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Информация о владельце:

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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

«Propaedeutics of Internal Diseases»

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 5,6.

Introduction

1. Intended for carrying out current control of academic performance progress and intermediate attestation in the discipline of Propaedeutics of Internal Diseases 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) «Propaedeutics of Internal Diseases»

3. Developer(s): G.S. Ivchenko, Acting Head of the Department of Propaedeutics of Internal Diseases

4. Expert examination of the ATF has been completed.

Expert group:

Chairperson: E.V. Denisova, Associate Professor of the Department of Biochemistry, Molecular Biology and Medicine

5. Committee members: T.I. Dzhandarova, Head of the Department of Anatomy and Histology

S.M. Kotelevets, Professor of the Department 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.

6. 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: UC-1 Capable of carrying out a critical analysis of problem situations based on a system approach, and developing an action strategy.				
Learning outcomes for the discipline (module): Raising a comprehensively developed personality. Indicator: ID-1 UC-1 identifies a problem situation, carries out its analysis and diagnosis based on a systems approach	Does not identify a problem situation	Identifies a problem situation	Identifies a problem situation, carries out its analysis	Identifies a problem situation, carries out its analysis and diagnosis based on a systems approach
Learning outcomes for the discipline (module): Raising a comprehensively developed personality. Indicator: ID-2 UC-1 carries out the search, selection, and systematization of information to determine alternative options for strategic decisions in a problem situation;	Does not carry out the search, selection, and systematization of information	Carries out the search, selection, and systematization of information	Carries out the search, selection, and systematization of information to determine alternative options	Carries out the search, selection, and systematization of information to determine alternative options for strategic decisions in a problem situation
Learning outcomes for the discipline (module):	Does not determine the risks of possible options for	Determines the risks of possible options for solving a	Determines and assesses the risks of possible options for	Determines and assesses the risks of possible options for

Raising a comprehensively developed personality. Indicator: ID-3 UC-1 determines and assesses the risks of possible options for solving a problem situation, and selects the optimal variant for its solution.	solving a problem situation	problem situation	solving a problem situation	solving a problem situation, and selects the optimal variant for its solution
Competency: UC-2. Capable of managing a project at all stages through its life cycle.				
Learning outcomes for the discipline (module): Acquisition of special medical skills and their application in practical healthcare. Indicator: ID-1 UC-2 formulates the goal of the project, determines a set of interrelated tasks ensuring its achievement, and determines the expected results of solving the tasks	Does not define the goal of the project, does not determine a set of interrelated tasks.	Defines the goal of the project, determines a set of interrelated tasks	Defines the goal of the project, determines a set of interrelated tasks ensuring its achievement	Defines the goal of the project, determines a set of interrelated tasks ensuring its achievement, and determines the expected results of solving the tasks
Learning outcomes for the discipline (module): Acquisition of special medical skills and their application in practical healthcare. Indicator: ID-2 UC-2 develops an action plan for solving project	Does not develop an action plan for solving project tasks	Develops an action plan for solving project tasks	Develops an action plan for solving project tasks, choosing the optimal way to solve them	Develops an action plan for solving project tasks, choosing the optimal way to solve them, based on current legal norms and available resources and constraints

tasks, choosing the optimal way to solve them, based on current legal norms and available resources and constraints				
Learning outcomes for the discipline (module): Acquisition of special medical skills and their application in practical healthcare. Indicator: ID-3 UC-2 ensures project execution in accordance with the established goals, deadlines, and costs, based on current legal norms, available resources, and constraints, including using digital tools	Does not ensure project execution	Ensures project execution in accordance with the established goals, deadlines, and costs	Ensures project execution in accordance with the established goals, deadlines, and costs, based on current legal norms, available resources, and constraints	Ensures project execution in accordance with the established goals, deadlines, and costs, based on current legal norms, available resources, and constraints, including using digital tools
Competency: GPC-4 Capable of applying medical devices provided for by the procedure for rendering medical care, as well as conducting patient examinations in order to establish a diagnosis.				
Learning outcomes for the discipline (module): Development of clinical thinking. Indicator: ID-1 GPC-4 Applies medical technologies, medical devices, medicinal drugs, disinfectants, and their combinations when solving	Does not apply medical technologies	Applies medical technologies	Applies medical technologies, medical devices, medicinal drugs	Applies medical technologies, medical devices, medicinal drugs, disinfectants, and their combinations when solving professional tasks

