

Документ подписан простой электронной подписью
Информация о владельце:
ФИО: Кубанов Сергей Исмаилович
Должность: и.о. декана медико-биологического факультета
Дата подписания: 20.10.2026 10:11:25
Уникальный программный ключ:
bbc0243907972fc80f279c67afb4501106151a7d

**MINISTRY OF SCIENCE AND HIGHER EDUCATION
RUSSIAN FEDERATION**

**Federal State Autonomous Educational Institution of Higher Education
NORTH-CAUCASUS FEDERAL UNIVERSITY**

APPROVED
Assoc. Prof. Kubanov S.I.
PhD in Medical Sciences
Dean
Faculty of Medicine and Biology

ASSESSMENT TOOLS FUND FOR THE DISCIPLINE

Current issues of neonatology

Name of the discipline (module)

- Specialty: 31.05.01 General Medicine
- Mode of training: Full-time
- Year of commencement of studies: 2026
- Delivered in Semester 11

Introduction

1. Intended for carrying out current control of academic performance progress and intermediate attestation in the discipline of «Current issues of neonatology» for students of the specialty (majoring in) 31.05.01 General Medicine.

2. The ATF is an appendix to the program of the discipline (module) «Current issues of neonatology»

3. Developer(s): Ivchenko G.S., Acting Head of the Department of Internal Medicine Propaedeutics (Full Name, Position)

4. Expert examination of the ATF has been completed.

Expert group:

Chairperson: Kubanov S.I., Associate Professor of the Department of Surgery, Orthopedics, and Traumatology (Full Name, Position)

Committee members: T.I. Dzhandarova, Head of the Department of Anatomy and Histology (Full Name, Position)

Pozdnyakova O.Yu., Professor of the Department of Therapy (Full Name, Position)

Employer organization representative: Vilensky I.L., Chief Physician of Independent CDL, LLC

Expert conclusion – the ATF allows evaluating the level of competency levels and is recommended to be employed in the educational process.

5. The validity period for the ATF shall be determined by the period of implementation of the educational program.

1. Description of Evaluation Criteria at Various Stages of Their Formation, Description of Evaluation Scales

Levels of formation of competence(s), indicator(s)	Descriptors			
	Minimum level not achieved (Unsatisfactory) 2 points	Minimum level (Satisfactory) 3 points	Intermediate level (Good) 4 points	High level (Excellent) 5 points
Competence: PC-3 Capable of identifying the patient's main pathological conditions, symptoms, disease syndromes, and nosological forms in accordance with the International Statistical Classification of Diseases and Health-Related Problems, 10th Revision				
Learning outcomes by discipline Indicator: ID-1 PC-3 Capable of constructing an algorithm and selecting criteria for determining the main pathological conditions, syndromes, diseases in patients of various profiles in accordance with the International Statistical Classification of Diseases and Health-Related Problems, X revision (ICD-X)	Not capable to build algorithm various profile main pathological conditions, syndromes, diseases	He is able to create an algorithm for various profiles of basic pathological conditions, syndromes, and diseases.	Is able to build algorithm and choose criteria determination of patients various profile main pathological conditions, syndromes, diseases	Able to build algorithm and choose criteria definition in patients various profile main pathological conditions, syndromes, diseases in accordance with International statistical classification diseases and health-related problems, X revision (ICD-X)
Learning outcomes by discipline Indicator: ID-2 PC-3 Identifies the main pathological symptoms and syndromes, formulates a clinical diagnosis in accordance with ICD-10	Unable to identify pathological symptoms and syndromes	It highlights certain pathological symptoms and syndromes	It identifies the main pathological symptoms and syndromes	Identifies the main pathological symptoms and syndromes, formulates a clinical diagnosis in accordance with ICD-X

The evaluation of the competency formation level in the discipline is carried out on the basis of the Regulations on conducting current control of academic progress and intermediate attestation of students in higher education educational programs – Bachelor's programs, Specialist's programs, Master's programs – at the Federal State Autonomous Educational Institution of Higher Education NORTH-CAUCASUS FEDERAL UNIVERSITY in its current edition.

ASSESSMENT TOOLS FOR CHECKING THE LEVEL OF COMPETENCY DEVELOPMENT

Task Number	Correct Answer	Content of the Question	Competency
Semester 11			
1.	c	What is the average blood sugar level in healthy full-term newborns in the first days of life? a) 0.5-1.1 mmol/L b) 1.1-2.2 mmol/L c) 3.0-3.5 mmol/L d) 4.1-4.4 mmol/L	PC-3
2.	a	The newborn was diagnosed with "respiratory disorders syndrome", the radiological sign of this pathology is: a) a fine mesh pattern with "air bronchogram", due to unstretched airways b) deformation of the pulmonary pattern c) cystic formations in the upper lobe area	PC-3
3.	b	Skin marbling is considered physiological for: a) full-term newborns b) premature newborns c) overdue newborns	PC-3
4.	d	When caring for a healthy 1st degree premature infant, the following are used: a) treatment of the umbilical wound, skin, and visible mucous membranes b) frequent feeding c) contact with the mother d) feeding through a tube	PC-3
5.	a	This formula is used to calculate (select the correct answer): Number of children under 5 years of age who died X1000/ Number of live births a) Mortality rate of children under 5 years of age b) Infant mortality rate c) Infant mortality rate adjusted for body weight.	PC-3
6.	c	The development of hemorrhagic syndrome in newborns with biliary atresia is associated with	PC-3

