MINISTRY OF EDUCATION AND SCIENCE OF UKRAINE

Petro Mohyla Black Sea National University Medical Institute Department of Therapeutic and Surgical Disciplines

"APPROVE"
The first vice-rector
Ishchenko NM
2021

COURSE DISCRIPTION

"Pediatrics"

Specialty 222 "Medicine"

Developer

Head of the Department of Developer Guarantor of the educational program Director of the institute Head of NMV Iakovenko N.O.

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1. Description of the discipline

Characteristic	Characteristics of the discipline				
Name of discipline	Pediatrics				
Branch of knowledge	22 "Health care"				
Specialty	222 "Medicine"				
Specialization (if any)					
Educational program	Medicine				
Level of higher education	Master				
Discipline status	Normative				
Curriculum	4,5,6 years				
Academic year	2021 - 2022				
Semester numbers:	Full-time	Correspondence form			
	4 y-7 th - 8 – th 5 y- 9th- 10-th 6 y- 11 th -12th	-			
Total number of ECTS credits / hours	4 y-3,5 credits (2/1,5)/105 hours 5y-3,5 credits (1.5/2)/105 hours 6y-7,5 credits (3/4,5)/225 hours				
Course structure:	Full-time	Correspondence form			
- lectures	4 y- 8 (8 / 0) 5y- 8 (6/2) 6y -0	-			
- practical classes	4y-50 (30/20) 5y-54 (24/30) 6y-132 (56/76)				
- hours of independent work of students	4 y-47 (22 / 25) 5y- 43 (1 5/28) 6y- 93 (34 / 59)				
Percentage of classroom work	58%				
Language of instruction	English				
Form of intermediate control (if any)	Attestation-9th semes	ter, 11th semester			
Form of final control	Exam - 8th semester				
	Exam - 10th semester				
	Credit - 12th semester	r			

1. Purpose, tasks and planned learning outcomes

The purpose of teaching the discipline "Pediatrics" in the 5th year of study is for students to acquire knowledge and professional skills in neonatology, pediatric endocrinology, pediatric hematology and pediatric infectious diseases based on knowledge of age anatomical and physiological features of the child's body, medical biology, normal anatomy, normal physiology, histology and embryology, biochemistry, microbiology and virology, pathomorphology, pathophysiology, pharmacology and skills of clinical, laboratory and instrumental examination of the child in compliance with the principles of medical ethics and deontology.

The subject of study of the discipline "Pediatrics, pediatric infectious diseases" are the most common diseases of newborns, non-communicable diseases of childhood (endocrine diseases and diseases of the blood system in children) and the most common infectious diseases of children.

Interdisciplinary links: according to the curriculum, the study of the discipline "Pediatrics" is provided in VII - XII semesters. Prior to that, the student acquired relevant knowledge in the main basic disciplines: medical biology, normal anatomy, normal physiology, histology and embryology, bioorganic and biological chemistry, microbiology and virology and immun ology, pathomorphology, pathophysiology, pharmacology, and clinical disciplines: propaetripedic, pediatric therapy, surgery, obstetrics with which the program of the discipline "Pediatrics" is integrated. In turn, the discipline "Pediatrics" forms the foundations for further study student discipline "General practice (family medicine)", "infectious disease", which involves the integration of these disciplines "for vertical" and formation of skills for further learning and use in professional activities.

Expected learning outcomes. As a result of studying the discipline, students have:

1.To determine the etiological and pathogenetic factors of the most common somatic diseases of childhood.

2. Classify and analyze the typical clinical picture of the most common somatic diseases of childhood.

3.Make a plan of examination and analyze the data of laboratory and instrumental examinations in the typical course of the most common to demonstrate mastery of the principles of treatment, rehabilitation and prevention of the most common somatic diseases of childhood.

4.Put the diagnosis and provide emergency assistance in the most common somatic diseases of childhood.

5. Assess the prognosis of the most common somatic diseases of childhood.

6.Demonstrate mastery of moral and deontological principles of a medical specialist and the principles of professional subordination in pediatrics.

According to the method of organization, practical classes are clinical, aimed at controlling the assimilation of theoretical material and the formation of practical skills, as well as the ability to analyze and apply the acquired knowledge to solve practical problems; they provide:

- collecting history;
- examination of a sick child;
- planning the examination of a sick child;
- interpretation of laboratory and instrumental research data;
- of the differential diagnosis of the most common

diseases of children aged under typical of course;

- determination of the preliminary clinical diagnosis;
- definition of therapeutic tactics;
- appointment of medical nutrition;
- providing emergency medical care;
- situational solutions
- on models and near the bed of a sick child;
- keeping medical records.

According to the requirements of the educational-professional program, students must *know:*

- definition, prevalence, classification, etiology and pathogenesis of the most common diseases of children period of newborn children with endocrine, hematologic diseases and childhood infectious diseases:
- Clinical manifestations of uncomplicated and complicated course the most common diseases of children period of newborn children with endocrine, hematologic diseases and pediatric infectious diseases;
- criteria for establishing a preliminary clinical diagnosis in the most common diseases of infants, children with endocrine, hematological diseases and childhood infectious diseases:
- a plan of laboratory and instrumental examination of children with the most common diseases of children period of newborn children with endocrine, hematologic diseases and childhood infectious diseas es:
- the differential diagnosis of the most common diseases of children period of newborn children with endocrine, hematologic diseases and childhood infectious diseases;
- criteria for establishing the final clinical diagnosis in the most common diseases of infants, children with endocrine, hematological diseases and childhood infectious diseases:
- the treatment of the most common diseases of children period of newborn children with endocrine, hematologic diseases and childhood infectious diseases:
- protocol of first aid for the most common diseases of children of the newborn period, children with endocrine, hematological diseases and children's infectious diseases;
- prevention of the most common diseases of infants, children with endocrine, hematological diseases and childhood infectious diseases. Organization of anti-epidemic measures in the center of the most common infectious diseases in children. Calendar of preventive vaccinations;
- prognosis for the most common diseases of infants, children with endocrine, hematological diseases and childhood infectious diseases;
- the basic principles of medical ethics and deontology with professional dealing with a sick child and persons exercising care for the child.

be able:

- to determine the etiology and pathogenetic factors of neonatal diseases and the most common childhood non-communicable diseases;
- identify features of diseases of newborn children and put preliminary clinical diagnosis;

- to identify various clinical variants and complications of the most common diseases of childhood;
 - to determine the tactics of the patient with the most common diseases children's age;
- demonstrate mastery of the principles of treatment, rehabilitation and prevention of diseases of newborns and the most common childhood non-communicable diseases;
 - demonstrate the ability to conduct medical records in hospital children's diseases;
- plan examinations and interpret laboratory data in the typical course of diseases of newborns and the most common childhood non-communicable diseases;
- to demonstrate mastery of moral and deontological principles of a medical specialist and the principles of professional subordination in a pediatric clinic;
- to carry out differential diagnosis and to make the preliminary diagnosis of diseases of newborns and the most widespread children's non-communicable diseases ;
- put the diagnosis and to provide emergency assistance during major emergency conditions in infants and in children with the most common non-communicable diseases;
 - to make a life forecast for the most common somatic diseases of childhood;
- to determine the etiological and pathogenetic factors of the most common infectious diseases of children;
- to distinguish the features of the clinical course of the most common infectious diseases of children;
 - put the preliminary diagnosis of the most common infectious diseases of children;
- identify the tactics of keeping a child patient in the most common infectious disease;
- to determine the main directions of treatment of the most common infectious diseases in children;
- to determine preventive and anti-epidemic measures for the most common infectious diseases of children.

The developed program corresponds to the *educational-professional program (EPP)* and is focused on the formation of *competencies: general (GC) - GC 1- GC 3 EPP:*

- *GC* 1. Ability to abstract thinking, analysis and synthesis, the ability to learn and master modern knowledge.
- GC 2. Ability to apply knowledge in practical situations.
- *GC* 3. Knowledge and understanding of the subject area and understanding of professional activity.

professional (PC) - PC 1- PC 9, PC 11, PC 16, PC 18 EPP:

- -Patient interviewing skills.
- -Ability to determine the required list of laboratory and instrumental studies and evaluate their results.
 - -Ability to establish a preliminary and clinical diagnosis of the disease.
- -Ability to determine the required mode of work and rest in the treatment of diseases.
 - -Ability to determine the nature of nutrition in the treatment of diseases.
 - -Ability to determine the principles and nature of disease treatment.
 - -Ability to diagnose emergencies.
 - -Ability to determine the tactics of emergency medical care.

- -Skills provision of emergency medical care.
- -Skills to perform medical manipulations.
- -The ability to determine the tactics of keeping persons that are subject to clinical supervision.
 - -Ability to keep medical records.

According to the educational-professional program, the expected *program learning outcomes* (*PLO*) include the skills of *PLO 11*, *PLO 13-18*, *PLO 22*, *PLO 25*, *PLO 28*, *PLO 30*, *PLO 32*, *PLO 33*, *PLO 35*, *PLO 41 EPP*:

- Collect data on patient complaints, medical history, life history (including professional history), in a health care facility, its unit or at the patient's home, using the results of the interview with the patient, according to the standard scheme of the patient. Under any circumstances (in a health care facility, its unit, at the patient's home, etc.), using knowledge about the person, his organs and systems, according to certain algorithms:
- gather information on the overall condition of the patient (consciousness constitution) and the external appearance (examination of the skin, subcutaneous fat layer, palpation of lymph nodes, thyroid and mammary glands);

assess the psychomotor and physical development of the child;

- examine the condition of the cardiovascular system (examination and palpation of the heart and superficial vessels, determination of percussion boundaries of the heart and blood vessels, auscultation of the heart and blood vessels);
- examine the condition of the respiratory organs (examination of the chest and upper respiratory tract, palpation of the chest , percussion and auscultation of the lungs);
- examine the condition of the abdominal cavity (examination of the abdomen, palpation and percussion intestines, stomach, liver, spleen, palpation of the pancreatic gland, kidneys, organs of small pelvis, finger study of the rectum);
 - examine the condition of the musculoskeletal system (examination and palpation); examine the state of the nervous system;
 - examine the condition of the genitourinary system;
- assess the state of fetal development according to the calculation of fetal weight and auscultation of its heartbeat.
 - In the conditions of the health care institution, its subdivision and among the attached population:
- Be able to identify and record the leading clinical symptom or syndrome (according to list 1) by making an informed decision, using previous patient history, physical examination data, knowledge of the person, his organs and systems, adhering to relevant ethical and legal norms.
- Be able to establish the most probable or syndromic diagnosis of the disease (according to list 2) by making an informed decision, by comparing with standards, using previous patient history and examination of the patient, based on the leading clinical symptom or syndrome, using knowledge about the person, his organs and systems, adhering to the relevant ethical and legal norms.

In the conditions of a health care institution, its subdivision:

• Assign a laboratory and / or instrumental examination of the patient (according to list 4) by making an informed decision, based on the most probable or syndromic diagnosis, according to standard schemes, using knowledge about the person, his organs and systems, adhering to relevant ethical and legal norms.

- Carry out differential diagnosis of diseases (according to list 2) by making an informed decision, according to a certain algorithm, using the most probable or syndromic diagnosis, laboratory and instrumental examination of the patient, knowledge of the person, his organs and systems, adhering to ethical and legal norms.
- Establish a preliminary clinical diagnosis (according to list 2) by making an informed decision and logical analysis, using the most probable or syndromic diagnosis, data from laboratory and instrumental examination of the patient,

conclusions of differential diagnosis, knowledge about a person, his organs and systems, adhering to the relevant ethical and legal norms.

- Determine the desired mode of work and rest in the treatment of disease (for list 2) in terms of health institution, at home and in the patient during medical evacuation in t. H. In field conditions, based on previous clinical diagnosis using knowledge about a person, his organs and systems, adhering to the relevant ethical and legal norms, by making an informed decision according to existing algorithms and standard schemes.
- Identify the necessary therapeutic nutrition in the treatment of disease (in list 2), in terms of health care facility, home of the patient and on the stages of medical evacuation in t. H. In field conditions on the basis of previous clinical diagnosis using knowledge of the man its bodies and systems, adhering to the relevant ethical and legal norms, by making an informed decision according to existing algorithms and standard schemes.
- Identify the nature of treatment (conservative, surgical) disease (for list 2), in terms health care facility. home of the patient and on the stages of medical evacuation in t. H. In field conditions on the basis of clinical previous diagnosis using knowledge man. his organs and systems, adhering the relevant ethical and legal norms, by making an informed decision according to existing algorithms and standard schemes.
- Determine the principles of treatment of the disease (according to list 2), in a health care facility, at the patient's home and at the stages of medical evacuation, including field conditions, based on a preliminary clinical diagnosis, using knowledge about the person, his organs and systems, adhering to the relevant ethical and legal norms, by making an informed decision according to existing algorithms and standard schemes.
- Establish a diagnosis (according to list 3) by making an informed decision and assessing the condition of the person, under any circumstances (at home, on the street, health care facility, its units), including in emergencies, in the field conditions, in conditions of lack of information and limited time, using standard methods of physical examination and possible anamnesis, knowledge about the person, his organs and systems, adhering to the relevant ethical and legal norms.
- Perform medical manipulations (according to list 5) in a medical institution, at home or at work on the basis of previous clinical diagnosis and / or indicators of the patient's condition , using knowledge about the person, his organs and systems, adhering to relevant ethical and legal norms, by adopting reasonable solutions and using standard techniques.
- To form, in the conditions of a health care institution, its division on production, using the generalized procedure of an assessment of a state of human health, knowledge of the person, its bodies and systems, adhering to the corresponding ethical and legal norms, by acceptance of the reasonable contingent, among the fixed contingent population: dispensary groups of patients; a group of healthy people, who are subject to dispensary supervision (infants, children, adolescents, pregnant women, representatives of the professions that have to undergo mandatory clinical examination).

- Organize holding of fixed contingent of population measures of secondary and tertiary prevention, using a generic procedure assess the state of health of humans (screening, preventive medical examination, request for medical help), knowle dge of a person of organs and systems, adhering to appropriate ethical and legal norms, by making an informed decision, in the conditions of the health care institution, in particular: to form groups of dispensary supervision; to organize medical and health-improving measures differentiated from the group of medical examination.

Carry out in the conditions of a health care institution, its subdivision:

- detection and early diagnosis of infectious diseases (according to list2);
- primary anti-epidemic measures in the center of an infectious disease.

In the health care facility, or at the patient's home on the basis of the obtained data on the patient's health, using standard schemes, using knowledge about the person, his organs and systems, adhering to relevant ethical and legal norms, by making an informed decision:

- identify the tactics of inspection and secondary prevention patients, which are subject to clinical supervision;
- identify the tactics of inspection and primary prevention of healthy individuals who are subject to clinical supervision;
- calculate and assign the necessary products catering to children of the first year of life.
- To determine the presence and degree of limitations of life, type, degree and duration of disability with the issuance of relevant documents in a health care institution on the basis of data on the disease and its course, features of professional activity .

On the territory of service according to standard methods of descriptive, analytical epidemiological and medical-statistical researches:

- conduct screening to identify major non-communicable diseases;
- evaluate the dynamics and in comparison with the average static data of morbidity, including ronic non-communicable diseases, disability, mortality, integrated health indicators;
 - identify risk factors for the occurrence and course of diseases;
 - to form risk groups of the population.

In the conditions of the health care institution, its subdivision and among the attached population:

- Be able to identify and record the leading clinical symptom or syndrome (according to list 1) by making an informed decision, using previous patient history, physical examination data, knowledge of the person, his organs and systems, adhering to relevant ethical and legal norms.
- To be able to establish the most probable or syndromic diagnosis of disease (for list 2) by adopting a reasoned decision by means of comparison with standards, using preliminary data patient history and data given patient, based on the leading clinical symptom or syndrome, using the knowledge of a person of bodies and systems, adhering to the relevant ethical and legal norms.

In the conditions of a health care institution, its subdivision:

- Assign a laboratory and / or instrumental examination of the patient (according to list 4) by making an informed decision, based on the most probable or syndromic diagnosis, according to standard schemes, using knowledge about the person, his organs and systems, adhering to relevant ethical and legal norms.
- Carry out differential diagnosis of diseases (according to list 2) by making an informed decision, according to a certain algorithm, using the most probable or syndromic diagnosis, laboratory and instrumental examination of the patient, knowledge of the person, his organs and systems, adhering to ethical and legal norms.

• Establish a preliminary clinical diagnosis (according to list 2) by making an informed decision and agile analysis, using the most probable or syndromic diagnosis, laboratory and instrumental examination data, conclusions of differential diagnosis, knowledge of the person, his organs and systems, adhering to relevant ethical and legal norms.

Determine the required mode of work and rest in the treatment of disease (the list 2), in terms of establishment health care, home of the patient and on the stages of medical evacuation in t. H. In field conditions, based on previous clinical diagnosis using knowledge of man, his organs and systems, adhering to the relevant ethical and legal norms, by making an informed decision according to existing algorithms and standard schemes.

To determine the necessary therapeutic food in the treatment of disease (in list 2), in terms of healthcare institution, the patient at home and during medical evacuation in t. H. In field conditions on the basis of previous clinical diagnosis using knowledge of the man, his bodies and systems, adhering to the relevant ethical and legal norms, by making an informed decision according to existing algorithms and standard schemes.

To determine the nature of the treatment (conservative, surgical) disease (for list 2), in terms of health care facility, home of the patient and on the stages of medical evacuation in t. H. In the field based on previous clinical diagnosis using knowledge of the man , its bodies and systems, adhering to the relevant ethical and legal norms, by making an informed decision according to existing algorithms and standard schemes.

To determine the principles of treatment of disease (in list 2), in terms of establishment of health, home and the patient during medical evacuation in t. H. The field, on the basis of previous clinical diagnosis using knowledge of a person of organs and systems , adhering to the relevant ethical and legal norms, by making an informed decision according to existing algorithms and standard schemes.

Establish a diagnosis (according to list 3) by making an informed decision and assessing the human condition, under any circumstances (at home, on the street, health care facility, its units), including in an emergency, in the field, in conditions of lack of information and limited time, using standard methods of physical examination and possible anamnesis, knowledge about the person, his organs and systems, adhering to the relevant ethical and legal norms.

- In the conditions of a health care institution or its subdivision according to standard methods:
- to carry out the selection and use of standardized clinical protocols for providing medical care, which developed on the basis of evidence-based medicine;
 - participate in the development of local protocols for medical care;
- to carry out quality control of medical care on the basis of statistical data, expert evaluation and data of sociological studies of the use of indicators of structure, process and results of activities;
- identify factors that hinder the improvement of the quality and safety of medical care.

2. The program of the discipline

The educational process is organized according to the European Credit Transfer and Accumulation System (ECTS).

The program of the discipline for the students of 4-th year BLOCK 1. THE MOST COMMON SOMATIC DISEASES IN EARLY CHILDREN, RESPIRATORY DISEASES AND ALLERGIC DISEASES IN CHILDREN

SECTION 1. DISEASES OF EARLY CHILDREN

Specific goals:

- 1. To determine the etiological and pathogenetic factors of the most common functional gastrointestinal disorders of young children (cyclic vomiting syndrome, colic, functional diarrhea, functional constipation); rickets, hypervitaminosis D and protein-energy deficiency.
- 2. Classify and analyze the typical clinical picture of the most common functional disorders of the digestive tract in young children (cyclic vomiting syndrome, colic, functional diarrhea, functional constipation); rickets, hypervitaminosis D and protein-energy deficiency.
- 3. Make a survey plan and analyze the data of laboratory and instrumental examinations in the typical course of the most common functional gastrointestinal disorders, rickets and hypervitaminosis D in young children.
 - 4. Demonstrate mastery of the principles of treatment, rehabilitation and prevention of rickets, hypervitaminosis D, protein-energy deficiency and functional gastrointestinal disorders (cyclic vomiting syndrome, colic, functional diarrhea and functional constipation) in young children.
- 5. Make a preliminary diagnosis of cyclic vomiting, functional diarrhea, colic and functional constipation; rickets and protein-energy deficiency in children.
 - 6. Provide a life expectancy for rickets, hypervitaminosis D, protein-energy deficiency, functional gastrointestinal disorders (cyclic vomiting syndrome, colic, functional diarrhea and functional constipation) in young children.
 - 7. Demonstrate mastery of moral and deontological principles of a medical specialist and the principles of professional subordination in pediatrics.

Topic 1. Rickets. Hypervitaminosis D. Protein-energy deficiency.

Definition, classification, etiology, pathogenesis, clinic, diagnosis, treatment of rickets. Prevention of rickets. Etiology, pathogenesis, clinic, diagnosis, prevention of hypervitaminosis D, emergency care and prognosis. Definition, classification, clinic, treatment and prevention of protein-energy deficiency in children.

Topic 2. Functional gastrointestinal disorders in young children

Definition, classification (according to Roman criteria III), etiology, pathogenesis, clinic and diagnosis of cyclic vomiting syndrome. Etiology, pathogenesis, classification, clinic and diagnosis of functional dyspepsia in young children. Etiology, pathogenesis, clinic, diagnosis of colic and functional constipation in young children. Treatment and prevention of functional gastrointestinal disorders. Forecast.

SECTION 2. DISEASES OF THE RESPIRATORY ORGANS IN CHILDREN

Specific goals:

- 1. To determine the etiological and pathogenetic factors of acute respiratory diseases of the upper respiratory tract (acute nasopharyngitis, acute pharyngitis, acute obstructive laryngitis, acute laryngopharyngitis, acute tracheitis, bronchitis, acute obstructive bronchitis, acute obstructive bronchitis, acute obstructive bronchitis). systems in children.
- 2. Classify acute respiratory diseases of the upper respiratory tract, acute bronchitis and pneumonia, respiratory failure, fever, convulsions, birth defects and chronic diseases of the bronchopulmonary system; to analyze the typical clinical picture of acute nasopharyngitis, acute pharyngitis, acute obstructive laryngitis (croup), acute laryngopharyngitis, acute tracheitis, acute bronchitis, acute obstructive bronchitis, acute bronchiolitis, recurrent varicella hyperthyroidism, recurrent and bronchitis and chronic diseases of the bronchopulmonary system in children.
- 3. Make a plan of examination and analyze the data of laboratory and instrumental examinations in the typical course of acute nasopharyngitis, acute pharyngitis, acute obstructive laryngitis (croup), acute laryngopharyngitis, acute tracheitis, acute bronchitis, acute obstructive bronchitis, acute obstructive bronchitis chronic diseases of the bronchopulmonary system in children.