professional tasks				
Learning outcomes for the discipline (module): Development of clinical thinking. Indicator: ID-2 GPC-4 Applies diagnostic instrumental examination methods with the aim of establishing a diagnosis	Applies diagnostic instrumental methods	Applies diagnostic instrumental methods	Applies diagnostic instrumental examination methods	Applies diagnostic instrumental examination methods with the aim of establishing a diagnosis
Competency: GPC-5 Capable of assessing morphofunctional, physiological states and pathological processes in the human body to solve professional tasks.				
Learning outcomes for the discipline (module): Development of clinical thinking. Indicator: ID-1 GPC-5 Assesses morphofunctional and physiological states and processes in the human body at individual, group, and population levels to solve professional tasks.	Does not assess morphofunctional and physiological states	Assesses morphofunctional and physiological states	Assesses morphofunctional and physiological states and processes in the human body at individual, group, and population levels	Assesses morphofunctional and physiological states and processes in the human body at individual, group, and population levels to solve professional tasks
Learning outcomes for the discipline (module): Development of clinical thinking. Indicator: ID-2 GPC-5 Identifies pathological states and processes in the human body to	Does not identify pathological states	Identifies pathological states	Identifies pathological states and processes in the human body	Identifies pathological states and processes in the human body to solve professional tasks

solve professional tasks				
Competency: GPC-6 Capable of organizing patient care, providing primary health care, ensuring the organization of work and professional decision-making in emergency conditions at the pre-hospital stage, in conditions of emergencies, epidemics, and in centers of mass destruction.				
Learning outcomes for the discipline (module): Readiness to act in non-standard situations, to choose methods of protection in emergency situations. Acquisition of special medical skills and their application in practical healthcare. Indicator: ID-1 GPC-6 Is capable of organizing patient care	Not capable of making arrangements	Capable making arrangements	Capable of arranging care	Capable of arranging patient care
Learning outcomes for the discipline (module): Readiness to act in non-standard situations, to choose methods of protection in emergency situations. Acquisition of special medical skills and their application in practical healthcare. Indicator: ID-2 GPC-6 Provides primary health care	Does not provide care	Provides care	Provides primary care	Provides primary health care
Indicator: ID-3 GPC-6 Is	Not capable of making	Capable of making	Capable of making	Capable of making

capable of making professional decisions in emergency conditions at the pre-hospital stage, in conditions of emergencies, epidemics, and in centers of mass destruction	professional decisions	professional decisions	professional decisions in emergency conditions at the pre-hospital stage, in conditions of emergencies, epidemics, and in centers of mass destruction	professional decisions in emergency conditions at the pre-hospital stage, in conditions of emergencies, epidemics, and in centers of mass destruction
Competency: GPC-8 Capable of implementing and monitoring the effectiveness of medical rehabilitation of the patient, including the implementation of individual programs of rehabilitation and habilitation of disabled persons, and conducting an assessment of the patient's ability to engage in work activities.				
Learning outcomes for the discipline (module): Acquisition of special medical skills and their application in practical healthcare. Indicator: ID-1 GPC-8 Compiles an individual plan of rehabilitation care together with the patient and family	Does not design an individual plan	Designs an individual plan	Designs an individual plan of rehabilitation care	Designs an individual plan of rehabilitation care together with the patient and family
Learning outcomes for the discipline (module): Acquisition of special medical skills and their application in practical healthcare. Indicator: ID-2 GPC-8 Monitors the effectiveness of medical rehabilitation of the patient, including during	Does not monitor the effectiveness of medical rehabilitation	Monitors the effectiveness of medical rehabilitation	Monitors the effectiveness of the patient's medical rehabilitation, including during the implementation of individual programs	Monitors the effectiveness of the patient's medical rehabilitation, including during the implementation of individual programs for patient rehabilitation

