

Quality Management System
Syllabus of the discipline "Surgical Diseases"
Specialty 560001 "General Medicine" EI "RMU"

# Ministry of education and science of Kyrgyz Republic EI "Royal Metropolitan University" Department of clinical disciplines



#### **SYLLABUS**

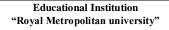
of the discipline "Surgical Diseases" for students of specialty 560001 "General medicine"

Form of study	full-
	time
Course	4
Semester	8
Credit	3
Total credits in the curriculum	3
Total hours according to the	90
curriculum	
Lectures	18
Practical lessons	36
Independent work	36

Syllabus developer: Assistant: Dadabaev A.M. Reviewed and approved at a meeting of the Department of "Clinical disciplines"

Protocol No. <u>1</u> from "<u>9</u>" <u>09</u> 2023 Head of the department Bekibaeva B.S.

(signature)





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#### Name and complexity of the discipline.

Cours	Semester	Number of	Number	of	academic	Numbe	r of hours	Total	Number of
e		weeks	hours			for i	ndependent	hours	modules
						work			
			Lectures	Pra	ctical	SIW	SIWT		
				clas	sses				
4	8	18	18		36	18	18	90	2

#### Annotation of the Academic discipline

"Surgical Diseases" is one of the basic disciplines, which lays the foundation for the study of surgical activity, necessary for any doctor-clinician, regardless of his further specialization. It combines the most important theoretical and clinical fundamentals of surgery. A modern doctor, in his practical activities, needs orientation in the basic issues of propaedeutic surgery, knowledge of the issues of emergency diagnosis of acute purulent surgical diseases and injuries, and the ability to provide emergency assistance in various serious conditions. After an analytical study of general issues of surgery, a synthetic study of the fundamentals of clinical surgery becomes possible. Acquiring the skills of clinical, laboratory and instrumental examination of a patient, knowledge of the main syndromes significantly facilitates the subsequent development of other areas of clinical medicine.

### Purpose of the discipline:

The main goal of mastering the discipline is to develop the competencies of students in the specialty "Surgical Diseases", study the theoretical foundations and practical skills of propaedeutic surgery, prepare a specialist for the initial examination of a surgical patient, provide first aid as part of the duties of a doctor in the specialty "General Medicine".

### **Learning Objectives:**

- to determine the attitude of students to the subject being studied and form a basic stock of knowledge among students in the discipline being studied on the basis of lecture, illustrative, and methodological material;
- study of theoretical knowledge in the main sections of propaedeutics of surgical diseases (asepsis, antiseptics, bleeding, desmurgy, wounds, pain and analgesia, surgical infections, circulatory disorders, injuries);



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- teaching students in the basic practical methods necessary for the examination and treatment of surgical patients;
- training in first aid for certain emergency conditions bleeding, injuries, fractures, sprains, burns.

## After mastering the discipline of «Surgical Diseases» the student: *will know*

- basic principles of modern asepsis and antisepsis;
- general principles of clinical and instrumental examination of a surgical patient;
- main surgical symptoms and syndromes;
- fundamentals of anesthesiology and transfusiology in surgery;
- the main stages of treatment of patients with the most common types of surgical diseases;
- diagnostics, principles and methods of providing first medical and surgical aid for emergency conditions (bleeding, trauma, closed injuries of the skull and internal organs, shock, collapse, burns, frostbite, electrical injuries);
- organization of an outpatient surgical service.

#### will be able

- examine a surgical patient with an assessment of the severity of the patient's condition and a description of the local pathological status (status localis);
- determine indications and contraindications, perform primary surgical treatment (PST) of the wound;
- perform local anesthesia;
- apply different types of bandages; apply an elastic bandage to the lower limb;
- apply a warm compress;
- Perform dressing of clean and purulent wounds;
- diagnose certain types of acute purulent diseases of soft tissues, cellular spaces and cavities (furuncle, carbuncle, abscess, phlegmon, hidradenitis, erysipelas, mastitis, paraproctitis, paranephritis, mediastenitis, arthritis, bursitis, peritonitis);
- perform an autopsy, inspection and drainage of a purulent focus (abscess);
- perform immobilization for dislocations and fractures of the upper and lower extremities by using improvised means and transport tires (improvised, standard ones such as Kramer, Dieterichs, etc.);
- perform immobilization for fractures of the spine and pelvic bones;
- provide primary medical care in case of emergency pathology (bleeding, shock, collapse, fainting, burns, frostbite, electrical trauma, etc.) with determining the tactics of further treatment and the type of transportation of the patient as intended;



