	Methods of examination of pregnant women. /Self-study/	8	2	PC-4.1 PC-8.2	L1.1 L1.2	0	
1.20	Methods for assessing the condition of the fetus. Fetus as an object of childbirth	8	4	PC-1.1 PC-3.2 PC-3.4 PC-4.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills
	Methods for assessing the condition of the fetus. Fetus as an object of childbirth	8	2	PC-4.1 PC-8.2	L1.1 L1.2	0	
1.22	Supervision of pregnant women. /Practical classes/	8	4	PC-1.1 PC-3.2 PC-3.4 PC-4.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills
1.23	Supervision of pregnant women. /Self-study/	8	2	PC-4.1 PC-8.2	L1.1 L1.2	0	
	Biomechanism of labor in the anterior and posterior types of occipital presentation	8	4	PC-1.1 PC-3.2 PC-3.4 PC-4.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills, tests
1.25	Biomechanism of labor in the anterior and posterior types of occipital presentation	8	2	PC-4.1 PC-8.2	L1.1 L1.2	0	
1.26	Physiology of normal childbirth. /Practical classes/	8	4	PC-1.1 PC-3.2 PC-3.4 PC-4.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills, case study
1.27	Physiology of normal childbirth. /Self-study/	8	2	PC-4.1 PC-8.2	L1.1 L1.2	0	
1.28	Clinical picture and management of the first stage of normal labor.	8	4	PC-1.1 PC-3.2 PC-3.4 PC-4.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills
1.29	Clinical picture and management of the first stage of normal	8	2	PC-4.1 PC-8.2	L1.1 L1.2	0	

	Clinical picture and management of the second stage of normal labor. /Practical classes/	8	4	PC-1.1 PC-3.2 PC-3.4 PC-4.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills, tests
1.31	Clinical picture and management of the second stage of normal labor. /Self-study/	8	2	PC-4.1 PC-8.2	L1.1 L1.2	0	
	Clinical picture and management of the third stage of normal labor.	8	4	PC-1.1 PC-3.2 PC-3.4 PC-4.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills
1.33	Clinical picture and management of the third stage of normal labor. /Self-study/	8	2	PC-4.1 PC-8.2	L1.1 L1.2	0	
1.34	Physiology of the postpartum period. The neonatal period.	8	4	PC-1.1 PC-3.2 PC-3.4 PC-4.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills, tests
1.35	Physiology of the postpartum period. The neonatal	8	2	PC-4.1 PC-8.2	L1.1 L1.2	0	
1.36	The course and management of the postpartum period. /Practical classes/	8	4	PC-1.1 PC-3.2 PC-3.4 PC-4.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills, case- study
1.37	The course and management of the postpartum period.	8	2	PC-4.1 PC-8.2	L1.1 L1.2	0	
1.38	Family planning. /Practical classes/	8	4	PC-1.1 PC-3.2 PC-3.4 PC-4.1 PC-8.2	L1.1 L1.2	0	Oral quiz
1.39	Analysis of a case-study /Test/	8	0	PC-1.1 PC-3.2 PC-3.4 PC-8.2	L1.1 L1.2	0	Oral quiz
2.	Section 2. Pathological					0	

2.1	Placental insufficiency. /Lecture/	9	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
2.2	Extragenital diseases and pregnancy. /Lecture/	9	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
2.3	Abnormalities of labour. /Lecture/	9	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
2.4	Prenatal diagnosis of congenital malformations and chromosomal pathology of fetal	9	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
2.5	Intrauterine infection. /Lecture/	9	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
2.6	Rh- immunization. Hemolytic disease of the fetus. /Lecture/	9	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
2.7	Caesarean section in modern obstetrics. /Lecture/	9	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
2.8	The modern view on the problem of miscarriage /Lecture/	9	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
2.9	Postponing pregnancy. /Lecture/	9	2	PC-1.1 PC-1.2 PC-3.1	L1.1 L1.2	0	

2.10	Pregnancy and	9	2	PC-1.1	L1.1 L1.2	0	
	childbirth with breech			PC-1.2 PC-3.1			
	presentation.			PC-3.1 PC-3.2			
	/Lecture/			PC-3.4			
				PC-4.2 PC-5.1			
				PC-8.2			
2.11	Supervision of	9	4	PC-1.1 PC-1.2	L1.1 L1.2	0	Oral quiz, practical
	pregnant women with			PC-1.2 PC-3.1			skills
	pathological			PC-3.2			
	conditions. /Practical			PC-3.4 PC-4.2			
	classes/			PC-5.1			
2.12	Dath alass of	9	4	PC-8.2 PC-1.1	L1.1 L1.2	0	01
2.12	Pathology of the	9	4	PC-1.1 PC-1.2	L1.1 L1.2	U	Oral quiz, practical
	fetoplacental			PC-3.1			skills,
	system. /Practical			PC-3.2 PC-3.4			tests,
	classes/			PC-4.2			study
				PC-5.1 PC-8.2			
			_				
2.13	Pathology of the	9	2	PC-1.1 PC-1.2	L1.1 L1.2	0	
	fetoplacental			PC-3.1			
	system. /Self-study/			PC-3.2 PC-3.4			
	/Sen-study/			PC-4.2			
				PC-5.1			
2.14	Extragenital	9	4	PC-8.2 PC-1.1	L1.1 L1.2	0	Oral quiz,
2.11	diseases and			PC-1.2	21.1 21.2	Ü	tests,
	pregnancy. /Practical			PC-3.1 PC-3.2			case- study
	classes/			PC-3.4			study
				PC-4.2 PC-5.1			
				PC-5.1 PC-8.2			
2.15	Extragenital	9	2	PC-1.1	L1.1 L1.2	0	
	diseases and pregnancy.			PC-1.2 PC-3.1			
	/Self-study/			PC-3.2			
				PC-3.4 PC-4.2			
				PC-5.1			
2.1.5	D: : :			PC-8.2			
2.16	Disruption of the contractile	9	4	PC-1.1 PC-1.2	L1.1 L1.2	0	Oral quiz, tests,
	activity of the			PC-3.1			case-
	uterus. /Practical			PC-3.2 PC-3.4			study
	classes/			PC-4.2			
				PC-5.1 PC-8.2			
2.17	Disruption of	9	2	PC-8.2 PC-1.1	L1.1 L1.2	0	
	the contractile		_	PC-1.2		Ü	
	activity of the uterus.			PC-3.1 PC-3.2			
	/Self-study/			PC-3.4			
				PC-4.2			
				PC-5.1 PC-8.2			
				- -	1		1

	Congenital malformations of the fetus, prenatal diagnostics. /Practical classes/	9	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Oral quiz, tests
2.19	Congenital malformations of the fetus, prenatal diagnostics. /Self-study/	9	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
2.20	Miscarriage of pregnancy. /Practical classes/	9	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills, tests, case- study
2.21	Miscarriage of pregnancy. /Self-study/	9	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
2.22	Anatomical and clinical narrow pelvis. Large foetus. /Practical classes/	9	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Oral quiz, tests, case- study
	Anatomical and clinical narrow pelvis. Large foetus. /Self-study/	9	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
2.24	Operative obstetrics. /Practical classes/	9	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills, tests, case- study
2.25	Operative obstetrics. /Self-study/	9	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	

	Intrauterine infection. /Practical classes/	9	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Oral quiz, tests
2.27	infection. /Self-study/	9	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
	Postponing pregnancy. /Practical classes/	9	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills, tests, case- study
	Postponing pregnancy. /Self-study/	9	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
2.30	Immunoconflic t during pregnancy. /Practical classes/	9	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Oral quiz, case- study
	Immunoconflic t during pregnancy. /Self-study/	9	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
2.32	extensor insertions of the fetal head. /Practical classes/	9	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills
2.33	Childbirth with extensor insertions of the fetal head. /Self-study/	9	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	

2.34	Childbirth in the wrong position of the fetus. /Practical classes/	9	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2	L1.1 L1.2	0	Oral quiz, practical skills
				PC-5.1 PC-8.2			
2.35	Childbirth in the wrong position of the fetus. /Self- study/	9	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
2.36	Multiple pregnancy. /Practical	9	4	PC-1.1 PC-1.2 PC-3.1	L1.1 L1.2	0	Oral quiz
2.37	Breech presentation of the fetus. /Practical classes/	9	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4	L1.1 L1.2	0	
2.38	Final lesson. /Practical classes/	9	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills, case- study
2.39	/Test/	9	0	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Case history (history of birth)
2.40	/ Credit /	9	0	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills
3.	Section 3. Emergencies in obstetrics.					0	
3.1	Preeclampsia, pathogenesis, clinical picture. /Lecture/	10	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-5.4 PC-8.2	L1.1 L1.2	0	