the implementation of individual programs for patient rehabilitation				
Learning outcomes for the discipline (module): Acquisition of special medical skills and their application in practical healthcare. Indicator: ID-3 GPC-8 Organizes the workspace and a safe hospital environment, trains the family in adapting the residential premises to the needs of the patient and disabled person	Does not arrange the workspace and a safe hospital environment	Arranges the workspace and a safe hospital environment	Arranges the workspace and a safe hospital environment, trains the family in adapting the residential premises	Arranges the workspace and a safe hospital environment, trains the family in adapting the residential premises to the needs of the patient and disabled person

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
5th semester			
1.	d	The most important of the listed differential diagnostic signs of COPD is: a) expiratory dyspnea b) cough with sputum discharge c) weakened or harsh vesicular breathing with prolonged expiration, dry buzzing and moist fine rales d) irreversible or partially reversible bronchial obstruction e) all of the above	UC-1
2.	a	Which antibiotic is the drug of choice in the treatment of community-acquired pneumonia, clinically and radiologically defined as pneumococcal: a) amoxicillin b) ceftriaxone c) ampicillin d) levofloxacin e) co-trimoxazole	UC-1
3.	a	In which disease is hemoptysis most often observed: a) fibrous-cavernous pulmonary tuberculosis b) primary pulmonary emphysema c) COPD d) tricuspid valve stenosis e) pneumonia	UC-1
4.	d	The most common cause of mitral stenosis: a) atherosclerotic change of the valve b) congenital defect c) infective endocarditis d) rheumatic heart disease e) myocardial infarction	UC-1
5.	d	Malignant hypertension can lead to all of the following, except: a) hypertensive retinopathy b) respiratory failure c) renal failure d) autoimmune hemolytic anemia	UC-1
6.	b	The least informative sign of atherogenic dyslipidemia is an increase in the blood level of: a) HDL b) LDL c) total cholesterol d) atherogenic index	UC-1
7.	b	A biochemical marker of chronic heart failure is:	UC-1

		a) the presence of antibodies to tissue transglutaminase b) brain natriuretic peptide c) glycated hemoglobin d) gamma-glutamyl transpeptidase e) procalcitonin	
8.	d	In which extrasystoles is a full compensatory pause observed: a) atrial b) extrasystoles from the AV node with preceding excitation of the ventricles c) group d) ventricular e) blocked	UC-1
9.	d	Which of the following drugs is a proton pump inhibitor: a) ranitidine b) sucralfate c) misoprostol d) omeprazole e) almagel	UC-1
10.	a	Signs of obstructive jaundice include all of the following, except: a) normal level of alkaline phosphatase b) moderate increase in aminotransferase levels c) clay-colored stool d) skin itching e) increase in predominantly conjugated bilirubin	UC-1
11.	a	In irritable bowel syndrome: a) discharge of mucus from the anus is possible b) bloody mucous diarrhea is characteristic c) treatment includes the prescription of 5-aminosalicylic acid preparations d) symptoms are not associated with stress factors e) the primary treatment is a gluten-free diet	UC-2
12.	d	Routes of infection in chronic pyelonephritis: a) lymphogenous b) hematogenous c) urogenic d) all of the above e) sexual	UC-2
13.	e	Rheumatoid arthritis is an autoimmune disease characterized by: a) inflammation and hyperplasia of the synovial membrane b) production of autoantibodies c) destruction of cartilage and bone tissue d) systemic manifestations, including those of the cardiovascular and respiratory systems, mental and skeletal disorders e) all of the above signs	UC-2
14.	a	The glucose tolerance test is not performed if:	UC-2

