



ОҢТҮСТІК ҚАЗАҚСТАН MEDISINA AKADEMIASY «Оңтүстік Қазақстан медицина академиясы» АҚ	 SOUTH KAZAKHSTAN MEDICAL ACADEMY АО «Южно-Казахстанская медицинская академия»
«Introduction to the clinic»	044 – 75 / 11
GUIDE TO PRACTICAL CLASSES in the discipline "Introduction to the clinic"	Page 1 from 22

Methodological guidelines for practical classes

Name of the discipline:	Introduction to the clinic
Code of discipline:	IP-2216
Name of EP:	6B10117 «Stomatology»
Amount of study hours/credits:	90 h (3 credits)
Course and academic semester:	2 course III semester
Practical (seminars) lessons:	24 h.

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«Introduction to the clinic»	044 – 75 / 11	
GUIDE TO PRACTICAL CLASSES in the discipline "Introduction to the clinic"	Page 2 from 22	

Methodological recommendations for practical classes in the discipline of «Introduction to the clinic» were developed in accordance with the working curriculum (syllabus) and discussed at a meeting of the department

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Head of the Department, Candidate of Medical Sciences,
Acting Associate Professor.



A.R.Zhumadilova

**Lesson № 1.****1. Topic: Rules for the layout and distribution of medicines to patients.****2. Purpose: to teach students to the work of nurses at the post and the rules for the distribution of medicines in medical institutions and the types of administration of medicines.****3. Learning objectives:****The student should know:**

1. Mastering the safety of medicines of the A-B list.
2. Proper placement of medicines as they are used.
3. Fully comply with the rules for the distribution of medicines.
4. Master the rules of accounting and write-off of medicines.
5. Own the types and routes of administration of medicines.
6. Mastering the types of enteral administration of the drug.
7. Mastering oral medication.
8. Mastering the methods of sublingual medication.
9. Administration of medicines by inhalation.

The student should be able to:

1. Know the methods of enteral administration of the drug.
2. Formation of skills of administration of medicines.
3. Mastering the method of drug administration by ingestion.
4. Administration of drugs by the transbucal route.
5. Formation of skills of inhalation administration of medicines.

4. The main objectives of the topic:

1. Discussing the ways of enteral administration of the drug.
2. Mastering the techniques of oral administration of medicines.
3. Mastering the methods of administration of drugs by taking them.
4. Master the use of drugs in a transbucal way.
5. To master the rules of administration of medicines by inhalation.

5. The main types / methods / technologies of training to achieve the final results of studying the discipline. Teamwork. Oral interview. Discussion of situational tasks and test tasks.**6. Types of the control to assess the level of achievement of the final results of the study of the discipline:** evaluation of an oral question, situational report and test tasks and solving practical work.**7. Literature (basic and additional):** in the end of the manual**8. Control** (questions, tests, situational tasks, etc.).**Questions:**

1. Name the rules and features of the distribution of medicines in the departments.
2. Describe the ways of enteral administration of drugs.
3. Name the types and methods of administration of drugs used orally.
4. Give a description of the features of taking medicines.
5. Name the indications and contraindications for the use of medicines by inhalation.

Tests:

1. The method of application of the drug through gastrointestinal tract called:


- A. Parenteral
- B. Oral
- C. Enteral
- D. Sublingual
- E. Rectal

2. Time of the taking the medicine on an empty stomach:

- A. 20 – 60 minutes before breakfast



- B. After a light breakfast
 C. Before going to bed
 D. 30 minutes before lunch
 E. 30 minutes after lunch
- 3 . Medicine and decoctions... accepts.
 A. With a spoon
 B. With a glass
 C. With an ampoule
 D. In the form of a drop with a bottle
4. Medications from the list ... saves.
 A. In the safe
 B. In a black place
 C. In the window
 D. In the closet
 E. In the refrigerator
- 5 . To medicines from the list ... (narcotic and toxic substances).
 A. Zinc
 B. Prednisone
 C. Adrenaline
 D. Corvalol
 E. Novocaine
- 6 . To drugs from the list ... (potent substances).
 A. Adrenaline
 B. Zinc
 C. Caffeine
 D. Morphine
 E. Novocaine
- 7 . For solid medicines... concern.
 A. Capsules, tablets, pills
 B. Candles, oils
 C. Tincture, decoction
 D. Suppository
 E. Gel
8. The benefits of taking medications orally.:
 A. Easy and affordable
 B. Instant effect
 C. Does not pass through the hepatic barrier
 D. Completely absorbed
 E. Affects the pathological area itself
- 9 . Rectally ... is being introduced.
 A. Suppository
 B. Powder
 C. Aerosol
 B. Sediment
 E. Dragees
- 10 . In the journal of registration of narcotic drugs... it is necessary to show.
 A. Patient's full name, medical history no
 B. Purpose of drug administration
 C. Patient's diagnosis

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«Introduction to the clinic»	044 – 75 / 11	
GUIDE TO PRACTICAL CLASSES in the discipline "Introduction to the clinic"	Page 5 from 22	

D. Ward number

E. Method of administration of the drug

Situational task:

Task 1. After the examination, the therapist prescribed the appropriate medicine to the patient. He should take medications according to the scheme, several times a day. At the next outpatient appointment, the patient admitted that he had little medication, and he drank only half. It turned out that he takes the medicine at home only in the presence of one of his relatives. She says: "All of a sudden I feel bad after the reception. Eventually, an allergic reaction or other complications may occur."