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- stop external bleeding by digitally pressing the vessel, applying a pressure bandage and tourniquet;
- perform venipuncture and catheterization of peripheral vessels;
- determine blood group according to the ABO system, Rhesus status, test for group and individual compatibility, transfuse blood and blood substitutes with filling out a transfusion protocol;
- determine indications for the prevention of tetanus and gas gangrene;

#### have the skills:

- treating hands with disinfectant solutions, treating hands before surgery and dressing wounds;
- preoperative preparation of the surgical field;
- putting on a sterile gown independently and with the help of an operating nurse, putting on and changing sterile gloves;
- local infiltration anesthesia of superficial soft tissues;
- examination and palpation of the abdomen, mammary glands, digital rectal examination;
- placement of a gas outlet tube, urethral catheter, nasogastric tube and gastric lavage before surgery;
- performing PSC of a wound, opening an abscess;
- wound treatment and the use of basic antiseptics to prevent surgical infection;
- applying and removing sutures from a wound;
- cardiopulmonary resuscitation;
- applying and removing plaster, bandage, scarf bandages, transport splints.



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Contents of the academic discipline

	ments of the acad			itory				t			
			lessons				den	st st		and ol	
N o.	Name sections and topics disciplines (lectures and practical classes)	Lectures	Seminars	Practical lessons	Laboratory works	Total hours for classroom work	Independent work	Student's independent work	Used educational technologies and teaching methods	Models	Forms of current and midterm control
1	Thoracic trauma	2		2		4			<ul> <li>Lecture using video materials (lecture),</li> <li>Oral survey</li> <li>Discussion</li> </ul>		Testing; Solving situational problems.
2	Mediastinum diseases	2		2		4	2	2	<ul> <li>Lecture using video materials (lecture),</li> <li>Simulation technologies (practical)</li> <li>Team-Based Learning (TBL)</li> <li>Case-Based Learning (CBL)</li> <li>Case-study Blitz survey</li> </ul>		Oral survey with reinforcement of material.  Checking the SIW.  Solving situational problems



3	Esophageal motility disorders. Buurhave syndrome, diverticula's		2	2		<ul> <li>Simulation (practical)</li> <li>Problem-Based Learning (PBL)</li> <li>Team-Based Learning (TBL)</li> <li>Case-study</li> <li>Blitz poll</li> </ul>		Assessment of mastery of material through oral questioning.
4	Dysphagia syndrome	2	2	4	2 2	<ul> <li>Lecture using video materials (lecture),</li> <li>Simulation technologies (practical)</li> <li>Team-Based Learning (TBL)</li> <li>Case-study</li> <li>Blitz poll</li> <li>Small group work</li> </ul>	Operating unit simulation	Oral survey. Checking the SIW. Assessment of the development of practical skills (abilities). Solving situational problems.
5	Diaphragmatic hernia		2	2		<ul> <li>Simulation technologies (practical)</li> <li>Team-Based Learning (TBL)</li> <li>Case-study</li> <li>Blitz poll</li> <li>Small group work</li> <li>Communicative method</li> </ul>	Operating unit simulation	Test. Solving situational problems
6	Lung cancer		2	2		<ul> <li>Simulation technologies (practical)</li> <li>Situation-Based Learning (SBL)</li> <li>Case-study</li> </ul>	Simulation of the operating unit, surgical instruments and	Test.  Assessment of the development of



7	Disorders of		2	2			<ul> <li>Blitz poll</li> <li>Small group work</li> <li>Simulation technologies</li> </ul>	preparation of the surgeon's hands.	practical skills (abilities). Solving situational problems  Test.
	arterial blood circulation						<ul> <li>(practical)</li> <li>Team-Based Learning (TBL)</li> <li>Case-study</li> <li>Blitz poll</li> <li>Small group work</li> <li>Communicative method</li> </ul>		Solving situational problems
8	Vein disease		2	2	2	2	<ul> <li>Simulation technologies, as well as the use of video materials (practical)</li> <li>Team-Based Learning (TBL)</li> <li>Case-study</li> <li>Blitz poll</li> <li>Small group work</li> </ul>	Dressing trainer	Testing.  Assessment of the development of practical skills (abilities).  Checking the SIW.
9	Surgical disease of the spleen, injuries, abscess	2	2	4	2	2	<ul> <li>Lecture using video materials (lecture),</li> <li>Simulation technologies and the use of video materials (practical)</li> <li>Case-study</li> <li>Blitz poll</li> <li>Small group work</li> </ul>	An advanced simulator for mastering bleeding control skills	Test.  Assessment of the development of practical skills (abilities).  Checking the SIW.
10	Thrombocytopenic purpura.	2	2	4	2	2	Lecture using video materials (lecture)	An advanced simulator for	Test.



