

MINISTRY OF HIGHER EDUCATION, SCIENCE AND INNOVATION OF
THE REPUBLIC OF UZBEKISTAN

MINISTRY OF HEALTH OF THE REPUBLIC OF UZBEKISTAN

TASHKENT MEDICAL ACADEMY

DEPARTMENT OF INTERNAL DISEASES AND FAMILY MEDICINE №2



"APPROVE"

Director for Academic Affairs

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WORKING CURRICULUM ON THE SUBJECT
AMBULATORY-POLYCLINIC THERAPY

Field of knowledge: 500000 – Health care and social security

Branch of education: 510000 – Health care

Direction of education: 5510100 – General medicine

5111000 – Professional education

Tashkent-2023

The work program on the subject was compiled on the basis of the standard program "Therapy". approved by the 2nd appendix of order No. 107 dated April 25, 2019 of the Ministry of Higher and Secondary Specialized Education of the Republic of Uzbekistan .

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1 . Methodological instructions for teaching a subject.

The subject "AMBULATORY-POLYCLINIC THERAPY" clearly shows students the necessary requirements for practical and independent science, skills, methods for controlling the assessment of knowledge, the use of modern technologies and literature, as well as the formation of knowledge and skills in clinical thinking, reasoning about the disease and its symptoms in general practitioners. practice, including: training students in timely and early diagnosis of diseases with a syndromic approach, further improvement of important knowledge and practical skills (data collection, identification of problems of the patient and the object of examination, as well as the main recommendations of laboratory and laboratory methods of examination, counseling skills, student training make a fundamental choice of tactics for managing patients, teaching students to carry out targeted therapeutic and preventive measures, Providing students with access to dispensary observation and monitoring in the process of performing learning functions.

The following requirements are imposed on the knowledge, skills and qualifications of students. The student must:

- Have an idea about the principles, philosophy and basis of family medicine, the principles of prevention of diseases common among the population, timely diagnosis and treatment, the principles of work in primary health care;

Know and be able to apply:

- principles of counseling;
- diseases that are accompanied by a certain syndrome and their clinical features;
- dangerous diseases accompanied by certain syndromes and their features;
- cases requiring management of patients at the level of SVP / SSP or SP (in accordance with the qualification characteristics of the GP);
- cases requiring consultations of a narrow specialist or referral to a hospital (in accordance with the qualification characteristics of the GP);
- the necessary diagnostic methods carried out in the conditions of SVP / SSP or SP (in accordance with the qualification characteristics of the GP),
- the main clinical manifestations of common diseases;
- the main criteria in the diagnosis of diseases accompanied by a certain syndrome and symptoms of damage to internal organs;
- methods of treating the disease in accordance with the principles of evidence-based medicine (non-drug and drug)
- principles of primary, secondary and tertiary prevention in SVP/SSP or SP;
- principles of managing patients in the conditions of SVP/SSP or SP (as well as conducting an examination of narrow specialists and maintaining after inpatient treatment), dispensary observation and rehabilitation;

Must have skills:

- independent reception and consultation of patients;
- apply medical ethics and deontology, interpersonal skills;
- collecting an anamnesis and conducting a physical examination (general examination, palpation, percussion, auscultation) in patients in order to identify the main problem affecting the quality of life of the patient;
- identification of the underlying syndrome (problem) and risk factors;

- make a preliminary diagnosis based on anamnesis and examination;
- drawing up a survey plan and interpreting their results;
- differential diagnosis and final diagnosis;
- the correct choice of tactics of conducting the patient;
- provision of first aid in emergency situations and the application of the principles of rational treatment;
- Observation and dispensary examination of patients in the conditions of SVP / SSP or SP;
- determination of working capacity (temporary and permanent) and execution of medical documents;
- rehabilitation of patients and sanatorium treatment;
- Carrying out preventive, health-improving, sanitary and hygienic measures in the conditions of SVP / SSP or SP;
- ECG recording and interpretation technique;
- carrying out peak flowmetry ;
- carrying out tonometry;
- selection of drugs based on evidence-based medicine;
- monitoring the effectiveness of the treatment;
- provision of health care to pregnant women with extragenital diseases;
- promotion of a healthy lifestyle (risk group and work with the population).
- use of scientific literature, the Internet and writing abstracts, scientific theses, articles;
- be able to accurately describe their views and conclusions.

Distribution of hours for the academic year:

Direction (faculty)	Total load	Auditorium hours				Independent work	Types of final control
		lectures	Practical classes (seminars)	Practice	Lab		
Medical Faculty	410	24	94	120	0	172	IC:OSCE, test
Faculty of Medicine and Education	410	24	94	120	0	172	IC:OSCE, test

