

OÑTÚSTIK-QAZAQSTAN <b>MEDISINA</b> <b>AKADEMIASY</b> «Оңтүстік Қазақстан медицина академиясы» АҚ	 <b>SKMA</b> -1979-	SOUTH KAZAKHSTAN <b>MEDICAL</b> <b>ACADEMY</b> АО «Южно-Казахстанская медицинская академия»
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### **Control and measuring tools for the final assessment of learning outcomes on the discipline propedeutics of childhood diseases**

**Name of discipline:** «Propaedeutics of childhood diseases-1»

**Code of discipline:** PChD 3205-1

**Name of EP:** 6B10101 «General Medicine»

**Amount of training hours /credits:** 120h. (4 credits)

**Course and semester of study:** 3 course, V semester

**Control and measuring tools:** practical skills

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### List of practical skills in the discipline

Compiler:

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**Protokol № 11 of 23.06.2023y.**

Head of the Department, PhD



**K.S. Kemelbekov**

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**1. The list of practical skills in the discipline (must be compiled in accordance with the results of training, discipline program, forms of training)**

**Methods of examination of the child.**

1. Questioning of the patient and (or) his relatives – complaints, anamnesis of the disease and life.
2. Preparation of conclusions on subjective examination.
3. Drawing up genealogical tree.

**Physical development.**

1. Anthropometry - weighing, measuring growth, head circumference, chest, shoulder, hip, tibia.
2. Calculation of index weight and the growth index of fatness Chulisky, the index of proportionality Chulisky, index and timelines, conducting the Philippine test.
3. Evaluation of anthropometric results obtained by empirical formulas and calculation tables (Sigma, centile).
4. Assessment of sexual development.
5. Final conclusion on physical development

**Respiratory system.**

1. Features of anamnesis of a patient with diseases of the respiratory system.
2. Respiration rate.
3. Type of breathing.
4. The ratio pulse and number of breathing.
5. Elasticity, resistance of the chest.
6. Voice trembling.
7. Topographic percussion of the lungs.
8. Comparative lung percussion.
9. Direct percussion of the lungs.
10. The definition of mobility pulmonary edges.
11. Definition of character and sonority breathing.
12. Graphic representation of the nature of breathing.
13. Analysis of normal spiograms.
14. Detection of signs of respiratory failure.
15. Sign koranji, Arkadina, the Dombrowski, D, Espina, "bowl Filosofova".
16. Reading a chest x-ray.

**Cardiovascular system.**

1. Examination of the skin.
2. Palpation – symmetry, frequency, rhythm, filling, pulse voltage, pulse wave shape.
3. Localization, area, strength and height of the apical shock.
4. Percussion of borders of relative dullness right, left and top.
5. Auscultation of heart tones at classical points over the entire surface of the heart, extracardial.
6. Graphic representation of auscultative picture of the heart.
7. Assessment of normal ECG-comparison with the age of the child, identification of the main age features.
8. Measurement of blood pressure on the hands and feet and evaluation of its results.

**Skin, subcutaneous tissue, lymphatic apparatus.**

1. Skin inspection.
2. Determination of thickness, elasticity, humidity, temperature, purity of the skin.
3. Endothelial samples ("tourniquet", " pinch", "hammer").
4. Definition of dermatographism.

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5. Determination of the thickness of the subcutaneous fat layer, evaluation of its thickness on the tables (four points).
6. Determination of tissue turgor.
7. Definition of edema.
8. Palpation of peripheral lymph nodes and percussion of intrathoracic lymph nodes.
9. Examination of the pharyngeal ring of Pirogov-Waldeyer (Palatine, lingual, nasopharyngeal tonsils).
10. Examination of the mucous membranes of the mouth and eyes

#### **Muscular and skeletal systems.**

1. Features of anamnesis in the defeat of the muscular and skeletal systems.
2. Determination of mass, tone, muscle strength.
3. Definition of craniotables.
4. Determining the size of the fontanelles, seams.
5. Determination of the forms of the thorax, Harrison's sulcus.
6. Identification of beads.
7. Definition of bracelets, strands of pearls.
8. Determination of limb curvature.
9. Definition of flat feet.
10. Determination of the state of the teeth.
11. Determination of age by the number of teeth.
12. The shape, mobility and size of the joints.
13. Determination of curvature of the spine.
14. Terms of eruption of milk and permanent teeth.

