

Ministry of Science and Higher Education of the Russian Federation
Federal State Autonomous Institution of Higher Education
“National Research Nuclear University “MEPhI”

INSTITUTE OF ENGINEERING PHYSICS FOR BIOMEDICINE

DEPARTMENT OF FUNDAMENTAL MEDICINE

APPROVED ИТС ИФИБ

Protocol No. 3.1

dated 30.08.2024

ACADEMIC COURSE OUTLINE

EMERGENCY MEDICAL PROCEDURES PRACTICE

Educational program track (speciality) [1] 31.05.01 General Medicine

Educational program title (specialization) General Medicine

Semester	Labour input, credits	Total course academic, hours	Practical sessions, hrs.	In the form of practical studies, hrs.	Independent studies, hrs.	Course progress, Exam/Pass-fail exam/Term
12	3	108	72		36	
Total	3	108	72	0	36	Ex

ABSTRACT

Students acquire practical skills in performing emergency medical procedures.

Mastering methods for assessing a patient's condition to decide on the need and extent of medical care; algorithms for diagnosis and emergency care for patients at various stages of care (pre-hospital and hospital stages); mastering practical skills of emergency medical procedures when providing medical care.

1. ACADEMIC COURSE GOALS AND OBJECTIVES

GOAL: to develop professional competencies in providing medical care to patients in urgent and emergency situations.

OBJECTIVES

- familiarization with the structure, objectives, and purpose of the emergency and urgent care service and its place in the healthcare system, as well as the organization of anesthesiology, resuscitation, and intensive care departments in multidisciplinary hospitals;

- development of skills and abilities in diagnostics and principles of treatment of critical conditions in patients with surgical, therapeutic and other profiles, modern methods of monitoring and detoxification used in intensive care;

- development of professional skills in providing emergency care in critical conditions to patients with medical, surgical and other profiles, skills in carrying out a set of resuscitation measures in case of acute respiratory and circulatory disorders, and in case of clinical death.

2. PLACE OF THE ACADEMIC COURSE IN THE MAIN HIGHER EDUCATION CURRICULUM

The practice is a logical continuation of the development of competencies in the provision of medical care in emergency and urgent situations based on the knowledge, skills and abilities acquired during the mastery of all clinical disciplines and practices included in the curriculum.

3. DEVELOPED COMPETENCIES AND INTENDED LEARNING OUTCOMES

Universal and/or general professional competencies:

Competency code and title	Code and title of competency-based rubrics
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Professional competencies in compliance with the goals and professional knowledge areas:

Professional activity goal	Professional activity knowledge area	Professional competency code and title; Based on the professional standard, experience analysis	Code and title of competency-based rubrics
medical			
Providing medical care	Individuals (patients);	IIK-3.1 [1] - Able to	3-IIK-3.1[1] - Know: -

to patients in urgent and emergency forms.	the population; the set of means and technologies aimed at creating conditions for preserving and strengthening the health of the adult population	provide medical care to patients in urgent or emergency forms <i>The base:</i> Professional standard: 02.009	clinical signs of sudden cessation of breathing, circulation, loss of consciousness, life-threatening mental disorders for the patient or others; - indications for external defibrillation; - principles of external electro-impulse therapy (defibrillation) devices and rules for performing external defibrillation; - rules for performing basic cardiopulmonary resuscitation.; Y-IIK-3.1[1] - Be able to: - recognize conditions (sudden acute illnesses, exacerbations of chronic diseases) requiring medical care in urgent or emergency forms; - identify clinical signs of sudden cessation of breathing, circulation, loss of consciousness, life-threatening mental disorders for the patient or others; - organize and perform basic cardiopulmonary resuscitation and external defibrillation measures.; B-IIK-3.1[1] - Possess skills in: - assessing the patient's condition requiring medical care in urgent and emergency forms; - performing basic cardiopulmonary resuscitation; - using medications and medical devices for providing medical care in emergency or urgent forms.
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4. PEDAGOGIC POTENTIAL OF THE COURSE