	Hereditary spherocytosis, splenomegaly and hypersplenism						<ul> <li>Simulation technologies and the use of video materials (practical)</li> <li>Case-study</li> <li>Blitz poll</li> <li>Small group work</li> </ul>	mastering bleeding control skills Application of hemostatic sutures.	Assessment of the development of practical skills (abilities).  Checking the SIW.
11	Strangulated abdominal hernia	2	2	4	2	2	<ul> <li>Lecture using video materials (lecture)</li> <li>Simulation technologies and the use of video materials (practical)</li> <li>Team-Based Learning (TBL)</li> <li>Case-study</li> <li>Blitz poll</li> <li>Small group work</li> <li>Communicative method</li> </ul>		Discussion forum.  Solving situational problems  Checking the SIW.
12	Features of acute appendicitis in children, elderly patients and pregnant women. Complications		2	2			<ul> <li>Simulation technologies and the use of video materials (practical)</li> <li>Team-Based Learning (TBL)</li> <li>Case-study</li> <li>Blitz poll</li> <li>Small group work</li> </ul>		Oral survey.  Solving situational problems.
13	Intestinal obstruction		2	2	2	2	<ul> <li>Simulation technologies (practical)</li> <li>Team-Based Learning (TBL)</li> <li>Case-study</li> <li>Blitz poll</li> <li>Small group work</li> <li>Communicative method</li> </ul>		Testing.  Solving situational problems.  Checking the SIW.



14	Peritonitis	2	2	4	2 2	<ul> <li>Lecture using video materials (lecture)</li> <li>Simulation technologies (practical)</li> <li>Team-Based Learning (TBL)</li> <li>Case-study</li> <li>Blitz poll</li> <li>Small group work</li> </ul>	Advanced simulator for mastering skills Set of wound models "Wounds and injuries"	Oral survey Checking the SIW.
15	Surgical sepsis		2	2		<ul> <li>Simulation technologies (practical)</li> <li>Team-Based Learning (TBL)</li> <li>Case-study</li> <li>Blitz poll</li> <li>Small group work</li> <li>Communicative method</li> </ul>	An advanced simulator for surgical treatment of wounds and training of wound suturing skills	Test.  Assessment of the development of practical skills (abilities).  Solving situational problems.
16	Intestinal fistulas	2	2	4	2 2	<ul> <li>Lecture using video materials (lecture)</li> <li>Simulation technologies (practice)</li> <li>Case-study Blitz poll</li> <li>Small group work</li> <li>Communicative method</li> <li>Role-playing games</li> </ul>	advanced patient care skills trainer.docx	Assessment of the development of practical skills (abilities). Writing and Defense of Medical history of the surgical patient  Checking the SIW.



17	Diabetic foot	2	2	4			<ul> <li>Lecture using video materials (lecture)</li> <li>Simulation technologies (practical)</li> <li>Team-Based Learning (TBL)</li> <li>Case-study</li> <li>Blitz poll</li> <li>Small group work</li> </ul>	W44403[1017567] advanced patient care skills trainer.docx	Oral questioning. Test.
18	Interactive lesson		2	2			<ul> <li>Communicative method</li> <li>Simulation technologies (practical)</li> <li>Team-Based Learning (TBL)</li> <li>Case-study</li> <li>Blitz poll</li> </ul>	W44403[1017567] advanced patient care skills trainer.docx	Test. Solving situational problems
							<ul><li>Small group work</li><li>Communicative method</li></ul>		
	Total hours	1	3	54h	1	18h			
	by discipline:	8 h	6 h		8 h				



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### Methodological recommendations for preparing for practical classes.

*Practical lessons* are held after lectures and are explanatory, generalizing and reinforcing in nature. They can be carried out not only in the classroom, but also outside the educational institution.

During practical classes, students perceive and comprehend new educational material. Practical classes are systematic, regularly following each lecture or two or three lectures.

Practical classes are carried out according to the schedule of the educational process and independent work of students in the disciplines.

When preparing for practical exercises, it is necessary to study in advance the methodological recommendations for its conduct. Pay attention to the purpose of the lesson, on basic questions to prepare for class, on the content of the lesson topic.

Before each practical lesson, the student studies the seminar lesson plan with a list of topics and questions, a list of references and homework on the material presented at the seminar. The following scheme of preparation for the seminar lesson is recommended for the student:

- 1. work through lecture notes;
- 2. read the basic and additional literature recommended for the section being studied;
- 3. answer questions from the seminar lesson plan;
- 4. study the topic and select literature for writing abstracts, reports, etc.

