



Non-Commercial Educational Institution  
Educational-Scientific-Production Complex  
«International University of Kyrgyzstan»

Quality Management System  
Academic and methodological complex of the discipline  
«Polyclinic therapy»  
MEP of «General Medicine» ISM IUK

**INTERNATIONAL UNIVERSITY OF KYRGYZSTAN**  
**INTERNATIONAL SCHOOL OF MEDICINE**  
**Department of Therapy**



# Syllabus

## OF THE DISCIPLINE

### «POLYCLINIC THERAPY»

Main educational program

specialty of **560001 General Medicine (for foreign citizens)**

*(code, direction name / specialty)*

qualification of the graduate: general practitioner

*(the qualification of the graduate is indicated in accordance with SES HPE)*

Full-time education

Course 6

Semester 11, 12

Control type: Test

Total curriculum credits 8

Total curriculum hours: 288

Work program developer: PhD. Bakaeva S.B., Oktyabr k. D

Head of the Department: prof. Baitova G. M.

**Bishkek 2021**



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## Content

<b>1. The work program of the academic discipline.....</b>	<b>2</b>
1.1. Explanatory note .....	2
1.2. Recommended educational technologies .....	8
1.3. The scope of the discipline and types of academic work.....	9
1.4. Discipline structure .....	9
1.4.1. Thematic plan for the study of the discipline (by semester) .....	9
1.4.2. Organization of student's individual work.....	21
1.4.3. Control questions for the course.....	27
<b>1.5. Educational-Methodological and informational support of the discipline.....</b>	<b>34</b>
1.5.1. List of recommended literature.....	34

### 1. The work program of the academic discipline

#### 1.1.Explanatory note

- **Mission of the ISM IUK** – *training of competent specialists in the field of medicine, consistent with international standards and traditions of medical ethics, ready for continuous professional growth using modern achievements of science and practice, to solve public health problems.*

#### **Annotation of the academic discipline**

The purpose of this educational program is the formation of professional competencies necessary for the successful mastering by students of the discipline "Polyclinic therapy"

Polyclinic therapy is one of the leading disciplines that form clinical thinking in students, laying a solid foundation for future professional activities. This discipline is compulsory for study at a medical school.

Polyclinic therapy is one of the main sections, the study of which lays down theoretical knowledge and practical skills in the examination and treatment of somatic patients in polyclinic (out-of-hospital conditions).

The study of the polyclinic therapy section provides for 288 hours, of which 72 hours are lectures, 216 hours are allocated for practical training.

The result of the passage of the cycle is the setting of points according to the university program of the BRS, which summarizes the points for attendance, activity in the classroom and the results of the quiz.

#### • **The purpose and objectives of the discipline**

##### **The goal of mastering the academic discipline:**

1. Mastering theoretical knowledge and practical skills in polyclinic therapy, developing the ability to navigate in various clinical situations and provide medical care to the adult population regardless of gender, develop professional and personal qualities necessary for a general practitioner.



Non-Commercial Educational Institution  
Educational-Scientific-Production Complex  
«International University of Kyrgyzstan»

Quality Management System  
Academic and methodological complex of the discipline  
«Polyclinic therapy»  
MEP of «General Medicine» ISM IUK

2. Further deepening of theoretical knowledge and improvement of practical skills in individual, most relevant areas of professional activity, due to the nature of the work of a general practitioner.

### **Tasks:**

1. Training in practical skills of organizing medical and preventive care for the population on an outpatient basis, namely: the basic principles of organizing medical and preventive care for the bulk of the population in a polyclinic;
2. To develop the ability to navigate, interpret, correctly assess various clinical situations, including medical emergencies and solve them in an outpatient setting.
3. To develop personal qualities and professional skills necessary for a general practitioner working in an outpatient setting.
4. Apply the concept of lifelong, comprehensive surveillance of the adult population.
5. To be able to implement the principles of a healthy lifestyle in practice.

### **Place of discipline in the structure of OOP (prerequisites, postrequisites)**

#### **Prerequisites:**

Latin - know medical terminology. Be able to apply it.

Normal anatomy - anatomy and topography of organs, morphological changes depending on age.

Histology - the histological structure of body tissues.

Biochemistry - standards for biochemical parameters of physiological fluids.

Normal Physiology - physiological Constants of Internal Organs

Pathological physiology - pathological physiology of inflammatory, allergic, dystrophic, atrophic and hypertrophic processes

Pathological Anatomy - pathological Anatomy of Inflammatory, Dystrophic, Atrophic and Hypertrophic Processes

Microbiology, Virology, Immunology - methods for the diagnosis of infectious agents.

Propedeutics of Internal Medicine - methods of direct examination of the patient

Faculty therapy - etiology, pathogenesis, clinical picture, diagnosis, treatment, prevention of common diseases of the cardiovascular, respiratory, blood, liver and kidney systems.

Hygiene - the impact of the environment on human health.

Surgical diseases - acute abdomen, gastrointestinal bleeding, pneumothorax.

Obstetrics and Gynecology - influence of pregnancy on the function of internal organs.

Oncology - Clinic and diagnosis of oncological diseases.



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Quality Management System  
Academic and methodological complex of the discipline  
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MEP of «General Medicine» ISM IUK

Radiation diagnostics and radiation therapy - X-ray diagnostics of diseases of internal organs.

Endocrinology - endocrine pathology of the thyroid, pancreas, adrenal glands, pituitary gland

Neurology - neurological symptomatology of pathology of internal organs.

Ophthalmology - the fundus of the eye in arterial hypertension; conjunctivitis, uveitis, iridocyclitis in rheumatic diseases.

Otorhinolaryngology - inflammatory diseases of the ear, throat, nose.

Psychiatry and Narcology - mental disorders in diseases of internal organs.

Infectious diseases - fever in infectious diseases, intestinal infections, acute hepatitis.

Dermatovenereology - skin lesions in the pathology of internal organs, sexually transmitted diseases.

Clinical Pharmacology - pharmacokinetics and pharmacodynamics of the main groups of drugs used in therapeutic practice.

Phthisiology - tuberculosis of the respiratory system, gastrointestinal tract and musculoskeletal system.

Public health and health care, health economics - knowledge: basic principles of management and organization of medical care to the population; organization of medical control over the state of health of the population, issues of examination of disability and medical and legal assistance to the population;

Skills: to plan, analyze and evaluate the quality of medical care, the state of health of the population and the influence of environmental and industrial factors on it; to participate in the organization and provision of medical and preventive and sanitary and anti-epidemic assistance to the population, taking into account its socio-professional and age-sex structure;

Skills: public health assessment; knowledge of the methodology for calculating indicators of medical statistics;

Epidemiology - Knowledge: epidemiological approach to the study of human diseases, types of epidemiological studies and their purpose; epidemic process and non-infectious epidemiology; etiology, pathogenesis and preventive measures for the most common diseases; modern classification of diseases;

Skills: to carry out preventive and anti-epidemic measures;

Skills: knowledge of the methodology for calculating epidemiological indicators;

Medical rehabilitation: know the principles of clinical examination of the population, rehabilitation of patients; skills: to assess social factors affecting the patient's physical health; rehabilitation of patients with a therapeutic and surgical profile;



Non-Commercial Educational Institution  
 Educational-Scientific-Production Complex  
 «International University of Kyrgyzstan»

Quality Management System  
 Academic and methodological complex of the discipline  
 «Polyclinic therapy»  
 MEP of «General Medicine» ISM IUK

Clinical pharmacology - Knowledge: clinical and pharmacological characteristics of the main groups of drugs and the rational choice of specific drugs in the treatment of major pathological syndromes of diseases and emergency conditions in patients;

Skills: to substantiate pharmacotherapy in a particular patient with major pathological syndromes and emergency conditions; determine the route of administration, regimen and dose of drugs, assess the effectiveness and safety of the treatment; apply various methods of drug administration;

Skills: write a prescription for a drug;

General surgery, radiation diagnostics - Knowledge: clinical manifestations of the main surgical syndromes of purulent-inflammatory processes of the skin, bones and soft tissues; diagnostic criteria and methods of their surgical treatment, indications for use;

Skills: to conduct a primary examination of the skin, musculoskeletal system, joints; to make a preliminary diagnosis - to synthesize information about the patient in order to determine the pathology and the reasons that cause it; outline the volume of additional studies in accordance with the prognosis of the disease, to clarify the diagnosis and obtain a reliable result; determine the presence of a fracture and dislocation on the roentgenogram; select an individual type of care for the patient's treatment in accordance with the situation: primary care, ambulance, hospitalization; identify life-threatening bleeding disorders.