Pedagogic tracks/objectives	Pedagogic goals (code)
Vocational and labor education	Establishing conditions for: formation of a deep

	understanding of the profession's social role, a positive and active commitment to the values of the chosen specialty, and a responsible attitude towards professional activity and work (B14)
Vocational and labor education	Establishing conditions for: formation of psychological readiness for professional activity in the chosen profession (B15)
Professional education	Establishing conditions for: formation of responsibility for professional choice, professional development and professional decisions (B18)
Professional education	Establishing conditions for: formation of motivation to improve the quality of medical care to the population and the desire to follow the rules and norms of interaction between the doctor, colleagues and the patient, contributing to the creation of the most favorable environment for the patient's recovery (B34)

5. ACADEMIC COURSE STRUCTURE AND CONTENT

Academic course sections, their scope, terms of study and assessment:

No.	Academic course section name	Weeks	Lectures/ Practical (seminars)/ Laboratory sessions, hrs.	Compulsory current assessment (form*, week)	Maximum grade per section**	Section assessment (form*, week)	Competency-based rubrics
	<i>12 Semester</i>						
1	Emergency medical procedures	1-2	0/72/0		50	Rep-2	3-ПК-3.1, Y-ПК-3.1, B-ПК-3.1
	<i>Totals for 12 Semester</i>		0/72/0		50		
	Assessment events for 12 Semester				50	Ex	3-ПК-3.1, Y-ПК-3.1, B-ПК-3.1

* – abbreviated name of assessment

** – 100 maximum points per semester including a pass/fail exam and (or) an exam

Abbreviated current assessment forms and section assessment

Abbreviation	Full name
Rep	Report

SYLLABUS

Weeks	Topics / Content	Lect.,	Pr./sem.,	Lab.,
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		hrs.	hrs.	hrs.
	<i>12 Semester</i>	0	72	0
1-2	Emergency medical procedures	0	72	0
1 - 2	Emergency medical procedures Practical training in emergency medical procedures. Introduction to the structure and work organization of medical organization departments specializing in anesthesiology and resuscitation. Safety briefing: occupational health and safety, fire safety, internal work regulations, and sanitary regulations. Organization of work of departments of a medical organization on anesthesiology, resuscitation and intensive care. Working in the emergency room. Studying the structure, work organization, sanitary and epidemiological regulations, and the procedure for hospitalizing patients with life-threatening conditions. Introduction to the Intensive Care Unit. 2. Main (clinical) stage. Key aspects of emergency procedures. Working as an assistant to an anesthesiologist-resuscitator and an intensive care unit physician. Interacting with patients. Informed voluntary consent for medical interventions. Specific aspects of interviewing and physically examining patients with illnesses and/or conditions requiring emergency and urgent medical care, taking into account age-related anatomical and functional characteristics in accordance with the current procedure for the provision of medical care, Specific aspects of interviewing and physically examining patients with illnesses and/or conditions requiring emergency and urgent medical care, taking into account standards of medical care: (physical examination of the patient; Assessment of the depth of disturbance of consciousness using the Glasgow Coma Scale; assessment of signs of intracranial hypertension; assessment of signs of hypertension-dislocation syndrome; Assessing the degree of dehydration; Recording an electrocardiogram; Decoding, description, and interpretation of electrocardiographic data; measurement of blood pressure in peripheral arteries; pulse oximetry; monitoring the patient's condition using electrocardiogram, blood pressure, heart rate, pulse oximetry, and temperature indicators using vital function monitoring devices; testing blood glucose levels); Implementation of measures aimed at stabilizing or improving the patient's condition: eliminating immobilization deficiencies, novocaine blockades in the absence of shock, administration of antibiotics and tetanus toxoid; Assessing the patient's condition and the need for medical care. Recognizing emergency conditions. Formulating a preliminary diagnosis. Developing a patient examination plan and ordering additional tests. Evaluating the data obtained from additional tests and refining the diagnosis. Review of medical documentation, preparing patients for	All		
		0	72	0
		Online		
		0	0	0