The patient is on the sick list, alone in the apartment during the day, all relatives gather only in the evening. I took medication only at night, sometimes in the morning.

1. Indicate which needs of the patient have been violated.
2. Formulate the patient's problems.

Lesson № 2.

1. Theme: Enteral and external routes of administration of drugs. Parenteral routes of drug administration.

2. Purpose: to teach patients the correct use of sterilization measures and features in the process of administration and methods of injection.

3. Learning objectives:

The student should know:

1. Mastering the methods of intravenous injections to patients.
2. Master the specifics of manufacturing injection equipment.
3. Mastering the methods of determining contraindications to the action of drugs during intravenous injection.
4. Mastering the methods of intradermal injection.
5. Mastering the methods of subcutaneous injection.

The student should be able to:

1. Know the correct selection of the necessary equipment for injections and the specifics of its use.
2. To study the method of administration of drugs by enteral and parenteral routes.
3. Study of the features of intradermal injections to patients.
4. Methods of applying ointments externally.
5. Be able to identify complications caused by parenteral administration of drugs to patients.

4. The main objectives of the topic:

1. Discussion of all types of general injections.
2. Discuss the specifics of intravenous injections for patients.
3. Training in determining the sterility of injection tools.
4. To study the features of intravenous infusion.

5. The main types / methods / technologies of teaching to achieve the final results of teaching the subject. Group work. Oral interview. Discussion of situational tasks and test tasks.

6. Types of control to assess the level of achievement of the final results of subject-based learning: Evaluation of oral questions, situational reports and test tasks, solving practical work.

7. Literature (basic and additional): At the end of the manual

8. Control (questions, tests, cases, etc.).

Questions:

1. At how many degrees is an intravenous injection done?
2. At how many degrees is an intradermal injection done?
3. Describe the technique and features of intravenous injections.



4. What complications can occur during intravascular injection?.
5. How to make sure the integrity of the syringe?
6. How many degrees can I inject into a muscle?
7. What is a medical instruction?

Tests:

1. The method of administration of the drug bypassing the gastrointestinal tract:
 - A. parenteral
 - B. oral
 - C. enteral
 - D. sublingual
 - E. rectal
2. Advantages of parenteral administration:
 - A. the drug is easy to dose and quickly administered
 - B. simplicity of the method
 - C. complications are less common
 - D. convenient for the patient
 - E. the drug will have fewer side effects
3. The introduction of the drug into the cavity, vein, muscle is called
 - A. injection
 - B. prick
 - C. puncture
 - D. blockade
 - E. extraction
4. Fat embolism ... occurs when an injection is administered.
 - A. intravenously
 - B. subcutaneously
 - C. intramuscularly
 - D. inside the bone
 - E. inside the skin
5. The appearance of a bluish spot under the skin during venipuncture is a sign of ...
 - A. rupture of a vein
 - B. blockage of a vein
 - C. clogging of a needle
 - D. inflammation of veins
 - E. violation of the rules of asepsis, antiseptics
6. With the in of 10% calcium chloride, the patient has a feeling of heat... required
 - A. suppression of the rate of drug administration
 - B. increase in the rate of drug administration
 - C. stops infusion
 - D. appointment of antipyretic
 - E. appointment of antihistamine
7. The rate of intravenous administration of the drug... drops per minute.
 - A. 40 - 60
 - B. 10 – 20
 - C. 30 – 40
 - D. 60 – 80
 - E. 5 – 10
8. With the correct application of the tourniquet... determined.
 - A. pallor of the skin below the tourniquet

- B. redness of the skin below the tourniquet
 - C. pulse is not detected
 - D. Bruising on the skin below the tourniquet
 - E. skin anesthesia
- 9 . If 10% of calcium chloride gets under the skin ...
- A. stop injections, make a blockade of novocaine, put a warming compress
 - B. after stopping the administration of the medicine, the patient is taken to the ward
 - C. finds a vein and continues to administer the medicine
 - D. the patient rests and continues to administer the medicine
 - E. the medicine is administered and an analgesic is given
10. General cleaning in the vaccination room is carried out ...
- A. daily
 - B. 1 time a month
 - C. 1 time in 2 weeks
 - D. 2 times a week
 - E. 1 time a week

Situational task:

Task 1. When distributing medications, the nurse mixed vials with a similar appearance and gave the patient prednisone instead of Panangin.

Evaluate the nurse's actions.

Task 2. There are two nitroxoline tablets left in the bottle. The nurse transferred them to another bottle of nitroxoline.

Evaluate the nurse's actions.

Task 3 During the injection, the nurse found an unsigned ampoule in a package with gentamicin. The nurse's actions?

Lesson №3.