#### **Digestive system.**

1. General examination, abdominal examination.
2. Superficial palpation, deep, sliding topographic palpation and by Obraztsova Strazhesko (Sigma, blind, transverse colon, ascending, descending, departments, liver, spleen, pancreas, mesenteric lymph nodes).
3. Percussion of the abdomen, determination of the boundaries of the stomach, liver, spleen and their measurement.
4. Auscultation of abdomen, with carrying out auscultation borders of the stomach.
5. Examination of the mouth.
6. The definition of pain points (Kera-Desjardins, Mayo-Robson, Boas, Openchowski).
7. Symptoms (Georgievsky - Musci, Ortner, Grekova).
8. Evaluation of fractional gastric probing, evaluation of fractional duodenal probing.
9. Coprogram.

#### **Urogenital system**

1. Palpation of the kidneys, bladder.
2. Percussion of the bladder.
3. Palpation of ureteral points.
4. Determination of peripheral edema, ascites, pseudo-ascites.
5. Assessment of urine analysis, kidney samples (in General, the Rehberg, orthostatic).
6. A symptom of beating.
7. Evaluation of biochemical blood tests.

#### **Hemopoietic system.**

1. Assessment of the skin, mucous membranes.
2. Conducting and evaluation of endothelial samples.

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3. Palpation of the liver, percussion determination of its boundaries, size by Kurlov.
4. Palpation of the spleen, percussion determination of its boundaries.
5. Inspection and palpation of joints, determination of their mobility.
6. Palpation and percussion of flat bones.
7. Evaluation of normal hemogram-comparison with the age of the child, the allocation of the main age features.
8. Evaluation of hemograms in somatic and hematological diseases.
9. Assessment coagulogram, myelogram.

### **Nervous system, neuropsychiatric development.**

1. Checking motor skills (holding the head, raising the trunk, turning (on its side, back, stomach), sitting, standing, walking, crawling, feeling, grasping).
2. Assessment of emotional status.(no emotions, negative emotions, positive emotions)
3. Assessment of speech development. (shouting, babbling, gurgling, pronouncing words, vocabulary)
4. Evaluation of visual-indicative reactions. (fixation of the gaze (short-term), movement of the eyes behind the object, recognition of the mother).
5. For children of the second year of life. (development of speech comprehension (SC), development of active speech (AS), sensory development (S), development of games and actions with objects (O), development of movements (Dm) skills formation (S).
6. For children older than 2 years (1 half). (active speech (AS), play (P), constructive activity, sensory development (CA), movement development (Dm), skill formation (S)
7. For children older than 2 years (2 half year) (active speech (AS), play (P), constructive activity, sensory development (CA), movement (M), skills (S), inventive activity.

## **2. Guidelines OSCE/OSPE (if there is one exam for the discipline).**

### **Semester V**

#### **Comparative lung percussion in older children**

№	Criteria for assessing steps	Score in points			
		0,4	0,3	0,2	0,1-0
1.	Introduced himself to the patient, explained the purpose of the medical intervention, received his consent	0,4	0,3	0,2	0,1-0
2.	Conducted hand hygiene	0,4	0,3	0,2	0,1-0
3.	Asked the patient to undress to the waist and stand facing	0,4	0,3	0,2	0,1-0
4.	Conducted a comparative percussion of the lungs on the front surface of the chest on symmetrical sections	0,4	0,3	0,2	0,1-0
5.	Offered the patient to raise his hands and put palms on his head. To carry out a comparative percussion of the lungs on the lateral parts of the chest along the mid-axillary line on the symmetrical sections	0,4	0,3	0,2	0,1-0
6.	Offered the patient to turn back and cross arms over his chest. Perform a comparative percussion of the lungs along the posterior surface of the chest on symmetrical sections.	0,4	0,3	0,2	0,1-0
7.	Asked the patient to get dressed	0,4	0,3	0,2	0,1-0
8.	Evaluated the result of comparative percussion of the lungs	0,4	0,3	0,2	0,1-0

	and informed the patient				
9.	Conducted hand hygiene	0,4	0,3	0,2	0,1-0
10	Made the right conclusion.	0,4	0,3	0,2	0,1-0