3.2	Intensive care for preeclampsia. /Lecture/	10	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-5.4 PC-8.2	L1.1 L1.2	0	
3.3	Obstetric bleeding and its features. Tactics and principles of therapy for obstetric bleeding. /Lecture/	10	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-5.4 PC-8.2	L1.1 L1.2	0	
3.4	Massive obstetric bleeding. Hemorrhagic shock. Multiple organ failure. /Lecture/	10	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-5.4 PC-8.2	L1.1 L1.2	0	
3.5	Spontaneous miscarriage. Leading tactics. /Lecture/	10	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-5.4 PC-8.2	L1.1 L1.2	0	
3.6	Premature birth. /Lecture/	10	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-5.4 PC-8.2	L1.1 L1.2	0	
3.7	Features of the course of postpartum infection and the principles of its treatment. / Lecture/	10	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-5.4	L1.1 L1.2	0	
3.8	Obstructed labour (shoulder dystocia). /Lecture/	10	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-5.4 PC-8.2	L1.1 L1.2	0	

3.9	Birth traumatism of the mother. /Lecture/	10	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-5.4 PC-8.2	L1.1 L1.2	0	
3.10	Pathology of the fetus and newborn. Birth traumatism. Fetal distress. /Lecture/	10	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-5.4 PC-8.2	L1.1 L1.2	0	
	Supervision of pregnant women. /Practical classes/	10	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills
3.12	Supervision of pregnant women. /Self-study/	10	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
3.13	Pre-eclamation. Pathogenesis. Clinical picture. Diagnostic methods. /Practical classes/	10	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills, tests, case- study
3.14	Pre-eclamation. Pathogenesis. Clinical picture. Diagnostic methods. /Self-study/	10	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
	Management of pregnancy and childbirth with severe forms of preeclampsia. Eclampsia. HELLP /Practical	10	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills, tests, case- study
3.16	Management of pregnancy and childbirth with severe forms of preeclampsia. Eclampsia. HELLP /Self-study/	10	1	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	

	Bleeding of the first half of pregnancy. /Practical classes/	10	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills, case- study
3.18	Bleeding of the first half of pregnancy. /Self-study/	10	1	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
3.19	second half of pregnancy, the first and second stages of labour. /Practical classes/	10	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills, case- study
3.20	Bleeding of the second half of pregnancy, the first and second stages of labor. /Self-study/	10	1	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
3.21	Bleeding in the third stage of labour. /Practical classes/	10	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills, case- study
	Bleeding in the third stage of labour. /Self-study/	10	1	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
	Massive obstetric bleeding. Hemorrhagic shock. DIC syndrome. Clinical conference.	10	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills, tests
3.24	Massive obstetric bleeding. Hemorrhagic shock. DIC syndrome. /Self-study/	10	1	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	

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	Purulent- inflammatory diseases of the postpartum period. Septic shock. /Practical classes/	10	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills, case- study
3.26	Purulent- inflammatory diseases of the postpartum period. Septic shock. /Self-study/	10	1	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
3.27	Spontaneous miscarriage. /Practical classes/	10	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills, case- study
3.28	Spontaneous miscarriage. /Self-study/	10	1	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
3.29	Premature birth. /Practical classes/	10	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills
3.30	Premature birth. /Self-study/	10	1	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
3.31	Birth traumatism. Fetal distress. /Practical classes/	10	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills
3.32	Birth traumatism. Fetal distress. /Self-study/	10	1	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	

	Solving case- studies on urgent conditions in obstetrics. /Practical classes/	10	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Case-study
	/Test/	10	0	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Case history
3.35	/Exam/	10	27	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills, case- study
4.	Section 4. Practical obstetrics					0	
4.1	Maintaining a normal pregnancy. /Lecture/	11	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
4.2	Conducting a normal delivery. /Lecture/	11	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
4.3	Immunoconflic t pregnancy. /Lecture/	11	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
4.4	Endocrine pathology and pregnancy. /Lecture/	11	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	

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4.5	Blood diseases and pregnancy. /Lecture/	11	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4	L1.1 L1.2	0	
4.6	Chown old accept			PC-4.2 PC-5.1 PC-8.2	111112	0	
4.6	Sharp abdomen and pregnancy. /Lecture/	11	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4	L1.1 L1.2	0	
4.7	Kidney disease			PC-4.2 PC-5.1 PC-8.2 PC-1.1	L1.1 L1.2	0	
4./	and pregnancy. /Lecture/	11	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	U	
4.8	Multiple pregnancy. FFS. /Lecture/	11	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
4.9	Management of high-risk pregnant women. /Lecture/	11	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
	Emergency transportation protocol for pregnant women. /Lecture/	11	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
	Clinical protocol for normal pregnancy. Supervision of pregnant women. /Practical	11	6	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills
4.12	Clinical protocol for normal pregnancy. Supervision of pregnant women. /Self-study/	11	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	

	Survey methods in obstetrics. /Practical classes/	11	6	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills, tests, case- study
4.14	Survey methods in obstetrics. /Self-study/	11	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
4.15	Clinical protocol for the management of normal labour. Simulation class: (Normal childbirth) /Practical	11	6	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills, tests
4.16	Clinical protocol for the management of normal labor. Simulation class: (Normal childbirth) /Self-study/	11	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
	Management of pregnant women, parturient women and parturient women with extragenital	11	6	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Oral quiz, tests
	Management of pregnant women, parturient women and parturient women with extragenital	11	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
4.19	Management of pregnant women, parturient women and parturient women with hypertensive disorders at the	11	6	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills, tests
4.20	Management of pregnant women, parturient women and parturient women with hypertensive	11	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	

4.21	Obstetric bleeding. /Practical classes/	11	6	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1	L1.1 L1.2	0	Oral quiz, practical skills, tests, case- study
4.22	Obstetric bleeding. /Self-study/	11	2	PC-8.2 PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
4.23	Multiple pregnancy. /Practical classes/	11	6	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills
4.24	Multiple pregnancy. /Self-study/	11	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
4.25	Immunoconflic t pregnancy. Hemolytic disease of the fetus. /Practical classes/	11	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Oral quiz, case- study
4.26	Immunoconflic t pregnancy. Hemolytic disease of the fetus. /Self- study/	11	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	
4.27	Premature birth. /Practical classes/	11	6	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Oral quiz, practical skills, case- study
4.28	Premature birth. /Self-study/	11	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	

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i /	Septic diseases in obstetrics. /Practical classes/		_	PC-1.1 PC-1.2 PC-3.1 PC-3.2	L1.1 L1.2	0	Oral quiz, practical skills
		11	6	PC-3.4 PC-4.2 PC-5.1 PC-8.2			
j	Septic complications in obstetrics. /Self-study/	11	2	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2	L1.1 L1.2	0	
				PC-5.1 PC-8.2			
,	Final lesson. /Practical classes/	11	6	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4	L1.1 L1.2	0	Oral quiz, case- study
4.32	Final lesson.			PC-3.4 PC-4.2 PC-5.1 PC-8.2 PC-1.1	L1.1 L1.2	0	
	rma iesson. /Self-study/	11	4	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1	L1.1 L1.2		
				PC-8.2			
4.33	/Test/	11	0	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2	L1.1 L1.2	0	Case history
4.34	/Exam/	11	0	PC-1.1 PC-1.2 PC-3.1 PC-3.2 PC-3.4 PC-4.2 PC-5.1 PC-8.2		0	Oral quiz, practical skills, case- study
					SSESSMENT TOOLS		
				5	.1. Tests and tasks		
Supple	ement 1				.i. icio ana asro		
				5.2. To	opics for written papers		
Supple	ement 1						
				5.3. A	ASSESSMENT TOOLS		
Supple	ement 1						
				5.4. I	List of assessment tools		
Oral qu	uiz, practical skil	ls,tests	s, case – stu	dy, case history	у		
			6.	COURSE	(MODULE) RESOURCES		
					ecommended Literature		

			6.1.1. Core		
	Authors	Title	Publish., year	Quantit	
L1.1	V.E. Radzinskiy, A.M. Fuks, Ch.G. Gagaev	Obstetrics/ Ultrasound diagnostics in obstetrics and gynecology: guideline	M.: ГЭОТАР-Media, 2019. https://www.studentlibrary.ru/book/ISBN9785970446836.htm l	1	
L1.2		Obstetrics Ultrasound diagnostics in obstetrics and gynecology: guideline	M.: ГЭОТАР-Media, 2019. https://www.studentlibrary.ru/book/ISBN9785970446836.htm l	1	
	Authors Title Publish., year				
		6.3.1 N	Iethodical development		
	Authors	Title	Publish., year	Quantity	

	6.2. Internet resources							
Э2	FreeMedicalJournals							
Э4	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 Inf	ormation Referral systems							
6.3.2.1	3.2.1 E-data bases: RSL, Orbicon, Medline.							
6.3.2.2	.2.2 Student Consultant http://www.studmedlib.ru							

ASSESSMENT TOOLS

Syllabus Supplement

OBSTETRICS

Qualifications Specialist

Specialty 31.05.01 – General Medicine

Form of education Full-time

Designer Obstetrics, gynecology and perinatology

Department

Graduate Internal diseases

Department

Sample tasks and tests.