2. Lectures

No.	Lecture topic	Watch
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1	Fundamentals of Family Medicine . History of family medicine. Development in Uzbekistan. Principles of work of the family doctor. MLO base.	2
2	Syndrome of pain in the chest. Differential diagnosis of coronary pain in the chest. Features of the course of IHD, myocardial infarction. Treatment. Prevention. Tactics of the family doctor.	2
3	Syndrome of arterial hypertension and headache. Differential diagnosis of arterial hypertension. Prevention and tactics of the family doctor.	2
4	Broncho-obstructive syndrome. Differential diagnosis in bronchial obstructive syndrome. Syndromes of cough with sputum and hemoptysis. Differential diagnosis of cough with sputum and hemoptysis. Prevention and tactics of the family doctor.	2
5	Differential diagnosis of edematous syndrome. Modern methods of treatment for CHF. Prevention. Tactics of the family doctor .	
6	Joint syndrome. Differential diagnosis in articular syndrome. Individual approach to treatment. Prevention. Tactics of the family doctor.	2
7	Syndrome of hepatomegaly and jaundice. Differential diagnosis in jaundice and hepatomegaly . Prevention. Tactics of the family doctor.	2
8	Differential diagnosis in pathological urinary sediment. Differential diagnosis for proteinuria, leukocyturia , hematuria, cylindruria , etc. Prevention. Tactics of the family doctor.	2
9	Gerontology and general geriatrics. Problems of the age norm. Problems and features of the course of diseases of internal organs in the elderly. Principles of work with this category of patients. Tactics of the family doctor.	2
10	arrhythmia syndrome. Differential diagnosis. Treatment. Sudden coronary death. Etiology. Prevention. Tactics of the family doctor.	2
11	Cardiomegaly and heart murmur syndrome. Differential diagnosis of cardiomegaly and heart murmurs. Prevention Tactics of the family doctor.	
12	Fever Syndrome. Fever of unknown origin. Prevention. Tactics of the family doctor.	2
	Summary	24 hours

Lecture classes are held for the flow of academic groups in an auditorium equipped with multimedia devices.

3. Practical exercises

"Inpatient Therapy"

No .	The name of the topic of the practical lesson	Watch
1.	Fundamentals of family medicine. Functions of a family doctor . Features of work. Medical documentation. Public involvement. The rights of the doctor and the patient. Ethics and deontology in the work of a family doctor . The art of communication. Factors contributing to communication. Difficulties in communication. Interpersonal communication. Practical advice. Consulting . Types of consultations. Counseling principles. The responsibility of the patient for their own health.	4
2.	Differential diagnosis in the practice of a family doctor. Estimated diagnosis. Principles of building a clinical diagnosis in a hospital and outpatient practice. Causes, nature of medical errors in the clinic of internal diseases. The concept of the most dangerous diseases . diagnostic errors. Illness mimics. Mental disorders and simulation. Polypharmacy in the work of a doctor. Teaching Principles	6
3	Cough with expectoration . Differential diagnosis of community-acquired and nosocomial pneumonia of various etiologies (bacterial, viral, mycoplasmal). Tactics of a family doctor in the detection of pneumonia. Features of diagnosis and treatment of pneumonia in COVID -19. Principles of teaching the topic.	6
4	Syndrome of dissemination and darkening in the lungs. Differential diagnosis in pulmonary dissemination . Differential diagnosis in lobar occlusion of the lungs: lobar pneumonia, infiltrative pulmonary tuberculosis, pulmonary infarction. Differential diagnosis in hematogenous disseminated form of TBC of the lungs, pneumoconiosis, cancer metastasis to the lungs. Tactics of the family doctor and methods of prevention.	6
5	Differential diagnosis in dry, exudative pleurisy. Types of exudative pleurisy. Early diagnosis of pleurisy. Tactics of a family doctor and prevention methods for early detection of pleurisy. Teaching Principles	6
6	Hemoptysis syndrome. Medical tactics and differential diagnosis of the main nosological forms (cancer, suppurative lung diseases, pulmonary embolism, tuberculosis). Timely detection and tactics of a family doctor in case of PE at the pre-hospital and hospital stages. Principles of teaching the topic.	6
7	Shortness of breath, suffocation. Differential diagnosis of diseases occurring with bronchial obstruction (bronchial asthma, COPD, lung tumors, bronchiectasis). Differential diagnosis of shortness of breath in cardiac and pulmonary pathology Principles of teaching the topic .	4
8	Arrhythmias . Differential diagnosis of sinus: tachycardia, bradycardia, arrhythmias; pacemaker migration, sick sinus syndrome, extrasystoles , atrial and ventricular fibrillation and flutter, paroxysmal tachycardia, WPW syndrome . Tactics of a family doctor depending on the class of arrhythmia . Definition of a high-risk group.	4
9	Arrhythmias . Differential diagnosis in blockade: intra-atrial and atrioventricular , intraventricular . Tactics of the family doctor and therapy for rhythm and conduction disorders. Indications for EX.	4
10	Arterial hypertension Differential diagnosis of hypertension with renal hypertension. Risk factors, stages of hypertension, types of renal hypertension (parenchymal and renovascular). Differential diagnosis of hypertension with endocrine hypertension. Types of endocrine hypertension (4