		a) the patient has fasting glycemia of 6.4 mmol/L; b) the patient has an elevated bilirubin level; c) relatives have been diagnosed with type 1 diabetes mellitus; d) the patient has fasting glycemia of 5.9 mmol/L; e) relatives have been diagnosed with type 2 diabetes mellitus.	
15.	a, b, c.	Regarding type I diabetes mellitus, the following is true: a) diabetes requires constant insulin therapy; b) diabetes more often occurs at a young age; c) the course of diabetes is accompanied by a tendency to ketoacidosis; d) diabetes usually occurs against the background of obesity; e) diabetes often accompanies pancreatic cancer.	UC-2
16.	b	Which autoantibodies are detected in elevated titers in autoimmune thyroiditis: a) antibodies to the TSH receptor; b) antibodies to thyroid peroxidase (TPO); c) thyroid-blocking antibodies; d) thyroid-stimulating antibodies.	UC-2
17.	b	Expected serum parameters in iron deficiency anemia – all except: a) decreased serum iron level; b) decreased iron-binding capacity of serum; c) decreased hemoglobin concentration in erythrocytes; d) decreased serum ferritin level.	UC-2
18.	bronchial asthma	A heterogeneous disease characterized by chronic inflammation of the airways, the presence of respiratory symptoms such as wheezing, shortness of breath, chest tightness and cough, which vary over time and intensity, and manifest together with variable airway obstruction is:	UC-2
19.	pneumonia	An acute, predominantly infectious disease in which damage to the alveoli and lung tissue of varying severity occurs is:	UC-2
20.	congenital anomalies (defects) of the heart, blood vessels and lungs; congestive heart failure, when reduced myocardial contractility	Name the causes of pulmonary hypertension	UC-2

	does not allow pumping the required amount of blood; narrowing of the opening between the left atrium and ventricle (mitral stenosis).		
21.	Primary prevention includes a rational regimen of work and rest, increased physical activity, restriction of table salt, avoidance of alcohol and smoking, reduction of caloric intake and body weight. Secondary prevention involves measures carried out under the supervision of physicians. Diseases and predisease conditions are timely identified, the patient is examined and adequate treatment is prescribed. The therapeutic goal is to reduce the risk of progression of the existing pathology and	Name the principles of primary and secondary prevention of cardiovascular diseases:	GPC-4

	the development of complications, and to improve the quality of life. Prevention of cardiovascular diseases is carried out in people who are at risk. Possible measures: Reduce excess weight, if present. Monitor blood pressure. Reduce salt intake. Monitor glycemia. Follow a hypocholesterolemia diet.		
22.	beta-blockers, calcium antagonists, organic nitrates	List the main groups of drugs used in the treatment of chronic forms of coronary artery disease:	GPC-4
23.	pressing pain behind the sternum; edema of the hands, feet, face, neck and upper parts of the chest; shortness of breath; nocturnal attacks of suffocation; ascites – accumulation of fluid in the abdominal cavity; hepatomegaly (enlarged liver); tachycardia;	List the symptoms of right ventricular failure:	GPC-4

	cyanosis (bluish discoloration) in the area of the nasolabial triangle; pallor of the skin.		
24.	bleeding, perforation, penetration, pyloric stenosis, and malignization	Types of complications of gastric and duodenal ulcers:	GPC-4
25.	nephrotic — pathological changes in urine predominate; hypertensive — manifested by increased blood pressure; mixed — a combination of the two above-mentioned forms; hematuric — blood in the urine is observed, other symptoms are mild or completely absent;	Classification of chronic glomerulonephritis	GPC-4
26.	weakness, apathy, fatigue; constant daytime sleepiness and nighttime insomnia; unexplained weight gain; dryness and laxity of the skin, hair loss; frequent constipation; loss of appetite; menstrual cycle disorders; in both men and	The main clinical manifestations of hypothyroidism	GPC-4

	women, a decrease in sexual desire occurs;		
27.	Nephropathy, accompanied by the development of chronic renal failure Retinopathy — damage to the vessels of the eyes, leading not only to decreased vision but also to blindness Diabetic foot Angina pectoris and myocardial infarction in case of damage to the heart vessels Polyneuropathy	List the possible complications of diabetes mellitus	GPC-4
28.	low dietary calcium intake; vitamin D deficiency; excessive salt intake; low physical activity.	Specify the risk factors for the development of osteoporosis	GPC-4
29.	an autoimmune disease of unclear nature, in which symmetrical small joints of the fingers and toes are initially affected, systemic (throughout the body) inflammation develops, and then large joints and other internal organs are affected.	Define the concept of "rheumatoid arthritis"	GPC-4