		a) damage to the liver parenchyma and a decrease in the synthesis of blood clotting factors b) increased capillary permeability c) impaired intestinal absorption of vitamin K	
7.	b	When determining prematurity, the main indicator is: a) indicators of physical development b) gestational age c) presence of reflexes of innate automatism	PC-3
8.	a	In the acute stage of sepsis treatment, the following are used: a) passive immunotherapy b) active immunotherapy	PC-3
9.	d	The perinatal period begins - (select the correct answer): a) from 28 weeks of pregnancy and ends after childbirth b) from 22 weeks of pregnancy and ends after childbirth c) from 22 weeks of pregnancy, includes the period of childbirth, and ends after 28 days of the newborn's life d) from 22 weeks of pregnancy, includes the period of childbirth, and ends after 168 hours of the newborn's life	PC-3
10.	d	Resuscitation of the newborn in the delivery room should be stopped if, despite full and adequate resuscitation efforts, the heartbeats are absent for: a) 3 minutes b) 5 minutes c) 8 minutes d) 15 minutes	PC-3
11.	b	The highest risk of intranatal asphyxia occurs in: a) premature birth, b) delayed birth, c) urgent birth	PC-3
12.	e	A specific (pathognomonic) symptom of sepsis in newborns is:	PC-3

		a) hyperleukocytosis (more than 25,000 in 1 microliter of capillary blood) b) thrombocytopenia c) increased levels of acute phase proteins in the blood serum d) positive hemoculture e) there is no single specific symptom for the diagnosis of sepsis	
13.	b	Premature infants are more likely to develop pneumonias in the early neonatal period: a) viral-bacterial b) bacterial c) parasitic d) viral	PC-3
14.	e	The criteria for physiological jaundice in a newborn baby are: a) appearance after 36 hours of life b) maximum on the 3rd-4th day of life c) fading after 10 days of life d) the maximum value of total bilirubin does not exceed 205 $\mu\text{mol/L}$ in full-term babies e) all answers are correct	PC-3
15.	c	The most severe form of jaundiced hemolytic disease of the newborn is a) anemia b) liver damage c) CNS damage d) heart failure	PC-3
16.	c	Which of the following is NOT a sign of improvement in the newborn's condition during resuscitation? a) increasing heart rate b) improving skin color c) decreasing muscle tone (relaxation) d) independent breathing	PC-3
17.	Ventilation under positive pressure 100% oxygen	Immediately after performing CPR, the patient should be placed in a supine position	PC-3
18.	from the moment of birth until 28 full days	The neonatal period begins	PC-3
19.	Breathing, heart rate (HR), skin and mucous membrane color	What are the main criteria for assessing a newborn's need for resuscitation?	PC-3

20.	functional maturity and overall health of the child	The method of feeding a premature baby determines	PC-3
21.	up to 38 weeks if there are signs of life	Premature babies are those who are born before the gestational age of:	PC-3
22.	Ventilation under positive pressure 100% oxygen	Direct heart massage should always be accompanied by:	PC-3
23.	from the moment of birth until 28 full days	The neonatal period begins	PC-3
24.	Breathing, heart rate (HR), skin and mucous membrane color	What are the main criteria for assessing a newborn's need for resuscitation?	PC-3

25. Description of the Evaluation Scale

Within the framework of the rating system, students' academic progress in each discipline is evaluated during current control and intermediate attestation. The rating system for assessing students' knowledge is based on the use of a combination of control activities to check the covered material (checkpoints), optimally located throughout the entire time interval of studying the discipline. The principles of the rating system for assessing students' knowledge are based on the requirements described in the Regulations on the organization of the educational process based on the rating system for assessing students' knowledge at NCFU.

26. Criteria for Evaluating Competencies

The grade **Excellent** shall be awarded to a student if the theoretical content of the course has been mastered completely, without gaps; the material is presented exhaustively, consistently, clearly, and logically; the student freely copes with tasks, questions, and other types of knowledge application; uses additional material in the answer; all tasks provided for by the program are completed, and the quality of their execution is evaluated by a number of points close to the maximum; analyzes the obtained results; demonstrates independence when performing tasks.

The grade **Good** is to be awarded to a student if the theoretical content of the course is mastered completely, the necessary practical competencies are mainly formed, all educational tasks provided for by the training program are completed, and the quality of their execution is sufficiently high. The student firmly knows the material, presents it competently and strictly on the merits of the matter, without allowing significant inaccuracies in answering the question.

The grade **Satisfactory** is awarded to a student in case the theoretical content of the course has been mastered in part only, but the gaps are not of a significant nature, most of the tasks provided for by the program are completed, but contain errors, the student allows inaccuracies and insufficiently correct wording when answering the question, and violations of logical sequence are observed in the presentation of the program material.

The grade **Unsatisfactory** is awarded to a student if they do not know a significant part of the program material, allow significant errors, perform practical works with great difficulty and uncertainty, the necessary practical competencies are not formed, most of the educational tasks provided for by the training program are not completed, and the quality of their execution is evaluated by a number of points close to the minimum.