- 4. Demonstrate mastery of the principles of treatment, rehabilitation and prevention of acute nasopharyngitis, acute pharyngitis, acute laryngopharyngitis, acute tracheitis, acute bronchitis, acute obstructive bronchitis, acute bronchiolitis, recurrent bronchitis and pneumonia, pneumonia and pneumonia in children.
- 5. Preliminary diagnosis of acute upper respiratory tract infections, acute bronchitis, pneumonia, congenital malformations and chronic diseases of the bronchopulmonary system in children.
- 6. Provide a prognosis of life in acute respiratory infections of the upper respiratory tract, acute bronchitis, pneumonia, birth defects and chronic diseases of the bronchopulmonary system in children .
- 7. Demonstrate mastery of moral and deontological principles of a medical specialist and the principles of professional subordination in pediatric pulmonology.

Topic 3. Acute respiratory infections of the upper respiratory tract in children

Etiology, pathogenesis, clinic, diagnosis, treatment and prevention of acute nasopharyngitis, acute pharyngitis, acute laryngopharyngitis, acute tracheitis in children. Clinic and emergency care for acute obstructive laryngitis (croup), hyperthermic syndrome and convulsions.

Topic 4. Acute bronchitis in children

Definition, etiology, pathogenesis, clinic, diagnosis, treatment and prevention of acute bronchitis, acute obstructive bronchitis, acute bronchiolitis and recurrent bronchitis in children.

Topic 5. Pneumonia in children

Definition, classification, etiology, pathogenesis, clinic, diagnosis, treatment and prevention of pneumonia in children. Forecast. Diagnosis and emergency care for respiratory failure in children.

Topic 6. Congenital malformations and chronic diseases of the bronchopulmonary system in children

Definition, classification, etiology, pathogenesis, clinic, diagnosis, treatment and prevention of congenital malformations and chronic diseases of the bronchopulmonary system in children. Forecast.

SECTION 3. ALLERGIC DISEASES IN CHILDREN

Specific goals:

- 1. To determine the etiological and pathogenetic factors of urticaria, atopic dermatitis, allergic rhinitis, bronchial asthma in children .
- 2. Classify and analyze the typical clinical picture of urticaria, atopic dermatitis, allergic rhinitis, bronchial asthma in children .
- 3. Make a survey plan and analyze the data of laboratory and instrumental examinations in the typical course of urticaria, atopic dermatitis, allergic rhinitis, bronchial asthma in children .
- 4. Demonstrate mastery of the principles of treatment, rehabilitation and prevention of urticaria, atopic dermatitis, allergic rhinitis and bronchial asthma in children .
- 5. With Tabitha previous diagnosis of urticaria, atopic dermatitis, allergic rhinitis, asthma in children .
- 6. To make a life prognosis for urticaria, atopic dermatitis, allergic rhinitis, bronchial asthma in children .
- 7. Demonstrate mastery of moral and deontological principles of a medical specialist and the principles of professional subordination in pediatric allergology.

Topic 7. Atopic dermatitis and allergic rhinitis in children. Urticaria in children

Definition, etiology, pathogenesis, clinic, diagnosis, treatment, prevention of urticaria in children. Definition, classification, etiology, pathogenesis, clinic, diagnosis, treatment and

prevention of atopic dermatitis in children, prognosis. Definition, classification, etiology, pathogenesis, clinic, diagnosis, treatment and prevention of allergic rhinitis in children, prognosis. Atopic march.

Topic 8. Bronchial asthma in children

Definition. Risk factors and pathophysiological mechanisms of bronchial asthma. Classification, clinic, diagnosis, treatment and prevention of bronchial asthma in children, prognosis. Emergency care for asthmatic status.

BLOCK 2 . Cardiorheumatology childhood digestive diseases AND C ECHOVOYI OF CHILDREN

SECTION 4. CHILDHOOD RHEUMATOLOGY OF CHILDHOOD

Specific goals:

- 1. To determine the etiological factors and hemodynamics of the most common congenital heart defects (AF) in children (ventricular septal defect (IBD), atrial septal defect (MVD), Fallot tetrad, aortic coarctation, pulmonary artery stenosis, arterial transplantation, aortic duct (VAP)); to determine the etiology and pathogenesis of carditis, infectious endocarditis, cardiomyopathies, acute rheumatic fever, dermatomyositis, scleroderma, JRA, reactive arthropathy, cardiac arrhythmias and conduction in children.
- 2. Classify and analyze the typical clinical picture of the most common airways in children, carditis, infectious endocarditis, cardiomyopathies, acute rheumatic fever, SLE, dermatomyositis, scleroderma, JRA, reactive arthropathy, cardiac arrhythmias and conduction in children.
- 3. Make a plan of examination and analyze the data of laboratory and instrumental examinations in the typical course of the most common congenital heart defects in children (IBE defect, WFP defect, Fallot's tetrad, aortic coarctation, pulmonary artery stenosis, aortic stenosis, transposition of main vessels and vascular infections). endocarditis, cardiomyopathies, acute rheumatic fever, dermatomyositis, scleroderma, SLE, JRA, reactive arthropathy, cardiac arrhythmias and conduction in children.
- 4. To demonstrate the principles of treatment, rehabilitation and prevention of the most common congenital heart defects in children (defect IBE defect MPP, Tetralogy of Fallot, coarctation of the aorta, stenosis of the pulmonary artery, aortic stenosis, transposition of great vessels and VAP), carditis, infective endocarditis, cardiomyopathy, acute rheumatic fever, dermatomyositis, scleroderma, SLE, JRA, reactive arthropathy, cardiac arrhythmias and conduction in children.
- 5. Preliminary diagnosis of the most common BBC, acute rheumatic fever, dermatomyositis, scleroderma, SLE, JRA, reactive arthropathy, carditis, cardiomyopathies, cardiac arrhythmias and conduction in children.
- 6. To make a prognosis for the most common congenital heart defects in children (IBE defect, WFP defect, Fallot's tetrad, aortic coarctation, pulmonary artery stenosis, aortic stenosis, transposition of main vessels and VAP), carditis, infectious endocardiomatitis, cardiomyditis, carcardiomatitis, cardia , scleroderma, SLE, JRA, reactive arthropathy, cardiac arrhythmias and conduction in children.
- 7. Demonstrate mastery of moral and deontological principles of a medical specialist and the principles of professional subordination in pediatric cardiorheumatology.

Topic 9. The most common congenital heart defects in children

Etiology of the most common BBC in children. Classification of heart defects, hemodynamics in the most common VVS in children (IBE defect, WFP defect, Fallot's tetrad,

aortic coarctation, pulmonary artery stenosis, aortic stenosis, transposition of arterial vessels and VAP). Diagnosis of the most common BBC in children. Physician tactics and prognosis in the most common BBC in children. Conservative treatment. Indications for cardiac surgery. Treatment of heart failure. Secondary prevention of infectious endocarditis.

Topic 10. Inflammatory and non-inflammatory heart disease in children

Carditis in children: definition, classification, etiology, pathogenesis, clinic, diagnosis, treatment, prognosis. Cardiomyopathies in children: definition, classification, etiology, pathogenesis, clinic, diagnosis, treatment, prognosis.

Topic 13. Cardiac arrhythmias and conduction in children

Cardiac arrhythmias and conduction in children: classification, causes, clinic, diagnosis, treatment, prognosis.

Topic 12. Hypertension in children

Hypertension in children: definition, classification, etiology, pathogenesis, clinic, diagnosis, treatment, prognosis.

Topic 13. Acute rheumatic fever in children

Acute rheumatic fever in children: definition, classification, etiology, pathogenesis, clinic, diagnosis, treatment, primary and secondary prevention, prognosis.

Topic 14. Systemic connective tissue diseases in children

SLE, dermatomyositis, systemic scleroderma: definition, classification, etiology, pathogenesis, clinic, diagnosis, treatment, dispensary observation, prognosis.

Topic 15. Reactive arthropathy, juvenile rheumatoid arthritis

Reactive arthropathies, JRA in children: definition, classification, etiology, pathogenesis, clinic, diagnosis, treatment, rehabilitation, prognosis.

Topic 16. Infectious endocarditis in children: definition, classification, etiology, pathogenesis, clinic, diagnosis, treatment, primary and secondary prevention, prognosis.

SECTION 5. DISEASES OF THE DIGESTIVE ORGANS IN CHILDREN

Specific goals:

- 1. To determine the etiological and pathogenetic factors of functional (functional dyspepsia, abdominal pain, irritable bowel syndrome, functional constipation) and organic diseases of the digestive tract, bile ducts and pancreas in older children.
- 2. Classify and analyze the typical clinical picture of functional (functional dyspepsia, abdominal pain, irritable bowel syndrome, functional constipation) and organic diseases of the digestive tract, bile ducts and pancreas in older children.
- 3. Make a plan of examination and analyze the data of laboratory and instrumental examinations in the typical course of functional (functional dyspepsia, abdominal pain, irritable bowel syndrome, functional constipation) and organic diseases of the digestive tract, bile ducts and pancreas in older children.
- 4. Demonstrate mastery of the principles of treatment, rehabilitation and prevention of functional and organic diseases of the digestive tract, biliary system and pancreas in older children.
- 5. Make a preliminary diagnosis of functional and organic diseases of the digestive tract, biliary system and pancreas in older children.
- 6. To predict life in functional and organic diseases of the digestive tract, bile ducts and pancreas in older children.
- 7. Demonstrate mastery of moral and deontological principles of a medical specialist and the principles of professional subordination in pediatric gastroenterology.

Topic 17. Functional and organic diseases of the esophagus and stomach in children

Definition, classification, etiology, pathogenesis, clinic, diagnosis, treatment, prevention of functional dyspepsia, abdominal pain, gastroesophageal reflux, duodenogastric reflex, organic diseases of the esophagus and stomach in older children.

Topic 18. Functional and organic diseases of the intestine and biliary system in children

Definition, etiology, pathogenesis, clinic, diagnosis, treatment of irritable bowel syndrome, functional constipation, nonspecific ulcerative colitis, Crohn's disease, prognosis. Clinic, diagnosis, treatment and prevention of gallbladder and sphincter dysfunction Oddi, organic diseases of the biliary system.

Topic 19. Diseases of the pancreas in children

Definition, etiology, pathogenesis, clinic, diagnosis, treatment of exocrine insufficiency of the pancreas. Etiology, pathogenesis, clinic, diagnosis, treatment and prevention of acute and chronic pancreatitis, prognosis.

SECTION 6. DISEASES OF THE URINARY SYSTEM IN CHILDREN

Specific goals:

- 1. Determine the etiological and pathogenetic factors of urinary tract infections (cystitis, pyelonephritis); glomerulonephritis, chronic renal failure and dysmetabolic nephropathy in children.
- 2. Classify and analyze the typical clinical picture of urinary tract infections (cystitis, pyelonephritis); glomerulonephritis, chronic renal failure and dysmetabolic nephropathy in children.
- 3. Make a plan of examination and analyze the data of laboratory and instrumental examinations for urinary tract infections (cystitis, pyelonephritis); glomerulonephritis, chronic renal failure, dysmetabolic nephropathy in children.
- 4. Demonstrate mastery of the principles of treatment, rehabilitation and prevention of urinary tract infections (cystitis, pyelonephritis); glomerulonephritis, chronic renal failure, dysmetabolic nephropathy in children.
- 5. Make a preliminary diagnosis of urinary tract infection (cystitis, pyelonephritis); glomerulonephritis, chronic renal failure and dysmetabolic nephropathy in children.
- 6. To make a life prognosis for urinary tract infections (cystitis, pyelonephritis); glomerulonephritis, chronic renal failure and dysmetabolic nephropathy in children.
- 7. Demonstrate mastery of moral and deontological principles of a medical specialist and the principles of professional subordination in pediatric nephrology.

Topic 20. Urinary tract infections in children

Definition, classification of urinary tract infections in children, differential diagnosis of lower and upper urinary tract infections. Etiology, pathogenesis, clinic, diagnosis, treatment, prevention and prognosis of cystitis in children. Definition, etiology, pathogenesis, classification, clinic, diagnosis, treatment, prevention and prognosis of pyelonephritis in children.

Topic 21. Glomerulonephritis in children. Chronic renal failure in children

Definition, classification, etiology, pathogenesis, clinic, diagnosis, treatment, prevention and prognosis of glomerulonephritis in children. Chronic renal failure: risk factors, etiology, pathogenesis, stages of the disease, clinic, diagnosis, treatment, prevention, prognosis.

Topic 22. Dysmetabolic nephropathy in children

Definition, classification, etiology, pathogenesis, clinic, diagnosis, treatment, prevention and prognosis of dysmetabolic nephropathy in children.

The program of the discipline for the students of 5-th year

Block 1. Neonatology, diseases of the blood and endocrine system in children;

Block 2. Children's infectious diseases.

BLOCK 1. NEONATOLOGY, DISEASES OF THE BLOOD SYSTEM AND ENDOCRINE SYSTEM IN CHILDREN

Section 1. Neonatology

Topic 1. Organization of neonatal care in Ukraine. Medical care for a healthy newborn baby.

Organization of neonatal care in Ukraine. Medical care for a healthy newborn baby. Issues of bioethics in modern neonatology.

Topic 2. Premature babies. Children with delayed fetal development.

Criteria for determining prematurity. Features adaptation of prematurity. Anatomical of prematurely born children. Etiological factors physiological features. Classification of premature children for the weight of the body at birth and the relation of physical development and gestational age. Evaluation of neuro- maturity prematurely born children (on a morphological and functional scale Balard). Principles of nursing premature babies in the maternity hospital and at the second stage of nursing. Features of breastfeeding premature babies. Emergency care for major emergencies in premature infants: hypothermia, respiratory failure, hypoglycemia. Intrauterine growth retardation: causes, postnatal diagnosis, treatment, prevention.

Topic 3. Asphyxia of the newborn. Childbirth trauma.

Neonatal

asphyxia: etiology, pathogenesis, classification, clinic, diagnosis, differential diagnosis, treatme nt, prevention, prognosis. Primary resuscitation of newborns.

Childbirth trauma: etiology, pathogenesis, classification, clinic, diagnosis, differential diagnos is, treatment, prevention, prognosis.

Topic 4. Respiratory distress syndrome of newborns (RDS). Neonatal pneumonia .

Respiratory distress syndrome of newborns: etiology, pathogenesis, classification, clinic, diagnosis, differential diagnosis, treat ment, prevention, prognosis.

Neonatal pneumonia: etiology, pathogenesis, classification, clinic, diagnosis, differential diagnosis, treatment, prevention, prognosis.

Topic 5. Hemolytic disease of the newborn (GHN). Hemorrhagic disease of newborns.

Hemolytic disease

of newborns: etiology, pathogenesis, classification, clinic, diagnosis, differential diagnosis, treatment, prevention, prognosis.

Hemorrhagic disease

of newborns: etiology, pathogenesis, classification, clinic, diagnosis, differential diagnosis, treatment, prevention, prognosis.

Topic 6. Intrauterine infections of newborns (TORCH-infections).

TORCH-infections

of newborns: etiology, pathogenesis, clinic, diagnosis, differential diagnosis, treatment, prevention, prognosis.

Topic 7. Bacterial infections of newborns. Inflammatory diseases of the skin and subcutaneous fatty tissue of newborns, the disease umbilical cord, umbilical wounds and umbilical vessels: classification, etiology, pathoge nesis, clinical

manifestations, diagnosis, differential diagnosis, treatment, prevention, prognosis. Neonatal sepsi

s : definition, classification, etiology, pathogenesis, clinic, diagnosis, differential diagnosis, treatment, prevention, prognosis.

Section 2. Diseases of the blood system in children

Topic 8. Anemia in children (deficient, posthemorrhagic, hemolytic, due to impaired hematopoiesis)

Anemia in children (deficient, posthemorrhagic, hemolytic, due to hematopoietic disorders): definition, etiology, pathogenesis, classification, clinic, diagnosis, differential diagnosis, treatment, prevention, prognosis.

Topic 9. Leukemias and lymphomas in children.

Leukemias in children: etiology, pathogenesis, classification, clinic, diagnosis, differential dia gnosis, treatment, prevention, prognosis.

Lymphomas in children: etiology, pathogenesis, classification, clinic, diagnosis, differential di agnosis, treatment, prevention, prognosis.

Topic 10. Hemorrhagic diseases in children.

Coagulopathies (hemophilia): in children: etiology, pathogenesis, classification, clinic, diagno sis, differential diagnosis, treatment, prevention, prognosis. Thrombocytopenia (thrombocytopenic idiopathic purpura) in children: etiology, pathogenesis, classification, clinic, diagnosis, differential diagnosis, treatment, prevention, prognosis. Hemorrhagic vasculitis: in children: etiology, pathogenesis, classification, clinic, diagnosis, differential diagnosis, treatment, prevention, prognosis. Emergency care for bleeding in children.

Section 3. Diseases of the endocrine system in children

Topic 11. Diabetes mellitus in children.

Diabetes mellitus in children: definition, etiology, pathogenesis, classification, clinic, diagnosi s, differential diagnosis, treatment, prevention, prognosis. Acute and chronic complications of di abetes

mellitus in children. Hyperglycemic ketoatsydotychna and hypoglycemic coma in children: caus es occurrence, pathogenesis, clinical

manifestations, diagnosis, differential diagnosis, providing emergency assistance, prevention.

Topic 12. Diseases of thyroid cancer in children.

Classification of thyroid diseases in children. Etiology, pathogenesis, clinic, diagnosis, differential diagnosis, treatment, prevention and prognosis of diffuse toxic goiter, hypothyroidism, autoimmune thyroiditis, endemic goiter in children. Emerge ncy care for thyrotoxic crisis in children.

Topic 13. Diseases of the hypothalamic-pituitary system and gonads in children. Etiology, pathogenesis, classification, clinical picture, diagnosis, differential diagnosis, treatment, prevention, prognosis pathology of growth and pathology of sexual glands in children.

Topic 14. Obesity in children

Definition, etiology, pathogenesis, classification, clinic, diagnosis, differential diagnosis, treat ment, prevention, prognosis of obesity in children.

BLOCK 2. CHILDREN'S INFECTIOUS DISEASES

picture

Topic 1. Measles. Rubella. Chicken pox. Herpes Zoster.

Etiology, epidemiology, pathogenesis, clinical of typical forms, complications. Congenital rubella. Principles of treatment. Specific prevention. Anti-epidemic measures in the center of infection.

Topic 2. Scarlet fever. Pseudotuberculosis.

Etiology, epidemiology, pathogenesis, clinic of typical forms, complications. Principles of treatment. Anti-epidemic measures in the center of infection.

Topic 3. Diphtheria. Infectious mononucleosis.

Etiology, epidemiology, pathomorphological features of different forms. Classification, clinic of typical forms and complications. Diagnosis. Principles of treatment. Specific prevention and anti-epidemic measures in the center of infection.

Topic 4. Pertussis. Mumps infection.

Etiology. Epidemiology. Classification. Clinical and pathogenetic features of different forms. Complication. Diagnosis. Principles

of treatment. Specific prevention and anti-epidemic measures in the center of infection.

Topic 5. Meningococcal infection.

Etiology, epidemiology, pathogenesis. Classification. Clinic of various forms. Complication. Diagnosis. Effects. Principles of treatment.

Topic 6. Polio. Enterovirus infection.

Etiology, epidemiology, pathogenesis. Classification. Clinic of various forms. Diagnosis. Effects. Principles of treatment. Specific prevention and anti-epidemic measures in the center of infection.

Topic 7. Acute respiratory viral infections (influenza, parainfluenza, adenoviral, respiratory syncytial, rhinovirus infection)

Etiology, epidemiological features, pathogenesis. Clinical forms. Complication.

Diagnosis. Principles of treatment and prevention.

Topic 8. Acute intestinal infections (shigellosis, salmonellosis, Escherichia coli, intestinal yersiniosis, rotavirus infection).

Etiology, epidemiology, pathogenesis. Classification. Clinic of typical forms in children of different ages. Complication. Laboratory diagnostics. Principles of treatment and prevention.

Topic 9. Viral hepatitis A, B, C, D and others

Etiology, epidemiological features, pathogenesis. Classification. Clinic of various forms. Laboratory diagnostics. Principles of treatment and prevention.

Topic 10. HIV/AIDS in children. AIDS-

opportunistic infections (pneumocystis, candidiasis, cryptococcal infection and others).

Epidemiological features in children. Clinical and laboratory diagnosis of AIDS-opportunistic infections. Principles of treatment. Prevention of congenital HIV infection.

Topic 11. TORCHinfections (toxoplasmosis, cytomegalovirus infection, herpes infection).

Etiology, epidemiology, pathogenesis. Clinic

of acquired and congenital forms. Laboratory diagnostics. Principles of treatment and prevention.

The program of the discipline for the students of 6-th year

BLOCK 1. DIFFERENTIAL DIAGNOSIS OF THE MOST COMMON RESPIRATORY DISEASES IN CHILDREN. EMERGENCY CARE FOR MAJOR EMERGENCIES

Sections:

- 1. Differential diagnosis of the most common respiratory diseases in children. Emergencies and help with them.
- 2. Differential diagnosis of the most common diseases of the circulatory system in children. Emergencies and help with them.
- 3. Differential diagnosis of the most common diseases of the digestive system in children. Emergency aid for basic emergency conditions

- 4. Differential diagnosis of the most common diseases of the urinary system in children. Emergency care for major emergencies .
- 5. Dispensary supervision of healthy and sick children at the outpatient stage. Emergency care for major emergency care conditions.