### Plan for organizing student independent work

No	Topic of student's	Assignment for	Recommended	Deadlines
•	independent work:	SIW	Literature	delivery
				(week
				number)
1.	Acute appendicities,	Essay,	1. P. Durani and D. Leaper,	2
	classification,	presentation/rep	"Povidone-iodine: use in hand	
	diagnostic, treatment	ort	disinfection, skin preparation and	
	_		antiseptic irrigation," International	
			Wound Journal, vol. 5, no. 3, pp.	
			376–387, 2018. View at: Publisher	
			Site   Google Scholar	
			2. "Sabiston Textbook of Surgery:	
			The Biological Basis of Modern	
			Surgical Practice" by Courtney M.	
			Townsend Jr., et al. (2016).	
2.	External hernias of the	Essay,	1. "Principles of Surgery" by	4
	belly, classification,	presentation/rep	Schwartz, S. I., et al. (2019).	
	diagnostic, treatment	ort		



			2. "Operative Techniques in Surgery" by Michael W. Mulholland, et al. (2020). 3. Association for Safe Aseptic Practice. (2014) Available at: http://antt.org/ANTT_Site/Home. html (accessed May 2014).	
3.	Internal hernias of the belly, classification, diagnostics, treatment	Essay, presentation/rep ort	1. "Surgical Exposures in Orthopaedics: The Anatomic Approach" by Stanley Hoppenfeld, Piet de Boer, et al. 2017 2. "Bailey & Love's Short Practice of Surgery" by Norman S. Williams, P. Ronan O'Connell, et al. 2018 "Current Surgical Therapy" by John L. Cameron, Andrew M. Cameron. 2020 3. The principles and prectic of bandaging/ internet source.	8
4.	Stomach and duodenum ulcer diseases, classification, diagnistic, treatment	Essay, presentation/rep ort	1. Core Topics in General and Emergency Surgery Edited by Hugh M. Paterson Oct 2023 2. Management of Bleeding Patients" by Robert A. Sikorski and Michael J. Hayton. 2016. 3. "Bleeding and Hemostasis: A Practical Guide for Clinicians" by George A. Davis and Geoffrey K. Nguyen. 2017.	9
5.	Gall stone diseases, classification, diagnostic, treatment	Essay, presentation/rep ort	1. "Stop the Bleed: The Official Handbook" by American College of Surgeons Committee on Trauma. 2017.  2. Core Topics in General and Emergency Surgery Edited by Hugh M. Paterson Oct 2023  3. "Bleeding and Hemostasis: A Practical Guide for Clinicians" by	10



			George A. Davis and Geoffrey K. Nguyen. 2017.	
6.	Pancreatitis, classification, diagnistics, treatment	Essay, presentation/rep ort	1. Core Topics in General and Emergency Surgery Edited by Hugh M. Paterson Oct 2023 2. "Transfusion Free Medicine and Surgery" by Mark I. B. Murphy and Arlin B. Bloodworth. 2016. 3. "Clinical Transfusion Medicine" by Jeffrey McCullough, et al. (2018) 4. Laura D. Blood groups and red cell antigens. Bethesda, MD: National Center for Biotechnology Information (US); 2015. [Google Scholar]	11
7.	Constipation, classification, diagnostics, treatment	Essay, presentation/rep ort	1. Principles and Practice of Surgery Edited by O. James Garden May 2022 2. "Principles of Surgery" by Seymour I. Schwartz, et al. (2021). 3. Vijay Dhakre Textbook of Surgery June 2022 Publisher: CBS Publisher and DistributorsISBN: 978-93-5466-365-9	13
8.	Parasyte diseases of liver: echinococcosis, alveococcosis, diagnostics, treatment	Essay, presentation/rep ort	1. "Surgical Wound Healing and Management" edited by Zeina N. Shabeeb and Shahbaz Quraishi (2021).  2. Principles and Practice of Surgery Edited by O. James Garden May 2022  3. Vijay Dhakre Textbook of Surgery June 2022 Publisher: CBS Publisher and DistributorsISBN: 978-93-5466-365-9	14
9.	Diseases of tre rectum, paraproctyties, hemmorroides, fissures. Classification, diagnostic, treatment	Essay, presentation/rep ort	1. "Principles and Practice of Surgery" by O. James Garden, Andrew W. Bradbury, and John L. R. Forsythe. 2020	16



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2. Principles and Practice of
Surgery Edited by O. James
Garden May 2022
3. Vijay Dhakre Textbook of
Surgery June 2022 Publisher:
CBS Publisher and
DistributorsISBN: 978-93-5466-
365-9

#### Methodological recommendations for preparing independent work

When studying the discipline "Propaedeutics of Surgical Diseases" the following types of independent work of students are used:

- studying theoretical material from lecture notes and recommended textbooks, educational literature, reference sources;
- independent study of some theoretical issues not covered in lectures, writing abstracts, preparing presentations;

Students are invited to read and meaningfully analyze monographs and scientific articles on neurology and neurosurgery. The results of working with texts are discussed in practical classes.

