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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

Hospital surgery, pediatric surgery

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 9-11

Introduction

1. Intended for carrying out current control of academic performance progress and intermediate attestation in the discipline of «Hospital surgery, pediatric surgery» 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) «Hospital surgery, pediatric surgery»

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

4. Expert examination of the ATF has been completed.

Expert group:

Chairperson Ivchenko G.S., Acting Head of the Department of Internal Medicine Propaedeutics (Full Name, Position)

Committee members: T.I. Dzhandarova, Head of the Department of Anatomy and Physiology (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
PC-1 Ready to participate in providing emergency medical care for conditions that require urgent medical intervention				
Learning outcomes by discipline: Ready to participate in rendering emergency medical aid in conditions, requiring urgent medical intervention Indicator: ID-1 PC-1 Is able to conduct therapeutic measures in rendering emergency medical aid in conditions, requiring urgent medical intervention	Unable to perform medical procedures during emergency medical care	Capable of partially performing medical procedures during emergency medical care	Capable of carrying out medical procedures in the provision of emergency medical care	Capable of carrying out medical procedures in the provision of emergency medical care for conditions that require urgent medical intervention
Learning outcomes by discipline (module): Ready to participate in rendering emergency medical aid in conditions requiring urgent medical intervention Indicator: ID-2 PC-1 Is able to identify conditions requiring medical aid in an emergency form, including clinical signs of sudden cessation of	He is unable to identify conditions that require emergency medical care	Partially able to identify conditions that require emergency medical care	He is able to identify conditions that require emergency medical care.	Able to identify conditions requiring medical care in emergency form, including clinical signs sudden stoppage of circulation and breathing

circulation and breathing				
Learning outcomes by discipline: Readiness to act in non-standard situations, choose methods of protection in emergency situations. Acquisition of special medical skills and their application in practical healthcare Indicator: ID-3 PC-1 Has the skills of assessing the condition of a patient who requires medical care in an emergency, the skills of recognizing conditions that threaten the life of a patient, including conditions of clinical death (stoppage of vital functions of the human body (circulation and/or breathing), which require medical care in an emergency	Does not have the skills to assess the condition of a patient who requires medical care	Has the skills to assess the condition of a patient who requires medical care	He has skills in assessing the patient's condition requiring emergency medical care, skills in recognizing conditions that pose a threat to the patient's life, including states of clinical death (stopping vital functions of the human body (blood circulation and/or respiration) that require emergency medical care	Possesses the skills of assessing the condition of a patient requiring medical care in an emergency form, the skills of recognizing conditions that pose a threat to the patient's life, including conditions of clinical death (stoppage of vital functions of the human body (circulation and/or breathing), requiring medical care in an emergency form
PC-3 is 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				
Results of training in the discipline: Formation of clinical thinking Acquisition of special medical skills and application of them in practical healthcare and Indicator: ID- 1	It is not possible to build an algorithm for various profiles of the main pathological conditions, syndromes, and diseases.	Able to build an algorithm of various profiles of main pathological conditions, syndromes, diseases	He is able to create an algorithm and select criteria for determining the main pathological conditions, syndromes, and diseases in patients with various profiles	Able to build algorithm and choose criteria determination in patients various profile main pathological conditions, syndromes, diseases in accordance with

PC-3 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)				the International Statistical Classification of Diseases and Health-Related Problems, X revision(ICD-X) Results of training in the discipline: Formation of clinical thinking Acquisition of special medical skills and application of them in Unable to identify pathological symptoms and syndromes Identifies some pathological symptoms and syndromes Identifies the main
Results of training in discipline: Formation clinical thinking Acquisition special medical skills and application of them in practical healthcare and Indicator: ID- 2 PC-3 Allocates main pathological symptoms and syndromes, formulates clinical diagnosis in accordance with ICD-X	Unable to identify pathological symptoms and syndromes	It identifies some pathological symptoms and syndromes	It identifies the main pathological symptoms and syndromes	Identifies the main pathological symptoms and syndromes, and formulates a clinical diagnosis in accordance with ICD-10

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 9-11			
1.	a	Complete the sentence: Choledocholithiasis is...: a. a stone in the common bile duct b. a stone in the gallbladder c. a stone in the bile duct of the gallbladder d. a stone in the bladder e. a stone in the kidneys	PC-1
2.	b	What do you understand by the term portal hypertension: a. high pressure in the inferior vena cava. b. high pressure in the portal vein system c. high pressure in the superior vena cava. d. high pressure in the splenic artery e. high pressure in the arterial system	PC-1
3.	a	Currently, the optimal method of treating acute appendicitis in children is appendectomy a. laparoscopic b. using the Da Vinci device c. invagination d. intraluminal endoscopic	PC-1
4.	e	What conditions are necessary for the development of a lung abscess: a. impaired bronchial drainage function b. impaired local blood circulation c. atelectasis of the lung d. infection in the lung tissue e. all answers are correct	PC-1
5.	c	The decisive method of diagnosis in pleural empyema is: a. chest X-ray b. percussion c. puncture of the pleural cavity d. auscultation e. chest X-ray	PC-1
6.	a	The esophagus is located in the chest in: a. the posterior mediastinum b. the anterior mediastinum c. the left pleural cavity d. the middle mediastinum e. behind the sternum	PC-1
7.	b	Indications for surgical treatment most often occur in _____ fractures a. diaphyseal b. intra-articular c. metadiaphyseal d. metaphyseal	PC-1
8.	c	Pulsation on the radial artery in case of aortic coarctation: a. not determined b. weakened c. tense d. not changed	PC-1