Stage I: Formative assessment.

Section 1. 'Physiological obstetrics':

Topic 'Organization of work of obstetric and gynecological service in the Russian Federation'. Task 1. Points for oral quiz

- Principles of the organization of obstetric and gynecological care.
- Organization of an obstetric hospital, indicators of its work.
- Specialized assistance in the conditions of antenatal clinic and hospital.
- Basic regulatory documents, medical records management.
- Aseptics and antiseptics in obstetrics. Sanitary and epidemiological regime of the maternity hospital.

Task 2. Sample Questions for tests with answers

- 1. The perinatal mortality rate is calculated by the formula
- (number of children born dead + number of children who died during the first year of life) x 1000 / number of children born alive
- (number of children born dead + number of children who died within 7 days of life) x 1000 / number of children born dead and alive
- (number of children born dead + number of children who died within 28 days of life) x 1000 / number of children born dead and alive
- (number of children born dead) x 1000 / number of children born dead and alive
- (number of children born dead + number of children who died within 7 days of life) x 1000 / number of children born alive
- 2. The stillbirth rate is calculated by the formula
- (number of children born dead + number of children who died during the first year of life) x 1000 / number of children born alive
- (number of children born dead + number of children who died within 7 days of life) x 1000 / number of children born alive and dead
- (number of children born dead and premature) x 1000 / number of children born alive and dead
- (number of children born dead) x 1000 / number of children born alive and dead
- (number of children born dead + number of children who died within 7 days of life) x 1000 / number of children born alive
- 3. The indicator of early neonatal mortality is calculated by the formula
- (number of children born dead + number of children who died during the first year of life) x 1000 / number of children born alive
- (number of children who died during 7 days of life) x 1000 / number of children born alive and dead
- (number of children who died during 28 days of life) x 1000 / number of children born alive
- (number of children who died during 28 days of life) x 1000 / number of children born dead and alive
- (number of children who died during 7 days of life) x 1000 / number of children born alive
- 4. The indicator of late neonatal mortality is calculated by the formula
- (number of children who died during the first year of life) x 1000 / number of children born alive
- (number of children who died during 7 days of life) x 1000 / number of children born alive and dead
- (number of children who died during 28 days of life) x 1000 / number of children born dead and alive
- (number of children who died at 2-4 weeks of life) x 1000 / number of children born alive the number of deaths in the first week
- (number of children born dead + number of children who died within 7 days of life) x 1000 / number of children born alive
- 5. What is included in the structure of the diagnosis
- the fact of pregnancy
- gestational age
- fetal data
- pathology associated with pregnancy
- extragenital pathology

- age features
- burdened obstetric history
- all of the above

Answers to the test

№	Answer
1	В
2	D
3	Е
4	D
5	Н

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

CASE-STUDY 1

At what minimum anhydrous period a woman in labour should be hospitalized in the observational department:

A.3h.

6h.

P.9h.

12h.

E.15h.

Sample answer to the problem

E. Anhydrous period of more than 12 hours is called a long anhydrous period, because in 100% of cases, the uterine cavity is seeding with the vaginal microflora, while the likelihood of intrauterine infection of the fetus and the frequency of inflammatory postpartum diseases increases. Therefore, women in labour with an anhydrous period of 12 hours are hospitalized in the observational department.

Topic 'Methods for assessing the hormonal function of the ovaries'

Task 1. Points for oral quiz

- Anatomy of the female reproductive system.
- Physiology of the female reproductive system.
- Neurohumoral regulation of the female reproductive system.
- Ovarian-menstrual cycle.
- Tests of functional diagnostics.

Task 2. List of practical skills:

• Conducting tests of functional diagnostics.

Task 3. Sample questions for tests with answers

- After ovulation, the egg retains the ability to fertilize during:
- 6 hours
- 12-24 hours
- 3 days
- 10 days
- Tests of functional diagnostics allow to determine:
- Biphasic menstrual cycle;
- Estrogen saturation of the woman's body;
- The presence of ovulation;
- Completeness of the second phase of the menstrual cycle

- The synthesis of chorionic gonadotropin occurs in:
- Adrenal glands;
- Syncytiotrophoblast;
- Uterus:
- Ovaries;
- The pituitary gland.
- Length of a normal menstrual cycle:
- 21-35 days;
- 3-4 days;
- 28-30 days;
- 35-40 days.

Answers to the Test

Nō	Answer
1	В
2	A,B,C,D
3	В
4	A

Topic 'Methods for assessing the hormonal function of the fetoplacental system'.

Task 1. Points for oral quiz

- The main stages of embryogenesis and development of the intrauterine fetus.
- The concept of the fetoplacental complex (FPC);
- Methods for assessing the function of the fetal-placental system.

Topic 'Anatomy of the female genital organs. The female pelvis from the obstetric point of view'.

Task 1. Points for oral quiz

- Anatomy of the female genital organs.
- The structure of the female pelvis.
- The plane of the small pelvis.

Task 2. List of practical skills:

• Measurement of the size of the pelvis.

Topic 'Adaptive changes in a woman's body during physiological pregnancy'

Task 1. Points for oral quiz

- Changes in the central nervous system during pregnancy.
- Changes in the endocrine system during pregnancy.
- Changes in the cardiovascular system during pregnancy.
- Changes in the respiratory system during pregnancy.
- Changes in the digestive system during pregnancy.
- Changes in the urinary system during pregnancy.
- Signs of pregnancy.

Topic 'Methods of examination of pregnant women and the condition of the fetus'.

Task 1. Points for oral quiz

- Diagnostics of pregnancy.
- Invasive and non-invasive methods of examination of pregnant women.
- Methods of examination of pregnant women in the first and second half of pregnancy.
- Examination of the somatic status and assessment of the woman's condition.
- Evaluation of laboratory data.

Task 2. List of practical skills:

- Interview and examination of a pregnant woman;
- Measurement of the pelvis, measurement of the abdomen, determination of the height of the uterine fundus;
- Palpation of the fetus in the uterus, auscultation of the fetus;
- Using the phantom in mastering the size of the pelvis and obstetric terminology;
- Determination of the gestational age and the date of delivery.

Task 3. Sample questions for tests with answers

- 1. The enlargement of the uterus during pregnancy occurs due to:
- A. hypertrophy of muscle fibers;
- B. hyperplasia of muscle fibers;
- C. stretching of the walls of the uterus by the growing fetus;
- D. A and B are correct:
- E. all of the above are correct.
- 2. True conjugate can be determined in all sizes indicated below, except:
- A. external conjugates;
- B. Soloviev index;
- C. diagonal conjugates;
- D. the length of the Michaelis rhombus;
- E. Frank size.
- 3. With the help of the first reception of palpation of the fetus in the uterus, the following are determined:
- A. presentation of the fetus;
- B. position, position of the fetus;
- C. the ratio of the presenting part of the fetus to the entrance to the small pelvis;
- D. the level of standing of the fundus of the uterus;
- E. the ratio of the presenting part of the fetus to the planes of the small pelvis.
- 4. Determination of α -fetoprotein in the blood of a pregnant woman is used to diagnose:
- A. diabetes;
- B. preeclampsia;
- C. malformations of the central nervous system of the fetus;
- D. chromosomal aberrations in the mother;
- E. Conflict on the Rh factor.
- 5. Optimal terms for screening ultrasound examination in the second trimester of pregnancy:
- A. 16-18 weeks;
- B. 14-16 weeks;
- S. 20-22 weeks;
- D. 24-28 weeks;
- E. 18-22 weeks.

Answers to the test

Nō	Answer
1	E
2	В
3	D
4	C
5	Е

Task 4. Examples of case-studies with sample answers

CASE-STUDY 1

The patient came to the antenatal clinic on 03/15/2015 with an indication of a delay in menstruation for 2 months. Menses for 4-5 days every 28 days, regular. The date of the last menstruation is 01/15/2015. Pregnancy test is positive.

- 1. What is the expected duration of pregnancy and childbirth?
- 2. What additional research methods are needed to diagnose pregnancy and determine its term?
- 3. What is the expected duration of the antenatal leave?

Sample answer to the problem

- Pregnancy 8 weeks + 4 days
- Blood for hCG, bimanual vaginal examination, ultrasound of the uterus.
- 08/18/2015

CASE-STUDY 2

A 38-year-old primary pregnant woman was sent for ultrasound examination at a gestational age of 31-32 weeks. The abdominal circumference is 110 cm, the height of the uterine fundus is 34 cm, the woman's weight is 70 kg.

- 1. What is the purpose of the study?
- 2. What is the estimated weight of the fetus?

Sample answer to the problem

- In order to clarify the estimated weight of the fetus, to exclude polyhydramnios.
- 2400 +/- 300 g

CASE-STUDY 3

The patient came to the antenatal clinic on 03/15/2017 with an indication of a delay in menstruation for 2 months. Menses for 4-5 days every 28 days, regular. The date of the last menstruation is 01/15/2017. Pregnancy test is positive.