1. Theme: Principles of anesthesia in dentistry.

2. Purpose: To teach students the easy principles of local pain in dentistry.

3. Learning objectives:

The student should know:

1. Principles of anesthesia in dentistry.
2. The importance of local anesthesia in dentistry.
3. Classification of anesthetics in dentistry.
4. Review of local anesthesia preparations in dentistry.
5. Preparation for the use of local anesthesia in dentistry.

The student should be able to:

1. The effect of local anesthetics on the body.
2. Modern techniques of local anesthesia in dentistry.
3. The study of vasoconstrictors in dental anesthesia
4. General and local complications after local anesthesia.
5. General anesthesia of dentistry. Classification. Features.
6. Indications and contraindications.

4. The main objectives of the topic:

1. Principles of anesthesia in dentistry.
2. Modern techniques of local anesthesia in dentistry.
3. General anesthesia of dentistry. Classification. Features. Indications and contraindications.

5. The main types / methods / technologies of teaching to achieve the final results of teaching the subject. Group work. Oral interview. Discussion of situational tasks and test tasks.

6. Types of control to assess the level of achievement of the final results of subject-based learning: Evaluation of oral questions, situational reports and test tasks, solving practical work.

7. Literature (basic and additional): At the end of the manual

8. Control (questions, tests, cases, etc.).

Questions:

1. The study of vasoconstrictors in dental anesthesia
2. Preparation for the use of local anesthesia in dentistry.
3. General anesthesia of dentistry. Classification. Features. Indications and contraindications.
4. General and local complications after local anesthesia.
5. Review of local anesthesia preparations in dentistry.
6. Classification of anesthetics in dentistry.

Tests:

1. In a 30-year-old patient, when a 2% solution of novocaine was administered in an amount of 2 ml for conduction anesthesia, red spots appeared on the skin of the face, limbs and body, not rising from the surface of the skin, accompanied by itching. What is the complication of the patient:

- A) Urticaria
- B) Quincke's edema
- C) anaphylactic shock
- D) contact dermatitis
- E) Smile

2. A 46-year-old man underwent local conductive anesthesia with a 2% novocaine solution in order to remove the tooth. After 50 seconds, the patient has a feeling of fear, cold sticky sweat, bruises on the lips, white 60 mm. criticism. gr. , pupil dilated, not exposed to light, involuntary urination. Which of the following complications was observed in the patient?

- A) Collapse
- B) fainting
- C) diabetic coma
- D) anaphylactic shock
- E) hypertensive crisis

3. 45-year-old woman underwent local conductive anesthesia with a 2% novocaine solution in order to remove a tooth. After 50 seconds, the patient has a feeling of fear, cold sticky sweat, white 90 mm. criticism. gr. , rapid pulse, pale skin. Which of the following complications was observed in the patient?

- A) Collapse
- B) epileptic seizure
- C) diabetic coma
- D) anaphylactic shock
- E) hypertensive crisis

4. After anesthesia for tooth extraction, a 4.18-year-old patient developed swelling in the inguinal region on the right. The doctor removed 1.8 teeth. It was proposed to put a cold. After 5-6 days, a painful sensation appeared in the upper jaw area, which is transmitted by itself. Objectively: an hourglass symptom. The mouth opening is limited. The feeling of severe pain during palpation in the transitional fold of zone 1.7, 1.8. the tooth cell is in the epithelization stage. What diagnosis do you think is appropriate?

- A) lumbar hematoma after injection
- B) phlegmon of the samoiloid zone after injection
- C) abscess of the spontaneous area after injection
- D) odontogenic phlegmon of the semantic zone
- E) suppuration of lumbar hematoma after injection

5. The patient was diagnosed with chronic periodontitis in order to remove a tooth in the throat. A history of food allergies. What is the prevention of anaphylactic shock?

- A) examination of the patient
- B) sampling for anesthetics
- C) conducting anti-inflammatory therapy before teething
- D) conducting a course of physiotherapy before brushing your teeth
- E) conducting a general blood test

6. The patient came with a diagnosis of chronic periodontitis with the purpose of a tooth in the throat. In the anamnesis-drug allergy. What is the prevention of anaphylactic shock:

- A) conducting a course of physiotherapy before brushing your teeth
- B) examination of the patient
- C) conducting anti-inflammatory therapy before teething
- D) sampling for anesthetics
- E) conducting a general blood test

7. If anaphylactic shock is suspected in a patient on an anesthetic administered, the therapy should contain the following drugs:

- A) analeptics
- B) hormonal drugs
- C) antihistamines and analeptics
- D) antihistamines and hormonal drugs
- E) antihistamines and hormonal drugs and analeptics

Situational task:

A 15-year-old girl turned to a dentist with complaints about the destruction of her front teeth, pain when eating, soreness and bleeding of the teeth when brushing her teeth. The examination revealed: multiple carious cavities, abundant deposits of soft dental plaque, edema, hyperemia and bleeding gums.

Questions

1. Assign additional examination methods to clarify the diagnosis.
2. The presumed diagnosis. Name the specialists needed for complex treatment.

Lesson № 4.