30.	b	The least informative sign of atherogenic dyslipidemia is an increase in the blood level of: a) HDL b) LDL c) total cholesterol d) atherogenic index	GPC-4
6th semester			
31.	d	The most important of the listed differential diagnostic signs of COPD is: a) expiratory dyspnea b) cough with sputum discharge c) weakened or harsh vesicular breathing with prolonged expiration, dry buzzing and moist fine rales d) irreversible or partially reversible bronchial obstruction e) all of the above	GPC-5
32.	a	Which antibiotic is the drug of choice in the treatment of community-acquired pneumonia, clinically and radiologically defined as pneumococcal: a) amoxicillin b) ceftriaxone c) ampicillin d) levofloxacin e) co-trimoxazole	GPC-5
33.	a	In which disease is hemoptysis most often observed: a) fibrous-cavernous pulmonary tuberculosis b) primary pulmonary emphysema c) COPD d) tricuspid valve stenosis e) pneumonia	GPC-5
34.	d	The most common cause of mitral stenosis: a) atherosclerotic change of the valve b) congenital defect c) infective endocarditis d) rheumatic heart disease e) myocardial infarction	GPC-5
35.	d	Malignant hypertension can lead to all of the following, except: a) hypertensive retinopathy b) respiratory failure c) renal failure d) autoimmune hemolytic anemia	GPC-5
36.	b	The least informative sign of atherogenic dyslipidemia is an increase in the blood level of: a) HDL b) LDL c) total cholesterol d) atherogenic index	GPC-5
37.	b	A biochemical marker of chronic heart failure is:	GPC-5

		a) the presence of antibodies to tissue transglutaminase b) brain natriuretic peptide c) glycated hemoglobin d) gamma-glutamyl transpeptidase e) procalcitonin	
38.	d	In which extrasystoles is a full compensatory pause observed: a) atrial b) extrasystoles from the AV node with preceding excitation of the ventricles c) group d) ventricular e) blocked	GPC-5
39.	d	Which of the following drugs is a proton pump inhibitor: a) ranitidine b) sucralfate c) misoprostol d) omeprazole e) almagel	GPC-5
40.	a	Signs of obstructive jaundice include all of the following, except: a) normal level of alkaline phosphatase b) moderate increase in aminotransferase levels c) clay-colored stool d) skin itching e) increase in predominantly conjugated bilirubin	GPC-5
41.	a	In irritable bowel syndrome: a) discharge of mucus from the anus is possible b) bloody mucous diarrhea is characteristic c) treatment includes the prescription of 5-aminosalicylic acid preparations d) symptoms are not associated with stress factors e) the primary treatment is a gluten-free diet	GPC-6
42.	d	Routes of infection in chronic pyelonephritis: a) lymphogenous b) hematogenous c) urogenic d) all of the above e) sexual	GPC-6
43.	e	Rheumatoid arthritis is an autoimmune disease characterized by: a) inflammation and hyperplasia of the synovial membrane b) production of autoantibodies c) destruction of cartilage and bone tissue d) systemic manifestations, including those of the cardiovascular and respiratory systems, mental and skeletal disorders e) all of the above signs	GPC-6
44.	a	The glucose tolerance test is not performed if:	GPC-6