- 1. What is the expected duration of pregnancy and childbirth?
- 2. What additional research methods are needed to diagnose pregnancy and determine its duration?

Sample answer to the problem

- Estimated gestational age -8 weeks +3 days; expected due date 10/22/18
- Blood for hCG, ultrasound of the pelvic organs.

Topic 'Methods for assessing the condition of the fetus. The fetus as an object of childbirth'

Task 1. Points for oral quiz

- The fetus as an object of childbirth. The structure and size of the fetal head
- Obstetric terminology: position, presentation, position, type of position, articulation of the fetus.
- Methods for assessing the condition of the fetus: fetal auscultation, CTG, ultrasound, DM, BPF, b / x screening.

Task 2. List of practical skills:

- Receptions of Leopold-Levitsky.
- Auscultation of the fetus.

Topic 'Supervision of pregnant women'

Task 1. Points for oral quiz

- Surveying a pregnant woman and a woman in labour.
- General objective examination.
- Special objective examination.

Task 2. List of practical skills:

- Measurement of the height of the fundus of the uterus, abdominal circumference. Calculation of the estimated weight of the fetus.
- Carrying out pelviometry. Rhombus Michaelis. Soloviev index.
- Carrying out Leopold-Levitsky's receptions.

Topic 'Biomechanism of labor in the anterior and posterior types of occipital presentation'.

Task 1. Points for oral quiz

- Anatomy, morphology and physiology of the female reproductive system outside of pregnancy.
- Planes of the small pelvis, their sizes.
- Size of the fetal head.
- Wire line of the pelvis.
- Wired or leading point.
- Determination of the biomechanism of labour.
- Biomechanism of labour in the anterior occipital presentation.
- Biomechanism of labour with the posterior occipital presentation.
- Differences in the biomechanism of labour in the anterior and posterior types of occipital presentation.

Task 2. List of practical skills:

- Reproduce the biomechanism of labour in the posterior and anterior occipital presentation on a phantom;
- Perform external and vaginal examination;
- Interpret the presentation of the head through the birth canal during external and vaginal examination.

Task 3. Sample questions for tests with answers

- 1. What movement does the fetal head make during eruption in the posterior form of the occipital presentation:
- A. flexion:
- B. extension;
- C. inner turn:
- D. flexion, extension;
- E. lowering.
- 2. Average oblique size of the fetal head:
- A. 9.5 cm;
- H 10.5 cm:
- S. 11 cm;
- D. 12 cm;
- E. 13.5 cm.
- 3. The second moment of the mechanism of labor in the anterior type of occipital presentation:
- A. flexion of the head;
- B. lowering the head into the pelvic cavity with the formation of physiological asynclitism;
- C. extension of the head:
- D. internal rotation of the head with the back of the head anteriorly;
- E. internal rotation of the head by the occiput backwards.
- 4. The hard axis of the pelvis is:
- This is a line drawn through the masses and the lower edge of the bosom;

- This is a line drawn from the apex of the coccyx to the upper edge of the pubic articulation;
- This is a line connecting the centers of straight dimensions of the four planes of the pelvic cavity.
- In the anterior view of the occipital insertion, the wire point
- Large fontanelle
- Small fontanelle
- Glabella
- · Suboccipital fossa

Answers to the test

No	Answer
1	D
2	В
3	D
4	С
5	В

Analysis of a case history (4 course 8 term)

The student is given a birth history or medical 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 case history:

Title page (separate page)

- Passport part.
- Complaints: basic and found during the survey on organ systems.
- Anamnesis of the underlying and concomitant diseases.
- Anamnesis of life.
- Data of an objective study of the patient (with comments).
- Justification of the preliminary diagnosis and its formulation (with comments).
- Survey plan (with comments).
- Data of laboratory and instrumental studies, conclusions of consultants. (with comments).
- Final clinical diagnosis (justification and formulation).
- Differential diagnosis (with comments).
- Treatment of the patient and its justification in the form of a table (with comments).
- Epicrisis (with comments).
- Literature references.
- List of used literature.

Writing a case history of childbirth (9th, A, B terms)

Writing a case history of labour

The student independently chooses the nosological form, develops and defends the history of childbirth according to the proposed scheme.

The main stages of writing an educational history:

Title page (separate page)

- Passport part.
- Complaints: basic and found during the survey on organ systems.
- Anamnesis of the underlying and concomitant diseases.
- Anamnesis of life.
- Data of an objective study of the patient.

- Justification of the preliminary diagnosis and its formulation.
- Survey plan.
- Data of laboratory and instrumental studies, conclusions of consultants.
- Final clinical diagnosis (justification and formulation).
- Differential diagnosis.
- Treatment of the patient and its rationale.
- Forecast.
- Prevention (primary and secondary).
- Epicrisis.
- Diary of supervision.
- List of references.

Stage II. Midterm assessment (credit). 9th term.

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

Tasks for competence assessment «Knowledge»	Task type
List of points for oral quiz.	-theoretical
Modern principles of the organization of obstetric and gynecological	
care. Clinical examination of pregnant women. Regulatory documents.	
Methods of examination of pregnant women. Changes in a woman's	
body during pregnancy. Diagnosis of pregnancy. Invasive and non-	
invasive methods of examination of pregnant women.	
Methods for examining the condition of the fetus. Ultrasound during	
pregnancy. Doppler sonography. Biophysical profile of the fetus.	
Cardiotocography.	
Methods for assessing the hormonal function of the ovaries. Anatomy	
of the female reproductive system. Physiology of the female	
reproductive system. Neurohumoral regulation of the female	
reproductive system. Ovarian-menstrual cycle.	
Methods for assessing the hormonal function of the fetoplacental	
system. The main stages of embryogenesis and development of the	
intrauterine fetus. The concept of the fetoplacental complex. Methods	
for assessing the function of the fetal-placental system.	
Wrong fetal positions. The course and management of pregnancy.	
Childbirth with anterior head insertion, frontal insertion, frontal	
insertion.	
Physiology of normal labour. The concept of the readiness of the body	
of a pregnant woman for childbirth.	
Clinic for the first and second stages of normal labor. Intrapartum	
diagnostics during childbirth.	
Management of the first and second stages of labor. Modern methods	
of preparing the birth canal for childbirth.	
III stage of labor, clinical course and management.	
Physiology of the postpartum period. Definition of the term	
"postpartum period", its duration. The concept of physiological and	
pathological blood loss. Physiological changes in a woman's body after	
childbirth.	
Postpartum management. The main clinical indicators of the normal	
course of the postpartum period. The mammary glands, their structure,	
the formation and development of lactation, the role of hormonal	
factors.	

- The neonatal period. Clinical groups of newborns: full-term, premature, premature, mature, immature fetus. Anatomical and physiological features of the newborn. Newborn care rules.
- Anemia during pregnancy. Pathogenesis, diagnosis, complications, treatment, prevention.
- Abnormalities of labour: hypotonic dysfunction of the uterus (weakness of labor). Classification. Clinic, diagnostics, possible complications for the mother and the fetus. Obstetric tactics.
- Abnormalities of labour: discoordinated labour. clinical picture, diagnostics, possible complications for the mother and the fetus. Differential diagnosis. Obstetric tactics.
- Pregnancy and arterial hypertension. Diagnostics, treatment, complications during pregnancy and childbirth. Terms of planned hospitalization. Principles of labor management.
- Heart defects and pregnancy. Diagnostics, the course of the disease during pregnancy. Terms of planned hospitalization. Principles of labour management.
- Pregnancy and pyelonephritis. Diagnostics, course of the disease and pregnancy, complications, treatment and delivery.
- Pregnancy and glomerulonephritis. Diagnostics, course of the disease and pregnancy, complications, treatment and delivery.
- Pregnancy and diabetes mellitus. Influence on the course of pregnancy and the condition of the fetus. Diagnostics, complications, contraindications for carrying a pregnancy. Terms of planned hospitalization. Screening tests to detect gestational diabetes mellitus.
- Pregnancy and thyroid diseases (hypothyroidism, hyperthyroidism). Influence on the course of pregnancy and the condition of the fetus. Diagnostics, treatment. Pregnancy management. Prevention of iodine deficiency diseases.
- Pregnancy and acute appendicitis. Features of the course, diagnostics.
 Differential diagnosis. Complications from the mother and fetus. Lead tactics
- Miscarriage: spontaneous miscarriage. Etiology, pathogenesis, clinic, medical tactics.
- Isthmic-cervical insufficiency, causes, diagnosis, methods of correction during pregnancy. The concept of habitual bearing.
- Pathological preliminary period (false contractions). Clinical picture, diagnostics, possible complications. Obstetric tactics.
- Postterm pregnancy. Reasons, diagnosis, obstetric tactics. Methods Complications in childbirth, principles of delivery.
- Breech presentation of the fetus. Classification. The course of pregnancy and childbirth. Labor management. Obstetric benefits in childbirth. Indications for Cesarean section.
- Fetoplacental insufficiency. Risk factors, pathogenesis, classification. Assessment of the severity. Diagnostic methods, principles of treatment.
- Intrauterine fetal infection. Diagnosis of intrauterine infections, the concept of the TORCH-complex. General characteristics, features of the course, delivery.
- Immunoconflict pregnancy. Sensitization mechanisms, diagnostics, treatment. Principles of pregnancy management. Prevention.
- Congenital malformations of the fetus. Principles of prenatal screening diagnostics.