	pheochromocytoma , Kohn's syndrome, Itsenko-Cushing's syndrome, thyrotoxicosis). Indications for surgical treatment. Prevention. Tactics of the family doctor .	
11	Arterial hypertension Differential diagnosis of hypertension with hemodynamic and cerebral hypertension (traumatic brain injury, vertebrobasilar syndrome, arachnoiditis, encephalitis, brain tumors), sclerotic hypertension. Tactics of the family doctor .	4
12	Pain in the region of the heart Differential diagnosis for chest pain of coronary origin and choice of management tactics. Differential diagnosis of pain syndrome in coronary artery disease, stable and unstable angina pectoris. Clinical, laboratory, ECG diagnostics of stable and unstable angina pectoris. N violation of lipid metabolism. The value of the ECG with physical activity in diagnosing the degree of damage to the coronary arteries. Clinical assessment of the results of the stress test . Prevention. Tactics of the family doctor.	4
13	Pain in the region of the heart Differential diagnosis of acute coronary syndrome. Differential diagnosis of various clinical variants, stages in myocardial infarction. Complications of MI (cardiogenic shock, pulmonary edema, pulmonary aneurysm, Dressler's syndrome). Tactics of managing a patient with myocardial infarction at the pre-hospital and outpatient stage.	4
14	Heart murmurs and cardiomegaly Differential diagnosis of murmurs in the apex of the heart. Differential diagnosis of functional (myocardial , anemic, with blood changes, fever) and organic (mitral and aortic defects) heart murmurs. Early prevention of complications, indications for surgical treatment. Tactics of the family doctor.	4
15	Heart murmurs and cardiomegaly Differential diagnosis of myocarditis and various clinical forms of cardiomyopathy (dilated , restrictive , hypertrophic, arrhythmogenic right ventricular dysplasia). Early detection and prevention of cardiomyopathy and tactics of a family doctor .	6
16	Dysphagia Differential diagnosis of esophagitis, reflux esophagitis, dysphagia in scleroderma, tumors of the esophagus, etc. Prevention. Tactics of the family doctor .	6
17	Stomach ache. Differential diagnosis of gastritis and peptic ulcer (stomach and duodenal ulcer); chronic cholecystitis and chronic pancreatitis; nonspecific ulcerative colitis and Crohn's disease Prevention. Tactics of the family doctor.	6
18	Hepatomegaly and jaundice Differential diagnosis of active and inactive chronic hepatitis , liver cirrhosis , cholelithiasis with tumors of the biliary -pancreatic zone (tumors of the liver, gallbladder, pancreas). Early diagnosis of jaundice . Prevention and tactics of the family doctor .	4
19	Articular syndrome Differential diagnosis of systemic lupus erythematosus , systemic scleroderma, dermatomyositis a, periarteritis nodosa and hemorrhagic vasculitis. Tactics of the family doctor .	4
20	Urinary sediment changes Differential diagnosis of proteinuria and pathological urinary sediment (pyelonephritis, glomerulonephritis and interstitial nephritis). Tactics of the family doctor . Chronic kidney disease. Differential diagnosis of amyloidosis and nephropathies (pregnant, diabetic, drug). Tactics of the family doctor.	4

	Outcome for Inpatient Therapy	94 hours
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"Outpatient Therapy"
(Clinical training practice)

No	The name of the topic of the practical lesson	Hour se
1	<p>Work with seven e th. The art of communication. Features of work. Psychological climate in the family. Problems of religion, rituals. Family counseling. Principles of consulting in PZZ. Responsibility of the patient for his health (dispensary observation, monitoring of the condition in the PZZ). Factors contributing to communication. Difficulties in communication. Interpersonal communication. Practical advice. Consulting. Types of consultations. Working with different population groups. Children, adolescents, women (women of childbearing age, pregnant women), men, the elderly. Workers in production and agriculture. Socially vulnerable people. Sick, difficult patient, dying patient. Issues of rehabilitation and clinical examination of patients with therapeutic diseases. Employability examination .</p>	6
2	<p>Prevention in the activities of a family doctor. Prevention of infectious and non-infectious diseases. Immunization. Programs and activities. Health education. Impact on the main causes of morbidity and mortality in the PZZ. Ecology and professional factors. Teaching patients, "Schools of Health". Methods for conducting preventive examinations, screening</p>	6
	<p>Prevention in the activities of a family doctor. Prevention of infectious and non-infectious diseases. Immunization. Programs and activities. Sanitary educational work. The degree of mortality and the impact on the main factors of morbidity. Strengthening the psychological status. Ecology and professional factors. Education of patients - "schools of health". Methods for conducting preventive examinations. Screening.</p>	6
4	<p>Healthy food. Healthy eating, description, food composition, healthy eating pyramid, healthy eating - prevention of various diseases. Diet therapy for diseases of the cardiovascular system, gastrointestinal tract, respiratory and excretory systems, Fundamentals of non-drug therapy. The concept of adherence to non-drug therapy</p>	6
5	<p>Cough with expectoration. Differential diagnosis of acute respiratory infections, acute bronchitis and pneumonia. Tactics of the family doctor . Prevention and treatment of respiratory diseases in primary care.</p>	6
6	<p>Syndrome of shortness of breath and suffocation . Diagnosis of COPD and bronchial asthma in primary health care (PHC). Tactics of the family doctor . Treatment and prevention of COPD and BA in the PZZ (during and outside the attack, observation and outpatient treatment). Indication for outpatient treatment. Asthma control and step-by-step treatment. Management of patients with DN.</p>	6
7	<p>Chest pain. Tactics of a family doctor for non-coronary chest pains. Ambulatory treatment. Primary care and prevention</p>	6
8	<p>Palpitation. Tactics of a family doctor and prevention for various types of arrhythmias and blockades (definition of high-risk groups). Peculiarities of outpatient treatment. Indications of emergency and planned electropulse therapy. Prevention of cardiac arrhythmias.</p>	6

