Federal State Educational Institution of Higher Professional Education "Peoples" Friendship University of Russia"

Medical Institute

Recommended by MCSN

PROGRAM OF THE PRACTICAL TRAINING

Name of the practical training General medical practice: physician assistant of an outpatient clinic

Recommended for the direction of training/specialty 31.05.01 General medicine

Focus of the program

General medicine

Graduate qualification

Doctor of medicine

1. The purpose of the practical training.

The purpose of the practical training **"physician assistant of an outpatient clinic"** is to consolidate and deepen the theoretical training of the student, to acquire practical skills, possessions and skills, to form competencies that make up the content of the professional activity of the assistant therapist.

Tasks of practical training

* improvement and consolidation of skills and abilities according to the method of examination of a therapeutic patient, making a clinical diagnosis and its explenation;
* drawing up a plan and interpreting the results of the examination; drawing up a plan for the treatment and prevention of diseases of a therapeutic profile;

* to develop students ' skills of clinical thinking on the diagnosis of the most common diseases in a polyclinic, assessment of the features of their course, outpatient treatment, examination of working capacity and medical examination.

* ensure that students master the basic principles of organizing medical care for the population in polyclinic conditions.

* to familiarize students with the peculiarities of the organization and scope of work of the district general practitioner of the polyclinic and the general practitioner.

* develop skills in providing emergency care at the pre-hospital stage in life-threatening conditions and acute diseases.

* to teach students the basic principles of disease prevention, the formation of a healthy lifestyle among the population.

* to familiarize students with the modern diagnostic capabilities of the polyclinic service and to teach them rational use.

2. Place of practical training in the structure of the OP VO:

V-year students are attached to the doctor of the surgical department and work in the ward under his supervision, supervising from 6 to 12 patients. At the same time, students learn to fill out a medical history (using methods of physical examination of the patient), to establish a diagnosis of the disease, to prescribe the necessary additional methods of special examinations, to prepare patients for operations and to monitor patients in the postoperative period. The work should begin with the presence at the morning medical conference.

The practical training of students takes place in the 9th semester of the V course is based on the theoretical knowledge of the courses: "Propaedeutics of internal diseases", "Faculty therapy", "Hospital therapy" and "Polyclinic therapy". In addition, medical practice is based on practical knowledge and skills acquired earlier during medical practice.

3. Forms of practical training "physician assistant of an outpatient clinic".

Clinical (City clinical hospitals of Moscow)

4. Place and time of practical training "physician assistant of an outpatient clinic".

The practice is conducted at clinical bases in the City clinical hospitals of Moscow. The direct managers of the practice are employees of various departments of the Medical Faculty of the RUDN.

5. Competences of the student, formed as a result of practical training:

Table 1 shows the previous and subsequent disciplines aimed at the formation of the discipline's competencies in accordance with the competence matrix of the OP VO.

Table 1

Previous and subsequent disciplines aimed at the formation of the discipline's competencies

| N⁰ | Code and name of | Previous disciplines | Subsequent disciplines | |
|-------|---|--|---|--|
| p/p | competency | - | (groups of disciplines) | |
| Gener | al professional competenc | ies | | |
| 1 | GPC-2. Being able to monitor the effectiveness of preventive measures, healthy lifestyle formation and sanitary and hygienic education of the population | Propaedeutics of internal diseases; Faculty therapy; General surgery; Faculty Surgery; Polyclinic therapy | Faculty therapy; Hospital therapy; Endocrinology; Faculty Surgery; Hospital therapy; Surgery; Polyclinic therapy | |
| 2 | GPC-7. Being able to prescribe treatment and monitor its efficacy and safety | Propaedeutics of internal diseases; Faculty therapy; General surgery; Faculty Surgery; Polyclinic therapy | Faculty therapy;Hospital therapy;Endocrinology;Faculty Surgery;Hospital therapy; Surgery;Polyclinic therapy | |
| Проф | ессиональные компетен | ции | | |
| 1 | PC-1. Being able to provide emergency or urgent medical care to a patient | Propaedeutics of internal diseases; Faculty therapy; General surgery; Faculty Surgery; Polyclinic therapy | Faculty therapy; Hospital therapy; Endocrinology; Faculty Surgery; Hospital therapy; Surgery; Polyclinic therapy | |
| 2 | PC-2. Being able to examine a patient in order to determine a diagnosis | Propaedeutics of internal diseases; Faculty therapy; General surgery; Faculty Surgery; Polyclinic therapy | Faculty therapy; Hospital therapy; Endocrinology; Faculty Surgery; Hospital therapy; Surgery; Polyclinic therapy | |
| 3 | PC-3. Being able to prescribe treatment and monitor its efficacy and safety | Propaedeutics of internal diseases; Faculty therapy; General surgery; Faculty Surgery; Polyclinic therapy | Faculty therapy; Hospital therapy; Endocrinology; Faculty Surgery; Hospital therapy; Surgery; Polyclinic therapy | |
| 4 | PC-4. Being able to implement and monitor the patient's medical rehabilitation efficacy, including when implementing individual rehabilitation and habilitation programmes for persons with disabilities; assess the | Propaedeutics of internal diseases; Faculty therapy; General surgery; Faculty Surgery; Polyclinic therapy | Faculty therapy; Hospital therapy; Endocrinology; Faculty Surgery; Hospital therapy; Surgery; Polyclinic therapy | |