Tasks for competence assessment «Abilities»	Task type
List of practical skills.	-practical
The fetus as an object of childbirth. The position of the fetus in the	p. 400.041
uterine cavity. Obstetric terminology. Signs of fetal maturity. The	
structure and measurement of the fetal head.	
Anatomical and physiological characteristics of the newborn, the rules	
of caring for children during the newborn period. Newborn's primary	
toilet. Assessment of the condition of the newborn according to the	
Appar scale.	
Biomechanism of labor in the anterior and posterior types of occipital	
presentation of the fetus. Influence of the labor mechanism on the	
shape of the fetal head.	
Diagnostics of pregnancy. Calculation of the gestational age and the	
expected date of birth.	
The female pelvis from the perspective of obstetrics. The structure,	
the plane of the small pelvis.	
Pelvic floor, muscles and fascia, their role in the process of labor	
Assessment of fetal cardiac activity. Auscultation. Cardiographic	
examination. Methodology. Interpretation of results.	
Tests to determine the readiness of the pregnant woman's body for	
childbirth. Determination of the degree of maturity of the cervix.	
Dissection of the perineum. Perineotomy. Episiotomy. Indications,	
technique.	
Modern possibilities of ultrasound research methods in obstetrics.	
Doppler sonography in obstetrics, interpretation of results.	
During the 1st stage of labor. Principles of conduct. Indications and	
technique of vaginal examination during childbirth. Significance for	
determining the tactics of labor management. Partograph keeping.	
 Indications for amniotomy, technique. Possible complications. 	
• The period of expulsion of the fetus. Obstetric allowance in childbirth.	
• Successive period. Follow-up tactics.	
Bacteriological research methods in obstetric and gynecological	
practice. Indications, technique.	
Bacterioscopic research methods in obstetric and gynecological	
practice. Indications, technique.	
• Examination of women using vaginal speculum. Indications.	
Conditions. Execution technique. Evaluation of results.	
Bimanual vaginal-abdominal, rectal-abdominal examination.	
Indications. Execution technique. Evaluation of results.	
Tests of functional diagnostics in the assessment of the ovarian-	
menstrual cycle: basal temperature, examination of cervical mucus.	
Execution technique. Interpretation of the results.	
• Determination of the degree of cleanliness of the vagina. Indications.	
Execution technique. Interpretation of the results.	
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Midterm assessment (credit). B term.

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

Tasks for competence assessment «Knowledge»	Task type
Theoretical points for the oral quiz:	-theoretical
Modern principles of the organization of obstetric and gynecological	
care. Clinical examination of pregnant women. Regulatory documents.	

- Methods of examination of pregnant women. Changes in a woman's body during pregnancy. Diagnosis of pregnancy. Invasive and non-invasive methods of examination of pregnant women
- Methods for examining the condition of the fetus. Ultrasound during pregnancy. Doppler sonography. Biophysical profile of the fetus. Cardiotocography.
- Methods for assessing the hormonal function of the ovaries. Anatomy
 of the female reproductive system. Physiology of the female
 reproductive system. Neurohumoral regulation of the female
 reproductive system. Ovarian-menstrual cycle.
- Methods for assessing the hormonal function of the fetoplacental system. The main stages of embryogenesis and development of the intrauterine fetus. The concept of the fetoplacental complex. Methods for assessing the function of the fetal-placental system.
- Wrong fetal positions. The course and management of pregnancy. Childbirth with anterior head insertion, frontal insertion, frontal insertion.
- Physiology of normal labour. The concept of the readiness of the body of a pregnant woman for childbirth.
- Clinical picture for the first and second stages of normal labour. Intrapartum diagnostics during childbirth.
- Management of the first and second stages of labour. Modern methods of preparing the birth canal for childbirth.
- The third stage of labour, clinical course and management.
- Physiology of the postpartum period. Definition of the term "postpartum period", its duration. The concept of physiological and pathological blood loss. Physiological changes in a woman's body after childbirth.
- Postpartum management. The main clinical indicators of the normal course of the postpartum period. The mammary glands, their structure, the formation and development of lactation, the role of hormonal factors.
- Anemia of pregnancy. Pathogenesis, diagnosis, complications, treatment, prevention.
- Pregnancy and arterial hypertension. Diagnostics, treatment, complications during pregnancy and childbirth. Terms of planned hospitalization. Principles of labour management.
- Heart defects and pregnancy. Diagnostics, the course of the disease during pregnancy. Terms of planned hospitalization. Principles of labour management.
- Pregnancy and pyelonephritis. Diagnostics, course of the disease and pregnancy, complications, treatment and delivery.
- Pregnancy and glomerulonephritis. Diagnostics, course of the disease and pregnancy, complications, treatment and delivery.
- Pregnancy and diabetes mellitus. Influence on the course of pregnancy and the condition of the fetus. Diagnostics, complications, contraindications for carrying a pregnancy. Terms of planned hospitalization. Screening tests to detect gestational diabetes mellitus.
- Pregnancy and thyroid diseases (hypothyroidism, hyperthyroidism). Influence on the course of pregnancy and the condition of the fetus. Diagnostics, treatment. Pregnancy management. Prevention of iodine deficiency diseases.

- Pregnancy and acute appendicitis. Features of the course, diagnostics. Differential diagnosis. Complications from the mother and fetus. Lead tactics.
- Preeclampsia. Classification. Modern concepts of etiology and pathogenesis. The main clinical forms of the course. Assessment of the severity. Treatment, principles of delivery.
- Eclampsia. HELLP syndrome. Obstetric tactics. Principles of Intensive Care. Efferent methods of treatment.
- Miscarriage: spontaneous miscarriage. Etiology, pathogenesis, clinic, medical tactics.
- Isthmic-cervical insufficiency, causes, diagnosis, methods of correction during pregnancy. The concept of habitual bearing.
- Pathological preliminary period (false contractions). Clinical picture, diagnostics, possible complications. Obstetric tactics.
- Premature birth. Causes, course, complications. Management of premature birth.
- Immunoconflict pregnancy. Sensitization mechanisms, diagnostics, treatment. Principles of pregnancy management. Prevention.
- Hemorrhagic shock in obstetrics. Principles of infusion therapy. Efferent methods of treatment. Disseminated intravascular coagulation syndrome in obstetric pathology, control measures, prevention.
- Bleeding in the early postpartum period: hypotension and atony of the uterus. Diagnostics, differential diagnostics, obstetric tactics, prevention.
- Coagulopathic obstetric bleeding (disorders in the hemostatic system). Antiphospholipid syndrome. Classification. Laboratory diagnostics, clinical manifestations. Differential diagnosis. Treatment principles and obstetric tactics.
- Bleeding in the successive period, causes, differential diagnosis, medical tactics. Prevention.
- Multiple pregnancy. Diagnostics, pregnancy and childbirth. Possible complications. Obstetric tactics.
- Premature detachment of a normally located placenta. Reasons, diagnosis, obstetric tactics.
- Postpartum mastitis, clinic, diagnosis, treatment, prevention. Indications for suppressing lactation. Lactostasis. Hypogalactia. Reasons, methods of treatment.
- Postpartum endometritis. Etiology. Pathogenesis. Classification, diagnostics. Management tactics, principles of therapy.
- Premature birth. Causes, course, complications. Management of premature birth.
- Ruptured uterus. Classification, clinic, obstetric tactics.
- Postpartum purulent-inflammatory diseases. Classification, flow features in modern conditions. Sepsis, multiple organ failure syndrome: etiology, pathogenesis, clinical picture, diagnosis, treatment.
- Fetoplacental insufficiency. Risk factors, pathogenesis, classification. Assessment of the severity. Diagnostic methods, principles of treatment. Pathology of the postpartum period: subinvolution of the uterus, lochiometer, wound infection. Clinical picture, diagnostics. Treatment principles.

Tasks for competence assessment «Abilities»	Task type
List of the case-studies.	-theoretical

Case-study 1

The woman in labor was taken to the maternity ward by an ambulance team. This pregnancy is the third, the first ended in normal childbirth, the second is a spontaneous abortion. The position of the fetus is longitudinal, the pelvic end of the fetus is presented at the entrance to the small pelvis, labor activity is regular, active. During the examination, amniotic fluid poured out, after which a decrease in the fetal heart rate to 100 beats / min was noted. With a vaginal examination, the opening of the uterine pharynx is complete, there is no fetal bladder, a dropped umbilical cord is felt in the vagina. Buttocks of the fetus in the narrow part of the pelvic cavity.

- 1. Establish the diagnosis?
- 2. What should be the tactics of the doctor?
- 3. What mistakes were made in the management of a pregnant woman?