<p>surgery.</p> <p>Establishing the leading syndrome and preliminary diagnosis of the disease and (or) condition requiring emergency and urgent medical care, taking into account the current International Statistical Classification of Diseases and Related Health Problems (hereinafter referred to as ICD);</p> <p>Participation in the provision of emergency medical care for diseases and conditions that pose a threat to the patient's life: temporary stopping of external bleeding and revision of the tourniquet, elimination of all types of asphyxia, anti-shock measures, application of an aseptic dressing to a wound or burn surface, application of an occlusive dressing for open pneumothorax, puncture of the pleural cavity, catheterization or puncture of the bladder for acute urinary retention, simple resuscitation measures: artificial ventilation and indirect cardiac massage, transport immobilization using improvised means, administration of an anesthetic;</p> <p>Participation in providing emergency medical care in case of sudden acute illnesses, conditions and exacerbation of chronic diseases: providing syndrome-based care (shock, coma, acute respiratory failure, acute heart failure, critical decrease in blood pressure), without specifying the causes of these conditions, administration of respiratory analeptics in case of life-threatening respiratory depression, intravenous infusions of crystalloid solutions in case of severe hemodynamic disturbances; implementation of measures aimed at stabilizing or improving the patient's condition: eliminating immobilization deficiencies, novocaine blockades in the absence of shock, administration of antibiotics and tetanus toxoid;</p> <p>Participation in the provision of emergency medical care in urgent and urgent forms: (conducting basic and advanced cardiopulmonary resuscitation, including with the use of special medical devices, with the determination of the conditions for refusing to conduct it and indications for its termination, Ensuring the patency of the upper respiratory tract, including with the help of airways, a laryngeal tube, performing closed cardiac massage (manual and with the help of special medical devices), performing electrical impulse therapy (defibrillation, cardioversion).</p> <p>Prescribing treatment. Mastering the principles of treatment of the most common internal diseases, prescribing medications and physiotherapy procedures. Explaining medication and regimen recommendations to the patient.</p> <p>Temporary disability assessment.</p> <p>Review of medical documentation. Preventive work:</p> <p>Participation in medical examinations, preventive checkups, and counseling patients on healthy lifestyle issues.</p> <p>Medical Records Management:</p> <p>Completing medical records, extracts, prescriptions, sick note, examination reports, and issuing referrals for consultations and examinations, including using medical information systems</p>			
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	3. Preparing internship reports. Report defense. Preparing for the final report: analyzing completed work, preparing an internship diary, collecting necessary documents. Report defense.			
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Abbreviated names of online options:

Abbreviation	Full name
EC	E-course
FtM	Full-text material
FtL	Full-text lectures
VM	Video materials
AM	Audio materials
Prs	Presentations
T	Tests
ERM	E-reference materials
IS	Interactive site

6. EDUCATIONAL TECHNOLOGIES

The production practice is conducted in a traditional form in conditions that ensure the students' participation in medical activities and the performance of certain types of work related to their future profession.

During the practice, simulation technologies such as simulators can be used to help students develop their skills.

Students demonstrate their acquired skills during the defense of their practice report in simulated conditions.

Educational technologies for internships include teaching methods aimed at developing students' practical skills and abilities necessary for professional work. This includes, in particular, mastering the use of medical equipment and patient care skills.

7. ASSESSMENT TOOLKIT

The assessment toolkit ensures verification of the intended learning outcomes achievement (competency-based rubrics) using current, midterm and interim assessment of the course.

The link between developed competencies and their assessment is presented in the following table:

Competency	Achievement rubrics	Assessment activity (Syl 1)
ПК-3.1	3-ПК-3.1	Ex, Rep-2
	Y-ПК-3.1	Ex, Rep-2
	B-ПК-3.1	Ex, Rep-2

Educational achievement rubrics scales

The scale of each assessment activity varies from 0 to the maximum established point, inclusive. The final assessment of the course is performed on a 100-point scale and represents the sum of the points earned by the student in the section assessments, framework of current and interim assessment.

Sections and interim assessments are considered passed when the student achieves a minimum score equal to 60% of the maximum. The final grade is assigned only upon passing all sections and the interim assessment.

The final grade is assigned in accordance with the following scale:

Total score	Rating on a 4-point scale	Pass/fail examination	ECTS assessment
90-100	5 – « <i>excellent</i> »	« <i>pass</i> »	A
85-89	4 – « <i>good</i> »		B
75-84			C
70-74			D
65-69	3 – « <i>satisfactory</i> »		E
60-64			F
below 60	2 – « <i>fail</i> »	« <i>fail</i> »	

An “excellent” grade indicates a deep and solid mastery of the program material by a student who presents their answers consistently, clearly, and logically, is able to closely link theory with practice, and uses materials from monographic literature in their answers.