| | patient's ability to work | | |
|---|---|--|---|
| 5 | PC-5. Being able to carry out preventive measures and measures to promote a healthy lifestyle and sanitary and hygiene education among population and monitor their effectiveness | Propaedeutics of internal diseases; Faculty therapy; General surgery; Faculty Surgery; Polyclinic therapy | Faculty therapy; Hospital therapy; Endocrinology; Faculty Surgery; Hospital therapy; Surgery; Polyclinic therapy |
| 6 | PC-6. Being able to keep medical records and organize the activities of the nursing staff | Propaedeutics of internal diseases; Faculty therapy; General surgery; Faculty Surgery; Polyclinic therapy | Faculty therapy; Hospital therapy; Endocrinology; Faculty Surgery; Hospital therapy; Surgery; Polyclinic therapy |

The process of studying the discipline is aimed at the formation of the following competencies:

Table 2

| Competence | Competence name | Competence achievement indicators |
|------------|-----------------------|---|
| GPC-2. | Being able to | GPC-2.1. Being able to analyse the awareness of the |
| | monitor the | population of a healthy lifestyle and medical literacy. |
| | effectiveness of | GPC-2.2. Being able to develop a plan of organizational |
| | preventive | and methodical measures aimed at increasing the |
| | measures, healthy | awareness of the population of a healthy lifestyle, its |
| | lifestyle formation | literacy concerning disease prevention issues. |
| | and sanitary and | GPC-2.3. Being able to prepare an oral presentation or a |
| | hygienic education | printed text which promote a healthy lifestyle and |
| | of the population | increase the population's literacy concerning disease |
| | | prevention issues. |
| GPC-7. | Being able to | GPC-7.1. Mastering skills in the methods of general |
| | prescribe treatment | clinical examination, interpretation of laboratory results, |
| | and monitor its | instrumental diagnostic methods. |
| | efficacy and safety | GPC-7.2. Being aware of the algorithm for making a |
| | | preliminary diagnosis with the subsequent referral of the |
| | | patient to the relevant medical specialist. |
| PC-1. | Being able to provide | PC-1.1. Being able to assess the condition of a patient |
| | emergency or urgent | who needs emergency or urgent medical care. |
| | medical care to a | PC-1.2. Being able to recognize conditions that arise |
| | patient | from sudden acute diseases, exacerbation of chronic |
| | | diseases without obvious signs of a threat to the patient's |
| | | life and which require emergency medical care. |
| | | PC-1.3. Being able to provide emergency medical care |
| | | to patients with sudden acute diseases, conditions, |
| | | exacerbation of chronic diseases without obvious signs |
| | | of a threat to the patient's life. |
| | | PC-1.4. Being able to recognize conditions which pose |
| | | a threat to the patient's life, including conditions of |
| | | clinical death (cessation of the vital bodily functions |

Competencies to be formed

| | | (plood airculation and/or require(i-n)1:-1 |
|-------|----------------------|--|
| | | (blood circulation and/or respiration) which require |
| | | emergency medical care. |
| | | PC-1.5. Being able to provide emergency medical care |
| | | to patients in conditions which pose a threat to the |
| | | patient's life, including clinical death (cessation of the |
| | | vital bodily functions (blood circulation and/or |
| | | respiration). |
| | | PC-1.6. Being able to use drugs and medical devices |
| | | when providing medical care in emergency or urgent |
| | | forms. |
| PC-2. | Being able to | PC-2.1. Mastering the skills to collect complaints, |
| | examine a patient in | anamnesis of the patient's life and disease, as well as |
| | order to determine a | conduct a complete physical examination of the patient |
| | diagnosis | (examination, palpation, percussion, auscultation). |
| | C . | PC-2.2. Being able to make a preliminary diagnosis and |
| | | make up a plan of laboratory and instrumental |
| | | examinations of a patient. |
| | | PC-2.3. Being able to refer a patient to a laboratory |
| | | examination in case there are medical indications in |
| | | accordance with the current procedures for the provision |
| | | of medical care, clinical guidelines (treatment protocols) |
| | | on the provision of medical care taking into account the |
| | | medical care standards. |
| | | PC-2.4. Being able to refer a patient to an instrumental |
| | | examination in case there are medical indications in |
| | | accordance with the current procedures for the provision |
| | | of medical care, clinical guidelines (treatment protocols) |
| | | on the provision of medical care taking into account the |
| | | standards of medical care. |
| | | PC-2.5. Being able to refer a patient to consult with a |
| | | medical specialist if there is a medical indication in |
| | | 1 |
| | | accordance with the current procedures for the provision |
| | | of medical care, clinical guidelines (treatment protocols) |
| | | on the provision of medical care taking into account the |
| | | standards of medical care. |
| | | PC-2.6. Being able to refer a patient to be provided with |
| | | specialized medical care in an inpatient setting or in a day |
| | | hospital in case there are medical indications in |
| | | accordance with the current procedures for the provision |
| | | of medical care, clinical guidelines (treatment protocols) |
| | | on the provision of medical care taking into account the |
| | | standards of medical care. |
| | | PC-2.7. Being able to carry out differential diagnosis with |
| | | other diseases/conditions, including the urgent ones, as |
| | | well as to make a diagnosis taking into account the current |
| | | international statistical classification of diseases and |
| | | problems related to health (ISC). |
| PC-3. | Being able to | PC-3.1. Being able to develop a treatment plan for a |
| | prescribe treatment | disease or condition taking into account the diagnosis, |
| | and monitor its | age and clinical picture in accordance with the current |
| | efficacy and safety | procedures for the provision of medical care, clinical |
| | | guidelines (treatment protocols) on the provision of |
| | | |