### Auscultation of the lungs and the definition of voice tremor in children

№	Criteria for assessing steps	Score in points			
1.	Introduced himself to the patient, explained the purpose of the medical intervention, received his consent	0,4	0,3	0,2	0,1-0
2.	Conducted hand hygiene	0,4	0,3	0,2	0,1-0
3.	The child undressed to the waist	0,4	0,3	0,2	0,1-0
4.	Listened to the symmetrical parts of both lungs. Listened to the pathological murmur: Listened to the heart area	0,4	0,3	0,2	0,1-0
5.	Listened to the axillary region	0,4	0,3	0,2	0,1-0
6.	Listened to the paravertebral region	0,4	0,3	0,2	0,1-0
7.	Listened to the subscapular region	0,4	0,3	0,2	0,1-0
8.	Checked the voice trembling from the front side of the chest (asked the child to repeat words containing a large number of vowels and the sound "ra").	0,4	0,3	0,2	0,1-0
9.	Checked the back of the chest (asked the child to repeat the words containing a large number of sound and the sound "ra").	0,4	0,3	0,2	0,1-0
10.	Made the right conclusion.	0,4	0,3	0,2	0,1-0

### Auscultation of the heart in children

№	Criteria for assessing steps	Score in points			
1.	Introduced himself to the patient, explained the purpose of the medical intervention, received his consent	0,4	0,3	0,2	0,1-0
2.	Conducted hand hygiene	0,4	0,3	0,2	0,1-0
3.	The child undressed to the waist	0,4	0,3	0,2	0,1-0
4.	Defined the apex of the heart	0,4	0,3	0,2	0,1-0
5.	Put the phonendoscope on the apex of the heart (to determine the sound of the mitral valve)	0,4	0,3	0,2	0,1-0
6.	Put the phonendoscope in the second intercostal space to the right of the sternum (to determine the sound of the aortic valve)	0,4	0,3	0,2	0,1-0
7.	Put the phonendoscope in the second intercostal space to the left of the sternum (to determine the sound of the valve of the pulmonary trunk).	0,4	0,3	0,2	0,1-0
8.	Put the phonendoscope in the place of attachment the xiphoid process of the sternum (to listen to the sound tricuspid valve)	0,4	0,3	0,2	0,1-0
9.	Put the phonendoscope on the Botkin-Erb point (the place of attachment of the 3rd and 4th ribs to the sternum on the left) to listen for sound phenomena from the mitral and aortic valves.	0,4	0,3	0,2	0,1-0
10.	Made the right conclusion.	0,4	0,3	0,2	0,1-0

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### Methods of measuring the circumference of the chest, shoulder, hip in children

№	Criteria for assessing steps	Score in points			
		0,4	0,3	0,2	0
1.	Introduced himself to the patient, explained the purpose of the medical intervention, received his consent	0,4	0,3	0,2	0
2.	Conducted hand hygiene	0,4	0,3	0,2	0
3.	Processed a centimeter tape from two sides with a cloth moistened with disinfecting solution	0,4	0,3	0,2	0
4.	Measured while sitting or standing	0,4	0,3	0,2	0
5.	Put a centimeter tape on the chest on two landmarks: behind - the lower corners of the shoulder blades; front - lower edge near the nipple circles (in girls of pubertal age, the upper edge has 4 ribs, above the mammary glands)	0,4	0,3	0,2	0
6.	Defined the indicator and recorded the result	0,4	0,3	0,2	0
7.	Put a centimeter tape on the middle of the shoulder perpendicular to the humerus	0,4	0,3	0,2	0
8.	Defined the indicator and recorded the result.	0,4	0,3	0,2	0
9.	Put a centimeter tape on the thigh at the top of the femur perpendicular	0,4	0,3	0,2	0
10.	Made the right conclusion	0,4	0,3	0,2	0

### Conducting superficial palpation of the abdomen in children

№	Criteria for assessing steps	Score in points			
		0,4	0,3	0,2	0,1-0
1.	Introduced himself to the patient, explained the purpose of the medical intervention, received his consent	0,4	0,3	0,2	0,1-0
2.	Conducted hand hygiene	0,4	0,3	0,2	0,1-0
3.	Asked the patient (parent) to lie on the examination table and pick up clothes (free your belly), slightly bending your legs, put your hands along your body	0,4	0,3	0,2	0,1-0
4.	Sat on the chair to the right of the patient, asked him for the presence or absence of pain in the abdomen	0,4	0,3	0,2	0,1-0
5.	Palpated of the left iliac region and the right iliac region	0,4	0,3	0,2	0,1-0
6.	Palpated the left side area and the right side area	0,4	0,3	0,2	0,1-0
7.	Palpated in the left hypochondrium and right hypochondrium	0,4	0,3	0,2	0,1-0
8.	Palpated epigastric, paraumbilical, suprapubic areas	0,4	0,3	0,2	0,1-0
9.	Asked the patient (parent) to get dressed	0,4	0,3	0,2	0,1-0
10.	Made the right conclusion	0,4	0,3	0,2	0,1-0