Skills: basic medical diagnostic and therapeutic measures to provide first aid for urgent and life-threatening conditions; an algorithm for a detailed clinical diagnosis; descriptions of skeletal radiographs; interpretation of the results of laboratory, instrumental diagnostic methods;

**Postrequisites:** gastroenterology, nephrology, geriatrics, rheumatology, cardiology, general surgery, pediatrics, gynecology, urology, oncology, resuscitation, therapy, infectious diseases, epidemiology, neurology.

**Competencies of students formed as a result of mastering the discipline, the planned results of mastering the academic discipline.** A graduate in the specialty "General Medicine" with the assignment of the qualification of a specialist "General Physician" in accordance with the State Educational Standard of Higher Professional Education and General Education and the tasks of professional activity, must have the following professional competencies:

Code	Competency Content
PC-3	is able and ready to analyze socially significant problems and processes, to use the methods of economic relations in the health care system;
PC-22	is able and ready to apply rehabilitation measures (medical, social



Non-Commercial Educational Institution  
Educational-Scientific-Production Complex  
«International University of Kyrgyzstan»

Quality Management System  
Academic and methodological complex of the discipline  
«Polyclinic therapy»  
MEP of «General Medicine» ISM IUK

and professional) among the population with the most common pathological conditions and injuries of the body;

Able and ready to apply skills:

1. Station Therapy-1

- SAM 3G® Auscultation Dummy

- Blood pressure monitor

- Luxury arm trainer for blood pressure measurement with acoustic system 220 V / 230 V.

2. Station Therapy-2

- KERi™ Auscultation Patient Care Trainer

The planned results of mastering the academic discipline "Polyclinic therapy" are determined by the competencies acquired by the student, ie. his ability to apply knowledge, skills and personal qualities in accordance with the goals of the educational program and the tasks of professional activity:

PC-2 - is able and ready to conduct and interpret a survey, physical examination, clinical examination, the results of modern laboratory and instrumental studies, to write a medical record of an outpatient and inpatient adult and child.

PC-3 - is able to conduct pathophysiological analysis of clinical syndromes, substantiate pathogenetically justified methods (principles) of diagnosis, treatment, rehabilitation and prevention among adults and children, taking into account their age and sex groups;

**Diagnostic activity:**

PC-11 - capable and ready to make a diagnosis based on the results of biochemical and clinical studies, taking into account the course of pathology in organs, systems and the body as a whole;

PC-12 - is able to analyze the patterns of functioning of individual organs and systems, use knowledge of anatomical and physiological characteristics, the main methods of clinical and laboratory examination of the adult population and children, for the timely diagnosis of diseases and pathological processes;

PC-13 - is able to identify in patients the main pathological symptoms and syndromes of diseases, using knowledge of the basics of biomedical and clinical disciplines, taking into account the course of pathology in organs, systems of the body as a whole, to analyze the patterns of functioning of organs and systems in various diseases and pathological processes, use the algorithm for making a diagnosis (main, concomitant, complications), taking into account the ICD-10, carry out the main diagnostic measures to identify urgent and life-threatening conditions;

**Treating activity:**



Non-Commercial Educational Institution  
Educational-Scientific-Production Complex  
«International University of Kyrgyzstan»

Quality Management System  
Academic and methodological complex of the discipline  
«Polyclinic therapy»  
MEP of «General Medicine» ISM IUK

PC-14 - is able to perform basic therapeutic measures for the most common diseases and conditions in adults and children;

PC-15 - is able to prescribe adequate treatment to patients in accordance with the diagnosis;

PC-16 - is able to provide the adult population and children with first medical aid in the event of urgent and life-threatening conditions, to send patients to hospitalization in a planned and emergency manner.

Rehabilitation activities

PC-19 - capable and ready to apply rehabilitation measures (medical, social and professional) among adults and children.

*After mastering this discipline, the student:*

***Will know:***

- *anatomical and physiological, age-sex and individual characteristics of the structure and development of a healthy and sick person;*
- *the basics of organizing outpatient and inpatient care for children, adolescents and adults, modern organizational forms of work and diagnostic capabilities of outpatient services;*
- *concepts of etiology, pathogenesis, morphogenesis, pathomorphosis of the disease in an adult and adolescent, the principles of classification of diseases; basic concepts of general nosology;*
- *etiology, pathogenesis, diagnosis, treatment and prevention of the most common diseases among the population;*
- *the main patterns of development and life of the body of an adult, child and adolescent based on the structural organization of cells, tissues and organs;*

***Will be able to:***

- *to participate in the organization and provision of treatment-and-prophylactic and sanitary-anti-epidemic, preventive and rehabilitation assistance to adolescents and the adult population, taking into account the socio-professional and age-sex structure;*
- *collect anamnesis; interview the patient and his relatives, conduct a physical examination of the patient of various ages (examination, palpation, auscultation, blood pressure measurement, determination of pulse characteristics, respiratory rate, etc.);*
- *to interpret the results of the most common methods of laboratory and functional diagnostics, thermometry to identify pathological processes in human organs and systems;*
- *to interpret the results of the examination, to make the patient a preliminary diagnosis, to outline the amount of additional studies to clarify the diagnosis; formulate a clinical diagnosis;*



Non-Commercial Educational Institution  
Educational-Scientific-Production Complex  
«International University of Kyrgyzstan»

Quality Management System  
Academic and methodological complex of the discipline  
«Polyclinic therapy»  
MEP of «General Medicine» ISM IUK

- to substantiate the nature of the pathological process and its clinical manifestations, the principles of pathogenetic therapy of the most common diseases;

**Will own:**

- the methods of maintaining medical accounting and reporting documentation in medical and preventive institutions of the health care system;
- methods of general clinical examination of patients;
- interpretation of the results of laboratory, instrumental diagnostic methods in patients;

**Will analyze:**

- the quality of medical care, the state of health of the population, the influence of lifestyle factors, the environment and the organization of medical care on it;
- issues of general pathology and modern theoretical concepts and directions in medicine, to establish the fact of temporary disability, to determine the nature of the disability.
- medical reporting documentation;

**Will understand:**

- algorithms for making a preliminary diagnosis with the subsequent referral of the patient to the appropriate specialist doctor, algorithms for setting a detailed clinical diagnosis.

**Will be able to carry out:**

- organization of medical control over the state of health of the population, examination of disability and medical and legal assistance to the population;
- organization of medical (outpatient and inpatient) care for various groups of the population, organization of medical support for those involved in physical culture;

## 1.2. Recommended educational technologies

For the development of students of the educational discipline "polyclinic therapy", the acquisition of knowledge and the formation of professional competencies, the following educational technologies are used:

- lecture-electronic presentation,
- problem lecture,
- lesson-conference,
- training,
- brainstorm,
- small group method,
- participation in scientific and practical conferences, congresses, symposia,
- research work of a student,
- written analytical work
- preparation and defense of abstracts,





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Educational-Scientific-Production Complex  
«International University of Kyrgyzstan»

Quality Management System  
Academic and methodological complex of the discipline  
«Polyclinic therapy»  
MEP of «General Medicine» ISM IUK

- distance educational technologies.

### 1.3. The scope of the discipline and types of educational work

The data of the section are presented in tabular form in accordance with the curriculum. At the same time, the volume of classroom studies (lectures, seminars, practical and laboratory classes) and independent work of the student (general and by semester in which the discipline is studied), as well as the types of final control of progress are indicated.