| | | medical care taking into account the standards of medical |
|-------|-----------------------|--|
| | | care. |
| | | PC-3.2. Being able to prescribe medicinal drugs, medical |
| | | devices and medical nutrition taking into account the |
| | | diagnosis, age and clinical picture of the disease and in |
| | | accordance with the current procedures for the provision |
| | | of medical care, clinical guidelines (treatment protocols) |
| | | on the provision of medical care taking into account the |
| | | standards of medical care. |
| | | PC-3.3. Being able to prescribe non-drug treatment |
| | | taking into account the diagnosis, age and clinical picture |
| | | of the disease in accordance with the current procedures |
| | | for the provision of medical care, clinical guidelines |
| | | (treatment protocols) on the provision of medical care |
| | | taking into account the standards of medical care. |
| | | PC-3.4. Being able to assess the efficacy and safety of the |
| | | use of drugs, medical devices, medical nutrition and |
| | | other treatment methods. |
| | | PC-3.5. Being able to provide palliative care in |
| | | collaboration with medical specialists and other healthcare professionals. |
| | | PC-3.6. Being able to organize personalized treatment for |
| | | a patient, including pregnant women, elderly and senile |
| | | patients; assess the efficacy and safety of treatment. |
| PC-4. | Being able to | PC-4.1. Being able to conduct an examination of |
| 10-4. | implement and | temporary disability and work as part of a medical |
| | monitor the patient's | commission which examines temporary disability. |
| | medical | PC-4.2. Being able to prepare necessary medical |
| | rehabilitation | documentation to carry out medical and social |
| | efficacy, including | examination in federal state institutions of medical and |
| | when implementing | social examination. |
| | individual | PC-4.3. Being able to carry out medical rehabilitation |
| | rehabilitation and | measures for a patient, including when implementing an |
| | habilitation | individual rehabilitation or habilitation programme for |
| | programmes for | persons with disabilities, in accordance with the current |
| | persons with | procedures for the provision of medical care, clinical |
| | disabilities; assess | guidelines (treatment protocols) on the provision of |
| | the patient's ability | medical care taking into account the standards of medical |
| | to work | care. |
| | | PC-4.4. Being able to refer a patient who needs medical |
| | | rehabilitation to a medical specialist so that they |
| | | prescribe and carry out medical rehabilitation measures, |
| | | including when implementing an individual |
| | | rehabilitation or habilitation programme for persons with |
| | | disabilities, in accordance with the current procedures for |
| | | the provision of medical care, clinical guidelines |
| | | (treatment protocols) on provision of medical care taking |
| | | into account the standards of medical care. |
| | | PC-4.5. Being able to refer a patient who needs medical |
| | | rehabilitation to a medical specialist so that they |
| | | prescribe and carry out sanatorium treatment, including |
| 1 | | when implementing an individual rehabilitation or |