		e. absent	
9.	b, d	The most common complications of bronchopulmonary malformations are a. pneumosclerosis b. bleeding c. atelectasis d. suppuration e. dislocation	PC-1
10.	b, c, d	What disorders of water and electrolyte balance can be expected in a patient with diffuse peritonitis? a. hyperhydration b. hypokalemia c. hyponatremia d. dehydration	PC-1
11.	a, b, c	To prevent deep vein thrombosis in the postoperative period, it is necessary to: a. prescribe low-molecular-weight heparins b. use elastic compression of the extremities c. activate the patient early	PC-1
12.	c, d	Treatment of osteoarthritis should be started with: a. joint endoprosthetics b. intra-articular administration of corticosteroid hormones c. use of non-steroidal anti-inflammatory drugs d. administration of chondroprotectors e. autologous cartilage transplantation	PC-1
13.	-foot deformity, in which it deviates inward from the longitudinal axis of the tibia. It can be congenital and acquired en. Congenital clubfoot is most often found in newborns, however, deformation can develop and persist until adulthood. Acquired clubfoot can occur after injuries with fractures of large bones, hormonal changes, lesions of the nervous system, burns.	Clubfoot	PC-3
14.	Some surgical methods of treating varicose veins of the lower extremities: Combined phlebectomy. The operation includes several stages: Crossectomy. Stripping. Minivlebectomy. Endovasal thermal obliteration (ablation). Sclerotherapy.	Surgical methods of treating varicose veins of the lower extremities	PC-3

15.	Perforation of the intestinal wall. Hematogenous or lymphogenous infection. Appendicitis. Gastrointestinal diseases	Etiology of peritonitis in children	PC-3
16.	The etiology of urolithiasis in children includes a number of factors that contribute to the crystallization of salts: Infectious and inflammatory pathologies of the urinary system. Anatomical abnormalities of the urinary organs. Endocrine disorders. Genetic predisposition. Deficiency of inhibitors, which are special substances that prevent the formation of salts	Urolithiasis in children. Etiology.	PC-3
17.	The pathological process in acute pancreatitis is characterized by inflammation, tissue edema, and damage to the vessels of the glandular parenchyma. The pathological process can spread to nearby tissues, including the retroperitoneal tissue, the omental sac, the peritoneum, the omentum, the mesentery, and the liver ligaments. The pathological process in chronic pancreatitis is characterized by a sequential development, initially with diffuse or focal changes of an inflammatory and fibrotic nature of varying severity.	Characteristics of the pathological process in acute and chronic pancreatitis	PC-3
18.	a	Complete the sentence: Choledocholithiasis is...: a. a stone in the common bile duct b. a stone in the gallbladder c. a stone in the bile duct of the gallbladder d. a stone in the bladder e. a stone in the kidneys	PC-1

19.	b	What do you understand by the term portal hypertension: a. high pressure in the inferior vena cava. b. high pressure in the portal vein system c. high pressure in the superior vena cava. d. high pressure in the splenic artery e. high pressure in the arterial system	PC-1
20.	a	Currently, the optimal method of treating acute appendicitis in children is appendectomy a. laparoscopic b. using the Da Vinci device c. invagination d. intraluminal endoscopic	PC-1
21.	e	What conditions are necessary for the development of a lung abscess: a. impaired bronchial drainage function b. impaired local blood circulation c. atelectasis of the lung d. infection in the lung tissue e. all answers are correct	PC-1
22.	c	The decisive method of diagnosis in pleural empyema is: a. chest X-ray b. percussion c. puncture of the pleural cavity d. auscultation e. chest X-ray	PC-1
23.	a	The esophagus is located in the chest in: a. the posterior mediastinum b. the anterior mediastinum c. the left pleural cavity d. the middle mediastinum e. behind the sternum	PC-1
24.	b	Indications for surgical treatment most often occur in _____ fractures a. diaphyseal b. intra-articular c. metadiaphyseal d. metaphyseal	PC-1
25.	c	Pulsation on the radial artery in case of aortic coarctation: a. not determined b. weakened c. tense d. not changed e. absent	PC-1
26.	b, d	The most common complications of bronchopulmonary malformations are a. pneumosclerosis b. bleeding c. atelectasis d. suppuration e. dislocation	PC-1
27.	b, c, d	What disorders of water and electrolyte balance can be expected in a patient with diffuse peritonitis?	PC-1

		a. hyperhydration b. hypokalemia c. hyponatremia d. dehydration	
28.	a, b, c	To prevent deep vein thrombosis in the postoperative period, it is necessary to: a. prescribe low-molecular-weight heparins b. use elastic compression of the extremities c. activate the patient early	PC-1
29.	c, d	Treatment of osteoarthritis should be started with: a. joint endoprosthetics b. intra-articular administration of corticosteroid hormones c. use of non-steroidal anti-inflammatory drugs d. administration of chondroprotectors e. autologous cartilage transplantation	PC-1
30.	b, d	The most common complications of bronchopulmonary malformations are a. pneumosclerosis b. bleeding c. atelectasis d. suppuration e. dislocation	PC-1

31. 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.

32. 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.