Full-time form of education

Academic plan for 2021	11,12 sem.	Total	
		in hours	in hours
<b>Total labor intensity</b>	<b>288</b>	<b>288</b>	<b>8</b>
<b>Classroom works</b>	144	144	4
Lectures	36	36	1
Practical classes	108	108	3
Independent work	72	72	2
SIWT	72	72	2
<b>Type of final control</b>	test		

### 1.4. Discipline structure

Course	Semester	Number of Credits	Quantity of Academic hours		Independent work		Total hours
			Lecture	Practical classes	SIW	SIWT	
6	11,12	8	36	108	72	72	288
<b>TOTAL</b>			<b>36</b>	<b>108</b>	<b>12</b>	<b>12</b>	<b>288</b>

#### 1.4.1. Thematic plan for the study of the discipline (by semester) -

**Thematic plan for studying the discipline and competency matrix** (labor intensity is indicated in academic hours).

№	Name of sections and topics of disciplines (lectures and practical classes)	Quantity of academic hours	Individual Formed Compete Used	Form of control	Name of sections and topics of	Quantity of



Non-Commercial Educational Institution  
Educational-Scientific-Production Complex  
«International University of Kyrgyzstan»

Quality Management System  
Academic and methodological complex of the discipline  
«Polyclinic therapy»  
MEP of «General Medicine» ISM IUUK

		Lectures	Practical classes	Total classroom hours	SIWT					disciplines (lectures and practical classes)	academic hours
	Модуль 1										
<b>I</b>	<b>Section 1. General questions in polyclinic therapy</b>									Video lectures, brainstorming	Testing, case studies, assessing the development of practical skills (abilities)
<i>I</i>	<i>Polyclinic therapy as a discipline</i>	2	1	2		4	2	2	<i>PC-2, PC-3, PC11 PC-12, PC-13, PC-14, PC-15, PC-16, PC-19</i>	Video lectures, brainstorming	Testing, case studies, assessing the development of practical skills (abilities)
<b>II</b>	<b>Section 2. Pulmonology</b>										
<i>I.</i>	<i>Topic 1. ARVI, influenza on an outpatient basis.</i>	2		2		4	2	2	<i>PC-2, PC-3, PC-11 PC-12, PC-13, PC-14,</i>	Video lectures, brainstorming	Testing, case studies, assessing the development of practical skills (abilities)



Non-Commercial Educational Institution  
Educational-Scientific-Production Complex  
«International University of Kyrgyzstan»

Quality Management System  
Academic and methodological complex of the discipline  
«Polyclinic therapy»  
MEP of «General Medicine» ISM IUUK

									PC-15, PC-16, PC-19		
2.	<i>Topic 2. Outpatient management of patients with COPD and bronchial asthma, HPS.</i>		2		2	2	2		PC-2, PC-3, PC-11 PC-12, PC-13, PC-14, PC-15, PC-16, PC-19	Video lectures, brainstorming	Testing, case studies, assessing the development of practical skills (abilities)
3.	<i>Topic 3. Pneumonia, pleurisy on an outpatient basis</i>	2		2		4	2	2	PC-2, PC-3, PC-11 PC-12, PC-13, PC-14, PC-15, PC-16, PC-19	Video lectures, brainstorming	Testing, case studies, assessing the development of practical skills (abilities)
	<i>Topic 4. Differential diagnosis of infiltrative processes in the lungs at the outpatient stage.</i>	2		2		4	2	2	PC-2, PC-3, PC-11 PC-12, PC-13, PC-	Video lectures, brainstorming	Testing, case studies, assessing the development of practical



Non-Commercial Educational Institution  
Educational-Scientific-Production Complex  
«International University of Kyrgyzstan»

Quality Management System  
Academic and methodological complex of the discipline  
«Polyclinic therapy»  
MEP of «General Medicine» ISM IUK

									14, PC- 15, PC- 16, PC- 19		skills (abilities)
	<i>Topic 5. Acute respiratory failure in outpatient practice. Emergency conditions in pulmonology at the prehospital stage.</i>	2		2		4	2	2	PC-2, PC-3, PC-11 PC-12, PC-13, PC-14, PC-15, PC-16, PC-19	Video lectures, brainstorming	Testing, case studies, assessing the development of practical skills (abilities)
<i>II</i>	<i>Section 3. Syndrome of pain in the left side of the chest in outpatient practice</i>										
<i>I</i>	<i>Topic 1. CBS in an outpatient setting.</i>	2		2		4	2	2	PC-2, PC-3, PC-11 PC-12, PC-13, PC-14, PC-15, PC-16, PC-19	Video lectures, brainstorming	Testing, case studies, assessing the development of practical skills (abilities)
2	<i>Topic 2. Infectious myocarditis in outpatient practice.</i>	2		2		4	2	2	PC-2, PC-3, PC-	Video lectures,	Testing, case studies,



Non-Commercial Educational Institution  
Educational-Scientific-Production Complex  
«International University of Kyrgyzstan»

Quality Management System  
Academic and methodological complex of the discipline  
«Polyclinic therapy»  
MEP of «General Medicine» ISM IUK

									11 PC-12, PC-13, PC-14, PC-15, PC-16, PC-19	brainstorming	assessing the development of practical skills (abilities)
4	<i>Topic 3. Disorders of rhythm and conduction in outpatient practice.</i>	2		4		6	2	2	PC-2, PC-3, PC-11 PC-12, PC-13, PC-14, PC-15, PC-16, PC-19	Video lectures, brainstorming	Testing, case studies, assessing the development of practical skills (abilities)
5	<i>Topic 4: Dilated cardiomyopathy, hypertrophic cardiomyopathy in outpatient practice, myocardial dystrophy in the practice of a local therapist.</i>	2		4		6	2	2	PC-2, PC-3, PC-11 PC-12, PC-13, PC-14, PC-15, PC-16, PC-19	Video lectures, brainstorming	Testing, case studies, assessing the development of practical skills (abilities)
<i>I V</i>	<i>Section 4. Features of the course and</i>										



Non-Commercial Educational Institution  
Educational-Scientific-Production Complex  
«International University of Kyrgyzstan»

Quality Management System  
Academic and methodological complex of the discipline  
«Polyclinic therapy»  
MEP of «General Medicine» ISM IUUK

	<b><i>treatment of diseases with heart failure at the outpatient stage.</i></b>											
	<i>Topic 1. Differential diagnostic search for hypertension syndrome in an outpatient setting. Symptomatic hypertension. Possibilities of examination and management of patients in outpatient practice.</i>	2		4		6	2	2	PC-2, PC-3, PC-11, PC-12, PC-13, PC-14, PC-15, PC-16, PC-19	Video lectures, brainstorming	Testing, case studies, assessing the development of practical skills (abilities)	
	<i>Topic 2. Chronic heart failure in outpatient practice. Emergency conditions in cardiology at the prehospital stage.</i>	2		2		4	2	2	PC-2, PC-3, PC-11, PC-12, PC-13, PC-14, PC-15, PC-16, PC-19	Video lectures, brainstorming	Testing, case studies, assessing the development of practical skills (abilities)	
	<i>Topic 3. Rheumatic fever in outpatient practice. Management of patients with acquired heart defects.</i>	2		2		4	2	2	PC-2, PC-3, PC-11, PC-12, PC-13, PC-14, PC-15,	Video lectures, brainstorming	Testing, case studies, assessing the development of practical skills (abilities)	



Non-Commercial Educational Institution  
Educational-Scientific-Production Complex  
«International University of Kyrgyzstan»

Quality Management System  
Academic and methodological complex of the discipline  
«Polyclinic therapy»  
MEP of «General Medicine» ISM IUUK