| habilitation programme for persons with disabilities, in accordance with the current procedures for the provision of medical care taking into account the standards of medical care taking into account the standards of medical care. PC-4.6. Being able to assess the efficacy and safety of medical rehabilitation measures for a patient in accordance with the current procedures for the provision of medical care. PC-5. Being able to carry out effects to a medical and social examination ad monitor their effectiveness PC-5.1. Being able to organize and conduct medical examination and monitor their effectiveness PC-5.2. Being able to organize and monitor the immunization of medical care. PC-5.3. Being able to acry out medical examination of the adult population against infectious diseases in accordance with the current procedures for their development in accordance with the current procedures for their development in accordance with the current procedures for their development in accordance with the current procedures for their development in accordance with the current procedures for their development in accordance with the current procedures for their development in accordance with the current procedures for their development in accordance with the current legislative acts and other documents. PC-5.5. Being able to prescribe preventive measures to patients taking into account risk factors for their development in accordance with the current legislative acts and other documents. PC-5.6. Being able to prescribe preventive measures to patients taking into account risk factors of nedical care. PC-5.7. Being able to carry out follow-up care of patients with diagnosed chronic noncommunicable diseases. PC-5.6. Being able to actry out follow-up care of patients with diagnosed chronic noncommunicable diseases. PC-5.7. Being able to determine medical indications to introduce | PC-5.Being able to carry out preventive measures and measures to promote a healthy lifestyle and sanitary and hygiene education and monitor their effectivenessBeing able to carry ecount the component of the provision of medical care taking into account the standards of medical care. PC-4.6. Being able to assess the efficacy and safety medical rehabilitation measures for a patient accordance with the current procedures for the provisio of medical care. PC-4.6. Being able to assess the efficacy and safety medical rehabilitation measures for a patient accordance with the current procedures for the provisio of medical care, clinical guidelines (treatment protocol on the provision of medical care taking into account the standards of medical care.PC-5.Being able to carry out preventive measures to promote a healthy lifestyle and sanitary and hygiene education and monitor their effectivenessPC-5.2. Being able to organize and monitor the immunization of the adult population against infectio diseases in accordance with the current procedures f the provision of medical care, clinical guidelin (treatment protocols) on the provision of medical care. | | | |
|---|--|-------|--|--|
| PC-5. Being able to carry out preventive measures and measures to promote a healthy lifestyle and sanitary and hygiene education among population and monitor their effectiveness effectiveness PC-5.2. Being able to organize and monitor the immunization of the adult population against infectious diseases in accordance with the current procedures for the provision of medical care. PC-5.3. Being able to carry out medical care. PC-5.3. Being able to carry out medical care. PC-5.4. Being able to carry out medical care. PC-5.5. Being able to carry out medical care. PC-5.5. Being able to carry out medical care. PC-5.6. Being able to carry out medical care. PC-5.6. Being able to prescribe preventive measures to patients taking into account risk factors in accordance with the current legislative acts and other documents. PC-5.6. Being able to prescribe preventive measures to patients taking into account risk factors in accordance with the current legislative acts and other documents. PC-5.6. Being able to monitor observing preventive measures. PC-5.7. Being able to determine medical indications to introduce restrictive measures (quarantine) and indications for referral to a medical specialist in the event of infectious (parastic) diseases. PC-5.8. Being able to issue and send an emergency notification to the territorial body of the Federal Service for Surveillance on Consumer Rights Protection and Human Wellbeing when an infectious or occupational disease is detected. PC-5.9. Being able to carry out anti-epidemic measures. | PC-5.Being able to carry out preventive measures and measures to promote a healthy lifestyle and sanitary and hygiene education and monitor their effectivenessPC-5.1. Being able to organize and conduct medic examinations taking into account age, health statu profession in accordance with applicable legislative ac and other documents.PC-5.2. Being able to organize and monitor t immunization of the adult population against infectio diseases in accordance with the current procedures f the provision of medical care, clinical guidelin (treatment protocols) on the provision of medical care. | | | of medical care, clinical guidelines (treatment protocols) on the provision of medical care taking into account the standards of medical care. PC-4.6. Being able to assess the efficacy and safety of medical rehabilitation measures for a patient in accordance with the current procedures for the provision of medical care, clinical guidelines (treatment protocols) on the provision of medical care taking into account the standards of medical care. PC-4.7. Being able to refer a patient with a persistent bodily dysfunction caused by diseases, the consequences |
| measures and measures to promote a healthy lifestyle and sanitary and hygiene education and monitor their effectiveness PC-5.2. Being able to organize and monitor the immunization of the adult population against infectious diseases in accordance with the current procedures for the provision of medical care, clinical guidelines (treatment protocols) on the provision of medical care taking into account the standards of medical examination of the adult population aimed at early detection of chronic noncommunicable diseases and the main risk factors for their development in accordance with the current legislative acts and other documents. PC-5.4. Being able to carry out follow-up care of patients with diagnosed chronic noncommunicable diseases. PC-5.5. Being able to prescribe preventive measures to patients taking into account risk factors in accordance with the current procedures for the provision of medical care, clinical guidelines (treatment protocols) on the provision of medical care taking into account the standards of medical care. PC-5.6. Being able to determine medical indications to introduce restrictive measures (quarantine) and indications for referral to a medical specialist in the event of infectious (parasitic) diseases. PC-5.8. Being able to issue and send an emergency notification to the territorial body of the Federal Service for Surveillance on Consumer Rights Protection and Human Wellbeing when an infectious or occupational disease is detected. PC-5.9. Being able to carry out anti-epidemic measures | measures and measures to promote a healthy lifestyle and sanitary and hygiene education and monitor their effectiveness measures and profession in accordance with applicable legislative ad and other documents. PC-5.2. Being able to organize and monitor t immunization of the adult population against infectio diseases in accordance with the current procedures f the provision of medical care, clinical guidelin (treatment protocols) on the provision of medical care. | PC-5. | | PC-5.1. Being able to organize and conduct medical |
| including quarantine measures when especially dangerous (quarantine) infectious diseases are detected. | noncommunicable diseases and the main risk factors f their development in accordance with the currer legislative acts and other documents. PC-5.4. Being able to carry out follow-up care of patier with diagnosed chronic noncommunicable diseases. PC-5.5. Being able to prescribe preventive measures patients taking into account risk factors in accordan with the current procedures for the provision of medic care, clinical guidelines (treatment protocols) on t provision of medical care taking into account t standards of medical care. PC-5.6. Being able to monitor observing preventi measures. PC-5.7. Being able to determine medical indications introduce restrictive measures (quarantine) a indications for referral to a medical specialist in the eve of infectious (parasitic) diseases. PC-5.8. Being able to issue and send an emergen notification to the territorial body of the Federal Servi for Surveillance on Consumer Rights Protection a Human Wellbeing when an infectious or occupatior disease is detected. PC-5.9. Being able to carry out anti-epidemic measur in the event of the occurrence of a focus of infectio including quarantine measures when especial | | out preventive measures and measures to promote a healthy lifestyle and sanitary and hygiene education among population and monitor their | examinations taking into account age, health status, profession in accordance with applicable legislative acts and other documents. PC-5.2. Being able to organize and monitor the immunization of the adult population against infectious diseases in accordance with the current procedures for the provision of medical care, clinical guidelines (treatment protocols) on the provision of medical care. PC-5.3. Being able to carry out medical examination of the adult population aimed at early detection of chronic noncommunicable diseases and the main risk factors for their development in accordance with the current legislative acts and other documents. PC-5.4. Being able to carry out follow-up care of patients with diagnosed chronic noncommunicable diseases. PC-5.5. Being able to prescribe preventive measures to patients taking into account risk factors in accordance with the current procedures for the provision of medical care. PC-5.6. Being able to monitor observing preventive measures. PC-5.7. Being able to determine medical indications to introduce restrictive measures (quarantine) and indications for referral to a medical specialist in the event of infectious (parasitic) diseases. PC-5.8. Being able to issue and send an emergency notification to the territorial body of the Federal Service for Surveillance on Consumer Rights Protection and Human Wellbeing when an infectious or occupational disease is detected. PC-5.9. Being able to carry out anti-epidemic measures in the event of the occurrence of a focus of infection, including quarantine measures when especially |