A “good” grade corresponds to a student’s solid knowledge of the material, who presents their answers competently and to the point, without any significant inaccuracies.

A “satisfactory” grade corresponds to the basic level of mastery of the material by the student, in which the main material has been mastered, but its details have not been assimilated, the answers contain inaccuracies, insufficiently correct wording and logical inconsistencies.

A grade “pass” corresponds to at least a basic level of mastery of the program material, in which the student possesses the necessary knowledge, skills, and abilities, and is able to apply theoretical principles to solve typical practical problems.

A grade “fail” is given to a student who lacks a significant understanding of the curriculum material, makes significant errors in their answers, or fails all required assignments. These students are generally unable to continue their studies without additional classes.

8. ACADEMIC COURSE EDUCATIONAL, METHODOLOGICAL AND INFORMATIONAL SUPPORT

CORE READING:

1. ЭИ К 70 Анестезиология, реанимация, интенсивная терапия. Клинико-лабораторная диагностика : учебник для вузов, Эмануэль В. Л., Страшнов В. И., Корячкин В. А., Москва: Юрайт, 2024

2. ЭИ И 73 Интенсивная терапия. В 2 томах. Том 1 : национальное руководство, , Москва: ГЭОТАР-Медиа, 2022

3. ЭИ И 73 Интенсивная терапия. В 2 томах. Том 2 : национальное руководство, , Москва: ГЭОТАР-Медиа, 2022

FURTHER READING:

1. ЭИ О-85 General Care of a Patient : учебное пособие, Oslopov V.N., Bogoyavlenskaya O.V., Москва: ГЭОТАР-Медиа, 2019

2. ЭИ П 27 Анестезиология и реаниматология (боль и обезболивание) : учебное пособие для вузов, Перепелица С. А. [и др.], Москва: Юрайт, 2024

3. ЭИ Б 78 Внезапная сердечная смерть : Серия "Библиотека врача-специалиста", Бокерия Л.А. [и др.], Москва: ГЭОТАР-Медиа, 2020

4. ЭИ А 72 Водно-электролитный обмен и его нарушения : руководство для врачей : практическое руководство, Антонов В.Г., Карпищенко А.И., Москва: ГЭОТАР-Медиа, 2020

5. ЭИ ПЗ3 Инсульт: пошаговая инструкция. Руководство для врачей : практическое руководство, Танащян М.М., Максимова М.Ю., Пирадов М.А., Москва: ГЭОТАР-Медиа, 2020

6. ЭИ Г 65 Медицина чрезвычайных ситуаций. Том 1 : , Фисун А.Я. , Гончаров С.Ф. , Москва: ГЭОТАР-Медиа, 2021

7. ЭИ Г 65 Медицина чрезвычайных ситуаций. Том 2 : , Фисун А.Я. , Гончаров С.Ф. , Москва: ГЭОТАР-Медиа, 2021

8. ЭИ П 17 Оказание неотложной медицинской помощи детям. Алгоритмы манипуляций : учебное пособие, Ежова О. Л., Папаян Е. Г., Санкт-Петербург: Лань, 2022

9. ЭИ Э41 Экстракорпоральная мембранная оксигенация при лечении критической сердечной и дыхательной недостаточности : Практическое руководство рекомендовано Национальным медицинским исследовательским центром по профилю анестезиология и реаниматология (для взрослых) ФГАОУ ВО Первый Московский государственный медицинский университет им. И.М. Сеченова Минздрава России (Сеченовский Университет), , Москва: ГЭОТАР-Медиа, 2024

SOFTWARE:

No special softwares is required

LMS AND ONLINE RESOURCES

<https://online.mephi.ru/>

<http://library.mephi.ru/>

9. LOGISTICAL SUPPORT

1. Фантом головы с пищеводом и желудком (64-301)
2. Комплект зондов желудочных одноразовых и дуоденальных (64-301)
3. Тренажер интубации с контроллером (64-301)
4. Фантом реанимационный (торс) с электрическим контроллером (64-301)
5. Фантом предплечья для внутривенных инъекций с дополнительным вкладышем (64-301)
6. Фантом руки для внутривенных инъекций (64-301)
7. Фантом мужской промежности для катетеризации мочевого пузыря (64-301)
8. Фантом женской промежности для катетеризации мочевого пузыря (64-301)
9. Катетеры Фолея и Нелатона (64-301)
10. Кровать функциональная механическая с матрасом и штативом для капельниц (64-301)
11. Кушетка смотровая КМС-01 (64-301)
12. Манекен-симулятор для отработки навыков пальпации живота (с контроллером) Z980A (64-301)
13. Электрокардиограф ЭК12Т-01-Р-Д/141 (64-301)
14. Манекен сердечно-легочной реанимации Р4201СРR ВОЛОДЯ. Модификация 1 (64-301)
15. Учебный автоматический наружный дефибриллятор МУ0353 (64-301)
16. Мешок Амбу КД-МП-В (64-301)
17. Медицинское оборудование для практической подготовки обучающихся, предусмотренное договором (Клиническая база)
18. Иное оснащение, предусмотренное порядками оказания медицинской помощи по соответствующему профилю (Клиническая база)
19. Тренажер для отработки навыков внутривенных инъекций (на фантомах с различной степенью доступности) (64-302)
20. Аппарат холтеровского мониторирования ЭКГ (64-301)
21. Аппарат суточного мониторирования АД (СМАД) (64-301)

10. EDUCATIONAL AND METHODOLOGICAL RECOMMENDATIONS FOR STUDENTS

Practice is an integral part of the learning process.

During the internship, the student is required to:

- Fully complete the assignments outlined in the internship program;
- comply with the internal work schedule at the enterprise, institution, or organization;

- study and strictly adhere to occupational health and safety regulations, sanitary norms
- be responsible for the work performed and its results;
- Upon completion of the internship, submit a written report to the Head of practical training on the completion of all assignments and pass (defend) the internship exam.

The student has the right to:

- propose the specialized organization where the student is currently working for the internship (if the professional activity they are pursuing meets the internship requirements).
- obtain advice on all internship-related questions from the management of the specialized organization (medical organization), the internship supervisor, the Head of practical training at the university;
- address any controversial issues to the Head of practical training, department head, or educational program director.

The first stage of practice (introduction)

The Head of practical training will notify students in advance of the actual meeting place on the first day of practical training.

It is mandatory to complete safety training. This should be reflected in the diary.

The Head of practical training assigns students to departments in conjunction with the person responsible for practical training at the medical organization. The practical assignment is clarified and agreed upon, taking into account the specific activities of the specific department within the medical organization.

During the internship, each student completes a daily the ДНЕВНИК-ОТЧЕТ / REPORT document using the prescribed format. The supervisor's notes in the appropriate columns of the diary/report will confirm that the student actually attended the internship that day, mastered certain skills, became familiar with the work of certain departments, etc.

A supervisor is the employee directly supervising the internship. This may be different employees on different days. The Head of practical training and the person responsible for practical training at the medical organization, may also act as supervisor for specific sections.

The second stage of practice is the main one.

Direct implementation by the student of activities to acquire skills and master practical abilities provided for by the internship program.

Practical work:

Work in the offices of doctors of therapeutic and surgical profiles as a physician assistant.

Ongoing Assessment

The ongoing assessment is conducted through the following methods: monitoring students' completion of relevant sections in the ДНЕВНИК-ОТЧЕТ / REPORT document (including daily report notes and report sections), verifying compliance with safety regulations, internal work procedures, and sanitary standards, conducting interviews, and evaluating students' demonstration of acquired skills. The Head of practical training may personally monitor the student's progress at any time during practice hours.