									PC-16, PC-19		
	<i>Topic 4. Congenital malformations in adults in outpatient practice.</i>	2		4		6	2	2	PC-2, PC-3, PC-11 PC-12, PC-13, PC-14, PC-15, PC-16, PC-19	Video lectures, brainstorming	Testing, case studies, assessing the development of practical skills (abilities)
	<i>Topic 5. Infective endocarditis in outpatient practice. Gastroenterology.</i>			2		2	2	2	PC-2, PC-3, PC-11 PC-12, PC-13, PC-14, PC-15, PC-16, PC-19	Video lectures, brainstorming	Testing, case studies, assessing the development of practical skills (abilities)
V	<b>Section 5.</b>								,		
	<i>Topic 1. Chronic gastritis, peptic ulcer in outpatient practice</i>	2		2		4	2	2	PC-2, PC-3, PC-11 PC-12, PC-13, PC-14,	Video lectures, brainstorming	Testing, case studies, assessing the development of practical skills (abilities)



Non-Commercial Educational Institution  
Educational-Scientific-Production Complex  
«International University of Kyrgyzstan»

Quality Management System  
Academic and methodological complex of the discipline  
«Polyclinic therapy»  
MEP of «General Medicine» ISM IUK

									PC-15, PC-16, PC-19		
	<i>Topic 2: Biliary dyskinesia, chronic non-calculous cholecystitis, postcholecystectomy syndrome in outpatient practice.</i>	2		4		6	2	2	PC-2, PC-3, PC-11 PC-12, PC-13, PC-14, PC-15, PC-16, PC-19	Video lectures, brainstorming	Testing, case studies, assessing the development of practical skills (abilities)
	<i>Topic 3. Chronic pancreatitis in outpatient practice. Chronic hepatitis and cirrhosis of the liver in the practice of a local therapist.</i>	2		4		6	2	2	PC-2, PC-3, PC-11 PC-12, PC-13, PC-14, PC-15, PC-16, PC-19	Video lectures, brainstorming	Testing, case studies, assessing the development of practical skills (abilities)
	<i>Topic 4. Dysbacteriosis, inflammatory and functional bowel diseases in the practice of a local therapist. Rare forms of bowel disease. Bowel cancer predictors.</i>	2		4		6	2	2	PC-2, PC-3, PC-11 PC-12, PC-13, PC-	Video lectures, brainstorming	Testing, case studies, assessing the development of practical





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Educational-Scientific-Production Complex  
«International University of Kyrgyzstan»

Quality Management System  
Academic and methodological complex of the discipline  
«Polyclinic therapy»  
MEP of «General Medicine» ISM IUUK

									14, PC- 15, PC- 16, PC- 19		skills (abilities)
	<i>Topic 5: Emergency conditions in gastroenterology at the prehospital stage</i>	2		2		4	2	2	PC-2, PC-3, PC-11 PC-12, PC-13, PC-14, PC-15, PC-16, PC-19	Video lectures, brainstorming	Testing, case studies, assessing the development of practical skills (abilities)
<b>V</b>	<b>Section 6</b>										
<b>I</b>	<b>Rheumatology. Nephrology</b>										
	<i>Topic 1: Rheumatoid arthritis, osteoarthritis, gout in outpatient practice</i>			2		2	2	2	PC-2, PC-3, PC-11 PC-12, PC-13, PC-14, PC-15, PC-16, PC-19	Video lectures, brainstorming	Testing, case studies, assessing the development of practical skills (abilities)
	<i>Topic 3. Management of patients with diffuse connective tissue diseases in outpatient practice.</i>	2		2		4	2	2	PC-2, PC-3, PC-11 PC-	Video lectures, brainstorming	Testing, case studies, assessing the



Non-Commercial Educational Institution  
Educational-Scientific-Production Complex  
«International University of Kyrgyzstan»

Quality Management System  
Academic and methodological complex of the discipline  
«Polyclinic therapy»  
MEP of «General Medicine» ISM IUUK

									12, PC-13, PC-14, PC-15, PC-16, PC-19		developm ent of practical skills (abilities)
	<i>Topic 4. Chronic glomerulonephritis. Chronic pyelonephritis. Urinary syndrome in outpatient practice.</i>	2		4		6	2	2	PC-2, PC-3, PC-11 PC-12, PC-13, PC-14, PC-15, PC-16, PC-19	Video lectures, brainstorming	Testing, case studies, assessing the development of practical skills (abilities)
	<i>Topic 5. CKD. Vascular and metabolic nephropathy in outpatient practice.</i>	2		2		4	2	2	PC-2, PC-3, PC-11 PC-12, PC-13, PC-14, PC-15, PC-16, PC-19	Video lectures, brainstorming	Testing, case studies, assessing the development of practical skills (abilities)
	<i>Topic 6. Acute renal failure in outpatient practice. Emergencies</i>	2		2		4	2	2	PC-2, PC-3, PC-11	Video lectures, brainstorming	Testing, case studies, assessing



Non-Commercial Educational Institution  
Educational-Scientific-Production Complex  
«International University of Kyrgyzstan»

Quality Management System  
Academic and methodological complex of the discipline  
«Polyclinic therapy»  
MEP of «General Medicine» ISM IUK

	<i>in nephrology at the prehospital stage.</i>								PC-12, PC-13, PC-14, PC-15, PC-16, PC-19		the development of practical skills (abilities)
V II	<b>Section 7. Hematology. Endocrinology.</b>										
	<i>Topic 1. Diabetes mellitus, management of patients on an outpatient basis. Metabolic syndrome.</i>	2		2		4	2	2	PC-2, PC-3, PC-11 PC-12, PC-13, PC-14, PC-15, PC-16, PC-19	Video lectures, brainstorming	Testing, case studies, assessing the development of practical skills (abilities)
	<i>Topic 2. Diseases of the thyroid gland. Iodine deficiency syndrome in outpatient practice</i>	2		2		4	2	2	PC-2, PC-3, PC-11 PC-12, PC-13, PC-14, PC-15, PC-16, PC-19	Video lectures, brainstorming	Testing, case studies, assessing the development of practical skills (abilities)



Non-Commercial Educational Institution  
Educational-Scientific-Production Complex  
«International University of Kyrgyzstan»

Quality Management System  
Academic and methodological complex of the discipline  
«Polyclinic therapy»  
MEP of «General Medicine» ISM IUUK

	<i>Topic 3. Emergency conditions in diabetology in a polyclinic.</i>	2		2		4	2	2	PC-2, PC-3, PC-11 PC-12, PC-13, PC-14, PC-15, PC-16, PC-19	Video lectures, brainstorming	Testing, case studies, assessing the development of practical skills (abilities)
	<i>Topic 4. Anemic syndrome, iron, B12, folate deficiency anemia in outpatient practice. Hemolytic, hypo- and aplastic anemias</i>	2		4		6	2	2	PC-2, PC-3, PC-11 PC-12, PC-13, PC-14, PC-15, PC-16, PC-19	Video lectures, brainstorming	Testing, case studies, assessing the development of practical skills (abilities)
	<i>Topic 5. Hemorrhagic diathesis</i>	2		2		4	2	2	PC-2, PC-3, PC-11 PC-12, PC-13, PC-14, PC-15, PC-16,	Video lectures, brainstorming	Testing, case studies, assessing the development of practical skills (abilities)



Non-Commercial Educational Institution  
Educational-Scientific-Production Complex  
«International University of Kyrgyzstan»

Quality Management System  
Academic and methodological complex of the discipline  
«Polyclinic therapy»  
MEP of «General Medicine» ISM IUUK

									PC-19		
	<i>Topic 6. Multiple myeloma: clinical syndromes. Diagnostic criteria, principles of outpatient treatment.</i>		2		2	2	2		PC-2, PC-3, PC-11, PC-12, PC-13, PC-14, PC-15, PC-16, PC-19	Video lectures, brainstorming	Testing, case studies, assessing the development of practical skills (abilities)
	<b>Total for the semester</b>	<b>288</b>									<b>Control work, test</b>