1. Topic: Specific lesions of the oral mucosa. Fungal infections.

2. Purpose: Teach students to identify diseases of lesions of the oral mucosa and the state of fungal diseases

3. Learning objectives:

The student should know:

1. Inflammation of the oral mucosa.
2. What diseases occur with inflammation of the oral mucosa.
3. Clinical manifestations of inflammation of the oral mucosa.
4. Fungal infections.
5. The signs and diagnosis of fungal diseases.
6. Therapeutic care for fungal diseases.

The student should be able to:

1. Diseases of the oral cavity: types and methods of treatment.
2. Medical care for diseases of the oral cavity.
3. Preventive measures for ulcerative lesions.
4. Diagnosis of fungal diseases.

5. Medical care for fungal diseases.

4. About the main tasks of the topic:

1. Inflammation of the oral mucosa.
2. What diseases occur with inflammation of the oral mucosa.
3. Clinical manifestations of inflammation of the oral mucosa.
4. Preventive measures for ulcerative lesions.
5. The signs and diagnosis of fungal diseases.

5. The main types / methods / technologies of teaching to achieve the final results of teaching the subject. Group work. Oral questioning. Discussion of situational tasks and test tasks.

6. Types of control to assess the level of achievement of the final results of subject training:

Evaluation of oral questions, situational reports and test tasks, solving practical work.

7. Literature (basic and additional): At the end of the guide

8. Control (questions, tests, cases, etc.).

Questions:

1. What diseases are caused by inflammation of the oral mucosa?
2. Medical care for diseases of the oral cavity.
3. Preventive measures for ulcerative lesions
4. Symptoms of inflammation of the oral mucosa, clinical manifestations
5. The signs and diagnosis of fungal diseases.
6. Medical care for fungal diseases

Test:

1. Observe the oral cavity when caring for a seriously ill patient ... Not used.
 - A. Boric acid solution
 - B. Sodium bicarbonate solution
 - C. Penicillin solution
 - D. Iodine solution
 - E. Potassium permanganate
2. With the impact of stomatitis ... does not lie.
 - A. Gum tolerance
 - B. Use when eating
 - C. With luno separation
 - D. Elevated body temperature
 - E. Loose plaque
3. There are no subjective feelings. Thanks to the tongue, close to the root, along the midline there is an oval focus, devoid of tubercles, scarlet, the striking surface is limited to other parts. What disease is characterized by these changes
 - A. Candidosis
 - B. Leukoplakia
 - C. Atypical cheilitis
 - D. Toxemic flat iron
 - E. Rhomboid glossitis
4. And it will be used for inflammation of the oral mucosa:
 - A. Application
 - B. Steaming
 - C. Peeling
 - D. And ngalation
 - E. Toboiling
5. Muzhchina, age 45, complains of dry mouth, pain in speech and eating, wheezing and sensory disturbances. Such changes have not been observed before. Objectively: the back of the tongue is al-

pink, dry, shiny, thread-like folds are atrophied, scale is detected in the folds of the tongue. What disease in the clinical picture is similar to:

- A. Acute pseudomembranous candidiasis
- B. Toandidosis
- C. Chronic atrophic candidiasis
- D. Acute atrophic candidiasis
- E. Chronic hyperplastic candidiasis

6. In the case of a 28-year-old patient, complains of general weakness, soreness of the oral cavity and the appearance of a putrid odor. No comorbidities. Due to a strong cold snap for 3 days, painful sensations are tormented. On examination: the patient is pale, body temperature 38.2 ° C. In the oral cavity, near the retromolar region, a necrotic focus is found on a reddish background, swollen in two sips. The edge of the necrotic focus is uneven, gray-green color, when the scale is removed, a bleeding ulcer (uvula) forms under it. The bottom and edges of the wound are not dense. Oral hygiene is moderate. Make a presumptive diagnosis:

- A. Vincent's ulcerative-necrotic stomatitis
- B. Decubital ulcer
- C. Peptic ulcer disease
- D. Trophic ulcer
- E. Syphilis ulcers

A 7.6-month-old breastfed baby. The mother noticed that her daughter has recently been restless and refuses to breastfeed. Objectively: in the manifestation of redness of the mucous membranes of the lips and tongue there are whitish cheese plaques that are easily removed during the massacre. What pharmacological drugs to use:

- A. Toeratoplasty
- B. Antibacterial
- C. To orthosteroid
- D. Protifungal agent
- E. Antivirus

Situational task:

1- task. In a 7-year-old child, in the process of treating pneumonia with antibiotics, dryness and burning of the oral mucosa appeared, then a cheesy coating formed on the tongue. The mother cleaned off the plaque, but it reappeared. We asked for advice. On examination, hyperemia of the oral mucosa was revealed, white plaque on the tongue is not completely removed during scraping. Prescribe special examination methods.

Make a definitive diagnosis.

Specify the etiology of the disease.

2- Task. The child is 15 years old. Complaints of bleeding gums when brushing teeth, eating hard food. The gingival margin in the area of all teeth is swollen, hyperemic. There was an accumulation of plaque in the cervical region of the teeth.