Section 1. Differential diagnosis of the most common respiratory diseases in children. Emergency care for major emergencies .

Topic 1. Differential diagnosis of pneumonia in children. Complications of pneumonia. Emergency care for acute respiratory failure in children.

Leading clinical symptoms and syndromes in different clinical variants and complications of pneumonia in children. Data from laboratory and instrumental studies in different clinical variants of pneumonia and its complications. Differential diagnosis of pneumonia in children. Establishing a preliminary diagnosis. Tactics of patient management in different clinical variants of pneumonia and its complications. Emergency care for acute respiratory failure, depending on the causes and degrees of severity. Prevention of pneumonia and its complications in children.

Topic 2. Differential diagnosis of bronchial obstruction syndrome in children. Emergency care during a severe attack of bronchial asthma in children.

Leading clinical symptoms and syndromes in bronchial asthma, bronchiolitis, acute obstructive bronchitis children. Features in of bronchial asthma children depending on the severity and level of control. Data of laboratory and instrumental methods bronchial for asthma, bronchiolitis, acute obstructive bronchitis and their complications. Differential diagnosis of bronchial obstruction syndrome in c hildren of different ages. Establishing a preliminary diagnosis. Tactics of patient management in different clinical variants of bronchoo children. Providing bstructive svndrome and its complications in emergency care for asthmatic conditions. Prevention of bronchial asthma and bronchial obstruction syndrome in children of different ages. Dispensary observation.

Topic 3. Differential diagnosis of hereditary, congenital and chronic diseases of the bronchopulmonary system in children.

clinical symptoms syndromes in chronic bronchitis, bronchial disease, hereditary and congenital diseases of bronchopulmonary system (cystic fibrosis, idiopathic hemosiderosis pulmonary primary ciliary dyskinesia, a syndrome Wilms bronhomalyatsiyi, aplasia and hypoplasia deficiency antitrypsin, bronchopulmonary dysplasia, lung sequestration) in children. Data of laboratory and instrumental research methods in chronic bronchitis, bronchiectasis, hereditary and congenital diseases the bronchopulmonary system and their complications. Differential diagnosis of chronic, hereditary and congenital diseases the bronchopulmonary of system in children. Tactics of patient management in hereditary, congenital and chronic diseases of the bronchopulmonary system and their complications in children. Prevention of hereditary, congenital and chronic diseases the bronchopulmonary system in children. Dispensary observation.

Section 2. Differential diagnosis of the most common diseases of the circulatory system in children. Emergency care for major emergency care conditions.

Topic 4. Differential diagnosis of cyanosis, dyspnea, cardiomegaly at diseases of the heart in children. Emergency care for acute heart failure in children.

Leading clinical symptoms and syndromes of diseases of system of blood cardiomegaly circulation in children. Differential diagnosis of cyanosis, dyspnea, in laboratory children. Data and instrumental research methods, differential diagnosis of congenital and acquired heart defects, inflammatory and non-inflammatory heart diseases in children. Tactics of patient management in congenital and acquired heart defects, inflammatory and non-inflammatory heart diseases in children. Emergency care in acute heart failure. Treatment and prevention of chronic failure. Secondary prevention of infectious endocarditis in children. Dispensary observation.

Topic 5. Differential diagnosis of cardiac arrhythmias and disorders of conduction in children. First aid at paroxysmal disorders of rhythm and Morhan'yi-Stokes-Adams syndrome.

Leading clinical symptoms and syndromes with disturbances of heart rhythm and conduction in children (arrhythmia, paroxysmal tachycardia, atrial fibrillation, complete atrioventricular block). Clinical variants of paroxysmal tachycardia and atrial fibrillation in children. Data from instrumental studies in extrasystole, paroxysmal tachycardia, atrial fibrillation, complete atrioventricular block. Differential diagnosis of extrasystole, paroxysmal tachycardia, atrial fibrillation and complete atrioventricular block. Tactics of patient management in cardiac arrhythmias and conduction disorders

in children. Providing emergency assistance with paroxysmal tachycardia, atrial fibrillation, MA SS syndrome in children. Prevention of cardiac arrhythmias and conduction in children.

Topic 6. Differential diagnosis of systemic connective tissue diseases and systemic vasculitis in children.

Leading clinical symptoms and syndromes with juvenile rheumatoid arthritis, systemic lup us erythematosus, acute rheumatic fever, dermatomyositis, scleroderma, Kawasaki disease, lumpy field arteritis, Kawasaki's disease and other systemic vasculitis in children. Clinical variants of course and complications of systemic connective tissue diseases and systemic vasculitis in children. Data from laboratory and instrumental studies in systemic connective tissue diseases and systemic vasculitis in children. Differential diagnosis of systemic connective tissue diseases and systemic vasculitis in children. Differential diagnosis of arthritis in children. Tactics of management of patients with systemic connective tissue diseases and systemic vasculitis in children. Primary and secondary prevention of acute rheumatic fever in children. Dispensary observation.

Section 3. Differential diagnosis of the most common diseases of the digestive system in children. Emergency care for major emergency care conditions.

Topic 7. Differential diagnosis of functional and organic diseases of the stomach and intestines in children.

Leading clinical symptoms and syndromes in the functional and organic diseases of stomach and intestine in children (functional dyspepsia syndrome, the irritable bowel, functional constipation, functional diarrhea, gastroesophageal disease, acute and chronic gastritis, peptic ulcer and duodenal ulcer, disaharidazniy exudative enteropathy failure, , celiac disease, cystic fibrosis, Crohn's disease, nonspecific ulcerative colitis). Examination differential diagnosis of functional organic diseases and the stomach and intestines in children. Clinical variants of functional and organic diseases of the stomach and intestines in children. Tactics of children with functional and organic diseases of the stomach and intestines. Emergency care for gastric bleeding. Prevention and dispensary observation of functional and organic diseases of the stomach and intestines in children.

Topic 8. Differential diagnosis of diseases of the hepatobiliary system and pancreas in children. Emergency care for acute liver failure in children. Portal hypertension syndrome in children.

Leading clinical symptoms and syndromes in functional and organic diseases of the hepatobiliary system and pancreas in children (dysfunction of the gallbladder and sphincter of Oddi, acute and chronic cholecystitis, acute and chronic pancreatitis and chronic hepatitis in children). Differential diagnosis of diseases accompanied by insufficiency pancreas. The of examination and differential diagnosis with functional and organic diseases the hepatobiliary system and pancreas cancer in children. Clinical variants of the course in diseases of hepatobiliary system the and in children. Tactics of child management in functional and organic diseases of the hepatobiliary system and pancreas. Methods of correction of exocrine insufficiency of pancreatic cancer in children. Emergency care for acute liver failure and complications of portal hypertension syndrome . Prevention and outpatient observation diseases hepatobiliary and pancreatic cancer in children.

Section 4. Differential diagnosis of the most common diseases of the urinary system in children. Emergency care for major emergency care conditions.

Topic 9. Differential diagnosis of infectious and inflammatory diseases of the urinary system in children. Differential diagnosis of hereditary diseases of the urinary system in children.

Leading clinical symptoms and syndromes with infections of the urinary system, dysmetabolitic nephropathy and hereditary tubulopatiyah (phosphate diabetes syndrome Debre Fanconi, renal insipidus diabetes, renal tubular acidosis) in children. Clinical variants cour se and complications with infections of urinary system, dysmetabolitic nephropathy and hereditary tubulopatiy in children. Data of laboratory and instrumental research methods urinary infections, dysmetabolic nephropathies and hereditary tubulopathies in children. Different ial diagnosis of the most common urinary tract infections, dysmetabolic nephropathy and in children. Tactics child hereditary tubulopathies with an infection of urinary system and their complications dysmetabolitic nephropathies and hereditary tubul opativah in children. Principles of treatment of chronic renal failure.

Emergency services at acute retention of urine. Prevention of infections of the urinary system in children. Dispensary observation.

Topic 10. Differential diagnosis of acute and chronic glomerulonephritis in children. Emergency care for acute renal failure in children.

Leading clinical symptoms and syndromes in acute and chronic glomerulonephritis in children. Clinical variants course and complications of acute and chronic glomerulonephritis in children. Data from laboratory and instrumental studies in acute and chronic glomerulonephritis in children. Differential diagnosis of acute and chronic glomerulonephritis, interstitial and hereditary nephritis in children. Tactics managing a child of with acute and chronic glomerulonephritis. Emergency for care acute renal failure in children. Dispensary observation.

$Section \ 5. \ Dispensary \ supervision \ of \ healthy \ and \ sick \ children \ at$ the outpatient stage. Emergency care for major emergency care conditions .

Topic 11. Medical observation of children in the first three years of life at the outpatient stage.

order of mandatory preventive reviews child aged up The to three years. Rational feeding nutrition of a child under three years of age. Assessment of physical and psycho-motor development a child under three years. Tactics of of a general practitioner in violation of physical and neuropsychological development of children the first three years of life. Principles of effective counseling. Differential diagnosis and prevention of the most common deficiency states (rickets, iron deficiency anemia, proteincalorie deficiency) children early age. Preventive vaccinations for children under three years. Emergency care for anaphylactic reactions. Features of dispensary observation of low birth weight and premature infants.

Topic 12. Differential diagnosis of jaundice in newborns.

Clinical variants and complications of jaundice of newborns at the outpatient stage of observation. Data

from laboratory and instrumental studies in parenchymal, hemolytic, conjugative and mec hanical jaundice in newborns. Tactics of newborns with manifestations of jaundice at the site.

Topic 13. Perinatal lesions of the central nervous system in children. Dispensary observation of children with perinatal pathology of the central nervous system.

Leading clinical symptoms and syndromes in children with perinatal pathology of the nervous system. Data of laboratory and instrumental research methods in perinatal lesions of the nervous system in children. Differential diagnosis of perinatal CNS lesions in infants. Tactics of management of children with perinatal lesions of the CNS in the clinic. Emergency care for seizures in children.

Topic 14. Cough in children. Differential diagnosis. Doctor's tactics .

Cough: a problem-oriented approach in pediatrics. Main types and reasons for ashlyu. Differential diagnosis of diseases, the leading sign of which is cough. Laboratory - instrumental examinations of children with cough. Differential use of drugs for cough in children.

Topic 15. Abdominal pain syndrome in children. Differential diagnosis. Doctor's tactics .

Abdominal pain syndrome in children: a problem-oriented approach in pediatrics. Pathophysiology of abdominal pain in children. The main causes of abdominal pain in children. Differential diagnosis of diseases that are accompanied by abdominal pain syndrome in children. Laboratory and instrumental examinations of children with abdominal pain syndrome . Indications for consultation with a pediatric surgeon. Treatment of abdominal pain syndrome of different genesis in children. Emergency care for threatening conditions that are accompanied by abdominal pain in children.

Topic 16. Paleness in children. Differential diagnosis. Doctor's tactics . Lymphadeno pathy in children. Differential diagnosis. Doctor's tactics.

Paleness in children: a problem-oriented approach in pediatrics. Differential diagnosis of diseases and conditions that are accompanied by pallor in children. Treatment of diseases and conditions that are accompanied by pallor in children.

Topic 17 Hepatomegaly in children. Differential diagnosis. Doctor's tactics. Splenomegaly in children. Differential diagnosis. Doctor's tactics . Emergency care for bleeding.

Lymphadenopathy in children. Differential diagnosis. Doctor's tactics . Indications for consultation with a pediatric hematologist. Hepatomegaly in children. Differential diagnosis. Doctor's tactics . Splenomegaly in children. Differential diagnosis. Doctor's tactics .

Emergency care for acute bleeding.

Topic 1 8 . Fever in children. Differential diagnosis. Doctor's tactics . Fever in childre n: a problem-oriented approach in pediatrics. Causes and types of fever. Differential diagnosis of diseases that are accompanied by fever in children. Therapeutic approaches to fever in childhood. Indications for antipyretics in pediatrics. Emergency care for febrile seizures.

Topic 19 . Features of medical observation for children of teenage age. Differential diagnosisof arterial hypertension. Emergency assistance with ar terial hypertension and hypotension in adolescents.

The order of mandatory preventive medical reviews children's adolescence. Nutrition: prevention of obesity, diabetes. Assessment of puberty. Medical and psychological counseling. Tactics

physician general practice with autonomic dysfunction and arterial hypertension. Differen tial diagnosis of primary and secondary arterial hypertension in children of adolescent age. Tactics driving the patient to arterial hypertension at the outpatient stage. Providing emergency care in autonomic crises, hypertensive crisis. Preve ntion

of autonomic dysfunction and arterial hypertension in children. Dispensary observation.

Topic 20. Integrated management of childhood diseases.

The strategy of integrated maintenance of diseases of children's age and its purpose. General signs of danger of the child's condition. Assessment, classification, treatment, consultation and follow- up for cough, shortness of breath, diarrhea, ear problems, sore throat, fever, eating disorders and anemia, in the presence of HIV infection in children from 2 months to 5 years. Assessment, classification, treatment, consultation and subsequent observation of children in the age up to 2 months with jaundice, diarrhea, problems feeding and low weight of the body is extremely severe disease and a local bacterial infection.

BLOCK 2. CHILDREN'S INFECTIOUS DISEASES

Section 1. Differential diagnosis of infectious diseases with exanthema syndrome in children and children's respiratory diseases. Emergency care for major emergencies.

Topic 1. Differential diagnosis

in children.

of infectious diseases with exanthema syndrome in children.

Leading clinical symptoms and variants of infections with exanthema syndrome (measles, rubella, chickenpox, scarlet fever, pseudotuberculosis). Differential diagnosis of exanthema syndrome in various infectious and non-infectious diseases. Tactics of patients management, organization of anti-

epidemic measures in the center of infection in diseases with exanthema syndrome .

Subject 2. Differential diagnosis and emergency care in respiratory infections

Leading clinical symptoms and variants of pediatric respiratory infections (diphtheria, infectious mononucleosis, mumps, pertussis). Differential diagnosis of various forms of pediatric respiratory infections. Differential diagnosis of sore throat and croup syndromes in various infectious and non-infectious diseases. Tactics of managing a patient with croup syndrome. Emergency care for cereals. Features of

the apnea form of pertussis in children. Tactics keeping the patient in whooping cough with the aim of preventing occurrence of apnea. Emergency services at the bus stop breathing in patients with whooping cough. Organization of anti-epidemic measures in the center of infection in pediatric respiratory infections.

Section 2 . Differential diagnosis and emergency care in neuroinfections in children.

Topic 3. Differential diagnosis of neuroinfections in children

Leading clinical symptoms and variants of meningococcal infection. Differential di agnosis of meningococcal from diseases that are accompanied by hemorrhagic rash (hemorrhagic vasculitis, thrombocytopenic purpura and others.). Lead ing clinical symptoms of bacterial and viral meningitis, their complications and differential diagnosis. Clinical and laboratory characteristics of primary and secondary encephalitis, their complications and differential diagnosis. Tactics of management of patients with meningitis and encephalitis.

Topic 4. Emergency conditions at neuroinfection in children. Diagnosis and treatment

Leading clinical symptoms of infectious-toxic shock (ITS) in meningococcal infection and edema-swelling of the brain in neuroinfections in children. Tactics of patient management and emergency care in ITS and edema-swelling of the brain.

Section 3. Differential diagnosis of acute intestinal infections (AII). Emergency conditions in the AII.

Topic 5 . Differential diagnosis and emergency conditions at AII in children. Diagnosis and treatment.

Leading clinical symptoms and syndromes of AII: local (gastritis, enteritis, colitis) and general (toxicosis, exicosis, neurotoxicosis, toxicosis-septic condition). Clinical variants of shigellosis, salmonellosis, Escherichia coli, intestinal yersiniosis, viral diarrhea in children of different ages. Differential diagnosis of AII among themselves and with diseases of the gastrointestinal tract of non-infectious origin. Tactics of management of children with AII (examination, indications for hospitalization, treatment). Anti-epidemic measures in the center of infection.

Leading clinical symptoms of toxic-exicosis and neurotoxicosis in AII in children. Data from laboratory and instrumental studies in toxico-exicosis and neurotoxicosis syndromes. Tactics of a general practitioner in the diagnosis of emergencies in AII in children, emergency care.

Topic. Emergency conditions in AII in children. Diagnosis and treatment

Toxico-exicosis in acute intestinal infections. Etiological structure. See exsiccosis. Clinical and laboratory diagnostics. Emergency care.

Neurotoxicosis in acute intestinal infections. Etiological structure. Clinical and laboratory diagnostics. Emergency care.

Section 4. Differential diagnosis and emergency conditions in viral hepatitis (VH) in children.

Topic 7. Differential diagnosis of viral hepatitis (VH) in children

Leading clinical symptoms, laboratory data and instrumental studies at various clinical variants and in dependence of the pathogen VH. Differential diagnosis of typical and atypical forms of VH in children. Tactics of managing a patient with viral hepatitis. Anti-epidemic measures in the center of infection.

Topic 8 . Emergency conditions viral hepatitis in children. Diagnosis and treatment

Leading clinical symptoms of acute liver failure in VH in children. Indicators of instrumental studies in assessing laboratory and the degree of severity and prognosis current VH with a syndrome of acute liver failure. Tactics of management of patient VH with syndrome of the with a acute hepatic insufficiency. Providing emergency care.

Section 5. Differential diagnosis and emergencies in influenza and ARVI in children. Immunoprophylaxis of infectious diseases in children. Topic 9. Differential diagnosis and emergency conditions in influenza and ARVI i

children

Leading clinical symptoms of influenza and ARVI in children. Differential diagnosis of parainfluenza, adenoviral, syncytial, rhinovirus influenza, respiratory infection, etc. Pandemic influenza, its epidemiological and clinical and pathogenetic features. Leading clinical symptoms of emergencies that observed in influenza and ARVI (hyperthermic syndrome and acute stenotic laryngotracheitis syndrome). Tactics of management of patients with influenza and ARVI. Emergency care in case of emergency. Prevention of influenza and ARVI in children.

Topic 10. Immunoprophylaxis of infectious diseases in children

Calendar of preventive vaccinations. Vaccination by age. Vaccinations that are recommended in Ukraine. Contraindications to vaccination. Post-vaccination reactions and complications, their diagnosis and treatment. Anaphylactic shock, diagnosis and emerg ency care.

The structure of the discipline "PEDIATRICS" for the 4-th year structure of the discipline

Topic	Lectures	Practical	CPC	Individual
		training		work
Block 1. The most common somatic	diseases in you	ıng children,		Examination of
respiratory diseases and allergic dis	a sick child,			
Section 1. Diseases of young childre	writing and			
1. Rickets. Hypervitaminosis	2	4	3	defense of
"D". Protein and energy deficiency				educational
in children				history.
2. Functional gastrointestinal		4	3	
disorders in young children				
Section 2. Respiratory diseases in cl	hildren			
3. Acute respiratory infections of		4	3	
the upper respiratory tract in				
children				
4. Acute bronchitis in children	1	4	3	
5. Pneumonia in children	1	4	3	
6. Congenital malformations and			3	
chronic diseases of the				
bronchopulmonary system in				
children				
Section 3. Allergic diseases in childr	ren			
7. Atopic dermatitis and allergic		4	2	

	1		
rhinitis in children. Urticaria in			
children		4	1 2
8. Bronchial asthma in children		4	2
Results and control of work № 1		2	70 .0
Block 2. Cardiorheumatology of		seases of the	digestive
system and urinary system in child			
Section 4. Cardiorheumatology of c			
9. The most common congenital	2	2	1
heart disease in children			1
10. Inflammatory and non-		1	1
inflammatory heart disease in			
children.		1	1
11. Cardiac arrhythmias and		1	1
conduction in children		2	1
12. Hypertension in children13. Acute rheumatic fever in		2	1
children		<u> </u>	1
14. Systemic connective tissue		2	1
diseases in children		∠	1
15. Reactive arthropathy, juvenile		2	1
rheumatoid arthritis		2	1
16. Infectious endocarditis in			1
children			
Section 5. Gastroenterology of child	lhood		
17. Functional and organic diseases	2	1	1
of the esophagus and stomach in			
older children			
18. Functional and organic diseases		1	1
of the intestine and biliary system in			
children			
19. Diseases of the pancreas in			1
children			1
Section 6. Diseases of the urinary sy	ystem in childre		1 4
20. Urinary tract infections in		1	1
children		1	1
21. Glomerulonephritis in children. Chronic renal failure in		1	1
children			
22. Dysmetabolic nephropathy in			1
children			1
Individual VTS. Curation of		2	10
patients, preparation			
of educational history of the disease			
Results and control of work № 2		2	
Total : ECTS credits - 3, hours -			
90;	8	50	47

	Hours								
Names of blocks and topics	TD 4 1	т ,	Practi	Independ	dent work				
-	Total	Lectu-	cal	Indivi-	Inde-				
		res	classe	dual	pendent				
			S		1				
BLOCK 1. Neonatology, diseases of the bl	ood syste	m and e	ndocrino	e system i	n children				
Section 1.	Neonatol	logy							
1 Organization	4		2		2				
of neonatal care in Ukraine.									
Medical care for a healthy newborn baby.									
	2				1				
2. Premature babies. Children from	3		2		1				
delayed fetal development.									
3. Asphyxia of newborns.	5	2	2		1				
Maternity trauma of newborns]		2		1				
4. Respiratory distress syndrome	3		2		1				
of newborns.			_		1				
Neonatal pneumonia									
5. Hemolytic disease	3		2		1				
of newborns. Hemorrhagic									
neonatal disease.									
6. Intrauterine infections	3		2		1				
of newborns (TORCH-									
infections)									
7. Bacterial infections	3		2		1				
newborns									
Section 2		_							
the blood sys	tem in ch	_							
8. Anemia in children	5	2	2		2				
(deficient, posthemorrhagic, hemolytic,									
due to a violation of hematopoiesis)	2		2		2				
9. Leukemias and lymphomas in children	3		2		2				
10. Hemorrhagic diseases in	3		2		2				
children			_		_				
	Diseases	s of	I						
Section 3. Diseases of the endocrine system in children									
	7	2	4		1				
11. Diabetes mellitus in railway and Tay									
12. Thyroid disease	3		2		1				
glands in children	_	ļ	_						
13. Diseases of the hypothalamic	3		2		1				
pituitary system and sex glands in children									
14. Obesity in children	3		2		1				
14. Obesity in children	3		<i>L</i>		1				

Individual work: Patient supervision, writing and defense	6			6	
medical history					
Final control № 1	9		4		2
Total hours from block 1	66	6	34	6	20
BLOCK 2. Child	ren's i	nfectiou	s disease	es	
1. Measles, rubella, chicken pox, herpes zoster	3		2		1
2. Scarlet fever, pseudotuberculosis	3		2		1
3. Diphtheria, infectious mononucleosis	3		2		1
4. Pertussis, mumps infection	3		2		1
5. Meningococcal infection	3		2		1
6. Poliomyelitis, enterovirus infection	3		2		1
7. ARVI	3		2		1
8. Acute intestinal infections	5	2	2		1
9. Viral hepatitis	3		2		1
10. HIV / AIDS in children. AIDS opportunistic infections	1				1
11. TORCH-infection	1				1
12. Curation of patients, writing and protection of medical history	4			4	
Final control № 2	4		2		2
Total hours from block 2	39	2	20	4	13
TOTAL HOURS FROM				10	33
THE DISCIPLINE	105	8	54		43

The structure of the discipline "PEDIATRICS" for the 6-th year

	ı ycar				
	Number of hours				
Names of modules and topics		Lect-	Practical	Independ	ent
	Total	ures	classes	work	
				Individ	Indep
				ual	

Block 1. Pediatrics

Section 1 Differential diagnosis of the most common respiratory diseases in children. Emergency care for major emergencies .