#### 1.4.2. Organization of students' independent work.

№	The topic of the student's independent work:	Task for the IWS	Recommended literature	Timing surrender (week number)
1	Diet therapy for respiratory and circulatory diseases. Diet therapy for diseases of the digestive tract and urinary system.	Presentation, abstract	1. International ERS/ATS Guidelines on Definition, Evaluation and Treatment of Severe Asthma// EurRespir J 2014 43:343-373; published ahead of print 2013 2. Global Strategy for Diagnosis, Management, and Prevention of COPD// Global Initiative for Chronic Obstructive Lung Disease (GOLD) 2011 Available from: <a href="http://www.goldcopd.org">www.goldcopd.org</a>	1
2	Primary and secondary prevention of COPD. "Asthma clubs"	Presentation, abstract	1. GINA Report, Global Strategy for Asthma	2



Non-Commercial Educational Institution  
Educational-Scientific-Production Complex  
«International University of Kyrgyzstan»

Quality Management System  
Academic and methodological complex of the discipline  
«Polyclinic therapy»  
MEP of «General Medicine» ISM IUK

	controlled management of bronchial asthma. Analysis of outpatient records of patients with COB and BA		Management and Prevention: Updated 2012// Global Initiative for Asthma (GINA) 2012. Available from: <a href="http://www.ginasthma.org">www.ginasthma.org</a> 2. Аллергический ринит и его влияние на астму (ARIA) 2012, 2014, доступно на: <a href="http://www.aria.org/">http://www.aria.org/</a> .	
3	Atypical pneumonia in outpatient practice. Features of the course and management of patients with pneumonia in old and senile age.	Presentation, abstract	1. Guidelines for the diagnosis and treatment of pulmonary hypertension// EurRespir J 2009; 34: 1219-1263 2. Recommendations for the management of patients with obstructive sleep apnoea and hypertension//EurRespir J 2013; 41: 523-538	3
4	Acute respiratory failure in outpatient practice. TELA in the clinic. Pulmonary hemorrhage, family doctor's tactics	Presentation, abstract	1. Global Strategy for Diagnosis, Management, and Prevention of COPD// Global Initiative for Chronic Obstructive Lung Disease (GOLD) 2011 Available from: <a href="http://www.goldcopd.org">www.goldcopd.org</a> 2. Guidelines for the diagnosis and treatment of pulmonary hypertension// EurRespir J 2009; 34: 1219-1263 3. Recommendations for the management of patients with obstructive sleep apnoea and hypertension//EurRespir J 2013; 41: 523-538	4
5	Differential diagnosis of angina pectoris at the outpatient stage. Outpatient management of AMI patients. Diagnostics and provision of first emergency and medical	Presentation, abstract	American Heart Assosation (AHA) – <a href="http://www.heart.org">www.heart.org</a> European Society of Cardiology - ESC <a href="http://www.escardio.org">www.escardio.org</a>	5



Non-Commercial Educational Institution  
Educational-Scientific-Production Complex  
«International University of Kyrgyzstan»

Quality Management System  
Academic and methodological complex of the discipline  
«Polyclinic therapy»  
MEP of «General Medicine» ISM IUK

	aid for complications of AMI			
6	<p>Possibilities of the outpatient service in the early diagnosis of arrhythmias.</p> <p>Paroxysmal forms of rhythm disturbances in outpatient practice:</p> <ul style="list-style-type: none"> <li>- atrial fibrillation and flutter;</li> <li>- paroxysmal tachycardia;</li> </ul> <p>Fibrillation and flutter of the ventricles;</p> <ul style="list-style-type: none"> <li>- blockade, MES syndrome</li> </ul>	Presentation, abstract	<ol style="list-style-type: none"> <li>1. Arrhythmogenic right ventricular dysplasia/cardiomyopathy diagnostic task force criteria: impact of new task force criteria / M.G. Cox, J.J. van der Smagt, M. Noorman et al. // Circ. Arrhythm. Electrophysiol. – 2010. – Vol. 3, N 2. – P. 126–133.</li> <li>2. Arrhythmogenicity of IgG and anti-52-kD SSA/Ro affinity-purified antibodies from mothers of children with congenital heart block / M. Boutjdir, L. Chen, Z.H. Zhang et al. // Circ. Res. – 1997. – Vol. 80, N 3. – P. 354–362.</li> </ol>	6
7	<p>Hypertensive crises at the prehospital stage. AH in pregnant women, pregnancy management tactics.</p>	Presentation, abstract	<ol style="list-style-type: none"> <li>1. Adams H.P., Adams R.J., Brott T. et al. Guidelines for the early management of patients with ischemic stroke. A scientific statement from the Stroke Council of the American Stroke Association // Stroke. – 2003. – Vol. 34. – P. 1056-1083.</li> <li>2. Adams H.P., del Zoppo G., Alberts M.J. et al. Guidelines for the early management of adults with ischemic stroke. A guideline from the American Heart Association / American Stroke Association Stroke Council // Stroke. – 2007. – Vol. 38. – P. 1655-1711.</li> </ol>	7
8	<p>Self-control in CHF. Patient education. An attack of cardiac asthma and pulmonary edema in outpatient practice.</p>	Presentation, abstract	<p><a href="http://www.escardio.org">www.escardio.org</a></p> <p><a href="http://www.acc.org">www.acc.org</a></p>	8



Non-Commercial Educational Institution  
 Educational-Scientific-Production Complex  
 «International University of Kyrgyzstan»

Quality Management System  
 Academic and methodological complex of the discipline  
 «Polyclinic therapy»  
 MEP of «General Medicine» ISM IUK

9	Primary prevention of myocarditis. Primary and secondary prevention of cardiomyopathies. Prevention of CHD	Presentation, abstract	. Adams H.P., del Zoppo G., Alberts M.J. et Guidelines for the early management of adults with ischemic stroke. A guideline from the American Heart Association / American Stroke Association Stroke Council // Stroke. – 2007.- Vol. 38. – P. 1655-1711.	9
10	Inflammatory and functional bowel diseases in the practice of a family doctor. Diseases: NUC, irritable bowel syndrome, rare forms.	Presentation, abstract	– Simren M, et al. Intestinal microbiota in functional bowel disorders: a Rome foundation report. Gut. 2013; 62:159–176. –Bhattarai Y, Muniz Pedrogo DA, Kashyap PC. Irritable bowel syndrome: a gut microbiota-related disorder? Am. J. Physiol. Gastrointest. Liver Physiol. 2017;312: –Lewin KJ, Riddell RH, Weinstein WM. Gastrointestinal pathology and its clinical implications. New York: Igaku-Shoin, 1992. –Tanaka M, Riddell RH, Saito H, et al. Morphologic criteria applicable to biopsy specimens for effective distinction of inflammatory bowel disease from other forms of colitis and of Crohn’s disease from ulcerative colitis. Scand J Gastroenterol 1999;34:55–67.	10
11	The importance of alcoholism in the development of pancreatitis. Dysbacteriosis and its role in the development of chronic enterocolitis.	Presentation, abstract	– "Chronic pancreatitis: MedlinePlus Medical Encyclopedia". www.nlm.nih.gov. Retrieved 2015-11-29. – Brock C, Nielsen LM, Drewes AM, Lelic D (14 November 2013). "Pathophysiology of chronic pancreatitis". World Journal of	11





Non-Commercial Educational Institution  
 Educational-Scientific-Production Complex  
 «International University of Kyrgyzstan»

Quality Management System  
 Academic and methodological complex of the discipline  
 «Polyclinic therapy»  
 MEP of «General Medicine» ISM IUUK

