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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

«Outpatient Therapy»

- Specialty: 31.05.01 General Medicine
- Mode of training: Full-time
- Year of commencement of studies: 2026
- Delivered in Semester, 10-12

Introduction

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

2. The ATF is an appendix to the program of the discipline « Outpatient Therapy»

3. Developer(s): Ivchenko G.S., Cand. of Med.Sc. Acting Head Department of Propedeutics of Internal Diseases.

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.

Committee members: Kotelevets S.M., Professor of the Department of Propedeutics of Internal Diseases.

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
Competency: PC-5				
Learning outcomes for the discipline (module): Acquisition of special medical skills and their application in practical healthcare. Indicator: ID-1 PC-5 Prescribes medicinal drugs, medical devices, and medical nutrition taking into account the diagnosis, age, and clinical picture of the disease in accordance with current procedures for rendering medical care, clinical recommendations (treatment protocols) on issues of medical care provision, taking into account standards of medical care	Does not prescribe medicinal drugs, medical devices, and medical nutrition	Prescribes medicinal drugs, medical devices, and medical nutrition	Prescribes medicinal drugs, medical devices, and medical nutrition taking into account the diagnosis, age, and clinical picture of the disease in view of procedures for rendering medical care	Prescribes medicinal drugs, medical devices, and medical nutrition taking into account the diagnosis, age, and clinical picture of the disease in view of current procedures for rendering medical care, clinical recommendations (treatment protocols) on issues of medical care provision, taking into account standards of medical care
Learning outcomes for the discipline (module): Acquisition of special medical skills and their application in	Does not assess the efficacy and safety of the use of medicinal drugs	Assesses the efficacy and safety of the use of medicinal drugs	Assesses the efficacy and safety of the use of medicinal drugs and medical devices	Assesses the efficacy and safety of the use of medicinal drugs, medical devices, medical nutrition, and

practical healthcare. Indicator: ID-2 PC-5 Assesses the efficacy and safety of the use of medicinal drugs, medical devices, medical nutrition, and non-drug treatment				non-drug treatment
Learning outcomes for the discipline (module): Acquisition of special medical skills and their application in practical healthcare. Indicator: ID-3 PC-5 Plans and monitors the management of patients with various nosological forms in outpatient conditions and day hospital conditions	Does not plan and monitor the management of patients	Plans and monitors the management of patients	Plans and monitors the management of patients with various nosological forms	Plans and monitors the management of patients with various nosological forms in outpatient conditions and day hospital conditions
Competency: PC-8				
Learning outcomes for the discipline (module): Acquisition of special medical skills and their application in practical healthcare. Readiness for communication in verbal and written forms. Indicator: ID-1 PC-8 Is capable of clearly	Not capable of clearly presenting in popular terms	Capable of clearly presenting in popular terms	Capable of clearly presenting in popular terms the significance of risk factors	Capable of clearly presenting in popular terms the significance of risk factors in diseases of internal organs and measures for exacerbation prevention

presenting in popular terms the significance of risk factors in diseases of internal organs and measures for prevention of exacerbations				
Learning outcomes for the discipline (module): Acquisition of special medical skills and their application in practical healthcare. Readiness for communication in verbal and written forms. Indicator: ID-2 PC-8 Identifies characteristics, determines the forms and methods of educational activity of medical workers among patients and the population to eliminate risk factors and form skills of a healthy lifestyle	Does not identify characteristics, does not determine forms and methods	Identifies characteristics, determines forms and methods	Identifies characteristics, determines forms and methods of educational activity of medical employees	Identifies characteristics, determines the forms and methods of educational activity of medical employees among patients and the population to eliminate risk factors and shape skills of a healthy lifestyle

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, 10	
1.	d	What types of activity must a general practitioner master? a) prevention, diagnosis, treatment of the most common diseases; b) performance of medical manipulations; c) provision of emergency care; d) all of the above.	PC-5
2.	d	Can a sick leave certificate be issued to an unemployed patient? a) cannot; b) only in acute diseases; c) in case of hospitalization; d) if there is a document on registration as unemployed.	PC-5
3.	d	What are the causes of disability? a) general disease; b) work injury; c) occupational disease; d) all of the above.	PC-5
4.	b	For what period are disability groups II and III established? a) for 1 year; b) for 2 years; c) for 3 years; d) for 4 years.	PC-5
5.	e	Which examination is not mandatory during dispensarization of the population: a) general blood test; b) urine test for protein; c) fluorography of the chest organs; d) examination by a gynecologist for women; e) spirometry.	PC-5
6.	e	During dispensarization of patients with arterial hypertension, the mandatory examinations are: a) general urine test – 2 times a year; b) creatinine – not less than 1 time a year; c) ECG – not less than 1 time a year; d) blood lipids – not less than 1 time a year e) all of the above.	PC-5
7.	a	Which specialists are necessarily involved in the examination of patients with duodenal ulcer disease with frequent relapses: a) surgeon; b) phthisiatrist; c) endocrinologist; d) otolaryngologist	PC-5