9	Heart murmurs and cardiomegaly Differential diagnosis in congenital heart disease. The value of risk factors for the disease, the implementation of preventive measures with women of childbearing age. Timely clinical, laboratory and instrumental diagnostics, risk factors, development of CHD . management of patients with bacterial endocarditis.	6
10	Headache. Stratification of the risk group in hypertension. Tactics of the family doctor . Prevention of hypertension and SAH in the primary care.	6
eleven	Arterial hypertension. Selection of antihypertensive therapy for hypertension and symptomatic hypertension. Tactics of a family doctor in hypertensive crises. Indications for surgical treatment. Prevention.	6
12	Joint syndrome . Differential diagnosis of rheumatic fever and rheumatoid arthritis, seronegative spondyloarthritis Prevention. Family doctor tactics	6
13	Joint syndrome . Primary, secondary, tertiary prevention of arthrosis and principles of clinical examination.	6
14	Dyspepsia (heartburn, nausea, vomiting). Diseases occurring with impaired secretion : gastric ulcer and duodenal ulcer, biliary dyskinesia, cholecystitis, postcholecystectomy syndrome, condition after gastric surgery. Treatment and prevention.	6
15	Prevention of diseases occurring with epi-, meso-, hypogastric pains. Diarrhea. Differential diagnosis of diarrhea and infectious and non-infectious etiology. SRK. Classification and criteria. Tactics of the family doctor . Prevention of IBS, constipation in the elderly, malignant neoplasms of the large intestine. Tactics of the family doctor .	6
16	Hepatomegaly. Prevention of acute, chronic hepatitis, alcoholic liver disease, liver cirrhosis of various etiologies. Tactics of the family doctor .	6
17	Dysuria. Prevention of acute and chronic pyelonephritis, cystitis and uric acid diathesis. Tactics of the family doctor .	6
18	Edema syndrome. Differential diagnosis of edematous syndrome of various origins: <i>generalized</i> (heart failure, kidney disease (nephritic syndrome; nephrotic syndrome, liver disease (cirrhosis, chronic hepatitis, liver cancer), diseases of the gastrointestinal tract, accompanied by protein loss, prolonged starvation, cachexic conditions , endocrine diseases, oncological diseases) and <i>local edema</i> (allergic, inflammatory, venous and lymphatic). Tactics of a family doctor .	6
19	Fever . Types and types of fever. Fever of unknown origin. Tactics of the family doctor .	6
20	Geriatrics. Problems of the age norm. Functional and organic changes during aging. Patterns of aging processes. The mechanism of development of age-related changes. Physiology and nutritional hygiene of the elderly. Clinical manifestations of atherosclerosis and dynamic monitoring. Emphysema in the elderly. Age-related changes predisposing to the development of COPD in the elderly. Tactics of the family doctor and methods of observation in the detection of these conditions in the elderly. Problems of the elderly with diseases of the gastrointestinal tract. Problems of the elderly with diseases of the urinary system. Age-related changes predisposing to these diseases.	6
Outpatient Therapy Hours		120

	total amount	214
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Practical classes are held in an equipped auditorium separately for each academic group. Practical classes are conducted using interactive teaching methods.

4. Independent work

No.	SRS Topics	Watch volume
1	Myocardial functions. Normal EKG. (Extracurricular work)	4
2	Pharmacodynamics of antiarrhythmic drugs. (Extracurricular work)	5
3	Etiology and pathogenesis of conduction disorders (Extracurricular work)	5
4	Arterial hypertension, hypertension, etiology, pathogenesis and classification of nephrogenic arterial hypertension. (Extracurricular work)	4
5	Arterial hypertension and etiology, pathogenesis and classification of endocrine arterial hypertension. (Extracurricular work)	4
6	Classification of antihypertensive drugs (Extracurricular work)	5
7	Etiology, pathogenesis of hemodynamic and cerebral hypertension and classification of antihypertensive drugs (Extracurricular work)	4
8	Etiology, pathogenesis and classification of coronary heart disease. Principles of IHD treatment. (Extracurricular work)	4
9	Etiology, pathogenesis of myocardial infarction. Pharmacodynamics of drugs used in the treatment of myocardial infarction. (Extracurricular work)	4
10	Causes of the development of cardiomegaly , forms of cardiomegaly, clinical variety of symptoms, ECG and X-ray diagnostics, treatment. Etiology, pathogenesis, clinic, diagnosis of mitral heart disease. (Extracurricular work)	4
eleven	Causes of malformations in rheumatism, infective endocarditis, aortic atherosclerosis. ECG and X-ray diagnostics, treatment. Etiology, pathogenesis, clinic, diagnosis of aortic heart disease. (Extracurricular work)	4
12	Etiology of malformations, pathogenesis, mechanism of murmurs, functional and organic, auscultatory pattern of murmurs, direct and indirect signs, signs of increased pressure in the pulmonary circulation, course of malformations. (Extracurricular work)	4
13	Causes of cardiomegaly , forms of cardiomegaly , clinical variety of symptoms. ECG and X-ray diagnostics. Treatment, features of the use of adrenoblockers and cardiac glycosides. (Extracurricular work)	5