			<p>Gastroenterology. 19 (42): 7231–7240.</p> <p>– "Acute Pancreatitis. Pancreatitis Symptoms and Information   Patient". Patient. Retrieved 2015-11-29.</p> <p>–American Gastroenterological Association Medical Position Statement (1998). "American Gastroenterological Association Medical Position Statement: treatment of pain in chronic pancreatitis". Gastroenterology.</p> <p>–American College of Gastroenterology (ACG) <a href="http://www.gi.org/">http://www.gi.org/</a></p> <p>–American Autoimmune Related Diseases Association (AARDA) <a href="http://www.aarda.org/">http://www.aarda.org/</a></p> <p>–American Liver Foundation <a href="http://www.liverfoundation.org/">http://www.liverfoundation.org/</a></p> <p>–National Institute of Diabetes &amp; Digestive &amp; Kidney Disorders <a href="http://www.niddk.nih.gov/">http://www.niddk.nih.gov/</a></p>	
12	The importance of streptococcal infection in the development of ARF and prevention. Fundamentals of auscultation of the heart for defects.	Presentation, abstract	<p>–Gewitz MH, Baltimore RS, Tani LY, et al. Revision of the Jones criteria for the diagnosis of acute rheumatic fever in the era of Doppler echocardiography. Circulation 2015;131:1806.</p> <p>–He VYF, Condon JR, Ralph AP, et al. Long-term outcomes from acute rheumatic fever and rheumatic heart disease: a data-linkage and survival analysis approach. Circulation 2016;134:222.</p>	12



Non-Commercial Educational Institution  
Educational-Scientific-Production Complex  
«International University of Kyrgyzstan»

Quality Management System  
Academic and methodological complex of the discipline  
«Polyclinic therapy»  
MEP of «General Medicine» ISM IUUK

			–Webb RH, Grant C, Harnden A. Acute rheumatic fever. <i>BMJ</i> 2015;351.	
13	Articular syndrome in a polyclinic. Indications and monitoring of treatment with immunosuppressants and biological agents in the clinic.	Presentation, abstract	Hunter T Urowitz MB Gorden DA Smythe HA Ogryzlo M Azathioprine in rheumatoid arthritis. <i>Arthritis Rheum.</i> 1975; 18: 15-20 –Gabriel SE Luthra HS Rheumatoid arthritis: can the long-term outcome be altered? –Furst DE Kremer JM Methotrexate in rheumatoid arthritis. <i>Arthritis Rheum.</i> 1988; 31: 305-314 –Hanly JG Hassan J Moriarty M Barry C Molony J Casey E Whelan A Feighery C Bresnihan B Lymphoid irradiation in intractable rheumatoid arthritis: a double-blind, randomized study comparing 750-rad treatment with 2,000-rad treatment. <i>Arthritis Rheum.</i> 1986; 29: 16-25	13
14	Urinary syndrome in the practice of a local therapist (acute glomerulonephritis) in outpatient practice Chronic kidney disease in outpatient practice	Presentation, abstract	– Internal diseases an introductory course. - Vasilenko V., Grebenev A. - M.: Mir . Publishers, 1990 –Propedeutics to internal medicine. Part 1.-Vinnytsya: NOVA KNYHA, 2006.- –Propedeutics to internal medicine. Part 2.-Vinnytsya: NOVA KNYHA, 2007. –Introduction to the course of internal diseases. Book 1. Diagnosis: [Textbook/Zh.D. Semidotskaya, O.S. Bilchenko, et al.]-Kharkiv: KSMU, 2005. -	14



Non-Commercial Educational Institution  
Educational-Scientific-Production Complex  
«International University of Kyrgyzstan»

Quality Management System  
Academic and methodological complex of the discipline  
«Polyclinic therapy»  
MEP of «General Medicine» ISM IUК

			<p>–Michael Swash Hutchison’s clinical methods / XIX edition. ELBS, 1989</p> <p>–Mark H., Beers M.D., Robert Berkow The Merck Manual of diagnosis and therapy / XVII edition.- Published by Merck research laboratories, 1999.</p> <p>–Harrison’s principles off internal medicine / Fauci, Braunwald, Isselbacher and al.-XIV edition. - Vol. 1 and 2. - International edition, 1998.</p>	
15	Thyrotoxic and Addison crises, hypothyroid coma in the practice of a family doctor. Anemic syndrome in the practice of a family doctor.	Presentation, abstract	<p>– Thyroid disease at Curlie</p> <p>–Medline Plus Medical Encyclopedia entry for Thyroid Disease</p> <p>–National Institutes of Health Differential Microbial Pattern Description in Subjects with Autoimmune-Based Thyroid Diseases: A Pilot Study.</p> <p>–Cornejo-Pareja I, Ruiz-Limón P, Gómez-Pérez AM, Molina-Vega M, Moreno-Indias I, Tinahones FJ.</p>	15

### 1.4.3. Control questions for the course:

#### XI semester

1. Polyclinic therapy as a discipline.
2. Dispanserization - determination. Groups of prophylactic patients. Criteria for the effectiveness of clinical examination.
3. Disability - Definition. Disability groups.
4. Examination of working capacity. Classification of types of labor. Types of disability.
5. Medical and Consulting Commission (MCC). Structure. The tasks of the MCC.
6. Medical and social expertise (MSE). Structure. Tasks of medical and social expertise.
7. Prevention - definition, classification, goals.
8. The value of medical nutrition in diseases of internal organs.



Non-Commercial Educational Institution  
Educational-Scientific-Production Complex  
«International University of Kyrgyzstan»

Quality Management System  
Academic and methodological complex of the discipline  
«Polyclinic therapy»  
MEP of «General Medicine» ISM IUK

9. Principles of management of elderly and senile patients on an outpatient basis with internal diseases organs.
10. Polyclinic documentation. Registration of medical records.
11. Outpatient management of patients with acute viral infections of the upper respiratory tract. Examination of temporary disability (TD). Criteria for recovery and restoration of working capacity.
12. Treatment at the outpatient stage of patients with acute viral infections of the upper respiratory tract. Indications for hospitalization. Primary prevention, management tactics, the importance of vaccination.
13. Outpatient management of patients with community-acquired pneumonia. The principle of choosing antibiotic therapy, its assessment efficiency. Non-drug treatments. Prevention.
14. Outpatient management of patients with community-acquired pneumonia. Temporary disability (TD), its optimal timing. Factors affecting her duration. Criteria for recovery and restoration of working capacity. Prevention and medical examination.
15. Outpatient management of patients with bronchial asthma. Clinical examination. Secondary prevention. Indications for spa treatment.
16. Bronchial asthma. Examination in a polyclinic. Treatment in the interictal period. Stopping an attack in conditions of the clinic.
17. Outpatient management of patients with chronic obstructive pulmonary disease. Diagnostic criteria. Treatment. Timing TD. Secondary prevention. Clinical examination.
18. Early diagnosis, first aid in the territorial area: pulmonary hemorrhage, acute respiratory failure.
19. Acute viral infections of the upper respiratory tract. Definition, etiology, classification. Distinctive features of clinical manifestations of influenza and other respiratory infections.
20. Community-acquired pneumonia. Early symptoms of pneumonia. Clinical and laboratory-instrumental methods diagnostics at the outpatient stage.
21. Chronic obstructive pulmonary disease, etiology, risk factors. Diagnostic criteria. Management of patients with COPD in conditions of the clinic.
22. Outpatient management of patients with chronic cor pulmonale. Diagnostic criteria. Treatment of chronic pulmonary heart at the outpatient stage. Indications for hospitalization.
23. Pulmonary embolism, etiology, risk factors. Clinic, diagnostics and emergency care at prehospital stage.
24. Different types of pulmonary insufficiency. Acute and chronic pulmonary impairment, diagnostic features, principles of treatment for outpatient stage. Indications for hospitalization.