8	5	!	
		1	2
6	4		2
y aid for	,		
8	5	1	2
8	5	1	2
7	4	1	2
id for			
8	5	1	2
7	5		2
	y aid for 8 8 7 7 8 8 7 7 8 8 8 7 8 8 8 8 8 8 8	y aid for 8	y aid for 8

Topic 9. Differential diagnosis of infectious and inflammatory diseases of	9	5	1	3
the urinary system in children. Differential				
diagnosis of hereditary diseases of				
the urinary system in children.				
Topic 10. Differential diagnosis of acute and	8	5		3
chronic glomerulonephritis in children.				
Emergency care for acute				
renal failure.				
Section 5. Dispensary supervision of healthy	and		ldren	at
the outpatient stage. Emergency care for major emergency	ncy car	e conditions		
Topic 11. Medical observation of children	6	4		2
the first three years of life at				
the outpatient stage.				
Topic 12. Differential diagnosis of	7	4	1	2
jaundice in newborns .				
Topic 13. Perinatal lesions of the central nervous system in	8	4	1	3
children. Dispensary observation of children				
with central perinatal pathology of				
nervous system.				
	0			
Topic 14. Cough in children.	8	4	1	3
Differential diagnosis. Doctor's tactics.				
Topic 15. Abdominal pain syndrome in	8	4	1	3
	0	4	1	3
children. Differential diagnosis. Doctor's tactics.	8	4	1	3
Topic 16. Paleness in children. Differential	0	-	1	3
diagnosis. Doctor's tactics . Lymphadenopathy in child				
ren. Differential diagnosis. Doctor's tactics.				
Topic 17. Hepatomegaly in children.	8	4	1	3
Differential				
diagnosis. Doctor's tactics . Splenomegaly in children.				
Differential diagnosis. Doctor's tactics . Emergency				
care for bleeding.				
Topic 18. Fever in	8	4	1	3
children. Differential diagnosis. Doctor's tactics.				
2				
Thoma10. Eastures of modical absorbation for all lives of	. 0	A	1	2
Theme 19. Features of medical observation for children of	8	4	1	3
teenage age. Differential diagnosis of arterial hypertension.				
Emergency assistance with arterial hypertension and hypotension in adolescents.				
tension in adolescents.				
				1

Topic 20. Integrated management of childhood diseases	8	4	1	3
Final control № 1	9	4		5
Total hours from module 1	163	92	16	55
Total nours from module 1	103			

	Names of blocks and topics			Number	r of hou	rs
ľ			Lectures	Practical classes	work	endent i Indep
l	Block 2 Section 1 of infectious diseases with exanthema syndrome in children diseases. Emergency care for major emergencies.	ren a		Differentia hildren's	_	
1	Differential diagnosis of infectious diseases with exanthema syndrome in children.	5		4		1
2	Differential diagnosis and emergency care in respiratory infections in children.	8		4	3	1
	Section 2 . Differential diagnosis and emergenchildren.	cy ca	ire i	n neuroii	nfection	s in
3	Differential diagnosis of neuroinfections in children	8		4	3	1
4	Emergency conditions at neuroinfections in children. Diagnosis and treatment	5	5	4		1
	Section 3. Differential diagnosis of acute into Emergency conditions in the AII.	estina	l info	ections (A	II).	
5	Differential diagnosis of AII in children	8		4	3	1
6	Emergency conditions in AII in children. Diagnosis and treatment	5		4		1
	Section 4. Differential diagnosis and emergency in viral hepatitis (VH) in children.	conc	dition	s		
7	Differential diagnosis of viral Hepatitis in children	6		2	3	1

8	Emergency conditions in viral	2		2		
	hepatitis in children. Diagnosis and treatment					
	Section 5. Differential diagnosis and emergenci	es in i	nflue	nza and		
	ARVI in children. Immunoprophylaxis of infectious diseases in children.					
9	Differential diagnosis and emergency conditions in	5		4		1
	influenza and ARVI in children					
10	Immunoprophylaxis of infectious diseases in children	5		4		1
	Final control № 2	5		4		1
	Total hours from block 2	62		40	12	10
	Total Hours from block 2			40		
	Total from the dissipline	225		132	28	65
	Total from the discipline			102	20	0.5

4. The content of the discipline 4.1. THEMATIC PLAN OF LECTURES for the 4-th year

No	Topic	hours
1	Rickets. Hypervitaminosis "D"	2
2	Bronchitis and pneumonia in children	2
3	The most common congenital heart defects in children	2
4	Functional and organic diseases of the digestive tract	2
	Total	8

THEMATIC PLAN OF LECTURES for the 5-th year

№	Topics	hours
B	LOCK 1. Neonatology, diseases of the blood system and endocrine syst	em in children
1.	Asphyxia of newborns. Maternity trauma of newborns	2
2.	Anemia in children: deficient, posthemorrhagic, hemolytic, due to a hematopoietic disorders	2
3.	Diabetes mellitus in children	2
To	otal from block 1	6
B	LOCK 2. Children's infectious diseases	
1.	Acute intestinal infections in children.	2
To	otal from block 2	2
T	OTAL FROM THE DISCIPLINE	8

4.2 . THEMATIC PLAN OF PRACTICAL CLASSES for the 4-th year

№	Topic	hours		
Block	Block 1. The most common somatic diseases in young children, respiratory diseases and			
allergic diseases in children				
1.2	Rickets. Hypervitaminosis "D". Protein and energy deficiency in children	4		
3.4	Functional gastrointestinal disorders in young children	4		

5.6	Acute respiratory infections in children	4
7.8	Acute bronchitis in children	4
9.10	Pneumonia in children	4
11.12	Atopic dermatitis and allergic rhinitis in children. Urticaria in children	4
13.14	Bronchial asthma in children	4
15	Final control work № 1	2
	Together for block 1	30
Bloc	k 2. Cardiorheumatology of childhood, diseases of the digestive system and	urinary
	system in children	
16	The most common congenital heart defects in children	2
17	Inflammatory and non-inflammatory heart diseases in children Cardiac	2
	arrhythmias and conduction in children	
18	Hypertension in children	2
19	Acute rheumatic fever in children	2
20	Systemic connective tissue diseases in children	2
21	Reactive arthropathies, juvenile rheumatoid arthritis in children	2
22	Functional and organic diseases of the esophagus and stomach in children	2
	Functional and organic diseases of the intestines and biliary system in children	
23	Urinary tract infections in children Glomerulonephritis in children. Chronic renal failure in children	2
24	Independent supervision of patients and preparation of educational history	2
	of the disease	
25	Results and control of work № 2	2
	Together for block 2	20
Total		50

THEMATIC PLAN OF PRACTICAL CLASSES for the 5-th year

№	Topics	hours		
BI	BLOCK 1. Neonatology, diseases of the blood system and endocrine system in ch			
1.	Organization of neonatological care in Ukraine.	2		
	Medical care for a healthy newborn baby			
2.	Features adaptation of prematurely born infants.	2		
	Organization of nursing and nursing prematurely born children			
3.	Asphyxia newborn maternity injury newborns	2		
4.	Respiratory distress syndrome and pneumonia in newborns	2		
5.	Hemolytic and hemorrhagic diseases of newborns	2		
6.	Intrauterine infections of the newborn (TORCH -infections)	2		
7.	Bacterial infections in newborns	2		
8.	Anemia in children: deficient, posthemorrhagic, hemolytic,	2		
	due to a hematopoietic disorders			
9.	Hemorrhagic diseases in children	2		
10.	Leukemias and lymphomas in children	2		
11.	Diabetes mellitus in children	4		
12.	Diseases of the thyroid gland in children	2		

13.	Diseases of the hypothalamic-pituitary system and genitals	2
	glands in children	
14.	Obesity in children	2
15.	Final control of including	4
	Test-control of theoretical training Control	
	of practical skills Solving situational problems	
	Interview	
То	etal from block 1	34
BI	LOCK 2. Children's infectious diseases	
1.	Measles, rubella, chicken pox, herpes zoster	2
2.	Scarlet fever, pseudotuberculosis	2
3.	Diphtheria, infectious mononucleosis	2
4.	Pertussis, mumps infection	2
5.	Meningococcal infection	2
6.	Polio, enterovirus infection	2
7.	ARVI	2
8.	Acute intestinal infections	2
9.	Viral hepatitis	2
10.	Final control of including	2
	Test-control of theoretical training Control	
	of practical skills Solving situational	
	problems Interview	
To	tal from block 2	20
T(OTAL FROM THE DISCIPLINE	54

THEMATIC PLAN OF PRACTICAL CLASSES for the 6-th year

No	Topic	Hours
	BLOCK 1. The most common somatic diseases in children	
1	Differential diagnosis of pneumonia in children. Complications of pneumonia.	5
	Emergency care for acute respiratory failure in children.	
2	Differential diagnosis of bronchial obstruction syndrome in children.	5
	Emergency care in the severe attack of bronchial asthma in children.	
3	Differential diagnosis of hereditary, congenital and chronic	4
	diseases of the bronchopulmonary system in children.	
4	Differential diagnosis of cyanosis, dyspnea, cardiomegaly at	5
	diseases of the heart in children. Emergency care for acute heart failure in children.	
5	Differential diagnosis of heart rhythm and conduction disorders in children. Emergenc	5
	y care for paroxysmal disorders	
	rhythm and Morgan-Adams-Stokes syndrome.	
6	Differential diagnosis of systemic connective	4
	tissue diseases	
	and systemic vasculitis in children.	
7	Differential diagnosis of functional and organic	5
	diseases of the stomach and intestines in children.	

8	Differential diagnosis of diseases of the hepatobiliary system and pancreas in	5
	children. Emergency care for acute liver	
	failure in children. Portal hypertension syndrome in	
	children.	
9	Differential diagnosis of infectious and inflammatory diseases of	5
	urinary system in children. Differential diagnosis of hereditary diseases of	
	the urinary system in children.	
10	Differential diagnosis of acute and chronic glomerulonephritis in children. Emergency	5
	care at acute renal failure in	
	children.	
11	Medical observation of children in the first three years of life at	4
	the outpatient stage.	
12	Differential diagnosis of jaundice in newborns.	4
13	Perinatal lesions of the central nervous system in children.	4
	Dispensary observation of children with perinatal pathology of	
	the central nervous system.	
14	Cough in children. Differential diagnosis. Doctor's tactics.	4
1 -		
15	Abdominal pain syndrome in children. Differential diagnosis.	4
	Doctor's tactics.	
16	Paleness in children. Differential diagnosis. Doctor's tactics. Lymphadenopathy in	4
	children. Differential diagnosis. Doctor's tactics.	
17	Hepatomegaly	4
	in children. Differential diagnosis. Doctor's tactics . Splenomegaly in children.	
	Differential diagnosis. Doctor's tactics. Emergency care for bleeding.	
	Fever in children. Differential diagnosis. Doctor's tactics.	4
19	Features of medical observation for children of teenage age. Differential diagnosis	4
	of arterial hypertension Emergency care at arterial hypertension and hypotension	
20	Integrated management of childhood diseases	4
	Final control № 1	4
	Total hours: 165	92

BLOCK 2. Children's infectious diseases

N₂	Topic		
245	торіс	Hours	
1	Differential diagnosis of infectious diseases with exanthema syndrome in children	4	
1	Differential diagnosis of fiffectious diseases with examinenta syndrome in children	4	
2	Differential diagnosis and emergency care in respiratory infections in children.	4	
3	Differential diagnosis of neuroinfections in children	4	
4	Emergency conditions at neuroinfection in children. Diagnosis and treatment	4	
5	Differential diagnosis of AII in children	4	
6	Emergency conditions at AII in children. Diagnosis and treatment	4	
7	Differential diagnosis of viral	2	
	Hepatitis in children		
8	Emergency conditions in viral	2	
	hepatitis in children. Diagnosis and treatment		
9	Differential diagnosis and emergency conditions in influenza and ARVI in	4	
	children		

10	Immunoprophylaxis of infectious diseases in children	4
	Final control № 2	4
	Total hours	40

4.3. THEMATIC PLAN OF INDEPENDENT WORK OF STUDENTS of 4-th year

№	Topic title	Number of	Types of control
		hours	
1	Preparation for practical classes	1 2	Current control in
			practical classes
2	Elaboration of topics that are not included in the		
	lesson plan:		
	1. Congenital malformations and chronic	4	Final control
	diseases of the bronchopulmonary system in children		
	2. Infectious endocarditis in children.	4	
	3. Diseases of the pancreas in children.	4	
	4. Dysmetabolic nephropathy in children.	4	
3	Individual VTS:		
	a) curation of patients, writing and protection of	1 2	Final control
	medical history		
4	Preparation for the final control	7	Final control
	Hours in general	47	

4.3. Independent work for students of 5-th year

The main types of independent work of students are:

- Preparation for practical classes
- Execution of individual work
- Mastering the topics that are made for independent work
- Preparation for the final control

№ s/ n	Topic title (or content of the work)	Number of hours
	OCK 1. Neonatology, diseases of e blood system and endocrine system in children	
1.	Preparation for practical classes	1 8
2.	Performing individual work: curation of patients, writing and protection of medical history	6
3.	Preparation for the final control № 1	2
Tota	ul from block 1	26
B	LOCK 2. Children's infectious diseases	
1.	Preparation for practical classes	9
2.	Performing individual work: curation of patients, writing and protection of medical history	4
3.	Mastering the topics that are made for independent work	2

4.	Preparation for final control № 2	2
Tota	al from block 2	17
TO	GETHER FROM THE DISCIPLINE	43

Individual tasks

 $BLOCK\ 1:$ Neonatology, diseases of the blood and endocrine system in children

Curation of the patients with writing of a Case history.

BLOCK 2: Children's infectious diseases

Curation of the patients with writing of a Case history.

4.3. Independent work for students of 6-th year

BLOCK 1. The most common somatic diseases in children

№	Topic title (or content of the work)	Hours	Types of control
1	Preparation for practical classes and preparation of reports for individual works	40	Current control on practical classes
2	Additional elaboration of topics that are insufficiently covered on classroom classes:	1 0	Final control
3.	Individual work of students	16	Current control on practical classes
4.	Preparation for the final control work № 1	5	Final control
	Total hours	71	

BLOCK 2. Children's infectious diseases

№	Topic title (or content of the work)	
1	Differential diagnosis of infectious diseases with exanthema syndrome in children.	
2.	Differential diagnosis and emergency care in respiratory infections in children	
3	Differential diagnosis of neuroinfections in children	
4	Emergency conditions at neuroinfection in children. Diagnosis and treatment	1
5	Differential diagnosis of AII in children	1
6	Emergency conditions in AII in children. Diagnosis and treatment	1
7	Differential diagnosis of viral Hepatitis in children	1
8	Emergency conditions in viral hepatitis in children. Diagnosis and treatment	0
9	Differential diagnosis and emergency conditions in influenza and ARVI in children	1

10	0 Immunoprophylaxis of infectious diseases in children	
1 1	Individual work of students	12
1 2	1 2 Preparation for final control work № 2	
	Total hours	22

Individual tasks

As individual work can be performed:

- analysis of clinical cases
- work with archival material of the clinic
- preparation of a literature review on clinical cases that have difficulties in differential diagnosis and / or treatment
- speech at a clinical medical and / or clinical and pathological conference.

Typical test problems to be solved in practical classes for the students of 4-th year:

- 1. Which of the options for pathogenetic therapy is most appropriate in the mixed form of chronic glomerulonephritis:
- A. a combination of prednisolone, heparin, curantil and cytostatics
- B. prednisolone monotherapy
- C. combination of prednisolone and cytostatics
- D. combination of prednisolone and heparin
- E. a combination of prednisolone, heparin and curantil

2. Which of the following provisions is incorrect for the treatment of nephrotic syndrome:

- A. all patients with nephrotic syndrome must be prescribed cytostatics
- B. corticosteroid therapy is prescribed
- C. the dose of diuretics is selected depending on the effect
- D. with severe edema and hypercoagulation, heparin is prescribed
- E. cytostatics are prescribed according to the indications

3. Which statement about the nephritic variant is incorrect:

- A. the main pathogenetic mechanism of edema is an increase in hydrostatic pressure
- B. edematous syndrome is often moderate
- C. main pathogenetic mechanism of edema is vascular disorders
- D. in the genesis of such edema hypoproteinemia is not significant
- E. in the genesis of such edema, hypoproteinemia is essential

4. Salt-deficient exsiccosis is characterized by:

- A. inhibition;
- B. hyperthermia;
- C. normothermia;
- D. excitation;
- E. hypertension.

5. Indicate the drugs used for rehydration.

A. 5% glucose solution

- B. lipofundin;
- C. gelatinol;
- D. alvesin;
- E. rheopolyglucin

Typical test problems to be solved in practical classes for the students of 5-th year

- 1. In full-term boy after discharge from the hospital during initial patronage pediatrician discovered symmetrical swelling of breasts without changes in the skin on them, swelling of the scrotum. Body temperature 36.5 °C. The baby is the mother's breasts suck actively. What condition should calm. about?
 - A Sexual crisis of the newborn
 - **B** Mastitis of the newborn
 - C Pathology of the urogenital system
 - **D** Disorders of electrolyte metabolism
 - E Diseases of the endocrine system
- 2. A full-term boy was born with a body weight of 3200 g, a body length of 52 cm. On examination on day 3, the skin became yellowish. The child is actively sucking, sleep is not disturbed. The abdomen is soft, the liver protrudes 2 cm from under the costal arch. In the blood test: hemoglobin 200 g / l, erythrocytes 5.5 T / l, platelets 200 G / l, total bilirubin 52 μ mol / l. What condition should you think about?
 - A Physiological jaundice
 - **B** Congenital hepatitis
 - C Hemolytic disease
 - **D** Hemorrhagic disease
 - *E* Congenital cirrhosis
- 3. The girl on the 5th day of life had bloody discharge from the vagina. Objectively: the child is active, sleep is restful. Above the lungs puerile breathing, heart sounds rhythmic, sonorous. The abdomen is soft, the liver protrudes from under the costal arch by 2 cm. Stool -4 times a day, without pathological impurities. What is the most likely diagnosis?
 - A Physiological metrorrhagia of the newborn
 - **B** Desquamative vulvovaginitis
 - C Physiological intestinal dysbacteriosis
 - **D** Hemorrhagic disease of the newborn
 - E Uric acid infarction of the newborn
 - 4. A child aged 3 days, born with a weight of 2900 g urgently, the examination revealed microcephaly, cataracts of both eyes, loose hemorrhagic rash on the body, hepatosplenomegaly. The child does not respond to sound stimuli. What intrauterine infection suffered child?
 - A Rubella
 - **B** Cytomegalovirus infection
 - C Viral hepatitis B
 - **D** Toxoplasmosis
 - E Chlamydia

- 5. In premature babies, is born with signs of intrauterine infection in the age of 1 year revealed chorioretinitis. What is the most probable cause of the disease?
 - A Toxoplasmosis
 - **B** Syphilis
 - C Viral hepatitis B
 - **D** Mycoplasmosis
 - E Chlamydia

Typical test problems to be solved in practical classes for the students of 6-th year

- 1. The baby was born to a mother who is a carrier of HbsAg. What preventive measures should be taken in the maternity hospital?
 - A Immunoglobulin prophylaxis immediately after birth
 - **B** Immunoglobulin prophylaxis after 1 month
 - C Triple administration of plasma vaccine
 - D Triple administration of recombinant vaccine
 - E Vaccination against hepatitis B
 - 2. A newborn child is diagnosed with hemolytic disease (jaundice variant), which arose against the background of rhesus-conflict. The concentration of hemoglobin in umbilical cord blood is 170 g / l, total bilirubin 42.5 μ mol / l. Designed conservative treatment. Which of the criteria in the future will be decisive as to the need of the child replaceable transfusion of blood?
 - A Hourly increase in total blood bilirubin.
 - **B** The level of reticulocytes in the blood.
 - C The severity of jaundice of the skin.
 - **D** The appearance of acholic stools.
 - E Condition of urination.
 - 3. The condition of a premature baby deteriorates on the 10th day of life with the appearance of apnea attacks, signs of respiratory distress, vomiting and bloating. At the time of objective examination the baby is lethargic, the skin is pale subicteric with a grayish tinge, muscle tone is reduced, physiological reflexes are suppressed, body temperature is 35.9 °C. In the culture of blood for sterility, taken 2 days ago from the central catheter, growth of Pseudomonas aeruginosa. Prescribe treatment to the newborn, choosing the optimal combination of antibacterial drugs
 - A Ceftazidime + amikacin
 - **B** Cefazolin + netromycin
 - C Ampicillin + gentamicin
 - **D** Cefotaxime + ampicillin
 - *E* Vancomycin + carbenicillin
 - 4. A boy born from a full-term pregnancy, jaundice at the end of the first day of life develops jaundice. The general condition of the child is satisfactory. Child's blood group B (III) Rh (+), mother's blood group A (II) Rh (-). Name an additional examination that will confirm the previous diagnosis.