Students must be prepared to answer the instructor's questions and demonstrate their practical skills. The maximum score for this section is 50. A student is admitted to the exam (intermediate assessment) only if they have achieved more than 30 points in the ongoing assessment. The grading scale for ongoing assessment is as follows: Excellent: 45-50 points, Good: 36-44 points, Satisfactory: 30-35 points

Assessment Criteria (Ongoing Assessment)

№ Criterion Max. score

1.1 Compliance with safety regulations, sanitary norms and internal work schedule.

Full compliance – 10 points, Partial compliance – 5 points, Non-compliance – 0 points* 10

1.2 Regularity of maintaining the ДНЕВНИК-ОТЧЕТ / REPORT document (including daily report notes and report sections).

Regular (daily) – 10 points, Irregular – 5 points, Not maintained – 0 points 10

1.3. Interview (answers to questions, demonstration of practical skills)* 30

Σ Total score 50

*The student answers 1 question and selectively demonstrates 2 practical skills. Each successful response is graded with a maximum of 10 points. If minor deficiencies are noted in an otherwise correct answer or satisfactory skill demonstration, the maximum score for each item may be reduced to 5 points. The maximum total score for Criterion 1.3 is 30 points.

The third stage of practice is the final one.

On the penultimate day of practice, the student must complete the diary (obtain all necessary signatures) and write a report in the appropriate section of the ДНЕВНИК-ОТЧЕТ / REPORT document.

The report is based on information about the specific production work performed by the student during the internship (practical activity in a medical organization).

Completing a clinical internship report begins with a description of the internship site and the work schedule at the hospital or clinic. The clinical internship report should detail everything the student did, participated in, and observed, day by day, providing a clear understanding of the student's level of independence in completing a given task.

Create a diary with an analysis of your work. Prepare a presentation of a complex clinical case (diagnosis, treatment, results). Complete a final assessment in the form of an interview on the competencies mastered.

The Head of practical training completes the appropriate section of the ДНЕВНИК-ОТЧЕТ / REPORT document (Professional Characteristics of Students), provides a detailed analysis of the student's completed work, and provides their opinion. The conclusion indicates the level of theoretical and practical training of the student, the quality of the work performed, work discipline, and shortcomings, if any; at the end of the characterization, an assessment is given for the practical experience/

The internship report is defended before a committee appointed by the program director. During the internship assessment, the student presents the ДНЕВНИК-ОТЧЕТ / REPORT document and answers questions from committee members.

Based on the results of the report defense, the internship committee prepares a "Commission's Conclusion on the Results of the Internship Defense" and records it in the corresponding section of the ДНЕВНИК-ОТЧЕТ / REPORT document; the final grade is entered into the grade sheet.

Intermediate Assessment

Admission to the intermediate assessment is contingent upon the completion of the practice objectives and achieving a grade of "Satisfactory" (more than 30 points) in the ongoing assessment.

The examination is conducted in the form of a practice report defense. Attestation commission formed by the head of the educational program. During the assessment, the student presents the ДНЕВНИК-ОТЧЕТ / REPORT document and answers questions from the commission members.

Upon completion of the report defense, the practice commission prepares a "Commission Conclusion on the Practice Defense Results", records it in the corresponding section of the ДНЕВНИК-ОТЧЕТ / REPORT document and the final grade is entered into the practice transcript.

Practice Report Assessment Criteria

№ Criterion Max. score

2.1 Completion and compliance of the ДНЕВНИК-ОТЧЕТ / REPORT document with methodological guidelines requirements. Logical structure of the report and material presentation. Accuracy of the summary report on work performed (strict correspondence with daily data). 5

2.2 Completeness, relevance and detail of material presentation in daily reports (logbook entries). Correctness of formulations and use of medical terminology. Scientific accuracy of presentation. Comprehensive coverage of practical aspects in the report. 5

2.3 Positive nature of professional reference. 5

2.4 Degree of utilization and processing of relevant information sources: legislation, educational literature, specialized periodic sources, including internet resources. 5

2.5 Quality of responses to commission questions, recommendations and comments during defense**:

Test questions

Oral questions

Correct demonstration of acquired practical skills

30

5

10

15

Σ Total score 50

**The student completes 5 selective test tasks, receiving 1 point for each correct answer. They answer 2 questions from committee members, earning 5 points for each correct response. The student demonstrates 3 selective practical skills, with each successful demonstration scored up to 5 points. If committee members have comments despite generally correct answers or satisfactory skill demonstrations, the score for each response may be reduced. The maximum score for criterion 2.5 is 30 points.

The assessment of the level of developed skills, practical experience, and student competencies during the exam conducted based on practice results is determined according to the university's approved grading scale.