14	Etiology, pathogenesis, classification of circulatory failure, clinical picture. The use of cardiac glycosides, β -blockers, ACE inhibitors, diuretics, methods of treating heart failure. (Extracurricular work)	5
15	Etiology, pathogenesis, treatment of myocarditis and myocardial dystrophy. Pharmacodynamics of drugs used in the treatment of myocarditis and myocardial dystrophy. (Extracurricular work)	4
16	Reasons for the development of pericarditis, diagnosis. Etiopathogenesis and clinic of PE, dissecting aortic aneurysm (Extracurricular work)	4
17	Etiology, classification of pneumonia, tuberculosis and pulmonary infarction, clinical signs and variants of pneumonia, tuberculosis and pulmonary infarction, research methods, complications (Extracurricular work)	4
18	Etiology, classification of pneumonia, clinical signs and variants of pneumonia, abscess , cancer and echinococcus of the lungs, research methods, complications. (Extracurricular work)	4
19	Etiology, classification of COPD, clinical signs, research methods, complications. (Extracurricular work)	4
20	Diagnostic criteria for rheumatism, rheumatoid arthritis. Criteria for the diagnosis of rheumatic fever. (Extracurricular work)	4
21	Diagnostic criteria for seronegative spondyloarthritis (reactive arthritis, Bechterew's disease, psoriatic arthritis. Criteria for diagnosing rheumatism. (Extracurricular work)	5
22	Diagnosis and criteria of activity, methods of treatment of DBST. (Extracurricular work)	5
23	Etiology, pathogenesis, classification, clinical syndromes, diagnosis, methods of treatment, pharmacodynamics of drugs used to treat CKD. (Extracurricular work)	5
24	Diagnostics and activity criteria, methods of treatment, prevention of SV and DM. Pharmacodynamics of drugs used in the treatment of SV and DM. (Extracurricular work)	4
25	Diagnosis and activity criteria, methods of treatment, prevention of NPP and UP. Pharmacodynamics of drugs used in the treatment of NSP and UP. (Extracurricular work)	5
26	Etiology, pathogenesis, clinical manifestation of the disease, diagnosis, criteria for the activity of immunoinflammatory and inflammatory diseases of the kidneys. (Extracurricular work)	5
27	Definition, etiology, pathogenesis of nephropathies. (Extracurricular work)	4
28	Etiology, pathogenesis, classification, clinical syndromes, diagnosis, methods of treatment, pharmacodynamics of drugs used to treat CKD. (Extracurricular work)	4
29	Etiology, pathogenesis, clinical manifestation of the disease, diagnosis, edematous syndrome (Extracurricular work)	5

third y	Etiology of dysphagia, pathogenesis, mechanism of pain. Risk factors in the development of dysphagia (Extracurricular work)	5
31	Clinical manifestations, clinical and laboratory criteria, complications, treatment of peptic ulcer (Extracurricular work)	4
32	Etiopathogenesis of pancreatitis, classification of pancreatitis. Diagnostic studies of pancreatic tumors. (Extracurricular work)	4
33	Complications of UC and diagnostic criteria for studies (Extracurricular work)	4
34	Etiopathogenesis , clinical manifestations, syndromic diagnosis of diseases accompanied by hepatomegaly . (Extracurricular work)	5
35	Etiopathogenesis , clinical manifestations, diagnosis of liver cirrhosis (Extracurricular work)	4
36	Etiopathogenesis , clinical manifestations, syndromic diagnosis of diseases accompanied by jaundice. (Extracurricular work)	5
37	Features of pharmacotherapy of gastrointestinal diseases and tactics in case of complications. (Extracurricular work)	5
38	Diagnostic criteria for aging, physiology of the senile organism, age norms. Etiology, pathogenesis, diagnostic criteria for osteoporosis, physiology of the senile organism (Extracurricular work)	5
39	Diagnostic criteria for atherosclerosis, emphysema in the elderly (Extracurricular work)	5
40	The concept of fever, types, curve. Diseases that occur with fever (Extracurricular work)	5
	Total	172 h

Students prepare abstracts and presentations on independently studied topics.

SIW is performed by the student in the classroom and outside the classroom

When organizing independent work of students, the following forms are used:

- Performing practical skills outside the classroom
- Implementation of practical skills in clinical departments, and the report of examined patients during independent duty at the morning conference;
- Carrying out curation and management of patients (patients) in clinical departments, filling in the medical history and reflection in the on-duty clinical audit;
- Preventive examination of the population in primary health care institutions, dispensaries, participation in patronage;
- Participate in the observation of patients under the supervision of the attending physician or doctor on duty;
- Conducting interviews and lectures on health education among the population;
- work with computer programs;
- Independent study of topics with the help of educational literature;
- Preparation of information (abstract) on a given topic;
- work and lecture on special or scientific literature (monographs, articles) on sections or topics of the subject;
- Preparation of scientific articles, abstracts for the conference;
- Solve situational problems focused on situational and clinical problems;

- Case solving (case study based on real clinical situations and clinical situation questions);

Also, the independent work of the student is:

- development and improvement of graphic organization;
- create and solve crossword puzzles;
- preparation of presentations and videos and their wide use in independent work, etc.
- Participation of students in olympiads, competitions, exhibitions, conferences and other events for the active study of the subject.

Instructions for organizing laboratory work.

According to the standard curriculum, laboratory work is not provided.

Instructions for the organization of course work.

Under the standard curriculum, there is no course work.