| | | PC-5.10. Being able to develop healthy lifestyle programmes, including the ones to reduce alcohol and tobacco consumption, prevent and combat non-medical use of narcotic drugs and psychotropic substances. PC-5.11. Being able to assess the effectiveness of preventive patient care. |
|-------|---|--|
| PC-6. | Being able to keep medical records and organize the activities of the nursing staff | PC-6.1. Being able to draw up a work plan and report on their work, issue a passport for a healthcare (therapeutic) area. PC-6.2. Being able to analyze morbidity, disability and mortality rates to characterize the health of the registered population. PC-6.3. Being able to keep medical records, including in the electronic form. PC-6.4. Being able to monitor the performance of official duties by a district nurse and other medical workers at the disposal. PC-6.5. Being able to provide internal control of quality and safety of medical activities within the scope of employment responsibilities. |

As a result of studying the discipline, the student must:

know:

- fundamentals of the legislation of the Russian Federation on public health protection, the main regulatory and technical documents for the provision of outpatient care;
- basic principles of organization of outpatient care to the population;
- fundamentals of legislation on the sanitary and epidemiological welfare of the population, the main official documents regulating anti-epidemiological services for infectious and parasitic diseases; regulatory documents on the prevention of hospital infections, the legal basis of state policy in the field of immunoprophylaxis;
- the basics of organizing the activities of outpatient clinics in the conditions of budgetinsurance medicine in the Russian Federation;
- organization of medical control over the state of public health, issues of examination of disability;
- the use of statistical indicators in assessing the activities of outpatient clinics;
- maintenance of standard accounting and reporting medical documentation by a polyclinic therapist and a general practitioner;
- health indicators of the population at the therapeutic site;
- diseases associated with the adverse effects of climatic and social factors;
- fundamentals of preventive medicine, organization of preventive measures aimed at improving the health of the population;
- methods of sanitary and educational work;
- implementation of anti-epidemic measures at the medical site;
- etiology, pathogenesis and prevention measures of the most common diseases;
- modern classification of diseases of ICD 10 revision;
- the clinical picture, features of the course and various complications of the most common diseases occurring in a typical form in different age groups;