To develop independent work skills, students complete assignments, independently turning to educational, reference and scientific-methodological literature. Testing the completion of assignments is carried out both in practical classes with the help of students' oral presentations and their collective discussion, and with the help of written independent work.

**Essay**—a summary in writing of the content of scientific work on the provided topic. This is an independent research work, where the student reveals the essence of the problem under study with elements of analysis on the topic of the essay.

Brings different points of view, as well as your own views on the problems of the topic of the essay. The content of the abstract should be logical, the presentation of the material is of a problem-thematic nature.

Requirements for writing an abstract:

The volume of the abstract may vary within 9-10 printed or handwritten pages.

Main sections: table of contents(plan), introduction, main content, conclusion, bibliography.

The abstract text must contain the following sections:

- -title page indicating: name of the university, departments, abstract topics, Full name of the author and full name of the teacher
- introduction, relevance of the topic.
- main section.
- conclusion(analysis of literature search results);conclusions.



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- the list of references must have at least10bibliographic titles, including network resources.

The text part of the abstract is drawn up on a sheet of paper in the following format:

- top margin 2 cm; left indent 3 cm; indentation on the right 1.5 cm; bottom indent
- -2.5 cm:
- text font: Times New Roman, font height -14, space -1.5;
- Page numbering is at the bottom of the sheet. There is no number on the first page.

The abstract must be completed competently in compliance with the culture of presentation. There must be references to the literature used, including periodical literature for the last 5 years.

Abstract evaluation criteria:

- Relevance of the research topic;
- relevance of the content to the topic;
- depth of material elaboration;
- correctness and completeness of development of the questions posed;
- the significance of the findings for further practical activities;
- correctness and completeness of use of literature;
- compliance of the abstract design with the standard;
- the quality of the message and answers to questions when defending the abstract.

**Report**- this is a type of brief but informative message about the essence of the issue under consideration, various opinions about the subject being studied. In some cases, it is allowed to present the author's own point of view within the framework of thematic issues.

Requirements for the report:

The length of the abstract should not exceed five printed pages.

A quality report has four main structural elements: 1) Introduction;

- 2) Introduction (at this stage the speaker must interest the audience, formulate the relevance and novelty of the research, emphasize the importance and purpose of the work done.) 3) Main part (it talks about the research methods used, the work done, and analyzes the results obtained);
- 4) Conclusion (summarizing the results of the work).

The text part of the report is drawn up on a sheet of the following format:

- top margin -2 cm; left indent -3 cm; indentation on the right -1.5 cm; bottom indent -2.5 cm;
- text font: Times New Roman, font height -14, space -1.5;
- Page numbering is at the bottom of the sheet. There is no number on the first page.

Criteria for evaluation:

- timeliness of submission:
- compliance with requirements;
- depth of material elaboration;



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- relevance of the content to the topic;
- correctness and completeness of use of the source.