Case-study 2

Multiparous 35 years old was admitted to the hospital with regular labour, urgent labour. History of 2 births, the last ended 2 years ago with a Caesarean section due to a clinical narrow pelvis, fetal weight 4000.0.

On admission: the size of the pelvis is 25 - 28 - 32 - 20, the circumference of the abdomen is 103 cm, the height of the fundus of the uterus is 44 cm, the pelvic end is presented.

During vaginal examination: the cervix is smoothed, its edges are thin, the opening is 2 cm, the fetal bladder is intact, the legs are present, the cape is not.

Examples of case-studies for the exam:

Case-study 1

The woman in labor was taken to the maternity ward by an ambulance team. This pregnancy is the third, the first ended in normal childbirth, the second is a spontaneous abortion. The position of the fetus is longitudinal, the pelvic end of the fetus is presented at the entrance to the small pelvis, labor activity is regular, active. During the examination, amniotic fluid poured out, after which a decrease in the fetal heart rate to 100 beats / min was noted. With a vaginal examination, the opening of the uterine pharynx is complete, there is no fetal bladder, a dropped umbilical cord is felt in the vagina. Buttocks of the fetus in the narrow part of the pelvic cavity.

- 1. Establish the diagnosis?
- 2. What should be the tactics of the doctor?
- 3. What mistakes were made in the management of a pregnant woman?

Case-study 2

Multiparous 35 years old was admitted to the hospital with regular labor, urgent labor. History of 2 births, the last ended 2 years ago with a caesarean section due to a clinical narrow pelvis, fetal weight 4000.0. On admission: the size of the pelvis is 25 - 28 - 32 - 20, the circumference of the abdomen is 103 cm, the height of the fundus of the uterus is 44 cm, the pelvic end is presented.

On vaginal examination: the cervix is smoothed, its edges are thin, the opening is 2 cm, the fetal bladder is intact, the legs are present, the cape is not reached. Establish the diagnosis? • Are there any mistakes in the management of a pregnant woman? • What are the possible complications of childbirth? What is a labor management plan? Tasks for competence assessment «Abilities» Task type List of practical skills: -practical • The fetus as an object of childbirth. The position of the fetus in the uterine cavity. Obstetric terminology. Signs of fetal maturity. The structure and measurement of the fetal head. • Anatomical and physiological characteristics of the newborn, the rules of caring for children during the newborn period. Newborn's primary toilet. Assessment of the condition of the newborn according to the Apgar scale. • Biomechanism of labor in the anterior and posterior types of occipital presentation of the fetus. Influence of the labor mechanism on the shape of the fetal head. • Diagnostics of pregnancy. Calculation of the gestational age and the expected date of birth. • The female pelvis from the perspective of obstetrics. The structure, the plane of the small pelvis. • Pelvic floor, muscles and fascia, their role in the process of labor • Assessment of fetal cardiac activity. Auscultation. Cardiographic examination. Methodology. Interpretation of results. Tests to determine the readiness of the pregnant woman's body for childbirth. Determination of the degree of maturity of the cervix. • Dissection of the perineum. Perineotomy. Episiotomy. Indications, technique. • Modern possibilities of ultrasound research methods in obstetrics. Doppler sonography in obstetrics, interpretation of results. • During the fisrt stage of labor. Principles of conduct. Indications and technique of vaginal examination during childbirth. Significance for determining the tactics of labor management. Partograph keeping. • Indications for amniotomy, technique. Possible complications. • The period of expulsion of the fetus. Obstetric allowance in childbirth. • Successive period. Follow-up tactics. Bacteriological research methods in obstetric and gynecological practice. Indications, technique. • Bacterioscopic research methods in obstetric and gynecological practice. Indications, technique. • Examination of women using vaginal speculum. Indications. Conditions. Execution technique. Evaluation of results. • Bimanual vaginal-abdominal, rectal-abdominal examination. Indications. Execution technique. Evaluation of results. • Tests of functional diagnostics in the assessment of the ovarianmenstrual cycle: basal temperature, examination of cervical mucus. Execution technique. Interpretation of the results. • Determination of the degree of cleanliness of the vagina. Indications. Execution technique. Interpretation of the results. Vacuum extraction of the fetus: indications, contraindications, conditions, technique, methods of pain relief.

- Manual examination of the uterine cavity. Indications, technique.
- Controlled balloon tamponade. Indications, technique.
- Manual separation and allocation of the placenta. Indications, technique.

Midterim assessment (exam). A term.

The exam ticket contains two oral quizzes, one practical skills question	, and one case study.
Tasks for competence assessment «Knowledge»	Task type
Theoretical points for the exam:	-theoretical
Modern principles of the organization of obstetric and gynecological	
care. Clinical examination of pregnant women. Regulatory documents.	
Anatomically narrow pelvis. Classification, causes, diagnosis. Features	
of the course of labor, possible complications and their prevention.	
Anemia of pregnancy. Pathogenesis, diagnosis, complications,	
treatment, prevention.	
Abnormalities of labour: hypotonic dysfunction of the uterus	
(weakness of labor). Classification. Clinical picture, diagnostics, possible	
complications for the mother and the fetus. Obstetric tactics.	
Abnormalities of labour: discoordinated labour. Clinical picture,	
diagnostics, possible complications for the mother and the fetus.	
Differential diagnosis. Obstetric tactics.	
Abnormalities in the location and attachment of the placenta.	
Placenta previa. Diagnostics. Pregnancy and childbirth management	
tactics.	
Pregnancy and arterial hypertension. Diagnostics, treatment,	
complications during pregnancy and childbirth. Terms of planned	
hospitalization. Principles of labor management.	
Heart defects and pregnancy. Diagnostics, the course of the disease	
during pregnancy. Terms of planned hospitalization. Principles of labor	
management.	
Pregnancy and pyelonephritis. Diagnostics, course of the disease and	
pregnancy, complications, treatment and delivery.	
Pregnancy and glomerulonephritis. Diagnostics, course of the disease	
and pregnancy, complications, treatment and delivery.	
Pregnancy and diabetes mellitus. Influence on the course of	
pregnancy and the condition of the fetus. Diagnostics, complications,	
contraindications for carrying a pregnancy. Terms of planned	
hospitalization. Screening tests to detect gestational diabetes mellitus.	
Pregnancy and thyroid diseases (hypothyroidism, hyperthyroidism).	
Influence on the course of pregnancy and the condition of the fetus.	
Diagnostics, treatment. Pregnancy management. Prevention of iodine	
deficiency diseases.	
• Pregnancy and acute appendicitis. Features of the course, diagnostics.	
Differential diagnosis. Complications from the mother and fetus. Lead	
tactics.	
• Intrauterine fetal infection. Diagnosis of intrauterine infections, the	
concept of the TORCH-complex. General characteristics, features of the	
course, delivery.	
Immunoconflict pregnancy. Sensitization mechanisms, diagnostics,	
treatment. Principles of pregnancy management. Prevention.	
Hemorrhagic shock in obstetrics. Principles of infusion therapy.	
Efferent methods of treatment. Disseminated intravascular coagulation	
syndrome in obstetric pathology, control measures, prevention.	

- Bleeding in the early postpartum period: hypotension and atony of the uterus. Diagnostics, differential diagnostics, obstetric tactics, prevention.
- Coagulopathic obstetric bleeding (disorders in the hemostatic system). Antiphospholipid syndrome. Classification. Laboratory diagnostics, clinical manifestations. Differential diagnosis. Treatment principles and obstetric tactics.
- Preeclampsia. Classification. Modern concepts of etiology and pathogenesis. The main clinical forms of the course. Assessment of the severity. Treatment, principles of delivery.
- Eclampsia. HELLP syndrome. Obstetric tactics. Principles of Intensive Care. Efferent methods of treatment.
- Clinically narrow pelvis, causes, diagnosis, obstetric tactics.
- Miscarriage: spontaneous miscarriage. Etiology, pathogenesis, clinic, medical tactics.
- Artificial termination of pregnancy at a later date. Indications, the role of medical and social factors, methods, possible complications.
- Isthmic-cervical insufficiency, causes, diagnosis, methods of correction during pregnancy. The concept of recurrent miscarriage.
- Congenital malformations of the fetus. Principles of prenatal screening diagnostics.
- Bleeding in the successive period, causes, differential diagnosis, medical tactics. Prevention.
- Multiple pregnancy. Diagnostics, pregnancy and childbirth. Possible complications. Obstetric tactics.
- Pathological preliminary period (false contractions). Clinic, diagnostics, possible complications. Obstetric tactics.
- Postterm pregnancy. Reasons, diagnosis, obstetric tactics. Methods Complications in childbirth, principles of delivery.
- Family planning. Modern methods of contraception. Postpartum contraception.
- Premature detachment of a normally located placenta. Reasons, diagnosis, obstetric tactics.
- Postpartum mastitis, clinic, diagnosis, treatment, prevention. Indications for suppressing lactation. Lactostasis. Hypogalactia. Reasons, methods of treatment.
- Postpartum endometritis. Etiology. Pathogenesis. Classification, diagnostics. Management tactics, principles of therapy.
- Premature birth. Causes, course, complications. Management of premature birth.
- Ruptured uterus. Classification, clinic, obstetric tactics.
- Vomiting of pregnant women, classification, clinic, treatment, indications for termination of pregnancy.
- Postpartum purulent-inflammatory diseases. Classification, flow features in modern conditions iyakh. Sepsis, multiple organ failure syndrome: etiology, pathogenesis, clinical picture, diagnosis, treatment.
- Fetoplacental insufficiency. Risk factors, pathogenesis, classification. Assessment of the severity. Diagnostic methods, principles of treatment.
- Pathology of the postpartum period: subinvolution of the uterus, lochiometer, wound infection. Clinic, diagnostics. Treatment principles.