- diagnostic methods, algorithm and diagnostic capabilities of therapeutic and infectious patient research methods, modern methods of clinical, laboratory, instrumental examination of patients (including endoscopic, X-ray methods, ultrasound diagnostics, express diagnostic methods);
- the basics of organizing outpatient care for various groups of the population, the principles of medical examination of the population, rehabilitation of patients;
- criteria for the diagnosis of various diseases;
- features of the organization of the work of an outpatient doctor, modern diagnostic capabilities of the polyclinic service, methods of emergency measures, indications for planned hospitalization of patients;
- treatment methods and indications for their use;
- the mechanism of therapeutic action of physical therapy and physiotherapy, indications and contraindications to their appointment, features of their implementation;
- clinical manifestations of major surgical syndromes;
- features of the organization of medical care during mass and sports events;
- types of inheritance of diseases and clinical manifestations of hereditary pathology, general characteristics of diseases with a hereditary predisposition, general principles and features of the diagnosis of hereditary diseases, causes of origin and diagnostic significance of morphogenetic variants of diseases;
- the main clinical manifestations of infectious diseases in general medical practice, the main methods of their laboratory and instrumental diagnostics used in the polyclinic;
- features of the organization of work with patients with HIV infection;
- the main clinical manifestations of skin diseases (scabies, pediculosis, dermatophytosis), HIV infection and sexually transmitted infections;
- clinical and pharmacological characteristics of the main groups of medicines and rational choice of specific medicines in the treatment of major pathological syndromes of diseases and emergency conditions in patients;
- the main stages of the work of a doctor in the primary health care system in an outpatient clinic.

To be able to:

- analyze the health status of the population and the impact of environmental and industrial factors on it;
- participate in the organization and provision of medical and preventive and sanitary-antiepidemic assistance to the population, taking into account its socio-professional and agesexual structure;
- perform preventive, hygienic and anti-epidemic measures;
- determine the patient's status: collect anamnesis, conduct a survey of the patient and/or his relatives, conduct a physical examination of the patient (examination, palpation, auscultation, measurement of blood pressure, determination of the properties of the arterial pulse, etc.); assess the patient's condition to make a decision on the need for medical care; conduct an initial examination of the systems and organs: nervous, endocrine, immune, respiratory, cardiovascular, blood and hematopoietic organs, digestive, urinary, reproductive, musculoskeletal and joints, eye, ear, throat, nose;
- set priorities for solving the patient's health problems: critical (terminal) condition, condition with pain syndrome, condition with chronic disease, condition with infectious disease, disability, geriatric problems, condition of mentally ill patients;
- assess the social factors affecting the patient's physical and psychological health: cultural, ethnic, religious, individual, family, social risk factors (unemployment, violence, illness and death of relatives, etc.);
- be able to make a preliminary and clinical diagnosis;

- to outline the necessary volume of additional studies in accordance with the prognosis of the disease to clarify the diagnosis and obtain a reliable result;
- choose an individual type of care for the treatment of the patient in accordance with the situation: primary care, ambulance, hospitalization;
- develop a plan of therapeutic actions, taking into account the course of the disease and its treatment;
- formulate indications for the chosen method of treatment, taking into account etiotropic and pathogenetic agents, justify pharmacotherapy in a particular patient with major pathological syndromes and urgent conditions, determine the route of administration, regimen and dose of medications, evaluate the effectiveness and safety of the treatment;
- use various methods of administration of medicines;
- monitor the indicators of hemodynamics and respiration;
- conduct a permanent set of measures for the primary and secondary prevention of diseases requiring therapeutic treatment with the population of the attached area,
- carry out preventive measures to increase the body's resistance to adverse environmental factors using various methods of physical culture and sports, hardening, promote a healthy lifestyle;
- fill out the medical card of an outpatient patient, write a prescription;
- apply the legal and medical aspects of the death of a person;
- provide medical and preventive care to the population in a polyclinic;
- provide emergency care to patients at the pre-hospital stage.

To master:

- proper management of medical documentation in the polyclinic;
- methods of general clinical examination;
- interpretation of the results of laboratory and instrumental diagnostic methods;
- the algorithm for making a preliminary diagnosis with the subsequent referral of the patient to the appropriate specialist doctor;
- the algorithm of a detailed clinical diagnosis;
- the main medical diagnostic and therapeutic measures for providing first aid in urgent and life-threatening conditions.

6. Structure and content of the practical training "physician assistant of an outpatient clinic".

The total labour input of training practice is **3 credit units.**

| No p/p | Stages of the practice | Types of production work, in practice, including independent work of students and labor intensity (in hours) | | | Forms of current |
|-----------|---|--|-----|---------------------|---------------------|
| | | Practical classes | CPC | Workload (hours) | control |
| 1 | Safety instructions. | 2 | 1 | 3 | Journal |
| 2 | Organization of the work of outpatient clinics. | 4 | 2 | 6 | Journal |
| 3 | Work as an assistant doctor of outpatient clinics | 66 | 33 | 99 | Journal |

| Total | 72 | 36 | 108 | |
|-------|----|----|-----|--|
| | | | | |

7. Educational, research and scientific-production technologies used during the productive practice "physician assistant of an outpatient clinic".

Educational, research and production technologies should be used in the process of practical training.

Educational technologies during the internship include:

- safety instructions; organization tour; primary briefing in the workplace;
- use of library stock;
- organizational and informative technologies (attendance at meetings, conferences, etc.);
- verbal communication technologies (conversations with managers, specialists);
- mentoring (work in the period of practice as a student of an experienced specialist);
- information and communicative technologies (information from the Internet, e-mail, etc.);
- work in the library (clarification of the content of educational and scientific problems, professional and scientific terms, indicators), etc.