### List of basic and additional literature

#### Main literature

- 1. Essentials of General Surgery and Surgical Specialties"-Peter F. Lawrence, Richard M. Bell, Merril T. Dayton. 15th edition (2021)
- 2. "Schwartz's Principles of Surgery" 10th edition (2014), 11th edition (2019)
- 3. "Principles and Practice of Surgery" by O. James Garden, Rowan W. Parks, et al. 2018.
- 4. P. Durrani and D. Leaper, "Povidone-iodine: use in hand disinfection, skin preparation and antiseptic irrigation," International Wound Journal, vol. 5, no. 3, pp. 376–387, 2018. View at: Publisher Site | Google Scholar
- 5. L. M. Reis, B. R. Rabello, C. Ross, and L. M. Santos, "Evaluation of the antimicrobial activity of antiseptics and disinfectants used in a public health service," Brazilian Journal of Nursing, vol. 5, pp. 870–875, 2015. View at: Google Scholar
- 6. "Sabiston Textbook of Surgery: The Biological Basis of Modern Surgical Practice" by Courtney M. Townsend Jr., et al. (2016).
- 7. "Antiseptic Stewardship: Biocide Resistance and Clinical Implications" by Dilip Nathwani and Gerald McDonnell (2018).
- 8. Evaluation of the Antibacterial Effectiveness of Some Antiseptics and Disinfectants-June 2021.UMYU Journal of Microbiology Research (UJMR) 6(1):175-181.DOI:10.47430/ujmr.2161.023 License: CC BY-NC 4.0
- 9. High-level disinfection, sterilization, and antisepsis: current issues in reprocessing medical and surgical instruments. Seavey R. Am J Infect Control. 2013. PMID: 23622741 Review
- 10. Association for Safe Aseptic Practice. (2014) Available at: http://antt.org/ANTT\_Site/Home.html (accessed May 2014).
- 11. Brühwasser C, Hinterberger G, Mutschlechner W, Kaltseis J, Lass-Flörl C, Mayr A. (2016) A point prevalence survey on hand hygiene, with a special focus on Candida species. American Journal of Infection Control 44: 71–73. [PubMed] [Google Scholar]
- 12. "Essential Surgical Practice: Higher Surgical Training in General Surgery" by Cuschieri, A., Steele, R. J. C., & Moosa, A. R. (2015).
- 13. "Operative Techniques in Surgery" by Michael W. Mulholland, et al. (2020).
- 14. "Principles of Surgery" by Schwartz, S. I., et al. (2019).
- 15. "Operative Techniques in Surgery" by Michael W. Mulholland, et al. (2020).
- 16. "Transfusion Medicine and Hemostasis: Clinical and Laboratory Aspects" by Christopher D. Hillyer, Beth H. Shaz, et al. 2019
- 17. "AABB Technical Manual" by Mark K. Fung, Connie M. Westhoff, et al. 2020



- 18. "Handbook of Transfusion Medicine" by Betty Ciesielski, Toby L. Simon, et al. 2017
- 19. "Transfusion Free Medicine and Surgery" by Mark I. B. Murphy and Arlin B. Bloodworth. 2016.
- 20. Management of Bleeding Patients" by Robert A. Sikorski and Michael J. Hayton. 2016.
- 21. "Surgical Exposures in Orthopaedics: The Anatomic Approach" by Stanley Hoppenfeld, Piet de Boer, et al. 2017
- 22. "Bailey & Love's Short Practice of Surgery" by Norman S. Williams, P. Ronan O'Connell, et al. 2018
- 23. "Current Surgical Therapy" by John L. Cameron, Andrew M. Cameron. 2020
- 24. "Surgical Anatomy and Technique: A Pocket Manual" by Lee J. Skandalakis, John E. Skandalakis, et al. 2019
- 25. The principles and prectic of bandaging/internet source.
- 26. Management of Bleeding Patients" by Robert A. Sikorski and Michael J. Hayton. 2016.
- 27. "Bleeding and Hemostasis: A Practical Guide for Clinicians" by George A. Davis and Geoffrey K. Nguyen. 2017.
- 28. Peev MP, Rago A, Hwabejire JO, Duggan MJ, Beagle J, Marini J, et al. Self-expanding foam for prehospital treatment of severe intra-abdominal hemorrhage: dose finding study. J Trauma Acute Care Surg. 2014;76(3):619–24.
- 29. "Stop the Bleed: The Official Handbook" by American College of Surgeons Committee on Trauma. 2017.
- 30. Longstaff C. Studies on the mechanisms of action of aprotinin and tranexamic acid as plasmin inhibitors and antifibrinolytic agents. Blood Coagul Fibrinolysis. 2014;5:537–542. [PubMed] [Google Scholar]
- 31. Dai C, Yuan Y, Liu C, Wei J, Hong H, Li X, Pan X. Degradable, antibacterial silver exchanged mesoporous silica spheres for hemorrhage control. Biomaterials. 2019;30:5364–5375. [PubMed] [Google Scholar]
- 32. "Hemostasis and Thrombosis: Basic Principles and Clinical Practice" by Robert W. Colman, et al. (2019).
- 33. Storry JR, Olsson ML. The ABO blood group system revisited: a review and update. Immunohematology. 2019;25:48–59. [PubMed] [Google Scholar]
- 34. "Clinical Transfusion Medicine" by Jeffrey McCullough, et al. (2018)
- 35. Laura D. Blood groups and red cell antigens. Bethesda, MD: National Center for Biotechnology Information (US); 2015. [Google Scholar]
- 36. Seltsam A, Hallensleben M, Kollmann A, et al. The nature of diversity and diversification at the ABO locus. Blood 2013;102:3035-42. [PubMed] [Google Scholar]