Make a preliminary diagnosis.

What are the possible reasons for the development of this pathology in this patient.

What additional method of examination should be carried out and for what?

Lesson № 5.

1. Topic: Diagnosis and first aid for acute blockage of the upper respiratory tract and pulmonary edema. Diagnosis and first aid for respiratory diseases: bronchial asthma, acute and chronic respiratory failure.

2. Purpose: diagnostics of respiratory organs and provision of first aid, establishing contact with the patient, didactic assistance for shortness of breath.



3. Learning Objectives:

The student should know:

1. Organization of first aid in case of ingestion of a foreign body in the respiratory tract.
2. Provision of first aid for acute and chronic respiratory failure.
3. Know the types of help for bronchial asthma.
4. The ability to prepare the patient for instrumental research methods.
5. Study of methods for preparing a contrast agent and applying it to the patient.

The student should be able to:

1. Provision of first aid in emergency situations.
2. Know first aid for bronchial asthma.
3. Be able to perform an algorithm for providing care for acute respiratory failure.
4. Know the algorithm for setting an artificial tube for upper airway obstruction.
5. The possibility of using salbutamol in patients with chronic respiratory diseases.
6. Study of the advantages and disadvantages of connecting the patient to artificial respiration.
7. Be able to correctly assess the patient's vital signs on the monitor.

4. The main objectives of the topic:

1. Formation of a general idea of shortness of breath in students
2. Mastering the assessment of the patient's vital signs on the monitor.
3. Discussion of common respiratory diseases.
4. Study of types of first aid for bronchial asthma.
5. Properly conducting instrumental research, we learn to establish good relations with the patient and his loved ones.
6. Teachmonitoring in the patient.

5. The main types / methods / technologies of teaching to achieve the final results of teaching the subject. Group work. Oral questioning. Discussion of situational tasks and test tasks.

6. Types of control to assess the level of achievement of the final results of subject training: Evaluation of oral questions, situational reports and test tasks, solving practical work.

7. Literature (basic and additional): At the end of the guide

8. Control (questions, tests, situational tasks, etc.).

Questions:

1. Name the clinical manifestations of a patient with pulmonary edema.
2. What are the causes of pulmonary edema?
3. What is bronchial asthma?
4. Organization of first aid for bronchial obstruction.
5. What are the clinical manifestations of chronic lung disease?
6. Preparation of the patient for instrumental and laboratory tests.
7. How many types of contrast agent are used?
8. How is the patient monitored?

Test:

- 1 ... forced posture of a patient with lobar pneumonia.
 - A. Lie down on the sore side....
 - B. Lie down on the healthy side
 - C. Lying on your back
 - D. Lying on your back
 - E. Squats
2. Blue skin color -... Develops.
 - A. due to increased hemoglobin, which is restored in the blood....
 - B. Due to the increase in red blood cells and hemoglobin in the blood
 - C. Accelerated gas exchange in the body



- D. from stagnation of blood in peripheral vessels
 E. peripheral roots from the bundle
3. The main parameters of percussion sound:
 A. Tissue depth...
 B. Sound Duration
 C. Amplitude of tissue vibrations
 D. Sound power
 E. Body size
4. Meaning of the term open pulmonary percussion sound:
 A. in terms of volume ...
 B. by the duration of the sound
 C. in sound insulation
 D. in sound amplification
 E. Air Organ
5. The most common type of percussion:
 A. finger percussion...
 B. instrumental percussion
 C. Direct percussion
 D. Composite percussion
 E. indirect percussion
6. The main advantage of indirect auscultation:
 A. Ability to listen separately to the sound of a limited area.....
 B. Be comfortable
 C. according to hygiene rules
 D. Be uncomfortable
 E. Against hygiene rules
7. Expiratory dyspnea means...
 A. sudden difficulty exhaling from the inside....
 B. difficulty exhaling from the inside during physical exertion.
 C. wheezing audible from afar.
 D. difficulty breathing inside during physical exertion.
 E. sudden difficulty breathing from the inside.
8. Inspiratory dyspnea...
 A. sudden difficulty breathing from the inside....
 B. difficulty exhaling from the inside during physical exertion.
 C. wheezing audible from afar.
 D. sudden difficulty exhaling from the inside.
 E. difficulty breathing inside during physical exertion.
9. The cough develops...
 A. Pleural surfaces are irritated
 B. from irritation of the bronchi
 C. from alveolar irritation
 D. from irritation of the larynx
 E. from throat irritation
10. Symptom of "deep cleaning of the bronchi" ...
 A. with pulmonary emphysema
 B. with lung abscess
 C. with bronchiectasis
 D. in the decay stage of lung cancer

E. with cavernous tuberculosis

Situational task:

1- **task.** In the therapeutic department, a 42-year-old patient complains of a sudden attack of suffocation. The patient rests his hands on the edge of the bed, the chest cavity is in a state of maximum breathing, the face is cyanotic, expresses fear, CT-38 min. shortness of breath of an expiratory nature, dry hissing sounds are heard in the distance.