Scientific and production technologies during internships include: innovative technologies used in the organization, studied and analysed by students in the course of practice.

Research technologies in practice include: defining a problem, object and subject of research, setting a research task; development of research tools; observation, measurement, fixation of results; collection, processing, analysis and preliminary systematization of factual and literary material.

8. Teaching and methodological support for students' independent work during practical training "physician assistant of an outpatient clinic".

The equipment necessary for the successful completion of practical training is presented by the departments of various profiles of clinical hospitals and the departments of the medical institute responsible for the practice.

Standard equipment of medical facilities departments.

9. Information support of the discipline

a) program software

"Mentor" Testing Program

6) databases, reference and search systems

- Electronic library system of the RUDN
- RUDN Educational Portal (http://web-local.rudn.ru)
- Official website of the Ministry of Health of the Russian Federation (https://minzdrav.gov.ru)
- Official website of the Social Insurance Fund of the Russian Federation (http://www.fss.ru)
- Scientific Electronic Library (http://elibrary.ru/defaultx.asp)
- Universal Library ONLINE (http://biblioclub.ru)
- BENTHA MOPEN Electronic Magazine Library (http://www.benthamscience.com/open/a-z.htm)

- Elsevier Electronic Magazine Library (http://www.elsevier.com/about/open-access/open archives)
- MedLib Online Medical Library (http://med-lib.ru/)
- Telecommunications educational and information System (<u>https://esystem.rudn.ru/)</u>

10. Educational-methodical support of the discipline.

a) basic literature:

1. regulatory legal acts:

1) Федеральный закон Российской Федерации от 21 ноября 2011 г. N 323-ФЗ «Об основах охраны здоровья граждан в Российской Федерации» (последняя редакция)

2) Федеральный закон от 29 ноября 2010 г N 326-ФЗ «Об обязательном медицинском страховании в Российской Федерации» (последняя редакция)

3) Федеральный закон от 27 июля 2006 г N 152-ФЗ «О персональных данных» (последняя редакция)

4) Федеральный закон от 30 марта 1999 г N 52-ФЗ О санитарно-эпидемиологическом благополучии населения» (последняя редакция)

5) Федеральный закон от 17.07.1999 N 178-ФЗ «О государственной социальной помощи» (последняя редакция)

6) Постановление Правительства Российской Федерации от 28 декабря 2020 г. № 2299 «О Программе государственных гарантий бесплатного оказания гражданам медицинской помощи на 2021 год и на плановый период 2022 и 2023 годов»

7) Приказ Минздравсоцразвития России от 15.05.2012 N 543н «Об утверждении Положения об организации оказания первичной медико-санитарной помощи взрослому населению» (последняя редакция)

8) Приказ Минздрава России от 15.12.2014 N 834н «Об утверждении унифицированных форм медицинской документации, используемых в медицинских организациях, оказывающих медицинскую помощь в амбулаторных условиях, и порядков по их заполнению»

9) Приказ Минздрава России от 14.09.2020 N 972н «Об утверждении Порядка выдачи медицинскими организациями справок и медицинских заключений»

10) Приказ Минздрава России от 31.07.2020 N 789н «Об утверждении порядка и сроков предоставления медицинских документов (их копий) и выписок из них»

11) Приказ Минздрава России от 28.09.2020 N 1029н «Об утверждении перечней медицинских показаний и противопоказаний для санаторно-курортного лечения»

12) Приказ Минздрава России от 14 января 2019 г. N 4н (ред. от 08.10.2020) «Об утверждении порядка назначения лекарственных препаратов, форм рецептурных бланков на лекарственные препараты, порядка оформления указанных бланков, их учета и хранения»

13) Приказ Минздравсоцразвития России от 22.11.2004 N 255 «О Порядке оказания первичной медико-санитарной помощи гражданам, имеющим право на получение набора социальных услуг» (последняя редакция)

14) Распоряжение Правительства РФ от 12.10.2019 N 2406-р (ред. от 23.11.2020) «Об утверждении перечня жизненно необходимых и важнейших лекарственных препаратов, а также перечней лекарственных препаратов для медицинского применения и минимального

ассортимента лекарственных препаратов, необходимых для оказания медицинской помощи» (с изм. и доп., вступ. в силу с 01.01.2021

15) Приказ Минздрава России от 29.03.2019 N 173н «Об утверждении порядка проведения диспансерного наблюдения за взрослыми»

16) Приказ Минздрава России от 13.03.2019 N 124н (ред. от 02.12.2020) «Об утверждении порядка проведения профилактического медицинского осмотра и диспансеризации определенных групп взрослого населения» (последняя редакция)

17) Приказ Минздрава России от 01.09.2020 N 925н «Об утверждении порядка выдачи и оформления листков нетрудоспособности, включая порядок формирования листков нетрудоспособности в форме электронного документа»

18) Приказ Министерства здравоохранения РФ от 23 августа 2016 г. N
625н «Об утверждении Порядка проведения экспертизы временной нетрудоспособности»
19) Приказ Министерства здравоохранения и социального развития Российской Федерации от 26 апреля 2011 г. N 347н «Об утверждении формы бланка листка нетрудоспособности».

