Annotation practices

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| Type of practice Form of practice | Industrial practiceSurgical practice |
| Methods and forms of implementationpractices | Stationary, on-site/ discreetly |
| Implementedcompetencies | PC-5, PC-6, PC-7, PC -11 |
| Results of mastering the practice | PC-5-1 Collects complaints, anamnesis of life and disease of the patient and a complete physical examination of the patient ( inspection, palpation, percussion, auscultation)PC-5-2Formulizes a preliminary diagnosis; creates a plan for laboratory and instrumental examinations of the patientPC-5-3. Refer the patient for laboratory and instrumental examination if there are medical indications in accordance with the current procedures for providing medical care, clinical recommendations (treatment protocols) on issues of providing medical care, taking into account the standards of medical carePC-5-4 H refers the patient for consultation with medical specialists if there are medical indications in accordance with the current procedures for the provision of medical care, clinical recommendations (treatment protocols) on issues of providing medical care, taking into account the standards of medical carePC-5-5 Refer the patient for specialized medical care in inpatient or day hospital conditions if there are medical indications in accordance with current procedures for providing medical care, clinical guidelines (treatment protocols ) on issues of providing medical care taking into account standards of medical carePC6-1Identifies the main pathological symptoms and syndromes, formulates a clinical diagnosis in accordance with ICD-XPC6-2 Conducts differential diagnostics with other diseases/conditions, including emergency onesPC6-3Establishes a diagnosis taking into account the current international Statistical Classification of Diseases and Related Health Problems (ICD)PC7-1 Conducts an examination of temporary disability as part of a medical commission that carries out an examination of temporary disabilityPC 7-2 O defines the signs of temporary disability and signs of persistent impairment of body functions caused by diseases, consequences of injuries or defects |

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|  | PC7-3 Prepares documentation when referring a patient for medical and social examinationPC7-4 Confirms biological death of a person, describes supravital reactions, early and late cadaveric phenomena/PC-11-1. Identifies conditions requiring emergency medical care, including clinical signs of sudden cessation of blood circulation and breathing.PC-11-2. Assesses the condition of a patient requiring emergency medical care, using the skills to recognize conditions that pose a threat to the patient's life, including clinical death (stoppage of vital functions of the human body (circulation and/or respiration) requiring emergency medical care.PC-11-3. Provides emergency medical care to patients in conditions that pose a threat to the patient's life, including clinical death (stoppage of vital functions of the human body (circulation and/or respiration), uses drugs and medical devices when providing emergency medical care |
| Labor intensity,c.u./hour​ | 5w.e.(31/3weeks,180 hours) |
| forms of reporting (includingsemesters) | Credit with assessment/8 semester |