- A Coombs' direct test
- **B** The general analysis of blood
- C content of bilirubin in serum blood
- **D** Determination of osmotic resistance of erythrocytes
- E Determining the activity of transaminase serum blood
- 5. In a transferred child (gestational age 44 weeks, body weight at birth 4100g), 6 hours after birth, focal seizures appeared. At neurological examination to 72 hours of life revealed focal neurological disorders: hemiparesis thing deflection eye side opposite hemiparesis; asymmetrical dilation of the pupils (larger right pupil). Neurosonography a slight increase in echogenicity of the brain, transillumination of the skull a limited focus of reduced glow over the right temporal area. CSF to normal. Preliminary diagnostic result:
 - A Childbirth injury, subdural hemorrhage
 - B Childbirth trauma, cephalohematoma
 - C Hypoxic-ischemic encephalopathy
 - **D** Intraventricular hemorrhage
 - E Meningoencephalitis
- 6. A full-term newborn boy (birth weight 3900g, gestational age 39 weeks) on the first day of life developed respiratory disorders: shortness of breath, arrhythmic breathing, cyanosis attacks. At inspection paradoxical breath and lag in the act of breath of the left part of a thorax is observed. Auscultatory on the left weakened breathing and strengthening wet rales. A neurologist diagnosed Duchenne-Erb's left paresis. In general, the analysis of the blood changes not detected. Preliminary diagnosis?
 - A Left paresis of the diaphragm
 - **B** Congenital pneumonia
 - C Respiratory distress syndrome
 - **D** Transient tachypnea of newborns
 - **E** Left pneumothorax

4.4. Ensuring the educational process

- 1. Multimedia projectors, computers, screens for multimedia presentations, lecture presentations.
- 2. Demonstration screens, laptops, files in Power Point and Word with tasks "Krok-1" Krok-2" for practical and final classes.
 - 3. Exam tickets.

5. Final control

5.1 . LIST OF PRACTICAL SKILLS FOR FINAL CERTIFICATION FOR THE 4-TH YEAR

- 1. Emergency care for vomiting syndrome in children.
- 2. Emergency care for spasmophilia (rickets).
- 3. Emergency care for hypervitaminosis D.
- 4. Calculation of the dose of vitamin D for the prevention and treatment of rickets.
- 5. Emergency care for seizures in children.
- 6. Emergency care for hyperthermia in children.

- 7. Emergency care in acute obstructive laryngitis.
- 8. Emergency care in acute valvular pneumothorax.
- 9. Emergency care for exudative pleurisy.
 - 10. Indications for use and technique of pleural puncture.
 - 11. Providing emergency care for respiratory failure in children.
 - 12. Indications and rules of oxygen therapy.
 - 13. Providing emergency care for asthma attacks in children.
 - 14. Providing emergency care for asthmatic status.
 - 15. Emergency care for cardiogenic pulmonary edema.
 - 16. Emergency care in acute heart failure.
- 17. Providing emergency care for vascular insufficiency (collapse, fainting).
- 18. Basic rules for prescribing cardiac glycosides.
- 19. First aid in case of asthma-cyanotic attack.
- 20. Changes in laboratory parameters in acute rheumatic fever in children. Their role in determining the activity of the rheumatic process.
- 21. Emergency care for peptic ulcer disease complicated by gastrointestinal bleeding.
- 22. Diet therapy of children of the first year of life with malnutrition of various degrees.
- 23. Diet therapy for children with chronic gastroduodenitis.
- 24. Diet therapy for peptic ulcer disease in children.
 - 25. Diet therapy of children with diseases of the hepatobiliary system.
 - 26. Diet therapy for children with pyelonephritis.
 - 27. Diet therapy for children with glomerulonephritis.

5.2 LIST OF QUESTIONS FOR THE FINAL CERTIFICATION FOR THE 4-TH YEAR

- 1. Functional dyspepsia in young children: etiology, pathogenesis, classification, clinic, diagnosis, treatment, prevention.
- 2. Cyclic vomiting syndrome: definition, classification (according to Roman criteria III), etiology, pathogenesis, clinic and diagnosis, treatment, prevention.
- 3. Colic and functional constipation in young children: etiology, pathogenesis, clinic, diagnosis, treatment, prevention.
- 4. Rickets. Definition, etiology, pathogenesis, classification, clinic, diagnosis, treatment. Prevention of rickets.
- 5. Hypervitaminosis D. Etiology, pathogenesis, clinic, diagnosis, prevention, treatment, emergency care for acute hypervitaminosis D, prognosis.
- 6. Protein and energy deficiency in children. Definition, classification, clinic, treatment, prevention, prognosis.
- 7. Acute respiratory infections of the upper respiratory tract (acute nasopharyngitis, acute pharyngitis, acute laryngopharyngitis, acute tracheitis) in children. Etiology, pathogenesis, clinic, diagnosis, treatment and prevention.
- 8. Acute obstructive laryngitis (croup) in children. Etiology, pathogenesis, clinic and emergency care.
- 9. Therapeutic measures for fever and convulsions in children with SARS.
- 10. Acute bronchitis in children. Definition, etiology, pathogenesis, clinic, diagnosis, treatment and prevention.
- 11. Acute obstructive bronchitis in children. Definition, etiology, pathogenesis, clinic, diagnosis, treatment and prevention.
- 12. Acute bronchiolitis in children. Definition, etiology, pathogenesis, clinic, diagnosis, treatment and prevention.
- 13. Recurrent bronchitis in children. Definition, etiology, pathogenesis, clinic, diagnosis, treatment and prevention.

- 14. Pneumonia in children. Definition, classification, etiology, pathogenesis, clinic, diagnosis, treatment and prevention of pneumonia in children. Forecast.
- 15. Acute respiratory failure in children. Definition, classification, etiology, pathogenesis, clinic, diagnosis, emergency care.
- 16. In birth defects and chronic diseases of the bronchopulmonary system in children. Definition, classification, etiology, pathogenesis, clinic, diagnosis, treatment and prevention. Forecast.
- 17. Atopic dermatitis in children. Definition, classification, etiology, pathogenesis, clinic, diagnosis, treatment and prevention, prognosis. Atopic march.
- 18. Allergic rhinitis in children. Definition, classification, etiology, pathogenesis, clinic, diagnosis, treatment and prevention, prognosis.
- 19. Urticaria in children. Definition, etiology, pathogenesis, clinic, diagnosis, treatment, prevention.
- 20. Bronchial asthma in children. Definition. Risk factors and pathophysiological mechanisms of bronchial asthma. Classification, clinic, diagnosis, treatment and prevention of bronchial asthma in children, prognosis.
- 21. Asthmatic status in children. Etiology, pathogenesis, clinic, diagnosis, emergency care.
- 22. The most common BBC in children. Etiology, classification of heart defects, hemodynamics in the most common VVS in children (IBE defect, WFP defect, Fallot's tetrad, aortic coarctation, pulmonary artery stenosis, aortic stenosis, arterial vascular transposition and VAP).
- 23. Diagnosis of the most common BBC in children. Physician tactics and prognosis in the most common BBC in children. Conservative treatment. Indications for cardiac surgery.
- 24. Diagnosis and treatment of heart failure in children with BBC. Secondary prevention of infectious endocarditis.
- 25. Carditis in children: definition, classification, etiology, pathogenesis, clinic, diagnosis, treatment, prognosis.
- 26. Cardiomyopathies in children: definition, classification, etiology, pathogenesis, clinic, diagnosis, treatment, prognosis.
- 27. Cardiac arrhythmias and conduction in children: classification, causes, clinic, diagnosis, treatment, prognosis.
- 28. Hypertension in children. Definition, classification, etiology, pathogenesis, clinic, diagnosis, treatment, prevention, prognosis.
- 29. Acute rheumatic fever in children. Definition, classification, etiology, pathogenesis, clinic, diagnosis, treatment, primary and secondary prevention, prognosis.
- 30. Systemic lupus erythematosus in children. Definition, etiology, pathogenesis, clinic, diagnosis, treatment, prevention, prognosis.
- 31. Dermatomyositis in children. Definition, etiology, pathogenesis, clinic, diagnosis, treatment, prevention, prognosis.
- 32. Systemic scleroderma in children. Definition, etiology, pathogenesis, clinic, diagnosis, treatment, prevention, prognosis.
- 33. Nodular enderteritis in children. Definition, etiology, pathogenesis, clinic, diagnosis, treatment, prevention, prognosis.
- 34. JRA: definition, classification, etiology, pathogenesis, clinic, diagnosis, treatment, rehabilitation, prognosis.
- 35. Reactive arthropathies in children: definition, classification, etiology, pathogenesis, clinic, diagnosis, treatment, prognosis.
- 36. Infectious endocarditis in children: definition, classification, etiology, pathogenesis, clinic, diagnosis, treatment, primary and secondary prevention, prognosis.
- 37. Functional dyspepsia, abdominal pain in older children. Definition, classification, etiology, pathogenesis, clinic, diagnosis, treatment, prevention.

- 38. Gastroesophageal reflux, duodenogastric reflux in older children. Etiology, pathogenesis, clinic, diagnosis, treatment, prevention.
- 39. Organic diseases of the esophagus and stomach in older children. Etiology, pathogenesis, clinic, diagnosis, treatment, prevention.
- 40. With Indra irritable bowel function and constipation in older children. Definition, etiology, pathogenesis, clinic, diagnosis, treatment, prevention, prognosis.
- 41. Nonspecific ulcerative colitis and Crohn's disease in children. Etiology, pathogenesis, clinic, diagnosis, treatment, prognosis.
- 42. Oddi gallbladder and sphincter dysfunction in children. Etiology, clinic, diagnosis, treatment and prevention.
- 43. Etiology, clinic, diagnosis, treatment and prevention of organic diseases of the biliary system in older children.
- 44. Exocrine insufficiency of the pancreas in children. Definition, etiology, pathogenesis, clinic, diagnosis, differential diagnosis, treatment, prevention, prognosis.
- 45. Acute and chronic pancreatitis in children. Etiology, pathogenesis, clinic, diagnosis, treatment, prevention, prognosis.
- 46. Urinary tract infections in children. Definition, classification, differential diagnosis of lower and upper urinary tract infections.
- 47. Cystitis in children. Etiology, pathogenesis, clinic, diagnosis, treatment, prevention, prognosis.
- 48. Pyelonephritis in children. Definition, etiology, pathogenesis, classification, clinic, diagnosis, treatment, prevention, prognosis.
- 49. Glomerulonephritis in children. Definition, classification, etiology, pathogenesis, clinic, diagnosis, treatment, prevention, prognosis.
- 50. Chronic renal failure in children. Risk factors, etiology, pathogenesis, stages of the disease, clinic, diagnosis, treatment, prevention, prognosis.
- 51. Dysmetabolic nephropathy in children. Definition, classification, etiology, pathogenesis, clinic, diagnosis, treatment, prevention, prognosis.

LIST OF PRACTICAL SKILLS FOR FINAL CERTIFICATION FOR THE 5-TH YEAR

The list of practical skills, the acquisition of which is controlled during the final control of block 1

I. Analysis of laboratory and instrumental studies in children

- 1. General clinical blood test
- 2. General clinical analysis of urine
- 3. General analysis of feces
- 4. Blood protein and its fractions, acute phase parameters
- 5. Glucose Blood
- 6. Lipid profile of blood
- 7. Blood electrolytes
- 8. Blood transaminases
- 9. Creatinine, blood urea
- 10. Total blood bilirubin and its fractions, analyze the Polachek curve
- 11. Coagulogram
- 12. ECG
- 13. Radiation study CNS of the chest and abdominal cavity, urinary system, thyroid gland, skull, bones, joints.
 - 14. Microbiological study of biological fluids and secretions
 - 15. Polymerase chain reaction, enzyme-linked immunosorbent assay
 - 16. General analysis of sternal punctate
 - 17. General analysis of cerebrospinal fluid

II. Medical manipulations in pediatrics

- 1. To determine blood groups, rhesus affiliation in children
- 2. Perform artificial respiration, indirect heart massage in children
- 3. Measure blood pressure in children
- 4. Conduct the primary toilet of the newborn
- 5. Carry out ECG recording in children
- 6. Carry out injections of drugs in children

III. Providing assistance during emergency conditions in children

- 1. Asphyxia of newborns
- 2. Acute respiratory failure in newborns
- 3. Convulsive syndrome in children
- 4. Bleeding in children
- 5. Hemorrhagic shock in children
- 6. Hyperglycemic ketoacidotic and hypoglycemic coma in children
- 7. Thyrotoxic crisis in children

The list of practical skills, the acquisition of which is controlled during the final control of block 2. Children's infectious diseases

Analysis of laboratory and instrumental research

- 1. The general analysis of blood
- 2. General analysis of urine
- 3. General analysis of cerebrospinal fluid
- 4. Coprogram
- 5. Serological reactions in infectious diseases
- 6. Bacteriological study of biological fluids and secretions
- 7. Immunological markers of infectious diseases
- 8. Blood bilirubin and its fractions
- 9. Alkaline phosphatase, thymol test, blood transaminases.

LIST OF QUESTIONS FOR THE FINAL CERTIFICATION FOR THE 5-TH YEAR. Block 1.

Neonatology, diseases of the blood and endocrine system in children

- 1. Organization of neonatal care in Ukraine.
- 2. Medical care for a healthy newborn child.
- 3. The medical care for a newborn baby with low weight body at birth.
- 4. Definition of "prematurity". Classification of premature infants according to the indicator "body weight at birth" and the ratio of physical development and gestational age.
- 5. Reasons for delay of intrauterine growth retardation. Features of adaptation of children with ZVUR and principles of nursing.
- 6. Assessment of morphological and neuro-functional maturity of premature infants (on the Ballard scale).
- 7. Features of thermoregulation of premature babies, methods of hypothermia prevention .
 - 8. Prevention and treatment of hypoglycemia in premature infants.
- 9. Mechanisms of development of hyperbilirubinemia of premature infants, possible consequences. Driving tactics .
- 10. Emergency care for apnea in premature babies. Indications for the use of artificial lung ventilation . Complications of long-term mechanical ventilation: bronchopulmonary dysplasia, retinopathy of prematurity .

- 11. Stages of nursing premature babies. Principles of transportation. Criteria for discharge from the hospital. Peculiarities of dispensary observation of premature children in of anemia, lactase deficiency, dysbacteriosis, rickets.
- 12. Principles of breastfeeding premature infants. Choose how feeding in dependence on gestational age and condition of the child.
- 13. Etiological, clinical and laboratory criteria for the diagnosis of "neonatal asphyxia", the pathogenesis of asphyxia. Criteria for the severity of asphyxia.
 - 14. Primary resuscitation of newborns and post-resuscitation care for newborns.
 - 15. Definition of the term "birth trauma" and factors of its development.
- 16. Childbirth injuries of soft tissues. Adiponecrosis. Damage klyuchychnosternocleidomastoid muscle. The differential diagnosis of labor tumor and cephalhematoma.
- 17. Childbirth injury of the spinal cord and humeral plexus. Paresis and paralysis Duchamp-Erb, Degerin-Klumpke.
- 18. Differential diagnosis of intracranial hemorrhage of hypoxic and traumatic origin in newborns.
- 19. The concept of the surfactant system of the lungs. Factors of RDS development in newborns. Methods of antenatal prevention.
 - 20. Assessment of the severity of respiratory failure in RDS. RDS diagnostics.
 - 21. Principles of treatment of RDS in newborns.
- 22. Classification of pneumonia in newborns in dependence on the way and duration of infection. Etiology.
- 23. Risk factors for pneumonia in newborns. Pathogenesis. Features course of pneumonia in newborns in dependence on the path of infection and etiology.
- 24. Principles of diagnosis and treatment of pneumonia in newborns. Features of etiotropic therapy.
- 25. Erythrocyte antigenic systems of human blood . Etiology, pathogenesis of GHN. Classification. Clinical and laboratory criteria for anemic, icteric and edematous forms of GHN. Stages of bilirubin encephalopathy.
- 26. Methods of antenatal diagnosis and prevention of hemolytic disease of the fetus. Treatment of hemolytic disease of newborns. Indications to conduct operations replaceable transfusion of blood. Technique of operation and its possible complications.
- 27. Features of the hemostasis system in newborns. Factors in the development of hemorrhagic disease. Clinical features of early, classical and late forms of hemorrhagic disease.
- 28. Differential diagnosis of hemorrhagic disease and "swallowed blood" syndrome. Emergency care for gastrointestinal bleeding. Treatment and prevention of hemorrhagic disease.
- 29. Definition of the term "TORSN-infection". Risk factors for the development of VUI. The nature of the lesion in VUI depending on the timing and route of infection of the fetus. Methods of early diagnosis and prevention of VUI.
- $30.\,Clinical$ manifestations of VUI depending on the etiology (congenital toxoplasmosis,
- rubella, neonatal herpes and cytomegalovirus infection). Principles of VUI treatment . Eti otropic and immunotherapy.
- 31. O mphalit. Etiology. Pathogenesis. Classification. Diagnosis. Prevention and treatment.

- 32. Vesiculopustulosis, neonatal vesicles, exfoliative Ritter's dermatitis . Etiology, clinic, treatment. Prevention.
- 33. Definition of the term "neonatal sepsis". Development factors . Classification, etiology, clinical and laboratory diagnostic criteria. Principles of treatment and prevention of neonatal sepsis.
 - 34. Issues of bioethics in modern perinatology and neonatology.
 - 35. Definition of anemia. Classification of anemias in children.
 - 36. Iron
- deficiency anemia in children. Causes, clinic, diagnosis, differential diagnosis. Treatment and prevention of iron deficiency anemia in children.
- 37. Posthemorrhagic anemia in children. Etiology, pathogenesis, diagnosis. Emergenc y

care for bleeding.

- 38. Leukemia in children. Causes. Classification of leukemias. Its connection with the hematopoietic scheme. Clinical variants, diagnosis and differential diagnosis of acute lymphoblastic leukemia in children.
- 39. Principles of treatment of leukemias in children (acute lymphoblastic leukemia, acute myeloid leukemia, chronic myeloid leukemia). Cytostatics. Classification of drugs used as cytostatics. Indications for their use. Complications of cytostatic therapy (immediate, delayed, remote).
 - 40. Classification
- of hemoblastosis. Lymphogranulomatosis in children. Etiology, pathogenesis, stages of the disease.
- 41. Diagnosis , differential diagnosis of lymphogranulomatosis in children with other lymphadenopathy, lymphadenitis, hemoblastosis. Clinic, treatment, prognosis of lymphogranulomatosis in children. Emergency care for superior vena cava compression syndrome .
 - 42. Classification of hemorrhagic diseases in children.
- 43. Hemophilia A and B. Etiology, pathogenesis, clinic, diagnosis. Prognosis in childr en. Zamisna therapy while providing an immediate help patients to hemofiliyu. Antihemophilic drugs (concentrates of blood coag ulation factors, SZP) and their use.
- 44. Hemorrhagic vasculitis in children. Etiology, pathogenesis, clinical forms, diagnosis, differential diagnosis, treatment, prognosis.
- 45. Thrombocytopenic purpura in children. Etiology, pathogenesis, clinic, diagnosis, d ifferential diagnosis, treatment, prognosis. Emergency care for bleeding.
- 46. Diabetes mellitus in children. Etiology, pathogenesis, clinic, diagnosis. Peculiarities of the course of diabetes mellitus in early and adolescence . Criteria for compensation of diabetes mellitus in children.
 - 47. Regime of insulin therapy of diabetes mellitus in children. Insulin preparations.
- 48. Peculiarities of diet in compensated and uncompensated diabetes mellitus in children.
- 49. Hyperglycemic ketoacidotic coma in children. Causes, clinic, diagnosis, emergenc y

care.

- 50. Hypoglycemic coma in children. Causes, clinic, diagnosis, emergency care.
- 51. Differential diagnosis of hyperglycemic and hypoglycemic coma in children.
- 52. Growth disorders in children. Pituitary dwarfism. Causes, clinic, differential diagnosis. Treatment and prognosis.
- 53. Obesity in children. Causes, clinical forms. Principles of complex treatment of various clinical forms of obesity in children. Prevention.
- 54. Autoimmune thyroiditis in children. Etiology, pathogenesis, clinic, diagnosis, differential diagnosis, treatment, prognosis.
- 55. Diffuse toxic goiter in children. Etiology, pathogenesis, Clinic, diagnostics, diferentsialnyy diagnosis. Treatment. Forecast.
 - 56. Endemic goiter in children. Causes, clinic, diagnosis, treatment, prevention.
 - 57. Hypothyroidism in
- children. Etiology, pathogenesis, clinic, early diagnosis. Treatment, prognosis.
 - 58. Clinic and diagnosis of congenital hypothyroidism in children. Treatment. Forecast.
- 59. Clinic and diagnosis of adrenogenital syndrome in children. Treatment. Emergency care for the losing form of adrenogenital syndrome.
- 60. Disorders of sexual development in boys and girls. Etiology, pathogenesis, clinic, diagnosis, differential diagnosis, treatment.
- 61. Differential diagnosis of variants of intersexualism. Research methods . Principles of treatment.