5. Practical skills in the subject:

No.	Name of practice	Qty	Necessary equipment for practical skills
1	Medical examination of patients with "Shortness of breath" syndrome	12	Practical skill room, literature, photographs, phantom, model, work in simulation centers
2	Medical examination of patients with the syndrome "Cough with sputum"		
3	Medical examination of patients with hemoptysis syndrome		
4	Medical examination of patients with the syndrome " Blackout of the lungs".		
5	Medical examination of patients with "Chest pain" syndrome		
6	Medical examination of patients with "Heart Murmur" syndrome		
7	Medical examination of patients with the syndrome of "arterial hypertension"		
8	Medical examination of patients with		

	"Arrhythmia" syndrome		
9	Medical examination of patients with "Articular Syndrome"		
10	Medical examination of patients with edematous syndrome		
eleven	Medical examination of patients with "Dysuria" syndrome		
12	Medical examination of patients with "Fever" syndrome		

No.	Stages of medical examination of patients with the syndrome " Shortness of breath "
1	Visual examination of the patient; diffuse cyanosis; swelling of the neck veins; epigastric pulsation; swelling in the legs
2	6 minute walking test
3	Chest examination
4	Palpation and percussion of the chest
5	Auscultation of lungs and heart
6	Counting the respiratory rate
7	Blood pressure measurements on peripheral arteries
	Stages of medical examination of patients with the syndrome "Cough with sputum"
1	Chest examination

2	Palpation and percussion of the chest
3	Auscultation of lungs and heart
4	Counting the respiratory rate
5	Blood pressure measurements on peripheral arteries
6	Assess the nature of sputum: color, quantity, smell, at what time it is excreted (morning, evening)
	Stages of medical examination of patients with hemoptysis syndrome
1	Visual examination of the patient; evaluate skin color and muscle atrophy, palpation of lymph nodes
2	Chest examination
3	Palpation and percussion of the chest
4	Auscultation of lungs and heart
5	Counting the respiratory rate
6	Blood pressure measurements on peripheral arteries
7	Hemoptysis at what time of the day is released and in what quantity
	Stages of medical examination of patients with "Blackout in the lungs" syndrome
1	Visual examination of the patient; evaluate skin color and muscle atrophy, palpation of lymph nodes, "cachectic" face
2	Chest examination
3	Palpation and percussion of the chest

4	Auscultation of lungs and heart
5	Counting the respiratory rate
6	Blood pressure measurements on peripheral arteries
7	Determination of body mass index
	Stages of medical examination of patients with "Chest pain" syndrome
1.	Assessment of the nature of the pain: acute, dull; compressive, pressing, stabbing, cutting, aching; connection with physical activity, temperature, emotional factors, food intake; localization of pain, irradiation; the duration of the pain syndrome.
2	Examination of the skin, limbs for acrocyanosis , examination of the chest: examination of the heart area, exclusion of herpetic eruptions, symmetry of the chest, palpation of the intercostal spaces, determining the nature of the apex beat, determining the configuration of the heart.
3	Auscultation of the heart : listening to the projection points of the mitral, tricuspid , pulmonary trunk and aortic valves of the heart. Auscultation of the lungs to exclude pleural rub.
4	ECG interpretation : determination of heart rate, signs of left ventricular hypertrophy, p - pulmonale / mitrale depression / elevation of the S - T segment, pathological Q wave .
	Stages of medical examination of patients with "Heart Murmur" syndrome
1	Careful history taking with clarification of symptoms and previous diseases : rheumatism , heart defects , past infectious diseases .
2	Conduct a general inspection. During a general examination, the patient's physique, pallor or acrocyanosis , the position of the patient, the presence of shortness of breath, swelling and pulsation of the cervical veins, and edema of the lower extremities should be noted .
3	Auscultation of points of projections of heart valves. Evaluation of the epicenter of the noise, the nature of the noise (organic, functional), the nature of the noise, duration, loudness, irradiation, relationship to the phases of cardiac activity.
4	Valsalva tests , breathing tests, tests with positional changes.

	Stages of medical examination of patients with the syndrome "Arterial hypertension"
1	Careful history taking. Identification of risk factors. Objective examination: examination of the skin, a brief neurological examination, palpation of the thyroid gland, examination of the heart and blood vessels, kidneys.
2	Diagnosis of hypertension of various origins: mini-neurological examination: determination of deep and superficial sensitivity, muscle tone, focal symptoms.
3	Diagnosis of endocrine hypertension : examination of the skin, determination of BMI, abdominal area, determination of the symptoms of Graefe, Mobius, Shtelvag , palpation of the thyroid gland.
4	Examination of renal function : palpation of the kidneys, auscultation of the renal arteries.
	Stages of medical examination of patients with "Arrhythmia" syndrome
1	Thorough collection of anamnesis; time of the first attack, duration of interruptions in the heart area, frequency, provoking factors, type of arrhythmia relief.
2	Auscultation of the heart: listening to heart sounds, heart rate, determining heart rate.
3	Pulse examination: determination of the pulse in the area of the radial artery, assessment of symmetry, rhythm, tension, filling, size, shape of the pulse wave. Calculation of the pulse deficit.
4	ECG interpretation. Determining the type of P wave , determining the pacemaker, correctness, heart rate, the presence of blockades, signs of myocardial infarction, lengthening of the PQ interval .
	Stages of medical examination of patients with the syndrome "dysphagia"
1	a thorough examination of the neck, oral cavity, oropharynx, larynx, examination of the oral cavity, teeth and gums, palpation of regional lymph nodes (which is important to clarify many causes of dysphagia, including malignant tumors).
2	reflex conditions (pharyngeal - the presence of saliva in the oropharynx, contraction of the posterior pharyngeal wall, thyroid cartilage and tension of the diaphragm of the mouth during the pharynx, vomiting; cough reflexes) ;
3	assessment of the sensitivity of the oropharyngeal mucosa (the sensitivity of the tongue, cheeks, soft palate (tactile, temperature, taste) is examined; by touching the spatula to the mucous membrane of the larynx, pharynx.