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- 37. Hosseini-Maaf B, Irshaid NM, Hellberg A, et al. New and unusual O alleles at the ABO locus are implicated in unexpected blood group phenotypes. Transfusion 2015;45:70-81. [PubMed] [Google Scholar]
- 38. "Clinical Transfusion Medicine" by Jeffrey McCullough, et al. (2018)
- 39. "Surgical Wound Healing and Management" edited by Zeina N. Shabeeb and Shahbaz Quraishi (2021).
- 40. Han G, Ceilley R. Chronic wound healing: a review of current management and treatments. Adv Ther. 2017; 34: 599-610.
- 41. Rahim K, Saleha S, Zhu X, Huo L, Basit A, Franco OL. Bacterial contribution in chronicity of wounds. Microb Ecol. 2017; 73: 710-721.
- 42. van Walraven C, Musselman R. The Surgical Site Infection Risk Score (SSIRS): A Model to Predict the Risk of Surgical Site Infections. PLoS One. 2013;8(6):e67167. [PMC free article] [PubMed]
- 43. "Current Diagnosis & Treatment: Surgery" by Gerard M. Doherty. 2020.
- 44. Ljungqvist O, Scott M, Fearon KC. Enhanced recovery after surgery: A Review. JAMA Surg. 2017;152:292–8. [PubMed] [Google Scholar]
- 45. Horosz B, Nawrocka K, Malec-Milewska M. Anaesthetic perioperative management according to the ERAS protocol. Anaesthesiol Intensive Ther. 2016;48:49–54. [PubMed] [Google Scholar

#### **Additional**

- 1. "Sabiston Textbook of Surgery: The Biological Basis of Modern Surgical Practice" by Courtney M. Townsend Jr., et al. 2021.
- 2. Vijay Dhakre Textbook of Surgery June 2022 Publisher: CBS Publisher and DistributorsISBN: 978-93-5466-365-9
- 3. "Schwartz's Principles of Surgery" by F. Charles Brunicardi, et al. (2020).
- 4. "Principles of Surgery" by Seymour I. Schwartz, et al. (2021).
- 5. "Clinical Surgery" by Michael M. Henry and Jeremy N. Thompson (2020).

### Monitoring and evaluation of learning outcomes

Each module is assessed using a 100-point system. The maximum score is 100. A student is allowed to take the final test if he has a total score in the discipline of 60 points or more.

Scoring Criteria	Module 1	Module 2	Module 3
Attendance	20 points	20 points	20 points
Classroom work (activity in discussions, oral questioning, working with a glossary, lectures, completing assignments, etc.)	20 points	20 points	20 points
Independent work: abstract, report, etc.	20 points	20 points	20 points
Total for the module (testing, situational task)	40 points	40 points	40 points
Total for the discipline (exam):	100 points	100 points	100 points



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#### **Evaluation criteria:**

#### Criteria for assessing the practical lesson:

- an "excellent" grade is given to a student if he has knowledge of the discipline in the full scope of the program and comprehends the discipline sufficiently deeply; independently, in a logical sequence and exhaustively answers all questions, emphasizing the most essential, is able to analyze, compare, classify, generalize, concretize and systematize the studied material, highlight the main thing in it;
- "good" rating: the student has knowledge of the discipline almost in full of the program (there are knowledge gaps only in some sections); independently and partly with leading questions, gives complete answers to the ticket questions; does not always highlight the most significant, but at the same time does not make serious mistakes in the answers;
- a "satisfactory" grade is given in cases where the student has the basic knowledge of the discipline; shows difficulty in answering independently, uses imprecise formulations; in the process of answering, errors are made regarding the substance of the questions;
- an "unsatisfactory" grade is given in cases where the student has not mastered the required minimum knowledge of the subject and is not able to answer the questions on the ticket even with additional leading questions from the teacher.

### Criteria for assessing practical skills:

- The "excellent" rating is given when all stages of the neurological examination are carried out thoroughly and systematically. Having clear and professional communication with the patient during the examination. The student has a thorough understanding of the neurological aspects being studied, including the analysis of specific symptoms and their interpretation.
- A "good" rating is given when the basic steps of the neurological examination are competently performed and the patient interacts effectively to ensure understanding and trust. With the ability to identify the main neurological symptoms and conduct appropriate analysis.
- A "satisfactory" rating is given when the main stages of the neurological examination are completed, but with some shortcomings, with some misunderstandings or failures in communication with the patient. With basic knowledge of neurological symptoms and their interpretation.
- An "unsatisfactory" grade is given if the student makes serious errors or omissions in conducting a neurological examination, as well as if there are problems in communication that may cause difficulties or even dissatisfaction in the patient and insufficient knowledge of neurological aspects and their identification during the examination.