Block 2. Children's infectious diseases

- 1. Features of the infectious process and immunity in children. Prevention of childhood infectious diseases (specific and nonspecific). Organization of preventive vaccinations for children.
- 2. Diphtheria. Etiology, epidemiology. Pathogenesis of various clinical forms. Diphtheria of the tonsils. Clinical forms. Complication. Diphtheria laryngotracheitis. Diphtheria of the nose, eyes, genitals, skin. Diagnosis. Treatment of diphtheria. Diphtheria serum, conditions of its effective action, method of administration. Prevention of diphtheria.
- 3. Scarlet fever. Etiology, epidemiology, pathogenesis. Classification of scarlet fever. Clinical picture of typical and atypical forms

of

- .. Complications. Treatment. Prevention.
- 4. Measles. Etiology, epidemiology, pathogenesis. Clinic of typical and atypical forms. Complication. Basic principles treatment. Measles prevention.
- 5. Rubella. Etiology, pathogenesis. Clinical picture, diagnosis. Congenital rubella. Treatment . Prevention.
 - 6. Pertussis. Etiology. Epidemiology. Pathogenesis. Clinic. Features of whooping cough in infants. Complication. Laboratory methods of diagnosis. Causal and pathogenetic therapy of patients for whooping cough. Prevention.
 - 7. Chicken pox. Etiology, epidemiology, pathogenesis. Clinical picture of typical and atypical forms of chickenpox . Complication. Treatment, prevention.
 - 8. Herpes Zoster . Diagnosis. Treatment.
 - 9. Herpetic infections (simple herpes). Etiology, ways of infection. Clinical forms, diagnosis. Treatment.

- 10. Mumps infection. Etiology, epidemiology. Classification. Clinical picture of various forms of mumps (mumps, submaxillitis, sublingualitis, pancreatitis, orchitis, meningitis, etc.). Treatment. Prevention.
- 11. Influenza. Clinical course. Features in young children. Complications, their pathogenesis. Treatment. Prevention.
- 12. Parainfluenza and respiratory syncytial infections in children. Features of clinical manifestations. Treatment, prevention.
- 14. Adenovirus infection. Ways of transmission. Features of the course in young children. Treatment. Prevention.
- 11. Sore throats in children. Etiological features depending on age. Clinic. Diagnosis. Differential diagnosis. Treatment. Tactics of keeping patients with sore throats at home.
- 12. Meningococcal infection. Etiology. Epidemiology. Pathogenesis. Clinical forms. C linical picture of meningococcal meningitis. Features of the course in children of the 1st year of life.
- 13. Meningococcemia, clinical picture. Laboratory diagnostics. Basic principles of treatment. Prevention. Emergency conditions at meningococcus infection (infectious to xic shock, swelling of the brain), diagnostics, treatment in the prehospital phase and in the hospital.
- 14. Infectious mononucleosis. Etiology. Clinical picture. Laboratory methods of diagnosis. Basic principles of treatment.
 - 19. Poliomyelitis. Etiology. Clinic. Treatment. Prevention.
- 20. Enterovirus infection. Etiology. Epidemiology. Clinical forms. Diagnosis. Treatme nt. Prevention.
- 21. Shigellosis in children. Incidence in different age groups. Clinic, diagnosis. Treatment. Prevention.
 - 22. Salmonellosis in children. Etiology, pathogenesis. Clinical forms. Treatment. Prevention.
- 23. Escherichia coli in children. Etiology. Clinical features in children of different ages depending on the pathogen. Treatment. Prevention.
 - 24. Acute intestinal infections in newborns. Etiological structure. Clinical features. Diagnosis. Treatment.
 - 25. Pseudotuberculosis. Epidemiological features in children. Pathogenesis. Clinic. Diagnosis. Treatment, prevention.
- 26. Intestinal yersiniosis . Features of epidemiology in children of different ages. Pathogenesis. Clinical forms. Diagnosis. Treatment. Prevention.
 - 27. Rotavirus infection. Etiology, epidemiology, pathogenesis. Clinical picture. Treatment.
- 28. Viral hepatitis A. Etiology. Clinical picture in children. Laboratory diagnostics. Treatment. Prevention.
- 29. Viral hepatitis B. Etiology, pathogenesis. Features of the course in young children. Laboratory diagnostics. Principles of therapy.
 - 30. Features of diagnosis and course of viral hepatitis C, D, E and others in children.
 - 31. HIV / AIDS in children. Epidemiology. Clinic. Diagnosis. Treatment. Prevention.
- 32. TORCH infections: toxoplasmosis, rubella, cytomegalovirus infection, herpes infection. Characteristics of pathogens, epidemiology, pathogenesis of congenital and acquired forms, clinical manifestations depending on the route and timing of infection. Laboratory diagnosis of acute, reactivated and latent forms. Principles of treatment and prevention.

LIST OF PRACTICAL SKILLS FOR FINAL CERTIFICATION FOR THE 6-TH YEAR

BLOCK 1.

I. Analysis of laboratory and instrumental research

- 1. The general analysis of blood
- 2. General analysis of urine
- 3. Analysis of urine by Zymnytsky
- 4. Analysis of urine by Nechiporenko
- 5. Analysis of urine for diastase
- 6. General analysis of feces
- 7. Blood protein and its fractions, acute phase parameters
- 8. Glucose Blood
- 9. Blood electrolytes
- 10. Lipid profile of blood
- 11. Alkaline blood phosphatase
- 12. Blood transaminases
- 13. Creatinine, blood urea
- 14. Total blood bilirubin and its fractions
- 15. Coagulogram
- 16. Analysis of pleural fluid
- 17. Analysis of synovial fluid
- 18. General analysis of sputum
- 19. General immunological profile of blood
- 20. Serological reactions in autoimmune diseases
- 21. Microbiological study of biological fluids and secretions
- 22. Radiation study CNS of the chest and abdominal cavity, urinary system.
- 23. Study of the function of external respiration
- 24. ECG
- 25. Endoscopic examination of the bronchi
- 26. Endoscopic examination of the digestive tract
- 27. Echocardiography
- 28. Radiation examination of bones and joints
- 29. Radiation study of the CNS
- 30. Tuberculin diagnosis
- 31. Fractional study of gastric juice, bile and pH-metry of the stomach

II. Medical manipulations

- 1. Carry out ECG recording
- 2. Carry out injections of medicinal substances
- 3. Measure blood pressure
- 4. Carry out catheterization of the bladder with a soft probe
- 5. Perform a pleural puncture
- 6. Perform artificial respiration, indirect heart massage
- 7. Determine blood groups, rhesus affiliation

III. Providing assistance during emergency conditions

- 1. Asthmatic condition
- 2. Anaphylactic shock
- 3. Acute respiratory failure
- 4. Acute heart failure
- 5. The attack of paroxysmal tachycardia
- 6. Morgan-Adams-Stokes syndrome

- 7. Hypertensive crisis
- 8. Collapse
- 9. Acute liver failure
- 10. Acute renal failure
- 11. Gastrointestinal bleeding

BLOCK 2 "Children's infectious diseases"

I. Analysis of laboratory and instrumental research

- 1. The general analysis of blood
- 2. General analysis of urine
- 3. General analysis of cerebrospinal fluid
- 4. Coprogram
- 5. Serological reactions in infectious diseases
- 6. Bacteriological study of biological fluids and secretions
- 7. Immunological markers of infectious diseases
- 8. Blood bilirubin and its fractions
- 9. Alkaline phosphatase, thymol test, blood transaminases

2. Providing assistance in emergencies:

- 1. Diphtheritic croup
- 2. Apnea at whooping cough
- 3. Infectious and toxic shock in meningococcal infection
- 4. Edema-swelling of the brain in meningitis and encephalitis
- 5. Toxico-exicosis in acute intestinal infections
- 6. Neurotoxicosis in acute intestinal infections
- 7. Acute liver failure in viral hepatitis
- 8. Acute stenotic laryngotracheitis in ARVI
- 9. Hyperthermic syndrome at influenza
- 10. Febrile convulsions at influenza
- 11. Anaphylactic shock during vaccination

LIST OF QUESTIONS FOR THE FINAL CERTIFICATION FOR THE 6-TH YEAR.

BLOCK 1. The most common somatic diseases in children

- 1. Differential diagnosis of pneumonia in children. Tactics of patient management in different clinical variants of pneumonia. Prevention of pneumonia and its complications in children.
- 2. Differential diagnosis of pneumonia complications in children. Tactics of patient management in different clinical variants of pneumonia complications in children.
- 3. Emergency care in acute respiratory failure in dependence on the causes of occurrence and degree of severity.
- 4. Differential diagnosis of bronchial obstruction syndrome in children of different ages. Tactics of patient management.
- 5. Differential diagnosis of complications of bronchial obstruction syndrome in children. Tactics of patient management.
 - 6. Emergency care in the severe attack of bronchial asthma in children.
- 7. Differential diagnosisof bronchial asthma in children. Tactics of patient manageme nt. Prevention of bronchial asthma and its complications in children. Dispensary supervision.

- 8. Prevention of bronchial obstruction syndrome in children of different ages.
- 9. Differential diagnosis of hereditary, congenital and chronic diseases of bronchopulmonary system (cystic fibrosis, idiopathic hemosiderosis pulmonary primary ciliary dyskinesia, syndrome Wilm

s Campbell, bronchomalacia, aplasia and hypoplasia of the lungs, the deficiency of α 1 - antitrypsin, bronchopulmonary dysplasia, sequestration lungs) in children.

- 10. Tactics of patient management in hereditary, congenital and chronic diseases of the bronchopulmonary system and their complications in children.
- 11. Prevention of hereditary, congenital and chronic diseases of the bronchopulmonary system in children. Dispensary supervision.
 - 12. Differential diagnosis of cyanosis in children. Tactics of managing a sick child.
- 13. Differential diagnosis of shortness of breath in children. Tactics of patient management .
 - 14. Differential diagnosis

of cardiomegaly in children. Tactics of patient management.

15. Differential diagnosis

of congenital and acquired heart defects in children. Tactics of managing children with congenital and acquired heart defects. Dispensary supervision.

- 16. Emergency care for acute heart failure in children.
- 17. Secondary prevention of infectious endocarditis in children.
- 18. Differential diagnosis

of extrasystole, paroxysmal tachycardia, atrial fibrillation and complete atrioventricular block in children.

- 19. Tactics of patient management with extrasystole, paroxysmal tachycardia, atrial fi brillation, complete atrioventricular block in children.
- 20. Prevention of cardiac arrhythmias and disorders of conduction in children.
 - 21. Emergency care for paroxysmal tachycardia, atrial fibrillation in children.
 - 22. Differential diagnosis

of systemic connective tissue diseases and systemic vasculitis in children. Tactics of patie nt

management. Dispensary supervision.

- 23. Primary and secondary prevention of acute rheumatic fever in children.
- 24. Differential diagnosis

of arthritis in children. Tactics of patient management . Prevention reactive arthritis in children.

25. Differential diagnosis of functional (cyclic vomiting syndrome, functional dyspepsia) and organic (chronic gastritis, chronic gastroduodenitis, peptic ulcer disease, stomach and duodenal ulcers) diseases of the digestive tract in children.

of

- 26. Differential diagnosis of functional and organic diseases of the esophagus, stomach and duodenum in children.
- 27. Tactics of patient management in functional and organic diseases of the esophagus, stomach and duodenum in children. Dispensary supervision.
- 28. Differential diagnosis of peptic ulcer of the stomach and duodenum in children. Tactics of patient management. Prevention. Dispensary supervision.
- 29. Differential diagnosis of complications of peptic ulcer disease in children. Emergency care at complications of peptic ulcer disease of stomach and duodenum in children.
 - 30. Differential diagnosis

of functional and organic intestinal diseases in children. Tactics of patient management.

- 31. Differential diagnosis of primary (disaccharide deficiency, exudative enteropathy, celiac disease, cystic fibrosis) and secondary (chronic enteritis, enterocolitis) malabsorption syndrome in childr en. Tactics of patient management . Dispensary supervision.
- 32. Differential diagnosis of acute and chronic pancreatitis in children. Tactics of patient management . Prevention of acute and chronic pancreatitis in children. Dispensary supervision.
- 33. Differential diagnosis of diseases that are accompanied by exocrine insufficiency of pancreas in children.
- 34. Differential diagnosis of functional and organic diseases of the gall bladder and the sphincter of Oddi in children. Tactics of patient management . Prevention of functional and organic diseases of the gallbladder and sphincter of Oddi in children. Dispensary supervision.
- 35. Differential diagnosis of chronic hepatitis in children. Tactics of patient management. Prevention of chronic hepatitis and portal hypertension in children. Dispensary supervision.
 - 36. Emergency care for acute liver failure and complications of portal hypertension syndrome in children.
- 37. Differential diagnosis of the most common infectious and inflammatory diseases of the urinary system (urinary tract infections, urethritis, cystitis, pyelonephritis) in children. Tactics of patient management

Prevention. Dispensary supervision.

- 38. Differential diagnosis of complications of the most common infectious and inflammatory diseases of the urinary system (urinary tract infections, urethritis, cystitis, pyelonephritis) in children. Tactics of patient management.
- 39. Differential diagnosis of hereditary tubilopatiy (phosphate diabetes, Syndrome Debre- de Toni-Fanconi, renal diabetes insipidus, renal tubular acidosis) in children. Tactics of patient management . Dispensary supervision.
- 40. Differential diagnosis of dysmetabolic nephropathy in children. Tactics of patient management . Dispensary supervision.
- 41. Principles of treatment of chronic renal failure in children. Dispensary supervision.
 - 42. Emergency care at acute retention of urine.
 - 43. Differential diagnosis

of acute and chronic glomerulonephritis, interstitial and hereditary nephritis in children.

Tactics of patient management. Dispensary supervision.

- 44. Emergency care for acute renal failure in children.
- 45. The procedure for conducting mandatory preventive examinations of a child under three years of age. Assessment of physical and psycho-motor development of a child under three years.
 - 46. Rational feeding and nutrition of a child under three years of age.
- 47. Doctor's tactics at physical and neuro-mental disorders in children's first three years of life.
- 48. Differential diagnosis and prevention of the most common deficiency conditions (chronic eating disorders, rickets, deficiency anemia, hypovitaminosis) in young children. Tactics of patient management. Dispensary supervision.
- 49. Specific prevention of infectious diseases in children. National calendar of preventive vaccinations.

- 50. Differential diagnosis of jaundice in newborns. Tactics of management of newborns with manifestations of jaundice at the outpatient stage.
- 51. Differential diagnosis of perinatal CNS lesions in infants. Tactics of management of children with perinatal CNS lesions at the outpatient stage .
- 52. Strategy of integrated management of childhood diseases and its purpose. General signs of danger of the child's condition.
- 53. Assessment, classification, treatment, consultation and subsequent observation of children with cough, complicated breathing, diarrhea, problems with the ear, pain in the throat, fever, malnutrition and anemia, in the presence of HIV in age from 2 months to 5 years.
- 54. Assessment, classification, treatment, consultation and subsequent observation of children under the age of 2 months with jaundice, diarrhea, feeding problems and low weight of the body and a local bacterial infection.
- 55. The order and timing of mandatory preventive medical examinations of children of adolescent age.
- 56. Evaluation of physical development and sexual maturation of adolescent age. Prevention
- of obesity in adolescents. Medical and psychological counseling.
- 57. Clinical variants of autonomic dysfunction in children. Doctor's tactics at autonomic

dysfunction and arterial hypertension in children. Prevention of autonomic dysfunction and arterial hypertension in children.

- 58. Differential diagnosis of primary and secondary arterial hypertension in adolescents .
 - 59. Providing emergency care during autonomic crises, hypertensive crisis.
- 60. Cough: the main types and causes of cough. Differential diagnosis of diseases, the leading symptom of which is cough.
 - 61. Drugs, which are used in the treatment of children with cough.
 - 62. Differential diagnosis
- of abdominal pain in children. Tactics of patient management . Indications for consultatio n with a pediatric surgeon.
- 63. Paleness in children. Differential diagnosis and treatment of diseases and conditions that are accompanied by pallor in children. Indications for consultation with a pediatric hematologist.
 - 64. Emergency care for acute bleeding.
- 65. Lymphadenopathy in children. Differential diagnosis. Doctor's tactics . Indication s for consultation with a pediatric hematologist.
 - 66. Differential diagnosis and treatment of

diseases and conditions that are accompanied by hepatomegaly and splenomegaly in children.

- 67. Fever in children. Differential diagnosis of diseases that are accompanied by fever in children. Tactics of patient management .
- 68. Indications for the appointment of antipyretics in pediatrics. Emergency care for febrile seizures.

BLOCK 2. Children's infectious diseases

- 1. Measles. Clinical picture of typical and atypical forms. Complication. Differential diagnosis. Treatment. Prevention.
- 2. Rubella. Differential diagnosis of acquired and congenital rubella. Treatment. Prevention.
- 3. Chicken pox. Clinical picture of typical and atypical forms of chickenpox . Iromplication. Differential diagnosis. Treatment, prevention.

- 4. Herpes
- Zoster. Diagnosis. Differential diagnosis. Treatment. Prevention.
 - 5. Herpetic infections (herpes
- simple). Clinical forms. Differential diagnosis. Treatment. Prevention.
- 6. Scarlet fever. Clinical picture of typical and atypical forms. Complication. Differential diagnosis. Treatment. Prevention.
- 7. Sore throats in children. Etiological features depending on age. Clinical picture. Diagnosis. Differential diagnosis. Treatment. Tactics of keeping patients with sore throats at home.
 - 8. Pseudotuberculosis. Differential diagnosis. Treatment, prevention.
- 9. Diphtheria. Clinical forms. Complication. Differential diagnosis. Treatment. Prevention of diphtheria.
- 10. Diphtherial laryngotracheitis. Clinic. Differential diagnosis of genuine and genuine cereals. Emergency care.
 - 11. Infectious mononucleosis. Differential diagnosis. Treatment. Prevention.
 - 12. Pertussis. Clinical
- picture. Complication. Differential diagnosis. Treatment Prevention.
- 13. Apnea form of whooping cough. Clinical and pathogenetic features. Emergency care for apnea.
- 14. Mumps infection. The clinical picture of various forms of epidemic mumps (mumps, submaksylit, sublinhvit, pancreatitis, orchitis, meningitis and others.). Differential diagnosis. Treatment. Prevention.
- 15. Meningococcal infection. Clinical forms. Features of the course in children of the 1st year of life. Differential diagnosis of meningococcemia. Treatment. Prevention.
 - 16. Infectious and toxic shock in meningococcemia. Diagnosis. Emergency care.
- 17. Bacterial and viral meningitis in children. Clinical features depending on the age of the child. Differential diagnosis. Treatment. Prevention.
- 18. Encephalitis in children. Etiological structure. Clinical features. Laboratory and instrumental diagnostics. Differential diagnosis. Treatment. Prevention.
- 19. Edema-swelling of the brain in meningitis and encephalitis in children. Diagnosis. Emergency care.
 - 20. Poliomyelitis. Clinical forms. Differential diagnosis. Treatment. Prevention.
 - 21. Enterovirus infection. Clinical forms. Differential diagnosis. Treatment. Prevention.

of

of

- 22. Shigellosis in children. Features the course in different age groups. Differential diagnosis. Treatment. Prevention.
- 23. Salmonellosis in children. Features
- the course in different age groups. Differential diagnosis. Treatment. Prevention.
- 24. Escherichia coli infection in children. Clinical features in children of different age groups depending on the pathogen. Differential diagnosis. Treatment. Prevention.
- 25. Acute intestinal infections in newborns. Etiological structure. Clinical features. Differenti al diagnosis. Treatment. Prevention.
- 26. Intestinal yersiniosis . Features of the course in children of different ages. Differential diagnosis. Treatment. Prevention.
 - 27. Rotavirus infection. Differential diagnosis. Treatment. Prevention.
 - 28. Toxico-exicosis in acute intestinal infections. Etiological structure.
- Clinical and laboratory diagnostics. Emergency care.
- 29. Neurotoxicosis in acute intestinal infections. Etiological structure. Clinical and laboratory diagnostics. Emergency care.
 - 30. Viral hepatitis A. Differential diagnosis. Treatment. Prevention.

- 31. Viral hepatitis B. Features of the course in young children. Differential diagnosis Treatment. Prevention.
- 32. Features of diagnosis and course of viral hepatitis C, D, E and others in children. Differential diagnosis. Treatment. Prevention.
- 33. Acute liver failure in viral hepatitis in children. Clinical and laboratory diagnostics. Emergency care.
- 34. Influenza. Clinical course. Features in children early age. Complication. Differential d iagnosis. Treatment. Prevention. Emergency care for hyperthermic and convulsive syndrome.
- 35. Pandemic Influenza. Features of epidemiology and clinic at the present stage. Complication. Differential diagnosis. Treatment. Prevention.
 - 36. Parainfluenza. Features
- of clinical manifestations. Differential diagnosis. Treatment. Prevention.
- 37. Acute stenotic laryngotracheitis (ASLT) in ARVI in children. Diagnosis. Differential diagnosis. Emergency care.
- 38. Respiratory syncytial infections in children. Features of clinical manifestations. Differential diagnosis. Treatment, prevention.
 - 39. Adenovirus infection. Features course in children early age. Differential diagnosis. Treatment. Prevention.
- 40. HIV / AIDS in children. Clinical picture. Diagnosis. Differential diagnosis. Treatment. Prevention.
- 41. TORCH infections: toxoplasmosis, rubella, cytomegalovirus infection, herpes infection. Clinical manifestations of congenital and acquired forms depending on the route and timing of infection. Laboratory diagnosis of acute, reactivated and latent forms. Principles of treatment and prevention.
- 42. Immunoprophylaxis of children's infectious diseases. Organization of preventive vaccinations for children. Contraindications to vaccination. Post-vaccination reactions and complications, their diagnosis and treatment.
 - 43. Anaphylactic shock during vaccination. Diagnosis, emergency care.