### Methods of measuring the body weight of a child up to a year

№	Criteria for assessing steps	Score in points			
		0,5	0,3	0,2	0
1.	Introduced himself to the patient, explained the purpose of the medical intervention, received his consent	0,5	0,3	0,2	0
2.	Set the scales on level, stable surface.	0,5	0,3	0,2	0
3.	Plug in the power cord, pressed the network switch, waited until	0,5	0,4	0,2	0

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	the indicator is set to "0.000"				
4.	Conducted hand hygiene	0,5	0,4	0,2	0
5.	Holding the child's head, laid him on the platform	0,5	0,4	0,3	0
6.	Waited for the body mass value to be established on the digital indicator.	0,5	0,4	0,3	0
7.	Gently removed the child from the platform weights	0,5	0,4	0,3	0
8.	Made the right conclusion	0,5	0,4	0,3	0

### Measurement of the thickness, tone and turgor of the subcutaneous fat layer in children

№	Criteria for assessing steps	Score in points			
1.	Introduced himself to the patient, explained the purpose of the medical intervention, received his consent	0,4	0,3	0,2	0,1-0
2.	Conducted hand hygiene	0,4	0,3	0,2	0,1-0
3.	The child undressed	0,4	0,3	0,2	0,1-0
4.	The thumb and forefinger of the right hand grabbed the skin and subcutaneous fat in a crease in the region of the navel. Determined the recovery time of the skin fold unfolding (normally fast recovery of the skin fold unfolding). Determined the thickness of the subcutaneous fatty layer on the abdomen (at the level of the navel and outwards from it, in normal 1 year old child it is about 1.5 cm)	0,4	0,3	0,2	0,1-0
5.	The thumb and forefinger of the right hand grabbed the skin and subcutaneous fat in a crease in the region of the inner surface of the shoulder.	0,4	0,3	0,2	0,1-0
6.	The thumb and forefinger of the right hand grabbed the skin and subcutaneous fat in a crease in the region of the inner surface of the thigh. Determined the thickness of the subcutaneous fat layer on the extremities (on the inner surface of the thigh and shoulder) in a normal one-year-old child is about 15.8 mm	0,4	0,3	0,2	0,1-0
7.	The thumb and forefinger gently grabbed the soft tissue turgor. Appreciated turgor (turgor depends on the resistance of soft tissue).	0,4	0,3	0,2	0,1-0
8.	Determined the thickness of the subcutaneous fat layer at the edge of the sternum (normally it is about 12.0 mm) and on the back under the shoulder blades (normally it is about 12.0 mm)	0,4	0,3	0,2	0,1-0
9.	Asked parents to dress the child, and conducted hand hygiene	0,4	0,3	0,2	0,1-0
10.	Made the right conclusion.	0,4	0,3	0,2	0,1-0

### Determination of respiratory rate and chest resistance in children

№	Criteria for assessing steps	Score in points			
1.	Introduced himself to the patient, explained the purpose of the medical intervention, received his consent	0,4	0,3	0,2	0,1-0
2.	Conducted hand hygiene	0,4	0,3	0,2	0,1-0
3.	The child undressed to the waist	0,4	0,3	0,2	0,1-0

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4.	Brought the phonendoscope to the child's nose and counted the child's breathing rate for 1 minute.	0,4	0,3	0,2	0,1-0
5.	Put his hand on the child's chest and counted the child's breathing rate for 1 minute.	0,4	0,3	0,2	0,1-0
6.	If the child is restless, then, together with the pulse, the frequency of breathing should be considered an "eye" for 1 minute	0,4	0,3	0,2	0,1-0
7.	Determines chest resistance by direct compression from front to back.	0,4	0,3	0,2	0,1-0
8.	Determines chest resistance by direct compression from the sides.	0,4	0,3	0,2	0,1-0
9.	Conducted hand hygiene	0,4	0,3	0,2	0,1-0
10.	Made the right conclusion.	0,4	0,3	0,2	0,1-0