#### **Criteria for assessing Essay:**



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- an "excellent" grade is given to the student if the topic of the essay is fully covered, excellent mastery of the material is demonstrated, the appropriate sources are used in the right quantity, the structure of the work corresponds to the assigned tasks, the degree of independence of the work is high;
- a "good" grade is given to the student if the topic of the essay is basically covered, good mastery of the material is demonstrated, appropriate sources are used, the structure of the work basically corresponds to the assigned tasks, the degree of independence is average;
- a "satisfactory" grade is given to the student if the topic of the essay is poorly covered, satisfactory mastery of the material is demonstrated, the sources used and the structure of the work partially correspond to the assigned tasks, the degree of independence of the work is low;
- an "unsatisfactory" grade is given to the student if the topic of the essay is not covered, poor mastery of the material is demonstrated, the sources used are insufficient, the structure of the work does not correspond to the assigned tasks, the work is not independent.

#### **Project evaluation criteria:**

- A grade of "excellent" is awarded to students if the project demonstrates outstanding depth of exploration of the neurological aspects of the topic, presenting innovative research approaches. Effective public education emphasizes creativity and originality of the project, as well as active community involvement. The organization and structure of the project is highly organized, logically structured, ideas are clearly and professionally expressed
- a "good" grade is given to students if the project demonstrates a good depth of research into neurological aspects, supported by specific facts and data. The effectiveness of education is significant, but there is room for further improvement. The presence of creative elements gives the project originality, but some aspects may require additional development. Community involvement is positive but can be more intense. The organization and structure of the project is generally good, but some areas may require improvement.
- -A "satisfactory" grade is given to students if the project meets the minimum requirements for research in neurological aspects, but needs additional development. The effectiveness of education is at a basic level and the project can be improved in this area. The project contains elements of creativity, but they can be supplemented and deepened. Community involvement could be more active. The organization and structure of the project needs additional attention to improve clarity and consistency.
- an "unsatisfactory" grade is given to students; the project does not meet basic standards and does not provide sufficient depth in the study of the neurological aspects of tuberculosis. The effectiveness of education is extremely limited, creativity and originality are lacking. Community involvement is insufficient or absent. The



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organization and structure of the project raises serious concerns, making it difficult to understand and disorganized.

### MCQ Assessment Criteria:

- An "excellent" mark on testing is awarded to a student who provides correct, deep and clear answers, demonstrating a high level of knowledge and its practical application. Important factors are the student's ability to solve complex problems, be creative, and comply with test requirements. Criteria may vary, but the general requirement is outstanding understanding and successful application of course material (if the number of correct answers is 90 or more)
- A "good" grade on testing is given to a student if he has demonstrated good knowledge of the subject, provided correct answers, clearly and clearly expressed his thoughts, and successfully completed the main aspects of the test tasks. This score may also reflect the student's ability to apply acquired knowledge in a variety of situations and effectively use the learned skills in test tasks (if the number of correct answers is from 76 to 89)
- A "satisfactory" test score is assigned to a student who demonstrates a basic understanding of the subject matter, provides answers that meet the minimum requirements, and successfully completes the core elements of the test. This score may indicate that the student has mastered the basics of the material, but may not have achieved a high level of depth of knowledge or was unable to cope with more complex aspects of the assignments. (with the number of correct answers from 60 to 75)
- an "unsatisfactory" mark on testing is given to a student if his knowledge of the subject is insufficient, the answers contain significant errors or do not meet the minimum requirements, and also if the student has not coped with the main aspects of the test. This score indicates an unsatisfactory level of mastery of the material and an inability to apply knowledge within the framework of test tasks.(if he gave up to 59 correct answers inclusive.)

Scale of correspondence between grades and points on the final control (exam)		
Points	Grade	
90-100	"Great"	
76-89	"Fine"	
60-75	"satisfactorily"	
0-59	"unsatisfactory"	

### **Academic discipline policy:**

- compulsory attendance at classes;
- active participation of the student in practical classes;
- preliminary preparation and completion of homework;
- high-quality and timely completion of tasks under CDS;
- participation in all types of control (current, milestone, final);

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- one lateness to classes and/or leaving before their end for any reason is considered as one missed lesson that cannot be restored;
- unacceptable: the use of cell phones during classes, deception and plagiarism, late submission of assignments, failure to comply with chain of command and rules of conduct.

**Help:** For consultations on completing independent work their delivery and defense, as well as for additional information on the material covered and all other questions that arise regarding the course being taught, please contact the teacher during the hours allocated for SIW.