8.	b	How often is gastroduodenoscopy performed during dispensarization of patients with gastric ulcer disease: a) 2 times a year (in spring and autumn); b) 1 time a year and on exacerbation; c) on exacerbation; d) 3 times a year.	PC-5
9.	c	In outpatient settings, the main method of diagnosing emphysema is: a) ECG; b) bronchoscopy; c) fluoroscopy of the chest organs; d) sputum analysis.	PC-5
10.	d	What types of activity must a general practitioner master? a) prevention, diagnosis, treatment of the most common diseases; b) performance of medical manipulations; c) provision of emergency care; d) all of the above.	PC-8
11.	d	Can a sick leave certificate be issued to an unemployed patient? a) cannot; b) only in acute diseases; c) in case of hospitalization; d) if there is a document on registration as unemployed.	PC-8
12.	b	For what period are disability groups II and III established? a) for 1 year; b) for 2 years; c) for 3 years; d) for 4 years.	PC-8
13.	c	In what cases is a sick leave certificate for care not issued? a) for care of patients suffering from chronic diseases in remission; b) for disabled persons of group 1; c) during regular leave, leave without pay, maternity leave; d) in all of the above cases	PC-8
14.	e	Which examination is not mandatory during dispensarization of the population: a) general blood test; b) urine test for protein; c) fluorography of the chest organs; d) examination by a gynecologist for women; e) spirometry.	PC-8
15.	e	During dispensarization of patients with arterial hypertension, the mandatory examinations are: a) general urine test – 2 times a year; b) creatinine – not less than 1 time a year;	PC-8

		c) ECG – not less than 1 time a year; d) blood lipids – not less than 1 time a year e) all of the above.	
16.	b	How often is gastroduodenoscopy performed during dispensarization of patients with gastric ulcer disease: a) 2 times a year (in spring and autumn); b) 1 time a year and on exacerbation; c) on exacerbation; d) 3 times a year.	PC-8
17.	d	Complaints characteristic of the onset of acute bronchitis in the first days of the disease are: a) dry cough; b) burning behind the sternum; c) chest pain; d) all of the above.	PC-8
18.	c	In outpatient settings, the main method of diagnosing emphysema is: a) ECG; b) bronchoscopy; c) fluoroscopy of the chest organs; d) sputum analysis.	PC-8
19.	H. pylori bacterium and intake of non-steroidal anti-inflammatory drugs	Main causes of development of gastric ulcer disease and gastritis	PC-8
20.	gastrosocopy,	The main research methods allowing verification of the diagnosis	PC-8
Semester,11			
21.	d	What types of activity must a general practitioner master? a) prevention, diagnosis, treatment of the most common diseases; b) performance of medical manipulations; c) provision of emergency care; d) all of the above.	PC-5
22.	d	Can a sick leave certificate be issued to an unemployed patient? a) cannot; b) only in acute diseases; c) in case of hospitalization; d) if there is a document on registration as unemployed.	PC-5
23.	d	What are the causes of disability? a) general disease; b) work injury;	PC-5

		c) occupational disease; d) all of the above.	
24.	b	For what period are disability groups II and III established? a) for 1 year; b) for 2 years; c) for 3 years; d) for 4 years.	PC-5
25.	e	Which examination is not mandatory during dispensarization of the population: a) general blood test; b) urine test for protein; c) fluorography of the chest organs; d) examination by a gynecologist for women; e) spirometry.	PC-5
26.	e	During dispensarization of patients with arterial hypertension, the mandatory examinations are: a) general urine test – 2 times a year; b) creatinine – not less than 1 time a year; c) ECG – not less than 1 time a year; d) blood lipids – not less than 1 time a year e) all of the above.	PC-5
27.	a	Which specialists are necessarily involved in the examination of patients with duodenal ulcer disease with frequent relapses: a) surgeon; b) phthisiatrist; c) endocrinologist; d) otolaryngologist	PC-5
28.	b	How often is gastroduodenoscopy performed during dispensarization of patients with gastric ulcer disease: a) 2 times a year (in spring and autumn); b) 1 time a year and on exacerbation; c) on exacerbation; d) 3 times a year.	PC-5
29.	c	In outpatient settings, the main method of diagnosing emphysema is: a) ECG; b) bronchoscopy; c) fluoroscopy of the chest organs; d) sputum analysis.	PC-5
30.	d	What types of activity must a general practitioner master? a) prevention, diagnosis, treatment of the most common diseases; b) performance of medical manipulations; c) provision of emergency care; d) all of the above.	PC-8
31.	d	Can a sick leave certificate be issued to an unemployed patient? a) cannot;	PC-8