### Palpation of lymph nodes in children

№	Criteria for assessing steps	Score in points			
1.	Introduced himself to the patient, explained the purpose of the medical intervention, received his consent	0,4	0,3	0,2	0
2.	Conducted hand hygiene, the child undressed	0,4	0,3	0,2	0
3.	Palpated of the occipital lymph nodes	0,4	0,3	0,2	0
4.	Palpated of the parotid, submandibular, submental lymph nodes	0,4	0,3	0,2	0
5.	Palpated of the anterior and posterior of neck lymph nodes	0,4	0,3	0,2	0
6.	Palpated supra-, subclavian lymph nodes	0,4	0,3	0,2	0
7.	Palpated of axillary lymph nodes	0,4	0,3	0,2	0
8.	Palpated of the elbow lymph nodes	0,4	0,3	0,2	0
9.	Palpated of the inguinal and popliteal lymph nodes	0,4	0,3	0,2	0
10.	Conducted hand hygiene and made the correct conclusion	0,4	0,3	0,2	0

### The method of measuring the body length of the child standing

№	Criteria for assessing steps	Score in points			
1.	Introduced himself to the patient, explained the purpose of the medical intervention, received his consent	0,4	0,3	0,2	0,1-0
2.	Conducted hand hygiene	0,4	0,3	0,2	0,1-0
3.	Raised the rolling bar height meter	0,4	0,3	0,2	0,1-0
4.	Asked to take off the shoes and helped the child stand on the platform of the height meter	0,4	0,3	0,2	0,1-0
5.	Established 4 points of contact: heels, buttocks, interscapular region, nape	0,4	0,3	0,2	0,1-0
6.	Arrange the head so that the outer corner of the eye and the tragus of the ear are on the same horizontal line	0,4	0,3	0,2	0,1-0
7.	Lower the rolling bar of the height meter (without pressure) to the head of the child until it touches the apical point	0,4	0,3	0,2	0,1-0
8.	Determined the length of the body along the bottom edge of	0,4	0,3	0,2	0,1-0

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	the bar (on the right scale of divisions)				
9.	Conducted hand hygiene	0,4	0,3	0,2	0,1-0
10.	Made the right conclusion	0,4	0,3	0,2	0,1-0

### Palpation of the kidneys in children by the method of Obratsov-Strazhesko

№	Criteria for assessing steps	Score in points			
1.	Introduced himself to the patient, explained the purpose of the medical intervention, received his consent	0,5	0,3	0,2	0
2.	Conducted hand hygiene	0,5	0,3	0,2	0
3.	Asked the patient (parent) to cure on the back on the couch with legs slightly bent at the knee and hip joints.	0,5	0,4	0,2	0
4.	The palm of the left hand with closed and straight fingers imposed on the lumbar region on the right or the same 12 ribs. Right arm with closed and slightly bent fingers set under the costal arch outwards from the rectus abdominis muscle	0,5	0,4	0,2	0
5.	When inhaling, formed a skin fold with right hand.	0,5	0,4	0,3	0
6.	On the exhale, the right hand immersed in the abdominal cavity, moving closer to the left hand. The left hand, putting pressure on the lumbar region, lifted the kidney, lying on the lumbar region, to the right arm	0,5	0,4	0,3	0
7.	Conducted hand hygiene	0,5	0,4	0,3	0
8.	Made the right conclusion.	0,5	0,4	0,3	0

### Palpation and percussion of the bladder in children

№	Criteria for assessing steps	Score in points			
1.	Introduced himself to the patient, explained the purpose of the medical intervention, received his consent	0,5	0,3	0,2	0
2.	Conducted hand hygiene	0,5	0,3	0,2	0
3.	The child undressed to the waist, asked the patient (parent) to cure on the back on the couch with legs slightly bent at the knee and hip joints.	0,5	0,4	0,2	0
4.	The palm of the left hand with closed and straight fingers laid on the suprapubic area of the patient in the place of protrusion of the anterior abdominal wall, directing towards the navel	0,5	0,4	0,2	0
5.	The skin fold shifted in front of the fingers and on the exhalation made the palpation of the bladder	0,5	0,4	0,3	0
6.	Bladder percussion: the finger-plestimetr was setting in the transverse direction at the level of the navel so that the middle phalanx of the finger lay on the anterior median line and was perpendicular to it. Applying a quiet percussion beats, percussion spent on this line in the direction of the pubis	0,5	0,4	0,3	0
7.	Conducted hand hygiene	0,5	0,4	0,3	0
8.	Made the right conclusion.	0,5	0,4	0,3	0