4	examination of the articulatory apparatus (articulatory praxis (oral and symbolic); volume, strength, amplitude of movements of the organs of articulation, muscle tone (h m n - V, VII, IX, X, XI and XII); soft palate phonation; hoarseness, nasal voice; choking and coughing before, during, or after swallowing; change in voice after swallowing water; regurgitation of fluid into the nasal cavity when swallowing; difficulty breathing while eating or drinking);
	Stages of medical examination of patients with "dyspepsia" syndrome
1	a thorough history taking with clarification of symptoms and past diseases Exclusion of anxiety symptoms such as: <ul style="list-style-type: none"> • acute attacks with the appearance of shortness of breath, sweating, tachycardia; • Anorexia • nausea, vomiting; • Weight loss • the presence of blood in the stool; • dysphagia, painful swallowing (odynophagia); lack of effect from the appointment of H2 blockers or proton pump inhibitors (PPIs)
2	Conduct a general inspection. During a general examination, it should be noted pallor of the skin and mucous membranes, sweating, body temperature, the presence of cachexia, jaundice, examination of the oral cavity, tongue, signs of dehydration
3	Conduct an examination and palpation of the abdomen in order to identify pain, volumetric formations of the organs of the epi and mesogastric parts of the abdomen (identify signs of gastric, hepatic dyspepsia)
4	Conduct an examination and palpation of the abdomen in order to identify soreness, space-occupying formations , flatulence, rumbling of the organs of the hypogastric part of the abdomen (identify signs of intestinal dyspepsia)
	Stages of medical examination of patients with the syndrome of "hepatomegaly and jaundice"
1	General examination: assessment of consciousness, skin color and visible mucous membranes, assessment of jaundice, examination of the oral cavity and tongue, body temperature, traces of scratching on the skin, rashes, edema.
2	Palpation of the lymph nodes and examination of the abdomen (rule out the symptom of an acute abdomen)
3	Palpation and percussion of the liver, examination of the gallbladder

4	Palpation of the spleen
	Stages of medical examination of patients with the syndrome "Pain in the abdomen"
1	General examination: state of consciousness, color of the skin and visible mucous membranes, pallor, assessment of the state of the oral cavity and tongue, general condition and forced position of the patient.
2	Determine important vital signs including heart rate, blood pressure, respiration rate and objectively rule out abdominal symptoms
3	Pain localization examination: inspection of the epigastric and mesogastric region of the abdomen, superficial and deep palpation and percussion (stomach, duodenum, pancreas, liver)
4	Pain localization examination: examination, palpation and percussion of the hypogastric region of the abdomen, palpation and percussion of the pelvic organs (intestines, bladder, gynecological organs, etc.)
5	General examination: state of consciousness, color of the skin and visible mucous membranes, pallor, assessment of the state of the oral cavity and tongue, general condition and forced position of the patient.

6. Criteria for assessing students' knowledge based on the rating system

Assessment Methods	Carrying out curation of the patient, performing practical skills, express tests, written assignments, oral questioning, presentations, etc.
	Criteria for evaluation
Excellent "5" (90-100)	<ul style="list-style-type: none"> - A complete correct answer on the topic of the lesson, rich in additional materials from various sources, the amount of knowledge goes beyond the program. -Fully mastered the main recommended literature on the program and is familiar with additional literature. - Timely and qualitatively completes tasks in a practical lesson. - He solves situational problems correctly, with a creative approach, with a clear and complete justification for the answer. - Actively participates in the discussion of the topic, discussions, can defend his point of view. - Actively, creatively participates in interactive games, correctly makes informed decisions and sums up, analyzes. <p>Practically: - Gives a complete definition of the syndrome</p> <ul style="list-style-type: none"> -Performs algorithmic differential diagnostics

- Analyzes, thinks creatively
- Conducts a professional survey and an objective examination of the patient
- Complete medical history
- Substantiates a correct preliminary diagnosis
- Interprets laboratory and instrumental research methods
- Self-recommends standards-based treatment and rehabilitation activities

Form of independent work: independent development of the topic, preparation of an abstract, scientific article, theses, reports and presentations

Independent development of the topic, writing a summary and preparing a presentation. The abstract is drawn up logically and fully covers all issues comprehensively, the topic is covered systematically, the main literature used and sources of information are indicated.

Abstract preparation. The student collected material using additional literature in addition to the main one (monographs, scientific, methodological articles, Internet data, electronic library materials, etc.), analyzed, systematized. The topic of the abstract is fully and comprehensively disclosed, using a logical sequence in the text, the correct conclusion is made and creative thoughts are characteristic.

Creative work. Correctly solved the situational tasks given in the lesson, crossword puzzles, organizers, used a creative approach in solving them, the answer is justified. The tables are filled out correctly and completely.

Preparation of scientific articles, abstracts, reports:

The student independently conducted tests on the topic of SNO and recorded the results, carried out statistical processing and, based on this study, independently made correct, logical conclusions. The student collected, analyzed, systematized materials on the topic of the lesson using educational literature, research papers, dissertations, articles, monographs, and other sources of information. The prepared article, thesis, report are based on the scientific results obtained during the study, as well as literature data.