childbirth. Indications for cesarean section.	
asks for competence assessment «Abilities»	Task type
xamples of case-studies for the exam:	-theoretical
Case-study 1	
Third day of the postpartum period. The body temperature is 38.2 $^{\circ}$ C,	
the postpartum woman complains of pain in the mammary glands.	
Pulse 86 beats / min, mammary glands - significant and uniform	
engorgement, sensitive to palpation, when pressed, droplets of milk ar	e
released from the nipple.	
What is your diagnosis?	
• What is the treatment for this complication?	
Case-study 2	
Multiparous 35 years old was admitted to the hospital with regular	
labor, urgent labor. History of 2 births, the last ended 2 years ago with	a
caesarean section due to a clinical narrow pelvis, fetal weight 4000.0.	-
On admission: the size of the pelvis is 25 - 28 - 32 - 20, the	
circumference of the abdomen is 103 cm, the height of the fundus of	
the uterus is 44 cm, the pelvic end is presented.	
On vaginal examination: the cervix is smoothed, its edges are thin, the	
opening is 2 cm, the fetal bladder is intact, the legs are present, the	
cape is not reached.	
• Establish the diagnosis?	
• Are there any mistakes in the management of a pregnant woman?	
What are the possible complications of childbirth?	
What is a plan for the management of labor?	
Case-study 3	
A 32-year-old woman in labor is in labor for 10 hours. Full-term	
pregnancy. The anamnesis has some urgent labor, which ended with	
the imposition of obstetric forceps. The size of the pelvis: 25 - 27 - 31 -	
21 cm, abdominal circumference 114 cm, the height of the uterine	
fundus 39 cm, the fetal head is pressed against the entrance to the	
pelvis, the fetal heartbeat is clear.	
The amniotic fluid departed, an hour later there were contractions of a	
forced character. The woman is restless, complains of sharply painful	
and almost continuous contractions, the uterus is tense, does not relax outside the contraction, the lower segment is sharply painful, the fetal	
head is fixed at the entrance to the pelvis, does not urinate on its own.	
On vaginal examination: the opening is complete, the anterior lip of the	2
cervix is edematous, the sagittal suture is in transverse size, deviated to	
the promontory, there is a significant generic tumor on the head.	
• Establish the diagnosis? Justify it.	
What are the possible complications of childbirth?	
What is a plan for the management of labor?	
Tasks for competence assessment «Abilities»	Task type
List of practical skills:	-practical
The fetus as an object of childbirth. The position of the fetus in the	
uterine cavity. Obstetric terminology. Signs of fetal maturity. The	
tructure and measurement of the fetal head.	

- Anatomical and physiological characteristics of the newborn, the rules of caring for children during the newborn period. Newborn's primary toilet. Assessment of the condition of the newborn according to the Apgar scale.
- Biomechanism of labor in the anterior and posterior types of occipital presentation of the fetus. Influence of the labor mechanism on the shape of the fetal head.
- Diagnostics of pregnancy. Calculation of the gestational age and the expected date of birth.
- The female pelvis from the perspective of obstetrics. The structure, the plane of the small pelvis.
- Pelvic floor, muscles and fascia, their role in the process of labor
- Preoperative period and preparation for obstetric operations. Caesarean section in modern obstetrics, indications. Postoperative management.
- Assessment of fetal cardiac activity. Auscultation. Cardiographic examination. Methodology. Interpretation of results.
- Vacuum extraction of the fetus: indications, contraindications, conditions, technique, methods of pain relief.
- Tests to determine the readiness of the pregnant woman's body for childbirth. Determination of the degree of maturity of the cervix.
- Dissection of the perineum. Perineotomy. Episiotomy. Indications, technique.
- Manual examination of the uterine cavity. Indications, technique.
- Modern possibilities of ultrasound research methods in obstetrics. Doppler sonography in obstetrics, interpretation of results.
- During the 1st stage of labor. Principles of conduct. Indications and technique of vaginal examination during childbirth. Significance for determining the tactics of labor management. Partograph keeping.
- Indications for amniotomy, technique. Possible complications.
- The period of expulsion of the fetus. Obstetric allowance in childbirth.
- Successive period. Follow-up tactics.
- Vacuum extraction of the fetus: indications, contraindications, conditions, technique, methods of pain relief.
- Manual examination of the uterine cavity. Indications, technique.
- Controlled balloon tamponade. Indications, technique.
- Manual separation and allocation of the placenta. Indications, technique.

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	Assessed	Assessment criteria	Grade
task	competences		
Oral quiz:	PC-1.1; PC -1.2; PC -3.1; PC -3.2; PC -3.4; PC -4.1; PC -4.2; PC -5.1; PC -5.2; PC -5.4; PC -8.2	The student demonstrates a comprehensive, systematic and indepth knowledge of the academic material; has learned the required and additional resources. The student demonstrates a consistent and thorough understanding of the required	Excellent
		knowledge, concepts, skills of the 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-	PC-1.1; PC -1.2; PC -3.1; PC -	The student correctly and solves the	
study	3.2; PC -3.4; PC -4.1; PC -4.2;	case-study task, demonstrating deep	Excellent
		knowledge. There are no errors in	

PC -5.1; PC -5.2; PC -5.4; PC -	logical reasoning and solution, the	
8.2	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 deep	
	knowledge. There are minor errors	
	in logical reasoning and solution, the	Good
	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	Satisfactory
	solution. The student demonstrates	
	difficulties, but still is able to solve a	
	case-study task.	
	The student incorrectly solves the	
	case-study task, makes significant	Unsatisfactory
	mistakes. The student is not able to	Unisatisfactory
	solve a case-study.	

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	Assessment criteria	Grade
770 01 000	competences		
Test	PC-1.1; PC -1.2; PC -3.1; PC	80 – 100%	Excellent
	-3.2; PC -3.3; PC -3.4; PC -	66 – 80%	Good
	5.1; PC -5.2; PC -5.4; PC - 8.2	46 – 65%	Satisfactory
	0.2	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	Assessment criteria	Grade
	competences		
Practical skills	PC-1.1; PC -1.2; PC -3.1; PC -3.2; PC -3.4; PC -4.1; PC -4.2; 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 model with significant mistakes. The indications and conditions used in this method are not described.	Unsatisfactory

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	Assessed	Assessment criteria	Grade
task	competences		
Case history	PC-1.1; PC -1.2; PC -3.1; PC -3.2; PC -3.4; PC -4.1; PC -4.2; 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 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. The student makes single mistakes in medical terminology, single stylistic mistakes and inconsistences in the text, inaccuracies of subjective or objective examination of the patient. The student demonstrates	Good

T T	T	
	insufficient ability to use the data	
	of objective examination in the	
	formulation and solving	
	therapeutic and diagnostic	
	problems.	
	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.	C-+:-f+
	The student makes multiple	Satisfactory
	mistakes in medical terminology,	
	multiple stylistic mistakes and	
	inconsistences 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.	
	The student has significant gaps in	Unsatisfactory
	knowledge of the basic material,	,
	has made fundamental mistakes in	
	examining a patient, is not able to	
	make a differential diagnosis,	
	assign diagnostic and therapeutic	
	measures for the pathology.	