11. EDUCATIONAL AND METHODOLOGICAL RECOMMENDATIONS FOR TEACHERS

The first stage of practice (introduction)

The Head of practical training will notify students in advance of the actual meeting place on the first day of practical training.

Introduction. Safety instructions. Determination of methods for conducting internship, goals and objectives of internship, reporting forms.

Distribution of students to departments together with the person responsible for practical training from the medical organization.

Clarification and coordination of the practical assignment, taking into account the specific activities of a particular department of a medical organization.

During the internship, each student completes a daily the ДНЕВНИК-ОТЧЕТ / REPORT document using the prescribed format.

The form is provided to students in advance in the form of a *.doc file for completion on paper, or students are provided with access to an information system that allows them to maintain the ДНЕВНИК-ОТЧЕТ / REPORT document in electronic form.

The supervisor's notes in the appropriate columns of the diary/report will confirm that the student actually attended the internship that day, mastered certain skills, became familiar with the work of certain departments, etc.

A supervisor is the employee directly supervising the internship. This may be different employees on different days. The Head of practical training and the person responsible for practical training at the medical organization, may also act as supervisor for specific sections.

The ongoing assessment is conducted through the following methods: monitoring students' completion of relevant sections in the ДНЕВНИК-ОТЧЕТ / REPORT document (including daily report notes and report sections), verifying compliance with safety regulations, internal work procedures, and sanitary standards, conducting interviews, and evaluating students' demonstration of acquired skills. The Head of practical training may personally monitor the student's progress at any time during practice hours.

The second stage of practice is the main one.

Direct implementation by the student of activities to acquire skills and master practical abilities provided for by the internship program.

During the main stage of practical training, rotation of students across departments should be provided so that each student acquires the necessary skills and abilities.

Weekly case reviews focusing on differential diagnosis and treatment strategies are available. Interactive business simulations on emergency situations are also available.

The form of ongoing monitoring for the main stage of practice is an interview and demonstration of acquired skills, monitoring of students' completion of the relevant sections in the ДНЕВНИК-ОТЧЕТ / REPORT document (diary entries, writing of the section of the practice report).

The teacher supervises the students' work in the departments, operating room, manipulation room, work with the patient together with the department staff, interpretation of data from additional research methods, and filling out medical documentation. Development of professional competencies: maintaining medical records, providing emergency care, and carrying out preventive measures

The third stage of practice is the final one.

On the penultimate day of practice, the student must complete the diary (obtain all necessary signatures) and write a report in the appropriate section of the ДНЕВНИК-ОТЧЕТ / REPORT document.

The report is based on information about the specific production work performed by the student during the internship (practical activity in a medical organization).

Completing a clinical internship report begins with a description of the internship site and the work schedule at the hospital or clinic. The clinical internship report should detail everything the

student did, participated in, and observed, day by day, providing a clear understanding of the student's level of independence in completing a given task.

Create a diary with an analysis of your work. Prepare a presentation of a complex clinical case (diagnosis, treatment, results). Complete a final assessment in the form of an interview on the competencies mastered.

The Head of practical training completes the appropriate section of the ДНЕВНИК-ОТЧЕТ / REPORT document (Professional Characteristics of Students), provides a detailed analysis of the student's completed work, and provides their opinion. The conclusion indicates the level of theoretical and practical training of the student, the quality of the work performed, work discipline, and shortcomings, if any; at the end of the characterization, an assessment is given for the practical experience/

The internship report is defended before a committee appointed by the program director. During the internship assessment, the student presents the ДНЕВНИК-ОТЧЕТ / REPORT document and answers questions from committee members.

Based on the results of the report defense, the internship committee prepares a "Commission's Conclusion on the Results of the Internship Defense" and records it in the corresponding section of the ДНЕВНИК-ОТЧЕТ / REPORT document; the final grade is entered into the grade sheet.

Students' internship helps them develop communication skills with patients, taking into account ethics, deontology, and psychological characteristics.

Independent work helps develop skills in working with patients, working with literature, analytical thinking, documentation skills, accuracy, and discipline.

Working with academic literature is considered a form of academic work and is completed within the hours allotted for its study. Each student is provided with access to the university's electronic library collections.

The recommendations are aimed at systematically developing professional competencies through a combination of theoretical knowledge, practical skills, and compliance with regulatory requirements..

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