<p>Good "4" (70-89.9)</p>	<ul style="list-style-type: none"> - A complete answer on the topic of the lesson, within the program, is logically justified, answers confidently. -Fully mastered the main recommended literature on the program. - Completing practical tasks in a timely manner. - He solves situational problems clearly, correctly , with justification for the answer. - Actively participates in the discussion of the topic, discussions, can defend his point of view. - Actively participates in interactive games. -Practically: Knows the definition of the syndrome -Performs differential diagnosis correctly - Summarizes, thinks creatively -Properly interviewing and examining the patient - Correctly fills out the medical history -Substantiates the preliminary diagnosis - Interprets common laboratory and instrumental research methods - Cannot give full recommendations for treatment and rehabilitation - Cannot give recommendations on prevention and determination of working capacity in full <p>Form of independent work: independent development of the topic, preparation of an abstract, scientific article, theses, reports</p> <p>Self-mastery of the topic and writing a summary The summary is drawn up logically and covers all questions on the topic of the lesson, the topic is covered systematically, the main literature used and sources of information are indicated.</p> <p>Abstract preparation. The student collected material using additional literature in addition to the main one (monographs, scientific, methodological articles, Internet data, electronic library materials, etc.), analyzed, systematized. The essence of the topic of the abstract is disclosed and only a conclusion is made.</p> <p>Creative work. Correctly solved the situational tasks given in the lesson, crossword puzzles, organizers, used a creative approach in solving them, the answer is justified. Tables filled out correctly and completely</p>
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<p>Satisfactory "3" (60-69.9)</p>	<ul style="list-style-type: none"> -Average satisfactory response. -Knows some concepts and definitions, does not fully answer additional questions. - When solving situational problems, he makes some mistakes. -Knows the syndrome -Performs differential diagnosis - Interrogates and examines the patient incompletely -Fills out the medical history together with the teacher - Substantiates the preliminary diagnosis together with the teacher -Cannot fully interpret all common laboratory and instrumental research methods -Recommendations for treatment and rehabilitation knows partially <p>Recommendations are hard to come by</p> <p>Form of independent work: independent development of the topic and writing a summary, preparation of an essay, creative work</p> <p>Self-study of the topic and writing a summary The summary covers all questions on the topic of the lesson, however, there is no systematic approach in presenting, the main literature used and sources of information are indicated.</p> <p>Abstract preparation. The student collected material using the main literature, analyzed, systematized. The essence of the topic of the abstract is disclosed, but there are minor shortcomings.</p> <p>Creative work. I found it difficult to substantiate the answer when solving situational problems, crossword puzzles, and organizers. There were minor shortcomings in filling the tables.</p>
<p>Unsatisfactory "2" (0-59.9)</p>	<ul style="list-style-type: none"> - Makes serious mistakes - has no idea on theoretical issues. - Did not master the literature recommended in the program. -Unable to solve situational problems. -Does not complete the assignments given in the practical lesson in a timely manner. -cannot perform practical skills <p>Has an idea about the syndrome</p> <ul style="list-style-type: none"> -Unable to make a differential diagnosis - Cannot enter into communication with the patient, cannot conduct interview and examination methods - Diagnosis cannot be substantiated -Does not know the interpretation of laboratory and instrumental research methods -Difficulty in recommending treatment and rehabilitation measures -Can't give advice <p>Form of independent work: independent development of the topic and writing a summary, preparation of an essay, creative work</p>

	Gathered materials for the synopsis and abstract, but did not write. Cannot solve situational problems, crossword puzzles, organizers.
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	Rating types	Max score	Time spending
	Current control:	50	During the cycle
	Assessment of theoretical knowledge on the topic, practical skills, interpretation of laboratory data, supervision and management of patients	45	
	Timely and high-quality performance of independent work of students	5	
	intermediate control	20	mid cycle
	PC is accepted by 2 teachers in writing. Students solve a situational problem.	10	
	PC is taken by 2 teachers orally. Students answer with tickets	10	30 day cycle
	Final control	thirty	Last 2 days of cycle
	OSKE	15	
	Test	15	
			Scheduled

Translation table 5 point scale to 100 point scale							
5 point scale	100 point scale		5 point scale	100 point scale		5 point scale	100 point scale
5.00 - 4.96	100		4.30 - 4.26	86		3.60 - 3.56	72

4.95 - 4.91	99	4.25 - 4.21	85	3.55 - 3.51	71
4.90 - 4.86	98	4.20 - 4.16	84	3.50 - 3.46	70
4.85 - 4.81	97	4.15 - 4.11	83	3.45 - 3.41	69
4.80 - 4.76	96	4.10 - 4.06	82	3.40 - 3.36	68
4.75 - 4.71	95	4.05 - 4.01	81	3.35 - 3.31	67
4.70 - 4.66	94	4.00 - 3.96	80	3.30 - 3.26	66
4.65 - 4.61	93	3.95 - 3.91	79	3.25 - 3.21	65
4.60 - 4.56	92	3.90 - 3.86	78	3.20 - 3.16	64
4.55 - 4.51	91	3.85 - 3.81	77	3.15 - 3.11	63
4.50 - 4.46	90	3.80 - 3.76	76	3.10 - 3.06	62
4.45 - 4.41	89	3.75 - 3.71	75	3.05 - 3.01	61
4.40 - 4.36	88	3.70 - 3.66	74	3.00	60
4.35 - 4.31	87	3.65 - 3.61	73	Less than 3.0	Less than 60

Types of control and evaluation criteria for the subject "Outpatient therapy".

At the end of the semester, 6th year students of the medical and pedagogical faculties on the subject "Outpatient and polyclinic therapy" pass the final control in the form of OSKE + TEST.

Conducting the final types of control, as well as assessing the knowledge of students, is carried out by a commission organized by the head of the department.

The composition of the commission is formed from professors and teachers of relevant subjects and specialists in this field.

7. List of used literature

Basic literature :

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