Non-Commercial Educational Institution  
Educational-Scientific-Production Complex  
«International University of Kyrgyzstan»

Quality Management System  
Academic and methodological complex of the discipline  
«Polyclinic therapy»  
MEP of «General Medicine» ISM IUK

25. Chronic obstructive bronchitis: etiology, risk factors. Classification. Diagnostic criteria. Treatment in conditions of the clinic. Indications for hospitalization.
26. Outpatient management of patients with pleurisy. Diagnostic criteria. Primary and secondary prevention. Indications to hospitalization.
27. MSE of patients with pleurisy. Clinical examination.
28. Coronary heart disease (CHD). Definition. Relevance of the problem, social significance. Primary and secondary prevention.
29. Risk factors for CHD, their significance, WHO classification. Diagnostic criteria for stable angina pectoris and possibilities verification in the clinic. Treatment in a polyclinic. Indications for surgical treatment.
30. CHD. Stable exertional angina, classification. Criteria for the diagnosis of angina pectoris. Outpatient management patients with stable exertional angina. The role of monitoring risk factors for CHD. Indications for hospitalization.
31. Unstable angina pectoris, classification, diagnostic criteria. The tactics of a polyclinic doctor in identifying a patient with suspected ACS on an outpatient basis.
32. CHD. Acute myocardial infarction: definition, diagnostic criteria. Tactics of a polyclinic general practitioner in case of suspected AMI.
33. Provision of emergency care for AMI at the prehospital stage in a polyclinic. Possibilities of diagnosing myocardial infarction in a polyclinic. Diagnostic criteria. Principles of outpatient management of AMI patients. Types of rehabilitation: medical, physical, psychological, social, labor. Medical and social expertise.
34. Hypertension. Definition, risk factors, classification. Blood pressure measurement technique. Clinic. Possibilities of examination in a polyclinic. Non-drug and medication methods of treatment.
35. The role of early detection of hypertensive patients. Diagnostic criteria. Outpatient management of patients with essential hypertension. Indications for hospitalization. Terms of TD. Clinical examination.
36. Symptomatic arterial hypertension (SAH). WHO questionnaire for the identification of SAH. Classification. Significance of a 2-stage scheme for examining a patient with hypertension. Tactics of a general practitioner of a polyclinic in establishing a diagnosis.
37. Nephrogenic arterial hypertension, classification, diagnostic criteria and treatment tactics. Indications for hospitalization. Clinical examination.
38. Pheochromocytoma. Diagnostic criteria. Importance of topical diagnosis. Treatment tactics. Labor forecast. Contraindicated types and working conditions.
39. Primary hyperaldosteronism. Diagnostic criteria. Treatment tactics. Clinical examination. MSEC.



Non-Commercial Educational Institution  
Educational-Scientific-Production Complex  
«International University of Kyrgyzstan»

Quality Management System  
Academic and methodological complex of the discipline  
«Polyclinic therapy»  
MEP of «General Medicine» ISM IUUK

40. Coarctation of the aorta. Definition. Diagnostic criteria. Management and treatment tactics. Clinical examination.
41. Renal hypertension. Diagnostic criteria. Methods of instrumental diagnostics at the outpatient stage. The importance of early diagnosis and treatment principles. Clinical examination.
42. Dilated cardiomyopathy. Clinical and diagnostic criteria. Features of management of patients with DCM in a polyclinic. Treatment principles. Indications for hospitalization.
43. Hypertrophic cardiomyopathy. Clinic, diagnostics on an outpatient basis. Treatment principles. Indications for hospitalization.
44. Cardiomyopathy: concept, classification. Principles of management of cardiomyopathies in a polyclinic. Indications for hospitalization.
45. Chronic heart failure: definition. Diagnostic criteria. Treatment principles. The role of patient education: keeping a self-monitoring diary. Prevention. Examination of the ability to work.
46. Chronic heart failure: clinical and objective symptoms of right ventricular heart failure. Diagnostics. Treatment principles. The role of patient education: keeping a self-monitoring diary. Prevention. Clinical examination. Labor forecast.
47. Outpatient management of patients with chronic heart failure. Clinical symptoms. Indications for hospitalization. Terms of VUT, depending on the FC. Diagnostic capabilities on an outpatient basis. Treatment principles.
48. Arrhythmias due to impaired excitability. Classification. Clinic, diagnostic methods in the clinic. Indications for hospitalization.
49. Extrasystole, definition. Classification. Diagnostic criteria. Features of medical tactics, indications for the appointment of antiarrhythmic drugs. Indications for hospitalization.
50. Atrial fibrillation and flutter. Definition. Clinical manifestations, ECG signs. Management of a patient with a constant form of atrial fibrillation. Indications for hospitalization. Labor expertise and forecast.
51. Ventricular flutter and fibrillation. Definition. Clinic, ECG signs. Polyclinic doctor's tactics for ventricular fibrillation.
52. Asystole. Clinic and ECG signs. Polyclinic doctor's tactics for asystole.
53. Arrhythmias due to conduction disturbances. Classification. Examination and treatment tactics. Indications for hospitalization with bradycardia.
54. Tactics of a polyclinic doctor in the event of sudden death.
55. Infectious myocarditis. Etiology. Classification. Clinical manifestations. Possibilities of diagnostics in the clinic. Lead tactics.
56. Infectious myocarditis. Clinic, diagnosis and treatment. Terms of TD. Clinical examination. Labor expertise. Forecast.



Non-Commercial Educational Institution  
Educational-Scientific-Production Complex  
«International University of Kyrgyzstan»

Quality Management System  
Academic and methodological complex of the discipline  
«Polyclinic therapy»  
MEP of «General Medicine» ISM IUK

57. Pericarditis. Etiology, classification. Subjective and objective data. Diagnostics and treatment tactics. Indications for hospitalization. Clinical examination.

58. Acute rheumatic fever in the clinic. Primary and secondary prevention. Clinical examination. Examination of TD, its duration, criteria for recovery and restoration of working capacity. Clinical examination.

59. Outpatient management of patients with acquired heart defects. Features of the course of rheumatic defects in old age.

## **XII semester**

1. Outpatient management of patients with systemic lupus erythematosus. Diagnostic criteria. Prevention, clinical examination.

2. Outpatient management of patients with infective endocarditis. Early diagnosis in therapeutic practice. Medical and Labor Expert Commission (MLEC-БТЭК). Clinical examination. Primary and secondary prevention of septic conditions.

3. Outpatient management of patients with rheumatoid arthritis. Permanent disability. Secondary prevention. Clinical examination.

4. Outpatient management of patients with osteoarthritis. Comorbid conditions in osteoarthritis. Treatment. Ability to work. Secondary prevention.

5. Outpatient management of patients with gout. Diagnostic criteria. Complications. Treatment. Clinical examination. Indications for hospitalization.

6. Infective endocarditis. Diagnostic criteria, rehabilitation and prevention of complications. Indications for hospitalization.

7. Outpatient management of patients with systemic scleroderma. Etiology. Classification. Diagnostic criteria. Treatment principles. Indications for hospitalization.

8. MSE of patients with systemic scleroderma. Clinical examination.

9. Osteoarthritis (OA). Factors predisposing to the development of OA. Diagnostic criteria. Primary prevention. Indications for hospitalization. Treatment principles.

10. Acquired heart defects. Definition, classification of etiology. Criteria for early diagnosis of mitral and aortic heart diseases. Indications for hospitalization.

11. Rheumatoid arthritis (RA). The most typical clinical signs of RA. Diagnostic criteria for RA. Outpatient treatment.

12. Osteoarthritis. Medical and social expertise. Clinical examination.

13. gout Diagnostic criteria. Treatment. Relief of an acute gout attack on an outpatient basis. Indications for hospitalization.

14. Differential diagnosis and treatment of articular syndrome in outpatient practice.

15. Outpatient management of patients with chronic gastritis: classification, diagnostic criteria. Indications for hospitalization.

16. Treatment of patients with chronic gastritis: non-drug, drug therapy. Clinical examination. Examination of the ability to work.