### The method of measuring the length of the child's body up to a year

№	Criteria for assessing steps	Score in points			
1.	Introduced himself to the patient, explained the purpose of the medical intervention, received his consent	0,4	0,3	0,2	0,1-0
2.	Established a horizontal height meter on level, stable surface with a "to yourself" scale	0,4	0,3	0,2	0,1-0
3.	Maid a diaper (it should not close the scale and interfere with the movement of the moving bar)	0,4	0,3	0,2	0,1-0
4.	Put the child on the height meter head to the fixed bar	0,4	0,3	0,2	0,1-0
5.	The helper / mother keeps the head of the child in a horizontal position so that the upper edge of the ear trestle and the lower edge of the orbit are in the same plane perpendicular to the height plate. The parietal part of the head of the child is in close contact with the fixed vertical bar of the height meter, arms extended along the body	0,4	0,3	0,2	0,1-0
6.	Straightened the child's feet with a light pressure with his left hand on the child's knees.	0,4	0,3	0,2	0,1-0
7.	With right hand pushed the right-angled, moving bar of the height meter to the plantar side of the child's feet.	0,4	0,3	0,2	0,1-0
8.	Determined the length of the body on a scale of divisions	0,4	0,3	0,2	0,1-0
9.	Carefully removed the child with a height meter	0,4	0,3	0,2	0,1-0
10.	Made the right conclusion.	0,4	0,3	0,2	0,1-0

### Determining the boundaries of relative cardiac dullness in children

№	Criteria for assessing steps	Score in points			
1.	Introduced himself to the patient, explained the purpose of the medical intervention, received his consent	0,4	0,3	0,2	0,1-0
2.	Conducted hand hygiene	0,4	0,3	0,2	0,1-0
3.	The child undressed to the waist	0,4	0,3	0,2	0,1-0
4.	Inspected the chest and revealed changes.	0,4	0,3	0,2	0,1-0
5.	Defined the right border - at the beginning, arranged finger-plessimetr on the right in the II-III intercostal spaces parallel to the ribs, percussion above defined the lower border of the lungs.	0,4	0,3	0,2	0,1-0
6.	Having risen one intercostal space above, put the finger perpendicular to the ribs, conducted a percussion outside the inside, from a clear pulmonary sound to dullness.	0,4	0,3	0,2	0,1-0
7.	Determined the upper border -put the finger-plessimetr on the left in the I intercostal space parallel to the ribs in the midclavicular line in children of early age and in the parasternal line in children of older age.	0,4	0,3	0,2	0,1-0
8.	Determined the left border - at first, the localization of the apical impulse was determined by palpation, then the finger is drawn along this intercostal space to the anterior axillary line	0,4	0,3	0,2	0,1-0

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	and the percussion is performed along the same intercostal space.				
9.	The finger- plessimetr is located parallel to the desired boundary and lies on the skin with a lateral surface.	0,4	0,3	0,2	0,1-0
10.	Made the right conclusion.	0,4	0,3	0,2	0,1-0

### The method of measuring the child's body weight from a year old and older

№	Criteria for assessing steps	Score in points			
		0,5	0,3	0,2	0
1.	Introduced himself to the patient, explained the purpose of the medical intervention, received his consent	0,5	0,3	0,2	0
2.	Conducted hand hygiene	0,5	0,3	0,2	0
3.	I checked the installation of floor scales, the readings of the arrow to "0"	0,5	0,4	0,2	0
4.	Asked to take off the shoes and helped the child stand on the scales	0,5	0,4	0,2	0
5.	Determined body weight on the scale of divisions	0,5	0,4	0,3	0
6.	Helped the child to get off the scale	0,5	0,4	0,3	0
7.	Checked the installation of floor scales, the readings of the arrow to "0"	0,5	0,4	0,3	0
8.	Made the right conclusion	0,5	0,4	0,3	0

Control and measuring tools for the final assessment of knowledge and skills in the discipline are certified by the compiler and approved by the head of the Department