		b) only in acute diseases; c) in case of hospitalization; d) if there is a document on registration as unemployed.	
32.	b	For what period are disability groups II and III established? a) for 1 year; b) for 2 years; c) for 3 years; d) for 4 years.	PC-8
33.	c	In what cases is a sick leave certificate for care not issued? a) for care of patients suffering from chronic diseases in remission; b) for disabled persons of group 1; c) during regular leave, leave without pay, maternity leave; d) in all of the above cases	PC-8
34.	e	Which examination is not mandatory during dispensarization of the population: a) general blood test; b) urine test for protein; c) fluorography of the chest organs; d) examination by a gynecologist for women; e) spirometry.	PC-8
35.	e	During dispensarization of patients with arterial hypertension, the mandatory examinations are: a) general urine test – 2 times a year; b) creatinine – not less than 1 time a year; c) ECG – not less than 1 time a year; d) blood lipids – not less than 1 time a year e) all of the above.	PC-8
36.	b	How often is gastroduodenoscopy performed during dispensarization of patients with gastric ulcer disease: a) 2 times a year (in spring and autumn); b) 1 time a year and on exacerbation; c) on exacerbation; d) 3 times a year.	PC-8
37.	d	Complaints characteristic of the onset of acute bronchitis in the first days of the disease are: a) dry cough; b) burning behind the sternum; c) chest pain; d) all of the above.	PC-8
38.	c	In outpatient settings, the main method of diagnosing emphysema is: a) ECG; b) bronchoscopy; c) fluoroscopy of the chest organs; d) sputum analysis.	PC-8

39.	H. pylori bacterium and intake of non-steroidal anti- inflammatory drugs	Main causes of development of gastric ulcer disease and gastritis	PC-8
40.	gastroscopy,	The main research methods allowing verification of the diagnosis	PC-8
Semester, 12			
41.	d	What types of activity must a general practitioner master? a) prevention, diagnosis, treatment of the most common diseases; b) performance of medical manipulations; c) provision of emergency care; d) all of the above.	PC-5
42.	d	Can a sick leave certificate be issued to an unemployed patient? a) cannot; b) only in acute diseases; c) in case of hospitalization; d) if there is a document on registration as unemployed.	PC-5
43.	d	What are the causes of disability? a) general disease; b) work injury; c) occupational disease; d) all of the above.	PC-5
44.	b	For what period are disability groups II and III established? a) for 1 year; b) for 2 years; c) for 3 years; d) for 4 years.	PC-5
45.	e	Which examination is not mandatory during dispensarization of the population: a) general blood test; b) urine test for protein; c) fluorography of the chest organs; d) examination by a gynecologist for women; e) spirometry.	PC-5
46.	e	During dispensarization of patients with arterial hypertension, the mandatory examinations are: a) general urine test – 2 times a year; b) creatinine – not less than 1 time a year; c) ECG – not less than 1 time a year; d) blood lipids – not less than 1 time a year e) all of the above.	PC-5

47.	a	Which specialists are necessarily involved in the examination of patients with duodenal ulcer disease with frequent relapses: a) surgeon; b) phthisiatrist; c) endocrinologist; d) otolaryngologist	PC-5
48.	b	How often is gastroduodenoscopy performed during dispensarization of patients with gastric ulcer disease: a) 2 times a year (in spring and autumn); b) 1 time a year and on exacerbation; c) on exacerbation; d) 3 times a year.	PC-5
49.	c	In outpatient settings, the main method of diagnosing emphysema is: a) ECG; b) bronchoscopy; c) fluoroscopy of the chest organs; d) sputum analysis.	PC-5
50.	d	What types of activity must a general practitioner master? a) prevention, diagnosis, treatment of the most common diseases; b) performance of medical manipulations; c) provision of emergency care; d) all of the above.	PC-8
51.	d	Can a sick leave certificate be issued to an unemployed patient? a) cannot; b) only in acute diseases; c) in case of hospitalization; d) if there is a document on registration as unemployed.	PC-8
52.	b	For what period are disability groups II and III established? a) for 1 year; b) for 2 years; c) for 3 years; d) for 4 years.	PC-8
53.	c	In what cases is a sick leave certificate for care not issued? a) for care of patients suffering from chronic diseases in remission; b) for disabled persons of group 1; c) during regular leave, leave without pay, maternity leave; d) in all of the above cases	PC-8
54.	e	Which examination is not mandatory during dispensarization of the population: a) general blood test; b) urine test for protein;	PC-8

		c) fluorography of the chest organs; d) examination by a gynecologist for women; e) spirometry.	
55.	e	During dispensarization of patients with arterial hypertension, the mandatory examinations are: a) general urine test – 2 times a year; b) creatinine – not less than 1 time a year; c) ECG – not less than 1 time a year; d) blood lipids – not less than 1 time a year e) all of the above.	PC-8
56.	b	How often is gastroduodenoscopy performed during dispensarization of patients with gastric ulcer disease: a) 2 times a year (in spring and autumn); b) 1 time a year and on exacerbation; c) on exacerbation; d) 3 times a year.	PC-8
57.	d	Complaints characteristic of the onset of acute bronchitis in the first days of the disease are: a) dry cough; b) burning behind the sternum; c) chest pain; d) all of the above.	PC-8
58.	c	In outpatient settings, the main method of diagnosing emphysema is: a) ECG; b) bronchoscopy; c) fluoroscopy of the chest organs; d) sputum analysis.	PC-8
59.	H. pylori bacterium and intake of non-steroidal anti-inflammatory drugs	Main causes of development of gastric ulcer disease and gastritis	PC-8
60.	gastroscopy,	The main research methods allowing verification of the diagnosis	PC-8

2. 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.

3. **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.