Non-Commercial Educational Institution  
Educational-Scientific-Production Complex  
«International University of Kyrgyzstan»

Quality Management System  
Academic and methodological complex of the discipline  
«Polyclinic therapy»  
MEP of «General Medicine» ISM IUK

17. Outpatient management of patients with gastric ulcer and duodenal ulcer. Diagnosis criteria. Indications for hospitalization.
18. Tactics of a polyclinic therapist in the event of complications of gastric ulcer and / or duodenal ulcer (bleeding, pyloric stenosis, penetration, perforation, malignancy).
19. Outpatient management of patients with gastric ulcer and duodenal ulcer. Anti-relapse therapy. Secondary prevention. Spa treatment. Clinical examination. Examination of the ability to work.
20. Chronic hepatitis. Classification. Diagnostics. Indications for hospitalization.
21. Chronic hepatitis: principles of outpatient management of patients with chronic viral hepatitis. Prevention. Reasons for TD (BYT). Clinical examination. Examination of the ability to work.
22. Liver cirrhosis. Classification. Clinical and laboratory diagnostics. Treatment principles. Indications for hospitalization.
23. Principles of outpatient management of patients with liver cirrhosis. Clinical examination. Examination of the ability to work.
24. Classification and definition of enteritis, colitis. Etiology, degree of diagnosis. Treatment in a polyclinic.
25. Inflammatory bowel diseases: enteritis, colitis. Spa treatment. Prevention. Clinical examination. Examination of the ability to work.
26. Ulcerative colitis: clinical picture, course, treatment in a polyclinic. Clinical examination. Examination of the ability to work.
27. Crohn's disease. Etiological factors. Clinical manifestations: intestinal and extraintestinal. Basic principles of treatment in a polyclinic.
28. Crohn's disease: course, treatment in a polyclinic. Clinical examination. Examination of the ability to work.
29. Chronic non-calculous cholecystitis. Etiology, risk factors. Diagnostic criteria. Management tactics in a polyclinic. Prevention.
30. Dyskinesia of the biliary tract. The reasons for the development and clinical manifestations. Management tactics in a polyclinic. Treatment and prevention. Labor forecast.
31. Chronic pancreatitis. Classification. Treatment in a polyclinic. Clinical examination. Examination of the ability to work.
32. Outpatient management of patients with acute glomerulonephritis. Diagnostic criteria. Indications for hospitalization. Treatment principles.
33. Acute glomerulonephritis: timing of VUT, the importance of clinical examination to prevent chronicity. Management of patients in a polyclinic. Spa treatment.
34. Outpatient management of patients with chronic glomerulonephritis. Diagnostic criteria. Indications for hospitalization.





Non-Commercial Educational Institution  
Educational-Scientific-Production Complex  
«International University of Kyrgyzstan»

Quality Management System  
Academic and methodological complex of the discipline  
«Polyclinic therapy»  
MEP of «General Medicine» ISM IUK

35. Chronic glomerulonephritis: treatment. Indications for referral to chronic hemodialysis. VUT criteria. Reasons for permanent disability. Clinical examination.
36. Chronic pyelonephritis. Definition. Clinic, laboratory and instrumental research. Indications for hospitalization.
37. Outpatient management of patients with chronic pyelonephritis. Diagnosis criteria. Indications for hospitalization. Principles of conduct. Prevention.
38. Acute kidney damage. Definition, reasons. The principles of diagnosis and treatment. Indications for hospitalization.
39. Chronic kidney disease (CKD), definition. Classification of CKD by stages. Early clinical and laboratory symptoms, treatment in a polyclinic. Lead tactics.
40. Chronic kidney disease. Indications for referral to chronic hemodialysis. TD (BYT) criteria. Reasons for permanent disability. Clinical examination.
41. Chronic pyelonephritis. Diagnostic criteria. Indications for hospitalization. Prevention.
42. Chronic pyelonephritis. Treatment during exacerbation and remission. Drug and non-drug therapy. Spa treatment. TD criteria.
43. Chronic pyelonephritis. Primary and secondary prevention. Clinical examination.
44. Diabetes mellitus types 1 and 2: risk factors, clinical features. Early diagnosis of diabetes mellitus. Indications for hospitalization.
45. Tactics of management of patients with diabetes mellitus on an outpatient basis. Indications for hospitalization.
46. Macro- and microvascular complications of diabetes mellitus. Prevention, the basic principles of treatment in the clinic.
47. Dispensary examination of patients with diabetes mellitus.
48. TD and in MSE in diabetes mellitus.
49. Metabolic syndrome on an outpatient basis. Diagnostic criteria. Prevention. Lead tactics.
50. Possibilities of managing patients with thyroid gland diseases at the outpatient stage.
51. Indications for hospitalization, for surgical and radiological methods of treatment of thyroid diseases
52. Dispensary examination of patients with thyroid diseases.
53. Syndrome of iodine deficiency in outpatient practice. Diagnostics. Lead tactics. Prevention.
54. Hypoglycemic coma. Causes. Diagnostics. Lead tactics. Prevention.
55. Hyperglycemic (hyperosmolar) coma. Causes. Diagnostics. Lead tactics. Urgent care.



Non-Commercial Educational Institution  
Educational-Scientific-Production Complex  
«International University of Kyrgyzstan»

Quality Management System  
Academic and methodological complex of the discipline  
«Polyclinic therapy»  
MEP of «General Medicine» ISM IUK

56. Hyperglycemic (hyperketonemic) coma. Causes. Diagnostics. Lead tactics. Urgent care.
57. Hypothyroidism - definition. Diagnostic criteria. Outpatient management of patients with hypothyroidism.
58. TD and MSE in thyroid diseases.
59. Erythremia. Diagnostic criteria. Treatment principles.
60. Outpatient management of patients with iron deficiency anemia. Diagnostic criteria. Treatment principles. Monitoring the effectiveness of treatment with iron preparations, its duration. Indications for hospitalization.
61. Dispanserization of patients with IDA. Primary and secondary prevention. Terms of TD.
62. Outpatient management of patients with B12-deficiency anemia, diagnostic criteria. Indications for hospitalization. Treatment.
63. Hemolytic anemias. Classification. Diagnostics. Lead tactics. Indications for hospitalization. MES.
64. Myeloma - clinic, diagnostic possibilities in the clinic, principles of treatment.
65. Anemic coma. Emergency diagnostics and emergency care.
66. Hemoblastosis - the possibility of diagnosis and treatment on an outpatient basis. Indications for hospitalization.
67. Terms of TD and MSE in hemoblastosis. Clinical examination.

## **1.5. Educational-Methodological and informational support of the discipline**

### **1.5.1. List of recommended literature:**

#### *Basic literature*

- Harrison's principles of internal medicine-Jameson Fauci, Kasper Hauser Longo Loscalzo Tom 1 and Tom 2-20s edition.

#### *Additional Literature*

– Adams H.P., Adams R.J., Brott T. et al. Guidelines for the early management of patients with ischemic stroke. A scientific statement from the Stroke Council of the American Stroke Association // Stroke. – 2003. – Vol. 34. – P. 1056-1083.

– Adams H.P., del Zoppo G., Alberts M.J. et Guidelines for the early management of adults with ischemic stroke. A guideline from the American Heart Association / American Stroke Association Stroke Council // Stroke. – 2007.- Vol. 38. – P. 1655-1711.

-Clinical management of human infection with pandemic (H1N1) 2009: revised guidance. Geneva, World Health Organization. Grouin JM, Eccles R et al.

-Principles of Appropriate Antibiotic Use for Treatment of Nonspecific Upper

-Respiratory Tract Infections in Adults: Background. Ann Intern Med. 2001; 134:490. Ralph Gonzales, John G. Bartlett, Richard E. Besser et al.



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- Lim W.S., Baudouin S.V., George R.C., et al. British Thoracic Society guidelines for the management of community-acquired pneumonia in adults – update 2009. //Thorax -2009. –Vol. 64 – Suppl. III. – P. iii1-55.
- Global initiative for chronic obstructive lung disease: WHO, updated 2007.
- American Thoracic Society. Standards for the diagnosis and care of patients with chronic obstructive pulmonary disease. Am. J. Respir. Crit. Care Med. 1995; 152 (5): 78–121.

**The list of resources of the information and telecommunication network "Internet" necessary for mastering the discipline:**

- [www.cardiosite.ru](http://www.cardiosite.ru)
- <http://medic.ossn.ru>
- [www.medmir.com](http://www.medmir.com)
- [www.medscape.com](http://www.medscape.com)
- [www.escardio.org](http://www.escardio.org)
- [www.guideline.gov](http://www.guideline.gov)
- [www.invalidnost.com](http://www.invalidnost.com)
- [www.med-edu.ru](http://www.med-edu.ru)