20) Приказ Минздравсоцразвития России от 05.05.2012 N 502н «Об утверждении порядка создания и деятельности врачебной комиссии медицинской организации» (последняя редакция)

21) Приказ Минздрава России от 10.05.2017 N 203н "Об утверждении критериев оценки качества медицинской помощи»

22) Приказ Минтруда России от 21.03.2017 N 293н «Об утверждении профессионального стандарта "Врач-лечебник (врач-терапевт участковый)»

23) Приказ Минтруда России от 31.07.2020 N 475н «Об утверждении профессионального стандарта «Медицинская сестра/медицинский брат»

24) Приказы Минздрава России об утверждении порядков, стандартов оказания медицинской помощи и клинических рекомендаций /Сайт Минздрава России https://minzdrav.gov.ru/documents

2) educational literature:

 Основные терапевтические синдромы в амбулаторной практике врача: учебное пособие / Н.В. Стуров, Г.Н. Кобыляну, Е.В. Митина, И.Н. Химина. - Электронные текстовые данные.
 - М.: Изд-во РУДН, 2019. - 276 с. - ISBN 978-5-209-08886-8 : 123.60.

2) Поликлиническая терапия: учебник / И.И. Чукаева, Б.Я. Барт, В.Н. Ларина [и др.]; Под ред. И.И.Чукаевой, Б.Я.Барта. - Электронные текстовые данные. - М.: Кнорус, 2019. - 696 с.
- ISBN 978-5-406-07200-4 : 1698.00.

3) Амбулаторно-поликлиническая терапия. Стандарты медицинской помощи. Критерии оценки качества: фармакологический справочник / сост. А.И. Муртазин. - Москва: ГЭОТАР-Медиа, 2019. - 624 с. - ISBN 978-5-9704-5087-1.

4) Поликлиническая терапия: учебник / О.В. Агафонова, С.В. Булгакова, Ю.В. Богданова [и др.]; под ред. Давыдкина И.Л., Щукина Ю.В. - 2-е изд., перераб. и доп.; Электронный текстовые данные. - Москва: ГЭОТАР-Медиа, 2020. - 840 с. - ISBN 978-5-9704-5545-6.

b) additional literature:

1) Сроки изоляции больных инфекционными заболеваниями и лиц, соприкасавшихся с ними. Методические рекомендации. Утв. МЗ РСФСР 15.10.1980 г.

2) Ориентировочные сроки временной нетрудоспособности при наиболее распространённых заболеваниях и травмах (в соответствии с МКБ-10). Рекомендации для руководителей лечебно- профилактических учреждений и лечащих врачей, специалистовврачей и исполнительных органов Фонда социального страхования Российской Федерации. Утв. 18.08.2000 г МЗ РФ и ФСС РФ N 2510/9362-34 и N 02-08/10-1977П.

3) Постановление Правительства Российской Федерации от 20 февраля 2006 г. N 95 «Об условиях и порядке признания лица инвалидом» (последняя редакция)

4) Приказ Министерства труда и социальной защиты Российской Федерации от 29.09.2014 г. N 664н «О классификациях и критериях при осуществлении медико-социальной экспертизы граждан федеральными государственными учреждениями медико-социальной экспертизы» (последняя редакция)

5) Стуров Н.В., Кобыляну Г.Н., Кузнецов В.И. Лекарственное лечение сердечнососудистых заболеваний в амбулаторной практике. М.: Академиздат, 2014.– 72 с.

11. Methodological recommendations for the organization of the practical training:

Students work from 09:00 to 15:00 (total time is 6 hours), but the working hours can be changed according to the working hours of the medical staff of the outpatient clinic. The practice takes place under the supervision of a doctor. During the period of practical training, he fills out medical records after examining patients using physical methods, formulates a clinical diagnosis, if necessary, uses methods of special research of patients, actively participating in these studies. Daily monitoring of the patient is recorded by entries in diaries. In consultation with the attending physician and under his supervision, prescribes the treatment of the patient.

12. Evaluation fund for the intermediate certification of students in practical training "Surgical Practice: Surgeon's Assistant".

Materials for assessing the level of mastering practical material on industrial practice "physician assistant of an outpatient clinic", including a list of competencies indicating the stages of their formation, a description of indicators and criteria for assessing competencies at various stages of their formation, a description of the assessment scales, typical control tasks or other materials necessary to assess knowledge, skills, techniques and (or) experience of activity, characterizing the stages of competencies formation in the process of mastering the educational program. Methodological materials that define procedures for assessing knowledge, skills, and (or) the experience of activities that characterize the stages of competencies formation are fully developed and available for students at the discipline page in the TUIS electronic system of the RUDN University.

The program was drawn up in accordance with the requirements of the Federal State Educational Standard of Higher Education.

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