1. Determine the emergency situation that has developed in the patient.
2. Develop an emergency algorithm and justify each stage.

2- **task.** An inpatient diagnosed with bronchiectasis suddenly coughed up red blood mixed with air bubbles.

Objectively: the patient is pale, the pulse is frequent, weak filling, 110 beats / min, blood pressure 90/70 mm Hg. Art. St., means anxiety, fear of death.

1. Determine the emergency situation that has developed in the patient.
2. Develop an emergency algorithm and justify each stage.

Lesson № 6.

1. Topic: Diagnosis and first aid for diseases of the cardiovascular system: acute coronary and cardiovascular insufficiency, hypertensive crisis, angina attack.

2. Purpose: To form students' understanding of first aid and diagnostic measures for acute coronary and cardiovascular insufficiency.

3. Learning Objectives:

The student should know:

1. Mastering the theoretical foundations of the organization of the nursing process in medical institutions.
2. The ability to determine the causes of pain in the heart.
3. Be able to master the uses of contrast agent.
4. The possibility of preparing the patient for angiographic examinations.
5. Mastering important manipulations in medical and diagnostic measures prescribed by a doctor.
6. Mastering the organization of instrumental research methods.
7. Management of the patient on the ECG, study of the advantages of the technique.
8. Training in the stages of first aid in emergency situations.

The student should be able to:

1. Provision of first aid in emergency situations.
2. The study of ultrasound and the research algorithm.
3. Detection of diseases of the cardiovascular system.
4. Study of the anatomical location and diseases of the coronary arteries.
5. Standard placement of all ECG attachments.
6. We learn to determine the causes of pain in the heart.
7. Study of the uses of contrast agent.
8. Preparation of the patient for angiographic examinations.

4. The main objectives of the topic:

1. Formation and discussion of the concept of the coronary artery of the heart.
2. Diagnosis of the coronary arteries of the heart.
3. Preparation of the patient for angiographic research methods.
4. Provision of first aid for hypertensive crisis.
5. Patient monitoring.

5. The main types / methods / technologies of teaching to achieve the final results of teaching the subject. Group work. Oral questioning. Discussion of situational tasks and test tasks.

**6. Types of control to assess the level of achievement of the final results of subject training:
Evaluation of oral questions, situational reports and test tasks, solving practical work.**

7. Literature (basic and additional): At the end of the guide

8. Control (questions, tests, situational tasks, etc.).

Questions:

1. What is tachycardia?
2. What is bradycardia?
3. What are the types of emergency medical care for patients with heart defects.
4. What is ultrasound?
5. How many standard and chest attachments are there in an ECG machine?
6. What are the causes of pain in the heart.
7. What are the uses of the contrast agent?
8. What are the features of preparing the patient for angiographic examinations.

Test:

1. The name of cyanosis in diseases of the cardiovascular system:
 - A. Extreme
 - B. central
 - C. mixed
 - D. Local
 - E. general
2. An extracardiac cause that cannot cause bradycardia is...
 - A. acute bleeding
 - B. Jaundice
 - C. uremia
 - D. cerebral hemorrhage
 - E. myxedema
3. The bronze color of the skin is characteristic.
 - A. Adrenal insufficiency
 - B. respiratory failure
 - C. Renal impairment
 - D. to indigestion in the intestine
 - E. to cardiovascular insufficiency
4. The displacement of the border of the heart towards pathology is found on the example of ...
 - A. obturation atelectasis
 - B. exudative pleurisy
 - C. hemothorax
 - D. pneumothorax
 - E. Hydrothorax
5. A 27-year-old patient complains of shortness of breath, which first appeared after physical violence on the street. She has a history of allergies to strawberries and eggs. A month ago I had a respiratory disease, but I did not go to the doctor, I was treated myself (aspirin, mustard plasters were put on my chest). Often coughs, secretes creamy sputum. With auscultation, breathing is hard, diffuse whistling sounds. Heart rate is 76 times per minute. Heart sounds are open, blood pressure is 130/70 mm Hg. Presumptive diagnosis:
 - A. bronchial asthma
 - B. heart attack
 - C. pneumonia
 - D. miliary tuberculosis
 - E. pulmonary embolism

6. Patient M., 20 years old, complained of stabbing pains in the heart, palpitations, weakness, anxiety. History: had the flu 3 weeks ago. On examination, the boundaries of the heart are shifted to the left, systolic murmur is heard at all points of the heart, there is no irradiation, heart rate is 90 beats per minute. Temperature 37.70C. Laboratory: leukocytosis, increased ESR, positive C-reactive protein. Presumptive diagnosis:

- A. myocarditis....
- B. pericarditis
- C. cardiomyopathy
- D. myocardial dystrophy
- E. neurocirculatory dystonia

7. What heart disease is characterized by the following auscultatory picture: 1 tone is weakened at the apex of the heart, then immediately there is a systolic murmur of a blowing character, with increased intensity given to the armpit:

- A. mitral valve insufficiency
- B. mitral valve stenosis
- C. stenosis of the aortic mouth
- D. pulmonary artery stenosis
- E. defect tricuspid valve

Situational task:

1- **task.** A nurse was called to the patient, who was being treated for HF at night. The patient was disturbed by pain due to the nature of compression of the heart and a feeling of tightness in the chest cavity in the left arm.