"0" version of the exam ticket for the 4-th year Petro Mohyla Black Sea National University

Educational qualification level - master Field of knowledge: 22 Health care specialty 222 Medicine

Academic discipline - **PEDIATRICS**

Option № 0

- 1. Functional dyspepsia in young children: etiology, pathogenesis, classification, clinic, diagnosis, treatment, prevention. **maximum number of points 20**
- 2. Hypervitaminosis D. Etiology, pathogenesis, clinic, diagnosis, prevention, treatment, emergency care for acute hypervitaminosis D, prognosis. **maximum number of points** 20
 - 3. Recurrent bronchitis in children. Definition, etiology, pathogenesis, clinic, diagnosis, treatment and prevention. **maximum number of points 20**
 - 4. Acute and chronic pancreatitis in children. Etiology, pathogenesis, clinic, diagnosis, treatment, prevention, prognosis. **maximum number of points 20**

Approved at the meeting of the Department of "Medical Biology and Chemistry Biochemistry, Microbiology, Physiology, Pathophysiology and Pharmacology", the protocol №from "" 2021.			
Head of the department prof. 3aκM.Ю.			
Examiner OV	Associate Professor B.Sc. Chernyshov		

Example of final control work for the 4-th year Solving problems KROK-2

- **1. The** child is 4 months old. Develops normally. Objectively: the right border of relative cardiac dullness is on the right parasternal line, the top the second edge, the left on 2 cm outside from a midclavicular line. How to interpret the results?
- A. Cardiomyopathy
- **B.** Age norm
- C. Pulmonary hypertension
- D. Congenital heart disease
- E. Hypertrophy, carditis
- **2.** At the girl of 9 months at objective inspection are noted: pallor of integuments, emergence of cyanosis during restlessness. Percussion: expansion of the heart in the transverse direction. Auscultatory: to the left of the sternum in 3-4 intercostal spaces a long systolic murmur is heard, which is carried out over the whole area of the heart and on the back. What congenital heart disease can be suspected in a child?
- **A.** Pulmonary artery stenosis
- B. Fallot's tetrad
- C. Interventricular septal defect
- **D.** Atrial septal defect
- E. Coarctation of the aorta
- **3.** In a 1-month-old boy with symptoms of agitation, the circumference of the head is 37 cm, the size of a large umbilicus 2x2 cm. The child vomits after feeding small portions of milk; stools are normal in composition and volume. Muscle tone is normal. Which diagnosis is most likely?
- **A.** Pylorostenosis
- **B.** Meningitis
- C. Pylorospasm
- **D.** Microcephaly
- E. Craniostenosis
- **4. The** child is 7 months old. Body weight at birth 3450 g. Is on natural feeding. Feeding was introduced in a timely manner. Determine this child's daily protein needs:
- **A.** $2.0 \, \text{g} / \text{kg}$
- **B.** 4.0 g / kg
- C. 3.5 g / kg
- **D.** 3.0 g / kg
- **E.** 2.5 g / kg

- **5.** A 13-year-old girl complains of a rise in body temperature to 37.4 °C during the last 2 months after SARS. Objectively: thin, diffuse enlargement of the thyroid gland of the II degree, its density on palpation, exophthalmos, tachycardia. What pathological syndrome occurs in the patient?
- A. Hypothyroidism
- **B.** Thyrotoxicosis
- C. Hypoparathyroidism
- **D.** Thymomegaly
- E. Hyperparathyroidism
- **6.** After a conversation with the mother of a seven-month-old boy who is breastfed, the pediatrician found out that the child is fed 7 times a day. How many feedings are set for a child of this age?
- A. 7 times
- **B.** 6 times
- C. 3 times
- **D.** 4 times
- **E.** 5 times

And so 20 problems with the subsequent analysis of typical errors.

"0" version of the exam ticket for the 5-th year Petro Mohyla Black Sea National University

Educational qualification level - master Field of knowledge: 22 Health care specialty 222 Medicine

Academic discipline - **PEDIATRICS**

Option № 0

- **1.** Principles of breastfeeding of premature babies. The choice of feeding method depending on the gestational age and condition of the child. **maximum number of points 20.**
- **2.** Adenovirus infection. Ways of transmission. Features of the course in young children. Treatment. Prevention. **maximum number of points 20.**
- 3. Determination of blood groups and Rh factor in children the maximum number of points 20.
 - 4. General analysis of cerebrospinal fluid the maximum number of points 20.

Approved at the meeting of the Department	
of "therapeutic and surgical disciplines", the protocol № from	n
" " 2021	

Head of the Department, Doctor of Medicine, Prof. Zack M.Yu.

Examiner Associate Professor

Iakovenko NO

Solving problems Krok-2

- 1. In a baby with blood group A (II) Rh positive, born from the first pregnancy, the mother's blood group 0 (I) Rh negative, on the first day there was jaundice. The level of bilirubin in umbilical cord blood is 60 μ mol / 1, for 2 days 290 μ mol / 1 due to the indirect fraction. Hb 100 g / l, erythrocytes 2.8 T / l. Diagnosed with hemolytic disease of the newborn. Choose treatment tactics ?
 - A Replacement transfusion of erythrocyte mass 0 (I) Rh positive and plasma AB (IV)
 - **B** Blood transfusion A (II) Rh positive
 - C Replacement blood transfusion of group A (II) Rh positive
 - **D** Phototherapy
 - *E* Detoxification therapy
- 2. The child on the 10th day of life increased jaundice, increased intoxication, weight loss . Pregnancy and influenza at 6-7 weeks. Jaundice with a greenish tinge, hepatolienal syndrome, dilation of the venous network on the abdominal wall. Urine is dark, stools are acholic. Total bilirubin -180 μ mol / l, direct-160 μ mol / l, AST, ALT normal, Hb -180 $\,$ g / l, er.-4,5 $\,$ T / l. Specify the genesis of jaundice?
 - A Mechanical
 - **B** Conjugation
 - C Parenchymal
 - **D** Hemolytic
 - **E** Mixed
- 3. The newborn on the 8th day of life appeared intoxication, exsiccosis, hyperthermia, changes in the skin of the torso and extremities in the form of flaccid blisters, cracks, wetting. The skin resembles boiled water. In the blood test leukocytosis, shift to the left, accelerated ESR. During the time of pregnancy in mothers was pyoderma, exacerbation of chronic sinusitis. Your probable diagnosis?
 - A Ritter's exfoliative dermatitis
 - **B** Pseudofurunculosis
 - *C* Phlegmon of the newborn
 - **D** Vesicles of the newborn
 - E Vesiculopustulosis
- 4. After days of life newborn hospitalized with symptoms of intoxication complicated "dry wheezing" nasal breath hepatolienal type syndrome, neurological disorders, vesicular rash on the trunk, palms, soles at infiltrated background, who left after pulling copper-red surface. What infection can be suspected?
 - A Syphilis
 - **B** Rubella
 - C Toxoplasmosis
 - **D** Cytomegalovirus infection
 - **E** Herpes infection
- 5. The newborn from the first pregnancy, weighing 3500 g from the first day, jaundice, lethargy, decreased reflexes. Objectively: yellowing of the skin of the II century. with a saffron shade, liver + 2 cm, spleen +1 cm. Urine and feces -

yellow. In the analysis of blood: Hb - 100 g / l, er. -3.2 T / l, lake.- 18.7 G / l, blood of mother 0 (I) Rh neg., Blood of child A (II) Rh pos. Bilirubin - 170 μ mol / l, the fraction is indirect. The level of ALT, AST - to normal. What

the disease is likely in a child?

- A Hemolytic disease of the newborn, AB0-conflict
- **B** Intrauterine hepatitis
- C Hemolytic disease of the newborn, Rh-conflict
- **D** Atresia of the biliary tract
- E Physiological jaundice
- 6. A newborn child born at 35 weeks weighing 2300 g, with an Apgar score of 6-8 points, at the age of 7 days showed signs of active encephalitis. It is known that the mother during pregnancy was determined by a high titer of anticytomegalovirus antibodies and its increase in dynamics. Specific treatment was performed. What results of the child's examination are more likely to confirm the suspicion of acute cytomegalovirus encephalitis?
 - A Diagnostic titer of specific IgM antibodies + positive polymerase chain reaction.
 - **B** High titer
- of specific IgG antibodies + positive polymerase chain reaction.
 - C Enhancement of all Ig classes
 - **D** Sufficiently detected increase in antibodies in the mother
 - ${\it E}$ Detection of petrifications and cysts on the neurosonogram .
- 7. In a newborn baby on the mucous membrane of the mouth (cheeks, tongue, palate, gums) there are multiple dot-like plaques resembling semolina or cheese, then merge to form white films of various sizes and shapes, which are easily removed with a tampon, leaving a red shiny mucous shell. What diagnosis can be made?
 - **A** Candidal stomatitis
 - **B** Aphthous stomatitis
 - C Red flat herpes
 - **D** Bubbles
 - *E* Herpes of the mucous membranes

"0" version of the exam ticket for the 6-th year Petro Mohyla Black Sea National University

Educational qualification level - master Field of knowledge: 22 Health care specialty 222 Medicine

Academic discipline - **PEDIATRICS**

Option № 0

- 1. Differential diagnosis of bronchial obstruction syndrome in children of different ages. Tactics of patient management . maximum number of points 20.
- 2. Emergency care for acute renal failure in children. maximum number of points- 20.
- **3.** Neurotoxicosis in acute intestinal infections. Etiological structure. Clinical laboratory diagnostics. Emergency care. **maximum number of points 20.**
- **4.** HIV / AIDS in children. Clinical picture. Diagnosis. Differential diagnosis. Treatment. Prevention. **maximum number of points 20.**

Approved at the meeting of the Department
of "therapeutic and surgical disciplines", the protocol № from
" " 2021.

Head of the Department, Doctor of Medicine, Prof. Zack M.Yu.

Examiner Associate Professor

Iakovenko NO

An example of final control work Solving tests from KROK-2

1. The baby is full-term, from the first pregnancy. Mother is 32 years old. Indicators for Apgar score at birth is low. During the week, the child's condition remained serious. Discharged from the hospital on the 20th day of life. He was not observed by doctors because his mother went to visit relatives in the village. At the time of inspection child 6 months, is on breastfeeding gets 2 rykormy juices. He watches the object, does not sit, has a pronounced hypertonicity of the flexor muscles of the arms and legs with a tendency to cross the legs, causes palmar-mouth, search reflexes and Robinson's reflex . Indicate what corresponds to the age norm?

is it related?

- A Weak expression of the lymph node capsule
- **B** Deep occurrence of lymph nodes
- ${\it C}$ Good development of subcutaneous tissue in the places of accumulation of lymph nodes
 - **D** Influence of physiological muscular hypertension
 - E Absence of lymph nodes at this age
- 2. The child is 3 days old. The skin is yellowish. The child is lethargic, does not respond to external contractors. Hyperthermia to 38.3. BH 72 per minute A Sucking reflex
 - **B** Palmoral reflex.
 - C Search reflex.
 - **D** Robinson's reflex .
 - E Hypertonia of the flexor muscles of the arms and legs.
- 3. In a newborn baby, the left arm is extended in all joints, lies along the torso, prone in the forearm. Active movements in the elbow joint are absent, in the shoulder joint preserved. The brush is flattened, atrophied cold to the touch, passively hangs. Grasping and palmar-oral reflexes on the patient's side are absent. Make a plausible diagnosis.
 - A Lower distal type of obstetric paresis (Degerin-Klumpke)
 - **B** Congenital polio
 - C Upper proximal type of obstetric paresis (Erba-Duchenne)
 - **D** Total type of obstetric paresis
 - E Congenital hemihypoplasia
- 4. The pediatrician assesses the physical development of a full-term 17-day-old child, who at birth had a body weight of 3400 g and a length of 52 cm. The doctor believes that the child is developed according to age. What weight gain is most likely to be the basis for such a conclusion?

A 200 g

B 100 g **C** 150 g **D** 50 g **E** 300 g

- 5. When examining a newborn baby, the doctor could not palpate his peripheral lymph nodes. From what most likely Auscultation in the lower parts of the lungs krepituyuchi wheezing. Heart rate 178. The liver is enlarged to 5 cm, the spleen up to 3 cm. Prescribe treatment tactics for the newborn
 - A Antibacterial, infusion therapy, respiratory support.
 - **B** Antibacterial, immunocorrective therapy
 - C Antibacterial, glucocorticoid, post-syndrome therapy
 - **D** Antibiotics, plasma transfusion
 - E Antibiotics, blood transfusions, vitamin therapy
- 6. Newborn baby from 3 pregnancies, 1 birth At birth, the skin is pink. Hemoglobin of blood 100 g/l, erythrocytes 3,6x10 $^{\tiny 12}/$ l. Blood bilirubin from the umbilical vein 60 μ mol/. The blood group of the mother O (I) is rhesus negative, the child O (I), rhesus is positive. Coombs' reaction is positive. What type of jaundice is at the heart of the state. Determine the tactics of treatment.
 - A Hemolytic
 - **B** Parenchymal
 - C Mechanical
 - **D** Syndrome thickening of bile
 - **E** Atresia of the biliary tract.
 - 7. The child was born with a weight of 4.5 kg. At the time of childbirth weakness of labor activity and its stimulation. In the analysis of blood erythrocytes 6.2×10^{12} / l, hemoglobin 160 g / l, hematocrit 0.59. After 6 hours, erythrocytes 3.2×10^{12} / l, hemoglobin 100 g / l, hematocrit 0.64. When examining BH 56 per minute., Heart rate 175 beats per minute. A / T 34/16, average 18 mm Hg. Determine the tactics of treatment.
 - A Blood transfusion, hemostatic therapy
 - **B** Blood transfusion, proteolysis inhibitors
 - C Vikasol, fresh frozen plasma.
 - **D** Refortan, heparin.
 - E Glucocorticoids, dry plasma.
- 8. At the newborn of 3 days with a respiratory distress syndrome deterioration of a condition is observed: lethargy, suppression of reflexes, diffuse cyanosis, swelling of nostrils, tachypnea 90 per minute, depression of the lower half

thoracic cage on inspiration, expressive refraction mechepodibnoho process, distant expir atory wheezing. In the analysis of acid-base balance and gas composition of blood: RaO2 - 45 mm Hg, PaCO2 - 70 mm Hg, pH - 7.1. Choose the most optimal method of respiratory therapy.

- \boldsymbol{A} Forced artificial ventilation of the regime of continuous positive pressure in the respiratory tract
 - **B** Auxiliary hardware lung ventilation
 - C oxygen therapy through a face mask
 - **D** SDPPT by Gregory

6. Evaluation criteria and tools for diagnosing learning outcomes for the students of 4th year

Control methods

- Survey (testing of theoretical knowledge and practical skills).
- Test control.

Current control. Testing in practical classes of theoretical knowledge and mastery of practical skills, as well as the results of independent work of students. Supervised by teachers according to the specific purpose of the curriculum. Assessment of the level of students' preparation is carried out by: interviewing students, solving and analyzing situational tasks and test tasks, interpreting the results of clinical-instrumental and clinical-laboratory research, monitoring the acquisition of practical skills. Current control is carried out at each practical lesson in accordance with the specific objectives of each topic.

Intermediate control. Checking the possibility of students using for clinical and diagnostic analysis of theoretical knowledge and practical skills on all topics studied, as well as the results of independent work of students. Carried out in the last lesson on the topic by passing practical skills, solving situational problems and testing.

The final control work (RCC) is carried out upon completion of the study of all topics of each block in the last, control, lesson. To the PKR students which visited all the prescribed curriculum lectures, lecture classes, completed fully independent work in the learning process gained score not less than the minimum - in the first block of 70 points in the second - 40 (see. lower)

In order to assess the results of training in pediatrics, the **final control** is conducted **in the form of an exam, which is recommended for academic disciplines, which is part of the integrated test exams EDKI and "Step-2".** Students who have both PKRs are admitted to the exam.

Evaluation of educational activities

When assessing the educational activities of students, preference is given to standardized methods of control: testing, structured written work, solving situational problems, structured by the procedure of control of practical skills in conditions close to real ones.

During the assessment of mastering each topic for the current activity of the student, grades are set on a multi-point (200-point) scale of the university, which corresponds to the ECTS scale, taking into account the approved assessment criteria for the discipline. This takes into account all types of work provided by the curriculum. The student has the right to receive a grade on each topic. The forms of assessment of learning activities includes an tion control of theoretical and practical training.

Distribution of points received by students

In the first block, the maximum number of points for the current educational activities of the student - 120. Accordingly, in the first block, the maximum score for each topic is: 120 points: 7 topics = 17 points.

The minimum score for each topic is: 70 points: 7 topics = 10 points. A score below 10 points means "unsatisfactory", the topic is not credited and must be worked out in the prescribed manner.

For PKR № 1 a student can get a maximum of **80 points.** PKR is considered credited if the student received at least **50 points.**

The second block of the maximum number of points for current educational activity of student is 80. And the story I disease as necessarily as indi a robot and considered and assessed as a separate topic classes. Accordingly, in the second block, the maximum score for each topic is: 80 points: 1 8 topics = 9 points, and writing a speech history - 8 points.

The minimum score for each topic is 40 points: 12 topics = 3.3 points.

For PKR № 2 a student can get a maximum of **40 points.** PKR is considered credited if the student received at least **30 points.**

At the exam, a student can get a maximum of **80 points.** The exam is considered passed if the student has scored at least **50 points.** Distribution of points on the exam - see above in the example of the exam ticket.

Assessment of student performance

Block 1 (content of the evaluated activity)	Maximum number of points
Block 1	_
Section 1	
Topic 1. Rickets. Hypervitaminosis "D". Protein and energy deficiency in	17
children	
Topic 2. Functional gastrointestinal disorders of young children	17
Section 2	
Topic 3. Acute respiratory infections of the upper respiratory tract in children	17
Topic 4. Acute bronchitis in children	17
Topic 5. Pneumonia in children	17
Section 3	11
Topic 6. Atopic dermatitis and allergic rhinitis in children. Urticaria in children	17
Topic 7. Bronchial asthma in children	17
Together	120
Final control work № 1	80
Together for block 1	200
Block 2	
Section 4	
Topic 8. The most common congenital heart defects in children	9
Topic 9. Inflammatory and non-inflammatory heart disease in	9
children Cardiac arrhythmias and conduction in children	
Topic 10. Hypertension in children	9
Topic 11. Acute rheumatic fever in children	9
Topic 12. Systemic connective tissue diseases in children	9
Topic 13. Reactive arthropathy, juvenile rheumatoid arthritis	9
Section 5	
Topic 14. Functional and organic diseases of the esophagus and stomach in older children Functional and organic diseases of the intestines and biliary system in children	9
Section 6	
Topic 15. Urinary tract infections in children Glomerulonephritis in	9
children. Chronic renal failure in children	

history	
Together	80
Final control work № 2	40
Together for block 2	120
Final control (exam)	80
THE AMOUNT OF POINTS PER BLOCK	200

Evaluation criteria

Students' knowledge is assessed from both theoretical and practical training according to the following criteria:

16-17 points per topic in the first block, 9 points per topic in the second block, 71-80 points on the RCC № 1, 38-40 points on the RCC № 2 and 71-80 points on the exam ("excellent" on the national scale, And on the ECTS scale) - the student correctly answered 90-100% of the tests of the Step-2 format. Correctly, clearly logically and fully answers all standardized questions of the current topic, including questions of a lecture course and independent work, or an exam ticket. Closely connects theory with practice and correctly performs practical work with writing a conclusion on the results. Freely reads the results of laboratory tests, solves situational problems of increased complexity, is able to summarize the material, has the methods of laboratory tests to the required extent.

13 -1 5 points for the topic in the first block, 7-8 points for the topic in the second block, 61-70 points for PKR № 1, 35-37 points for PKR № 2 and 61-70 points for the exam ("good" for national scale, B and C on the ECTS scale) - the student correctly answered 70-89% of the Step-2 tests. Correctly and essentially answers the standardized questions of the current topic, lecture course and independent work or exam ticket. Demonstrates performance (knowledge) of practical skills. Correctly uses theoretical knowledge in solving practical problems. Is able to solve easy and medium situational problems. Has the necessary practical skills and techniques to perform them in excess of the required minimum.

10-12 points on the subject in the first block, 5-7 points on the subject in the second block, 50-60 points on PKR number 1, 30-34 PKR points to number 2 and 50-60 score on the exam ("fair" for national scale, D and E on the ECTS scale) the student correctly answered 50-69% of the tests of the Step-2 format. Incomplete, with the help of additional questions, answers standardized questions of current activity, lecture course and independent work or exam ticket. Not can independently build a clear, logical answer. During the answer and demonstration of practical skills, the student makes mistakes. The student solves only the easiest problems, has only a mandatory minimum of research methods.

Less than 10 points on the subject in the first block, 5 score and on the subject in the second block, 50 points on PKR number 1, 30 points on PKR number 2 and 50 points on the exam ("unsatisfactory" on the national scale, Fx and F on a scale ECTS) - the student correctly answered less than 50% of the tests of the Step-2 format. Does not know the material of the current topic or questions of the exam ticket, can not build a logical answer, does not answer additional questions, does not understand the content of the material. Makes significant, gross mistakes when answering and demonstrating practical skills .

Criteria for assessing medical history

Assessment of medical history as a mandatory individual work of the student, occurs during its defense in the process of individual work of the teacher with the student.

Score of 8 points ("excellent" on a national scale, and on the ECTS scale) is given if the student conducted a complete clinical examination of a sick child, described its results, correctly assessed the patient's clinical condition, clinical changes in organs and systems, laboratory and instrumental results. methods of examination, correctly determined the clinical diagnosis according to the classification of diseases and substantiated it, made a full differential diagnosis, prescribed complete and correct treatment, correctly determined the prognosis of the disease and means of its prevention.