Stage: midterm assessment (credit)

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

	ood, satisfactory, unsatis		C de
Type of the task	Assessed	Assessment criteria	Grade
	competences		
Oral quiz	PC-1.1; PC -1.2; PC -3.1; PC -3.2; PC -3.4; PC -4.1; PC -4.2; PC -5.1; PC -5.2; PC -5.4; PC -8.2	The student discovers a comprehensive, systematic and deep knowledge of the educational material of the lesson, who has mastered the basic literature and is familiar with the additional literature recommended to prepare for the lesson. And also for students who have mastered the relationship of the basic concepts of the discipline in their meaning for the acquired profession, who have shown creative abilities in understanding, presenting and using	Excellent
		educational and	
		program material.	
	PC-1.1; PC -1.2; PC -3.1; PC -3.2; PC -3.4; PC -4.1; PC -4.2; PC -5.1; PC -5.2; PC -5.4; PC -8.2	The student has discovered complete knowledge of the educational material, has mastered the basic literature recommended for the lesson. And also the student has shown the systematic nature of knowledge in the discipline and are capable of their independent replenishment and renewal in the course of further	Good

	educational work and	
	professional activity.	
PC-1.1; PC -1.2; PC -3.1; PC -3.2; PC -3.4; PC -4.1; PC -4.2; PC -5.1; PC -5.2; PC -5.4; PC -8.2	The student has discovered knowledge of the educational material in the amount necessary for further mastering the discipline, who is familiar with the main literature recommended for the lesson. And also the students has made mistakes, but have the necessary knowledge to eliminate them under the guidance of a	Satisfactory
	teacher.	
PC-1.1; PC -1.2; PC -3.1; PC -3.2; PC -3.4; PC -4.1; PC -4.2; PC -5.1; PC -5.2; PC -5.4; PC -8.2	A student has discovered significant gaps in the knowledge of the basic educational material, made fundamental mistakes in answering questions.	Unsatisfactory

Scheme for assessing the correctness of the demonstration of practical skills (assessed on a four-point scale with grades):

Type of the task	Assessed	Assessment criteria	Grade
	competences		
Practical skills	PC-1.1; PC -1.2; PC -3.1; PC -3.2; PC -3.4; PC -4.1; PC -4.2; PC -5.1; PC -5.2; PC -5.4; PC -8.2	The student fluently, with a deep knowledge of the material, correctly and fully demonstrated the practical skill on the phantom. There are no errors in the demo, the technique is correct. The indications and conditions for this method are clearly described;	Excellent
	PC-1.1; PC -1.2; PC -3.1; PC -3.2; PC -3.4; PC -4.1; PC -4.2; PC -5.1; PC -5.2; PC -5.4; PC -8.2	If the student is convincing enough, with minor errors or inaccuracies in the	Good

	demonstration of practical skills, while there are no indications and conditions for this method in logical reasoning and	
PC-1.1; PC -1.2; PC -3.1; PC -3.2; PC -3.4; PC -4.1; PC -4.2; PC -5.1; PC -5.2; PC -5.4; PC -8.2	knowledge The student is not confident enough, with significant errors in the demonstration of practical skills, with difficulties, but still can, if necessary, carry out this method in practice;	Satisfactory
PC-1.1; PC -1.2; PC -3.1; PC -3.2; PC -3.4; PC -4.1; PC -4.2; PC -5.1; PC -5.2; PC -5.4; PC -8.2	The student has a very poor understanding of the subject and made significant mistakes in demonstrating practical skills, cannot cope with the implementation of this method in practice.	Unsatisfactory

Stage: midterm assessment - exam

Methodological recommendations for preparing for the exam.

The exam is conducted oral quiz and consists of several stages:

- oral quiz on examination tickets (the ticket contains 2 questions)
- case study;
- demonstration of practical skills using a simulator.

For admission and successful passing of the intermediate certification (exam), the student must fulfill the following requirements:

- 1. regularly attend classroom discipline classes; skipping classes is not allowed without a good reason;
- 2. in case of missing a lesson, the student must complete the missed lesson during the working hours;
- 3. The student must submit written works for verification on time and make sure that they are credited by the next lesson;
- 4. The student must hand over to the teacher all the colloquiums provided by the calendar-thematic plan.
- 5.if the student does not have a positive assessment on the colloquium, then he must approach the teacher during the hours of consultations and working hours and re-submit this material
- 6. In the credit week, the student is obliged to hand over to the teacher a test in the form provided for by the working curriculum writing and defending a clinical history.

The admission of a student to the exams is carried out by the educational part of the institute at the end of the credit week, on the basis of the transcripts handed over by the teachers and, in some cases, the memos of the teachers.

Students who have fully completed the requirements of the curriculum of the current semester, as well as received all credits provided for by the curriculum and have no academic debts for the previous semester, are allowed to take all exams.

The following students are not allowed to take exams:

• who have not received a credit in any discipline, for an exam in this discipline;

- systematically skipping classes, having arrears in current control for the exam in this discipline are not allowed (based on the results of the certification week and the teacher's memo to the educational department of the institute);
 - having 5 (five) or more arrears for the previous session;
- having at least one annual debt for earlier sessions. (Surgut State University Quality Management System QMS SURGU STO-2.12.5-15 Organization of current monitoring of progress and intermediate certification of students Edition No. 2)

Type of the task	Assessed	Assessment criteria	Grade
Practical skills	Competences PC-1.1; PC -1.2; PC -3.1; PC -3.2; PC -3.4; PC -4.1; PC -4.2; PC -5.1; PC -5.2; PC -5.4; PC -8.2	The student fluently, with a deep knowledge of the material, correctly and fully demonstrated the practical skill on the phantom. There are no errors in the demo, the technique is correct. The indications and conditions for this method are clearly described;	Excellent
	PC-1.1; PC -1.2; PC -3.1; PC -3.2; PC -3.4; PC -4.1; PC -4.2; PC -5.1; PC -5.2; PC -5.4; PC -8.2	If the student is convincing enough, with minor errors or inaccuracies in the demonstration of practical skills, while there are no indications and conditions for this method in logical reasoning and knowledge	Good
	PC-1.1; PC -1.2; PC -3.1; PC -3.2; PC -3.4; PC -4.1; PC -4.2; PC -5.1; PC -5.2; PC -5.4; PC -8.2	The student is not confident enough, with significant errors in the demonstration of practical skills, with difficulties, but still can, if necessary, carry out this method in practice;	Satisfactory
	PC-1.1; PC -1.2; PC -3.1; PC -3.2; PC -3.4; PC -4.1; PC -4.2; PC -5.1; PC -5.2; PC -5.4; PC -8.2	The student has a very poor understanding of the subject and made significant mistakes in demonstrating practical skills, cannot	Unsatisfactory

	cope with the	
	implementation of	
	this method in	
	practice.	

Type of the task	Assessed	Assessment criteria	Grade
	competences		
Oral quiz	PC-1.1; PC -1.2; PC -3.1; PC -3.2; PC -3.4; PC -4.1; PC -4.2; PC -5.1; PC -5.2; PC -5.4; PC -8.2	The student demonstrates a comprehensive, systematic and indepth knowledge of the academic material; has learned the required and additional resources. The student demonstrates a	Excellent
		consistent and thorough understanding of the required knowledge, concepts, skills of the material learned, and their significance for future profession.	
	PC-1.1; PC -1.2; PC -3.1; PC -3.2; PC -3.4; PC -4.1; PC -4.2; PC -5.1; PC -5.2; PC -5.4; PC -8.2	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
	PC-1.1; PC -1.2; PC -3.1; PC -3.2; PC -3.4; PC -4.1; PC -4.2; PC -5.1; PC -5.2; PC -5.4; PC -8.2	The student demonstrates basic knowledge necessary for further study; has learned basic recommended literature. The student operates with inaccurate formulating, has difficulties in the	Satisfactory

	independent answers, makes significant mistakes but is able to correct them under the guidance of a teacher.	
PC-1.1; PC -1.2; PC -3.1; PC -3.2; PC -3.4; PC -4.1; PC -4.2; PC -5.1; PC -5.2; PC -5.4; PC -8.2	A student has discovered significant gaps in the knowledge of the basic educational material, made fundamental mistakes in answering questions.	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 -3.4; PC -4.1; PC -4.2; PC -5.1; PC -5.2; PC -5.4; PC -8.2	The student freely, with deep knowledge of the material, correctly and fully completed the situational task. There are no errors in logical reasoning and decision, the problem is solved in a rational way. Correct answer received. The algorithm of actions is clearly described.	Excellent
	PC-1.1; PC -1.2; PC -3.1; PC -3.2; PC -3.4; PC -4.1; PC -4.2; PC -5.1; PC -5.2; PC -5.4; PC -8.2	If the student is convincing enough, with minor errors in theoretical training and sufficiently mastered skills, essentially correctly answered the questions or made minor errors in the answer, while there are no significant errors in logical reasoning and decision;	Good
	PC-1.1; PC -1.2; PC -3.1; PC -3.2; PC -3.4; PC -4.1; PC -4.2; PC -5.1; PC -5.2; PC -5.4; PC -8.2	The student was not confident enough, with significant errors in theoretical preparation and	Satisfactory

PC-1.1; PC -1.2; PC -3.1; PC -3.2; PC -3.4; PC -4.1; PC -4.2; PC -5.1; PC -5.2; PC -5.4; PC -8.2	poorly mastered skills, answered the questions of the situational task; with difficulties, but still can, if necessary, solve a similar situational problem in practice; The student has a very poor understanding of the subject and made significant mistakes	Unsatisfactory
	•	
	in practice;	
	The student has a	Unsatisfactory
, , , , , , , , , , , , , , , , , , , ,	very poor	
	understanding of the	
	subject and made	
	significant mistakes	
	in answering most of	
	the questions of the	
	situational task,	
	incorrectly answered	
	additional questions	
	asked to him, cannot	
	cope with solving	
	such a task in	
	practice.	