1. Determine the emergency situation that has developed in the patient.
2. Develop an emergency algorithm and justify each stage.

2- **task.** The nurse of the 73-year-old patient M. was called to the ward, is in the therapeutic department of the hospital: HF, with a diagnosis of atrial fibrillation. Hypertension 3 tbsp. The patient complains of weakness, headache in the occipital region, dizziness, severe nausea, lack of movement in the right arm and leg. On examination: speech is slowed down, words are pronounced "slurred", standing and timing are oriented correctly, they cannot independently take an upright position. MDG 16 per minute, pulse 72 per minute, blood pressure 190/110 mm Hg.

1. Determine the emergency situation that has developed in the patient.
2. Create an emergency algorithm and justify each stage

Lesson № 7.

1. Topic: Diagnosis and first aid for gastric and intestinal dyspepsia.

2. Purpose: To provide students with first aid and diagnostic measures for gastrointestinal dyspepsia and pain.

3. Learning Objectives:

The student should know:

1. Know the theoretical foundations of the organization of the nursing process in medical institutions;
2. Mastering the stages of first aid in emergency situations;
3. Mastering the diagnostic measures used in diseases of the gastrointestinal tract.
4. Diagnosis and first aid for gastrointestinal dyspepsia.

The student should be able to:

1. Providing first aid for bleeding from the gastrointestinal tract.
2. What are the symptoms that occur when the function of the digestive system is impaired.
3. Be able to determine the causes of bleeding from the stomach.
4. Study of the type of care provided to patients in the gastroenterology department.
5. Know the types of first aid for gastric bleeding.

6. Complications of stomach bleeding?

4. The main objectives of the topic:

1. Discuss the symptoms that occur with digestive system disorders.
2. Discuss the main symptoms: abdominal pain, gastric dyspepsia, heartburn, dysphagia, belching, loss of appetite, urge to vomit, vomiting, abdominal dyspepsia, diarrhea, constipation, flatulence, urinary incontinence.
3. The appearance of bleeding from the gastrointestinal tract.
4. Care for gastroenterological patients.
5. Principles of first aid for gastrointestinal bleeding.
6. Principles of first aid for acute abdominal pain.

5. The main types / methods / technologies of teaching to achieve the final results of teaching the subject. Group work. Oral questioning. Discussion of situational tasks and test tasks.

6. Types of control to assess the level of achievement of the final results of subject training:

Evaluation of oral questions, situational reports and test tasks, solving practical work.

7. Literature (basic and additional): At the end of the guide

8. Control (questions, tests, situational tasks, etc.).

Questions:

1. What are the symptoms that occur when the function of the digestive system is impaired.
2. Causes of stomach bleeding?
3. Nursing in the gastroenterology department.
4. First aid for gastric bleeding.
5. Complications of stomach bleeding?

Tests:

1. Gastritis is:
 - A. inflammation of the intestinal mucosa
 - B. inflammation of the gastric mucosa
 - C. Inflammation of the kidneys
 - D. Inflammation of the liver
 - E. hepatitis
2. The most important symptom in diseases of the digestive system:
 - A. headache
 - B. dizziness
 - C. vomiting
 - D. weakness
 - E. tinnitus
3. It is used as a stimulant for probing to obtain gastric juice:
 - A. pentogastrin
 - B. 5% glucose solution
 - C. 33% magnesium sulfate solution
 - D. 25% magnesium sulfate solution
 - E. 0.9% sodium chloride solution
4. The role of the nurse when sending the stomach for endoscopic examination:
 - A. Explanation to the patient
 - B. write direction
 Assessment of the general condition
 - C. go to the endoscopy room
 - D. That's right
5. The amount of water used for gastric lavage:
 - A. 0.5 liters



- B. 3-5 liters
 - C. 5-7 liters
 - D. 7-9 liters
 - E. 10 - 12 liters
6. Method of endoscopic examination of the esophagus:
- A. gastroscopy
 - B. Colonoscopy
 - C. sigmoidoscopy
 - D. esophagoscopy
 - E. cystoscopy
7. Symptom of perforation of the stomach?
- A. Bleeding
 - B. stabbing pain in the abdomen
 - C. vomiting
 - D. drop in blood pressure
 - E. headache
8. Fibrogastroscopy is:
- A. Chest examination
 - B. examination of the gallbladder
 - C. Examination of the stomach and duodenum
 - D. Examination of the colon
 - E. rectal examination
9. Flatulence means:
- A. String tension
 - B. Irritable bowel syndrome
 - C. Lack of bowel movement
 - D. frequent, loose stools
 - E. bleeding
10. What treatment does the order of taste use for stomach diseases?
- A. diet No. 5
 - B. diet No. 1
 - C. diet No. 7
 - D. diet No. 10
 - E. diet number 15

Situational task:

1- **task.** Patient R., 30 years old, went to the clinic with complaints of overflow of the stomach, food retention in the stomach, a feeling of fullness in the subacute area, nausea during the last 3 months. The occurrence of the disease is associated with nervous tension.