A score of 7 ("good" on the national scale, B and C on the ECTS scale) is given if the student has conducted a complete clinical examination of a sick child, but made inaccuracies in assessing the clinical condition, laboratory and instrumental methods of examination, correctly determined the clinical diagnosis and justified his, did not make a full differential diagnosis, prescribed the right treatment, but not in full or with minor errors.

Score of 6 points ("satisfactory" on the national scale, D and E on the ECTS scale) is given if the student made some mistakes in assessing the clinical condition of the patient, the results of clinical, laboratory and instrumental examination, diagnosis and justification, treatment or prognosis.

A score of less than 5 points ("unsatisfactory" on the national scale, Fx and F on the ECTS scale) is given if the student has made significant errors in the analysis of clinical condition, results of clinical, laboratory and instrumental examination of a sick child, failed diagnosis, treatment.

The work is considered completed if the student receives a positive assessment in writing and defending a medical history.

6. Evaluation criteria and tools for diagnosing learning outcomes for the students of 5-th year

Control methods

- Survey (testing of theoretical knowledge and practical skills).
- Test control.

Current control. Testing in practical classes of theoretical knowledge and the acquisition of practical skills, as well as the results of independent work of students. Supervised by teachers according to the specific purpose of the curriculum. Assessment of the level of students' training carried out by: interviewing students, solving is and analyzing situational tasks and test tasks, interpreting the results of clinicalinstrumental and clinical-laboratory research, monitoring the acquisition of practical skills. Current control is carried out at each practical lesson in accordance with the specific objectives of each topic.

Intermediate control. Checking the possibility of using students for clinical and diagnostic analysis of theoretical knowledge and practical skills on all topics studied, as well as the results of independent work of students. Carried out in the last lesson on the topic by passing practical skills, solving situational problems and testing.

The final control work (FCW) is carried out upon completion of the study of all topics of each block in the last, control, lesson. To the FCW allowed students who visited all prescribed curriculum lectures, classroom training sessions, completed fully independent work and during training gained score not less than the minimum - in the first block of 70 points in the second - 40 (see. lower)

In order to assess the results of training in pediatrics, the **final control** is conducted **in the form of an exam, which is recommended for academic disciplines, which is part of the integrated test exams EDKI and "KROK-2".** Students who passed both FCW are admitted to the exam .

Evaluation of educational activities

When evaluating educational activities of students given preference standardized methods of control: testing, structured written work, solving situational tasks structured by the procedure control of practical skills in conditions that are close to reality.

At the time of evaluation mastering each topic on the current activities of the student exhibited estimates for multimark (200-point) scale university, which corresponds to the scale of ECTS with regard approved criteria for assessment for the relevant discipline. When this takes into account all kinds of work, provided the training program. The student has the right to receive a grade on each topic. Forms of assessment of educational activities include control of theoretical and practical training.

Distribution points are getting students

In the first block, the maximum number of points for the current educational activities of the student - 120. Accordingly, in the first block, the maximum score for each topic is: 120 points: 15 topics = 8 points. The minimum score for the first block is: 70 points: 15 topics = 6.7 points. A score below 6.7 points means "unsatisfactory", the topic is not credited and must be worked out in the prescribed manner.

For FCW N_2 1 a student can get a maximum of **80 points. FCW** is considered to be passed if the student has received no less than **50 points.**

In the second block, the maximum number of points for the current educational activities of the student is **80.** The history of the disease, as a mandatory individual work, is considered and evaluated as an independent topic of the lesson. Accordingly, in the second block, the maximum score for each topic is: 80 points: 10 topics = 8 points. The minimum score for each topic is 40 points : 10 topics = 4 points.

For FCW $Noldsymbol{0}$ 2 a student can get a maximum of **40 points. FCW** is considered to be passed if the student has received no less than **30 points.**

At the exam, a student can get a maximum of **80 points.** The exam is considered passed if the student has scored at least **50 points.** Distribution of points on the exam - see above in the example of the exam ticket.

Assessment of student performance

rispessment of statent performance			
Nº	Topics	Maximum number of points	
	BLOCK 1. Neonatology, diseases of the blood system and endocrine system in children		
1.	Organization of neonatal care in Ukraine. Medical care for a healthy newborn baby.	8	
2.	Preterm children. Children with intrauterine delay development.	8	
3.	Asphyxia of newborns. Childbirth trauma newborns.	8	
4.	Respiratory distress syndrome of newborns.	8	
	Neonatal pneumonia .		

5.	Hemolytic disease of newborns. Hemorrhagic disease	8
6.	newborns. Intrauterine infections of the newborn (TORCH - infections)	8
7.	infections). Bacterial infections of newborns.	8
8.	Anemia in children (deficient, posthemorrhagic, hemolytic, due to a violation of hematopoiesis).	8
9.	Leukemias and lymphomas in children.	8
10.	Hemorrhagic diseases in children.	8
11.	Diabetes mellitus in children.	8
12.	Diseases of the thyroid gland in children.	8
13.	Diseases of the hypothalamic- pituitary system and genital glands in children.	8
14.	Obesity in children.	8
15.	Individual work (medical history).	8
	Together	120
	Final control work № 1	80
	Total for block № 1	200
	BLOCK 2. Children's infectious dis	eases
1.	Measles, rubella, chicken pox, herpes zoster	8
2.	Scarlet fever, pseudotuberculosis	8
3.	Diphtheria, infectious mononucleosis	8
4.	Pertussis, mumps infection	8
5.	Meningococcal infection	8
6.	Polio, enterovirus infection	8
7.	ARVI	8
8.	Acute intestinal infections	8
9.	Viral hepatitis	8
10.	Individual work (medical history)	8
	Together	80
	Final control work № 2	40
	Total for block № 2	120
	Total for block № 2 Exam	120 80

Evaluation criteria

Students' knowledge is assessed from both theoretical and practical training according to the following criteria:

8 points for the topic in the first and second blocks, 71-80 points for FCW № 1, 38-40 points for FCW № 2 and 71-80 points for the exam ("excellent" on the national scale, A on the ECTS scale) - the student correctly answered 90-100% of KROK-2 format tests. Right, logically and clearly meets all the standardized question current topics, including on the issues of the lecture course and individual work, or test ticket. Closely connects theory with practice and correctly performs practical work with writing

a conclusion on the results. Freely reads the results of laboratory tests, solves situational problems of increased complexity, is able to summarize the material, has the methods of laboratory tests to the required extent.

6-7 points per topic in the first and second blocks, 61-70 points on the FCW № 1, 35-37 points on the FCW № 2 and 61-70 points on the exam ("good" on the national scale, B and C on the ECTS scale) - the student correctly answered 70-89% of the KROK-2 tests. Correctly and essentially answers the standardized questions of the current topic, lecture course and independent work or exam ticket. Demonstrates performance (knowledge) of practical skills. Correctly uses theoretical knowledge in solving practical problems. Is able to solve easy and medium situational problems. Has the necessary practical skills and techniques to perform them in excess of the required minimum.

4.7-5 points per topic in the first block, 4-5 points per topic in the second block, 50-60 points on the FCW № 1, 30-34 points on the FCW № 2 and 50-60 points on the exam ("satisfactory" on the national scale, D and E on the ECTS scale) - the student correctly answered 50-69 % of the tests of the KROK-2 format. Incomplete, with the help of additional questions, answers standardized questions of current activity, lecture course and independent work or exam ticket. Cannot build a clear, logical answer on their own. During the answer and demonstration of practical skills, the student makes mistakes. The student solves only the easiest problems, has only a mandatory minimum of research methods.

Less than 4.7 points per topic in the first block, 4 points per topic in the second block, 50 points on the FCW № 1, 30 points on the FCW № 2 and 50 points on the exam ("unsatisfactory" on the national scale, Fx and F on the scale ECTS) - the student correctly answered less than 50% of the tests of the KROK-2 format. Does not know the material of the current topic or questions of the exam ticket, can not build a logical answer, does not answer additional questions, does not understand the content of the material. Makes significant, gross mistakes when answering and demonstrating practical skills.

Criteria for assessing of Case history

Assessment of medical history as a mandatory individual work of the student, occurs during its defense in the process of individual work of the teacher with the student.

Score of 8 points ("excellent" on a national scale, and on the ECTS scale) is given if the student conducted a complete clinical examination of a sick child, described its results, correctly assessed the patient's clinical condition, clinical changes in organs and systems, laboratory and instrumental results. methods of examination, correctly determined the clinical diagnosis according to the classification of diseases and substantiated it, made a full differential diagnosis, prescribed complete and correct treatment, correctly determined the prognosis of the disease and means of its prevention.

Score 6-7 points ("good" on a national scale, B and C on a scale ECTS) is given if the student has conducted a complete clinical examination of a sick child, but made inaccuracies in assessing the clinical condition, laboratory and instrumental methods of examination, correctly determined the clinical diagnosis and justified his, did not make a full differential diagnosis, prescribed the right treatment, but not in full or with minor errors.

A score of 4.7-5 points in the first block and 4-5 points in the second block ("satisfactory" on the national scale, D and E on the ECTS scale) is given if the student made some mistakes in assessing the clinical condition of the patient, the results of clinical, laboratory and instrumental examination, diagnosis and justification, treatment or prognosis.

A score of less than 4.7 points in the first block and less than 4 of the second block ("unsatisfactory" on the national scale, Fx and F on a scale ECTS) is given if the student

has made significant errors in the analysis of clinical condition, results of clinical, laboratory and instrumental examination of a sick child, failed diagnosis, treatment.

The work is considered completed if the student receives a positive assessment in writing and defending a medical history.

6. Evaluation criteria and tools for diagnosing learning outcomes

fot the students of 6-th year

Control methods

- Survey (testing of theoretical knowledge and practical skills).
- Test control.
 - Writing a review of scientific literature (abstracts), performing individual tasks.

Current control. Testing in practical classes of theoretical knowledge and the acquisition of practical skills, as well as the results of independent work of students. Supervised by teachers according to the specific purpose of the curriculum. Assessment of the level of student training is carried out by: interviewing students, solving and analyzing situational tasks and test tasks, interpreting the results of experimental and clinical and laboratory research, monitoring the acquisition of practical skills.

Intermediate control. Checking the possibility of using by students of clinical and diagnostic analysis of theoretical knowledge and practical skills on all topics studied, as well as the results of independent work of students. Carried out in the last lesson by section by passing practical skills, solving situational problems and testing.

The final control is carried out upon completion of the study of all topics of the module at the last control lesson of the semester. Includes theoretical and practical parts.

In order to establish the results of training in pediatrics with pediatric infectious diseases is also a **final control in the form of a test.**

To the FCW allowed students who attended all the provided tutorial lectures, lecture classes, completed fully independent work and in the process of learning gained number of points not less than the minimum - 60 points in the fall semester and 40 points in the spring semester.

Distribution points are getting students

In the autumn semester, a positive assessment in each practical session can be from 3 to 6 points. A score below 3 points means "unsatisfactory", the lesson is not credited and is subject to rework in the prescribed manner. At the final control of block 1, the student can get a maximum of 80 points. Control is passed, if the student scored no less than 50 points.

In the spring semester, a positive assessment in a practical session can be from 4 to 8 points. Evaluation below 4 point s means "unsatisfactory" classes are not counted and must be working out in due course. At the final control work of block 2, the student can get a maximum of 40 points. The control work is considered passed if the student has scored at least 30 points.

On the credit, a student can get a maximum of 80 points. The Credit is considered passed if the student received at least 50 points.

Assessment of student performance

Type of activity (task)	Maximum number of points		
BLO	BLOCK 1		
Topics of practical classes from 1to 20	6 points for each topic		
Total for 20 topics	120		
Final control work № 1	80		
Together for block 1	200		
BLOCK 2			
Topics of	8 points for each of the topics		
practical classes from 1 to 10			
Only for 10 topics	80		
Final control work№ 2	40		
Together for block 2	120		
Credit	80		
Together for block 2 and credit	200		

Evaluation criteria

Students' knowledge is assessed from both theoretical and practical training according to the following criteria:

- 5,5-6 points in the fall semester (7-8 points in the spring semester) 71-80 points in the final control in the fall semester (38-40 points in the spring semester) and 71-80 points on the standings (A for scale ECTS and 5 on a national scale)- the student correctly answered 90-100% of KROK-2 format tests. Right, logically and clearly meets all the standardized question current topics, including on the issues of the lecture course and individual work, or test ticket. Closely connects theory with practical correctly performs work with writing a conclusion on the results. Freely reads the results of laboratory tests, solves situational problems of increased complexity, is able to summarize the material, has the methods of laboratory tests to the required extent.
- 4-5,5 points in the autumn semester (5.5-7 points in the spring semester), 61-70 points in the final control in the autumn semester (35-37 points in the spring semester) and 61-70 points in the test (B and C scale ECTS and 4 on a national scale) -the student correctly answered 70-89% of the KROK-2 tests. Correctly and essentially answers the standardized questions of the current topic, lecture course and independent work or exam ticket. Demonstrates performance (knowledge) of practical skills. Correctly uses theoretical knowledge in solving practical problems. Is able to solve easy and medium situational problems. Has the necessary practical skills and techniques to perform them in excess of the required minimum.
 - 3-4 points in the autumn semester (4 5.5 points in the spring semester), 50-60 points in the final control in the autumn semester (30-34 points in the spring semester) and 50-60 points in the test (D and E scale ECTS and 3 on a national scale) the student correctly answered 50-69 % of the tests of the KROK-2 format. Incomplete, with the help of additional questions, answers standardized questions of current activity, lecture course and independent work or exam ticket. Cannot build a clear, logical answer on their own. During the answer and demonstration of practical skills, the student makes mistakes. The student solves only the easiest problems, has only a mandatory minimum of research methods.

Less than 3 points on the subject in the first block, 4 ball matches on the subject in the second block, 50 points on PKR number 1, 30 points on PKR number two and 50 points in the standings ("unsatisfactory" on the national scale, Fx and F on a scale ECTS) - the student correctly answered less than 50% of the tests of the KROK-2 format. Does not know the material of the current topic or questions of the exam ticket, can not build a logical answer, does not answer additional questions, does not understand the content of the material. Makes significant, gross mistakes when answering and demonstrating practical skills.

7. Recommended literature

Basic

- 1. Maidannik VG Pediatrics. Textbook (2nd edition, corrected and supplemented). Kharkiv: Folio, 2002. 1125 c.
- **2.** Pediatrics. Textbook for students of higher medical educational institutions of the IV level of accreditation / Ed. prof. O.B. Severe / Ed. the second. Vinnytsia: Nova Kniga, 2008. 1096 p.
- **3.** Pediatrics: a national textbook: in 2 volumes / Ed. prof. Berezhnogo VV Kyiv, 2013. 1040 p.
- **4.** Neonatology: a national textbook: in 2 volumes / Ed. prof. Ye. Shunko. -K., 2014.-Vol.1.960p.
- **5.** Infectious diseases in children: a textbook / S.O. Крамарьов, О.Б. Nadraga, L.V. Pipa and others.; for order. S.O. Крамарьова, О.Б. Dear. 2nd ed., Edited. K .: VSV "Medicine". 2016. 392 p. + 14 s. color. incl
- **6.** Nelson textbook 21 th Edition by Robert Kliegman; Bonita Stanton; Joseph W St Gem e, III; Nina Felice Schor; Richard E Behrman. Publisher: Elsevier, 2020

Additional

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- 2. Aryaev ML, Volosovets AP, Kotova NV, Starikova AA, Kononenko NA Pulmonology of children's age Kiev: Health, 2004.-608p.
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- 4. Belozerov Yu.M. Detskaya Cardiology. M .: Medpress-inform. 2004. 600p.
- 5. Vozianov AF, Maidannik VG, Bidny VG, Bagdasarova IV Fundamentals of Nephrology childish vozrasta.- K .: Book Plus, 2002.- 348 p.
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- 8. Volosovets OP, Krivopustov SP, Nagornaya NV, sang. Tasks in bioethics and medical deontology for pediatricians-Donetsk: Donbass, 2004. 84 p.
- 9. Volosovets AP, Nagornaya NV, Krivopustov SP, Ostropolets SS, Bordyugova OV Diagnosis, therapy and prevention of deficient anemias in children Donetsk: SPD Dmitrenko LR, 2007. 38 p.
- 10. Volosovets OP, Savvo VM, Krivopustov SP Selected issues of pediatric cardiorheumatology H .: "TNC", 2006 256 p.
- 11. Volosovets AP, Yulish EI Rational antibiotic therapy of respiratory diseases in children-Donetsk: Regina, 2005.-389p.

- 12. Lasitsa OI, Lasitsa TS, Nedelskaya SM Allergology of childhood. К .: Книга Плюс, 2004. 368 с.
- 13. Maidannik VG Rickets in children: Modern aspects Nizhyn: Ltd. Aspect-Polygraph Publishing House, 2006.- 116 p.
- 14. Maidannik VG Glomerular kidney diseases in children.- K .: Knowledge of Ukraine, 2002.- 228 p.
- 15. Maidannik VG Tubulointerstitial diseases of the kidneys in children.- K .: Knowledge of Ukraine, 2002.- 156 p.
- 16. Maidannik VG Clinical guidelines for the diagnosis and treatment of acute pneumonia in children. Kyiv: Knowledge of Ukraine, 2002.- 106 p.
- 17. Maidannik VG Modern macrolides (Pharmacodynamics, pharmacokinetics and clinical application) .- K .: Pharm Art, 2002.- 296 p.
- 18. Maidannik VG, Maidannik IV Directory sovremennыh lekarstvennыh sredstv.- M .: AST; Kharkiv: Folio, 2005.-1024 р.
- 19. Maidannik VG, Mitin Yu.V. Diagnosis, treatment and prevention
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- 20. Markevich VE, Maidannik VG, Pavlyuk PO etc. Morphofunctional and biochemical parameters in children and adults.- Kyiv-Sumy: McDen, 2002.- 268 p.
- 21. Moskalenko VF, Volosovets OP, Yavorivsky OP, Bulakh IE, Ostapyk LI, Palienko IA, Mruga MR (ed.) Step 2. General medical training. Part 2. Pediatrics, obst etrics and gynecology, hygiene. -Kyiv: Nova Knyha Publ., 2005.-404p.
- 22. Orders of the Ministry of Health of Ukraine "On improving outpatient care for children in Ukraine", "On improving the organization of medical care for adolescents ", and protocols for specialties "pediatrics" and others. Ministry of Health of Ukraine. Kyiv, 2005 r. 414 p.
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- 24. Prokhorov EV, Volosovets OP, Geleskul LM, coauthors. Gastroenterology of childhood Ternopil: Ukrmedknyha, 2004. 160 p.
- 25. Situational problems in pediatrics / Ed. Corresponding Member Academy of Medical Sciences of Ukraine, prof. V.G. Maidannika.- K., 2006.- 204 p.
- 26. Test the task of Pediatrics / Under Ed. Corresponding Member Academy of Medical Sciences of Ukraine, prof. V.G. Maidannika.- K., 2007.-429 p.
- 27. Menynhytы in children / Y.V.Bohadelnykov, L.H.Horyshnyak, H.M.Kushnyr and etc .: Under Ed. prof. IV Bogadelnikov, MV Loboda.- Crimea-Pharm-Trading Publishing House: Simferopol Kyiv, 2002.—448
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- 31. Unified clinical protocols of medical care for children with diseases of the digestive system From January 29, 2013 № 59
- 32. В.Г. Maidannik, MV Хайтович, В.В. Korneychuk, Zabolevanyya esophagus, stomach and dvenadtsatyperstnoy intestine in detey-Kiev: UK "outpost-Note" 2008 432s

Information resources

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- 4. On approval of the protocols of care for children in "Children's Hematology" .- Order of the Ministry of Health of Ukraine 20.07.2005 N 364 10 sec. http://www.gov.lica.com.ua/b_text.php?base=1&id=564544&type=3
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- 29 p. http://ukraine.uapravo.net/data/base21/ukr21220.htm
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- 8. Order of the Ministry of Health of Ukraine 27.04.2006 N255 "On approval of the clinical protocol for neonatological care for children" Jaundice of newborns ". 34 p. http://ukraine.uapravo.net/data/base09/ukr09578.htm
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- 11. Order of the Ministry of Health №149 of 20.03.2008 "Clinical protocol of medical care for a healthy child under 3 years of age" http://ukraine.uapravo.net/data2008/base09/ukr09572/index.htm
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http://www.uapravo.net/akty/postanowa-resolution/akt3dndi3a/index.htm

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- 15. Calendar of preventive vaccinations in Ukraine.- Order of the Ministry of Health of Ukraine №595 of September 16, 2011 (as amended by the order of the Ministry

- of Health of Ukraine of August 11, 2014 №551) <u>www.nmu.edu.ua</u> / kaf 34.php; https://www.moz. gov.ua/ua.
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- 17. Minutes of acute intestinal infections in children MOH Ukraine N 803 of 10.12.2007 on introducing changes to the order of the Ministry of Health of 09.07.04 N 354; On approval for diagnosis and treatment of Protocols of infectious diseases in children www.nmu.edu.ua / kaf 34.php; https: //www.moz. gov.ua/ua.
- 18. Adapted clinical guidelines based on evidence of influenza and acute respiratory infections www.nmu.edu.ua / kaf 34.php; https: //www.moz. gov.ua/ua.
- 19. unified clinical protocols of primary care for adults and children with acute respiratory infection approved by the Ministry of Health of Ukraine 16 July 2014 r. Number 499 www.mu.edu.ua / kaf 34.php; https://www.moz. gov.ua/ua.
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- 23. Unified clinical protocol of medical care for children with chronic viral hepatitis B. Order of the Ministry of Health №59 from 29.01.2013 www.nmu.edu.ua / kaf 34.php; https://www.moz.gov.ua/ua.
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