		a) the patient has fasting glycemia of 6.4 mmol/L; b) the patient has an elevated bilirubin level; c) relatives have been diagnosed with type 1 diabetes mellitus; d) the patient has fasting glycemia of 5.9 mmol/L; e) relatives have been diagnosed with type 2 diabetes mellitus.	
45.	a, b, c.	Regarding type I diabetes mellitus, the following is true: a) diabetes requires constant insulin therapy; b) diabetes more often occurs at a young age; c) the course of diabetes is accompanied by a tendency to ketoacidosis; d) diabetes usually occurs against the background of obesity; e) diabetes often accompanies pancreatic cancer.	GPC-6
46.	b	Which autoantibodies are detected in elevated titers in autoimmune thyroiditis: a) antibodies to the TSH receptor; b) antibodies to thyroid peroxidase (TPO); c) thyroid-blocking antibodies; d) thyroid-stimulating antibodies.	GPC-6
47.	b	Expected serum parameters in iron deficiency anemia – all except: a) decreased serum iron level; b) decreased iron-binding capacity of serum; c) decreased hemoglobin concentration in erythrocytes; d) decreased serum ferritin level.	GPC-6
48.	bronchial asthma	A heterogeneous disease characterized by chronic inflammation of the airways, the presence of respiratory symptoms such as wheezing, shortness of breath, chest tightness and cough, which vary over time and intensity, and manifest together with variable airway obstruction is:	GPC-6
49.	pneumonia	An acute, predominantly infectious disease in which damage to the alveoli and lung tissue of varying severity occurs is:	GPC-6
50.	congenital anomalies (defects) of the heart, blood vessels and lungs; congestive heart failure, when reduced myocardial contractility	Name the causes of pulmonary hypertension	GPC-6

	does not allow pumping the required amount of blood; narrowing of the opening between the left atrium and ventricle (mitral stenosis).		
51.	Primary prevention includes a rational regimen of work and rest, increased physical activity, restriction of table salt, avoidance of alcohol and smoking, reduction of caloric intake and body weight. Secondary prevention involves measures carried out under the supervision of physicians. Diseases and predisease conditions are timely identified, the patient is examined and adequate treatment is prescribed. The therapeutic goal is to reduce the risk of progression of the existing pathology and	Name the principles of primary and secondary prevention of cardiovascular diseases:	GPC-8

	the development of complications, and to improve the quality of life. Prevention of cardiovascular diseases is carried out in people who are at risk. Possible measures: Reduce excess weight, if present. Monitor blood pressure. Reduce salt intake. Monitor glycemia. Follow a hypocholesterolemia diet.		
52.	beta-blockers, calcium antagonists, organic nitrates	List the main groups of drugs used in the treatment of chronic forms of coronary artery disease:	GPC-8
53	pressing pain behind the sternum; edema of the hands, feet, face, neck and upper parts of the chest; shortness of breath; nocturnal attacks of suffocation; ascites – accumulation of fluid in the abdominal cavity; hepatomegaly (enlarged liver); tachycardia;	List the symptoms of right ventricular failure:	GPC-8

	cyanosis (bluish discoloration) in the area of the nasolabial triangle; pallor of the skin.		
54.	bleeding, perforation, penetration, pyloric stenosis, and malignization	Types of complications of gastric and duodenal ulcers:	GPC-8
55.	nephrotic — pathological changes in urine predominate; hypertensive — manifested by increased blood pressure; mixed — a combination of the two above-mentioned forms; hematuric — blood in the urine is observed, other symptoms are mild or completely absent;	Classification of chronic glomerulonephritis	GPC-8
56.	weakness, apathy, fatigue; constant daytime sleepiness and nighttime insomnia; unexplained weight gain; dryness and laxity of the skin, hair loss; frequent constipation; loss of appetite; menstrual cycle disorders; in both men and	The main clinical manifestations of hypothyroidism	GPC-8

	women, a decrease in sexual desire occurs;		
57.	Nephropathy, accompanied by the development of chronic renal failure Retinopathy — damage to the vessels of the eyes, leading not only to decreased vision but also to blindness Diabetic foot Angina pectoris and myocardial infarction in case of damage to the heart vessels Polyneuropathy	List the possible complications of diabetes mellitus	GPC-8
58.	low dietary calcium intake; vitamin D deficiency; excessive salt intake; low physical activity.	Specify the risk factors for the development of osteoporosis	GPC-8
59.	an autoimmune disease of unclear nature, in which symmetrical small joints of the fingers and toes are initially affected, systemic (throughout the body) inflammation develops, and then large joints and other internal organs are affected.	Define the concept of "rheumatoid arthritis"	GPC-8

60.	b	The least informative sign of atherogenic dyslipidemia is an increase in the blood level of: a) HDL b) LDL c) total cholesterol d) atherogenic index	GPC-8
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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.