1. Formulate a preliminary diagnosis
2. Schedule additional exams.
3. Prescribe treatment.
4. Create a patient rehabilitation plan.
5. Ways to encourage the patient to treat and maintain a healthy lifestyle in the future.
6. The procedure for the interaction of a general practitioner with specialist doctors

Lesson № 8.

1. Topic: Diagnosis and first aid for acute and chronic kidney damage. Bladder catheterization.

2. Purpose: Formation of pre-medical first aid and diagnostic measures for diseases of the urinary tract and kidneys in students.

3. Learning Objectives:

The student should know:

1. Theoretical foundations of the organization of the nursing process in medical institutions;
2. Preparation of the patient for urinalysis.
3. Know the methods of urine collection.
4. Mastering important manipulations in medical and diagnostic measures prescribed by a doctor;
5. Stages of first aid in emergency situations:

The student should be able to:

1. Pre-medical emergency care for emergency conditions of the urinary tract and kidneys.
2. Care for patients with kidney disease.
3. Determine the clinical symptoms of kidney disease.
4. Methods of urine collection according to Nicheporenko and Zimnitsky.

4. The main objectives of the topic:

1. Identify the main symptoms of diseases of the urinary tract and kidneys.
2. Features of care for nephrological patients in connection with symptoms.
3. First aid for diseases of the urinary tract.

5. The main types / methods / technologies of teaching to achieve the final results of teaching the subject. Group work. Oral questioning. Discussion of situational tasks and test tasks.

6. Types of control to assess the level of achievement of the final results of subject training:

Evaluation of oral questions, situational reports and test tasks, solving practical work.

7. Literature (basic and additional): At the end of the guide

8. Control (questions, tests, situational tasks, etc.).

Questions:

1. What is a kidney attack?
2. The main causes of a kidney attack?
3. Clinical manifestations of a kidney attack, possible complications?
4. Necessary research methods for a kidney attack?
5. First aid for a kidney attack.

Tests:

1. Decreased urination, lack of excretory and endocrine function due to reduction of kidney nephrons:

- A. pyelonephritis
- B. renal amyloidosis
- C. renal insufficiency:
- D. lung cancer
- E. Nephritis;

2. Type of respiratory changes in a patient with renal insufficiency:

- A. Biot
- B. rhythmic
- C. Kussmaul
- D. Cheyne-Stokes
- E. Grukko

3. "Anasarca" means:

- A. tumor of the lower leg
- B. a tumor in the abdominal cavity
- C. swelling up to the knee
- D. swelling in the whole body

- E. swelling of the face
4. Method of effective treatment of a patient with renal insufficiency:
- Oxygen therapy
 - hemodialysis
 - symptomatic
 - blood transfusion
 - Herbal medicine
5. In a patient with chronic renal failure, the following is usually detected:
- the tongue and lips become crimson-red
 - facial expression in the morning, swelling of the whole body
 - dark coffee-colored skin, "enanthem" redness of the tip of the face
 - bruises of the three corners of the mouth and nose
 - acrocyanosis, herpes rashes on the lips
6. In chronic renal failure, the biochemical blood test increases:
- cholesterol
 - nitrogen residue
 - protein
 - bilirubin
 - Sugar
7. Group of drugs used in the treatment of chronic renal failure:
- glucocorticoids
 - bronchodilators
 - cardiac glycosides
 - analgesics
 - vitamins
8. Complications of chronic renal failure:
- anaphylactic shock
 - hepatic coma
 - uremic coma
 - hemorrhagic shock
 - cardiogenic shock
9. In chronic renal failure, a test that determines the volume of renal glomerular filtration and the function of tubular reabsorption:
- Zimnitsky
 - Reberg-Tareev
 - Nechiporenko
 - Three samples of glass
 - Pasternatsky
10. The level of creatine in the biochemical analysis of the blood of a patient with chronic renal failure is 1.72 mmol / l, the amount of protein is 40-60 g / day. At the same time, the patient has drowsiness, headache and lethargy. This type is characteristic of which stage of renal failure:
- Decompensation
 - uremic
 - minimum
 - chronic
 - Primary

Situational task:

You are a local doctor. Patient M., 45 years old, called you at home and presented the following complaints: over the past month, he has been worried about severe headache and itching of the skin, abdominal pain, nausea, vomiting, loose stools. From history it is known that for 25 years he suffered from pyelonephritis. Objectively: petechial rashes and traces of scratching are visible on the skin of the hands and chest, the skin is dry, there is white dust in the hair roots, ammonia from the mouth. In the region of the heart, the noise of pericardial friction, the noisy breathing of Kussmaul are heard. Abdominal pain on palpation in the colon and epigastric region.

1. What type of kidney pathology does the patient have? What are the stages of this process and at what stage is the patient?
2. Etiological factors (classification) of this pathology.
3. What is cardiovascular syndrome in this pathology?
4. How to explain skin itching, dyspeptic disorders?

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