


<p> ONTÜSTIK-QAZAQSTAN MEDISINA AKADEMIASY «Оңтүстік Қазақстан медицина академиясы» АҚ </p>		<p> SOUTH KAZAKHSTAN MEDICAL ACADEMY АО «Южно-Казахстанская медицинская академия» </p>
Department of "social health insurance and public health"		044-58/16 ()

CONTROL MEASURING INSTRUMENTS

2 test tasks for intermediate control

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Option I

Option I

1. ~indicate the sources of scientific evidence:

- A) archival sources
- B) DARE,MEDLINE sites
- C) statistical indicators
- D) legislative materials
- E) economic materials

2. ~main clinical question:

- A) 1 component
- B) 3 components
- C) 2 components
- D) 4 components
- E) 5 components

3. ~the classic application includes a question:

- A) four components
- B) two components
- C) one component
- D) three components
- E) five components


4. ~clinical trial is:

- A) method of conducting medical interventions in the intervention group
- B) the final stage of a clinical study in which the truth of new theoretical knowledge is tested
- C) method of conducting medical interventions in the intervention group or comparison group
- D) retrospective study, in which patients are included in the intervention group to identify causal relationships between medical intervention and clinical outcome
- E) A special type of observational study that is the result of therapeutic intervention as the prognostic factor under study.

5. ~ clinical trial design is:

- A) method of conducting medical interventions in the intervention group
- B) the way medical interventions are carried out in the intervention group or comparison group
- C) the way in which scientific research is carried out in the clinic, that is, its organization or architecture
- D) method of conducting medical interventions in the comparison group
- E) method of conducting experimental research.

6. ~type of clinical trial design:

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- A) certain typical clinical tasks
 - B) administration of treatment
 - C) implementation of preventive measures
 - D) a set of classification features
 - E) a set of groups of patients for conducting clinical trials.
7. ~IPU design fits as a set of classification symbols:
- A) diagnostic methods
 - B) certain typical clinical tasks
 - C) forecasting methods
 - D) prevention methods
 - E) methods for calculating the cost
8. ~methods of statistical processing of results:
- A) a set of clinical trial design classification labels
 - B) clinical trial
 - C) clinical task
 - D) medical procedure
 - E) data correction marks
9. ~research methods in the clinical trial must match
- A) a set of clinical trial symptoms
 - B) list of medical research
 - C) statistical research
 - D) to the set of classification features of a particular design of a clinical trial
 - E) scientific research
10. ~research, in which groups of patients are described and observed according to certain characteristics, and the researcher collects data by observation, not actively intervening in them, is called:
- A) Experimental
 - B) Control
 - C) quasi-experimental
 - D) Scientific
 - E) Horizontal
11. ~the peculiarity of observational research is that the researcher:
- A) actively intervenes in events
 - B) monitors events without actively interfering with them
 - C) describes events, actively intervenes in them
 - D) actively changes events
 - E) experiments and develops various models of the course of the disease
12. ~if one or more groups of patients are described and observed according to certain characteristics, then this is:
- A) Experimental Research

- B) mathematical research
 - C) observational research
 - D) statistical research
 - E) predictive research
13. ~studies in which the results of the intervention are evaluated and the subject of the study is observed include:
- A) observational research
 - B) modeling methods
 - C) experimental research
 - D) methods of statistical processing of material
 - E) forecasting methods
14. ~research topic... observed in research.
- A) Experimental only
 - B) experimental and observational
 - C) observational only
 - D) observational and predictive
 - E) experimental and predictive
15. ~ ... Patients who are part of the group(s) participate in experimental studies.
- A) only one
 - B) from 2 to 3
 - C) one, two and more
 - D) from 1 to 5
 - E) only two
16. ~when conducting an experimental study, the results of the study include:
- A) patient and research design
 - B) drug, procedure, treatment
 - C) patient documentation and treatment
 - D) research design and procedure
 - E) Research Center and patient
17. ~notification of the situation:
- A) descriptive research
 - B) analytical research
 - C) experimental research
 - D) quasi-experimental research
 - E) longitudinal research
18. ~Notice of a number of circumstances ... in relation to research.
- A) Experimental
 - B) analytical control
 - C) longitude

- D) descriptive control
 E) horizontal analytical
19. ~Case control-this type:
 A) prospective study
 B) randomized study
 C) descriptive observational research
 D) analytical observational research
 E) descriptive research
20. ~ cohort research is:
 A) Experimental Research
 B) observational research
 C) analytical research
 D) descriptive research
 E) Medical Research
21. ~ongoing research ... refers to experimental research.
 A) mathematical tests
 B) clinical trials
 C) statistical tests
 D) experimental tests
 E) quasi-experimental tests
22. ~the outcome of the disease under the influence of treatment is subject to equal selection and without criteria:
 A) meet the requirements for medical research
 B) list of documentation
 C) statistical documentation
 D) mathematical requirements
 E) Meet the requirements for statistical processing of research results
23. ~requirement to use statistical processing methods correctly ... put on research.
 A) mathematical
 B) operational
 C) medical
 D) therapeutic
 E) medicinal
24. ~the most important requirements for medical research:
 A) randomization method
 B) place and duration of the study
 C) material interest of the study participants
 D) mandatory consent of relatives
 E) availability of insurance

25. ~to classical clinical trials ... includes research.

- A) controlled and uncontrolled
- B) analytical and observational
- C) uncontrollable and situation-control
- D) controlled and blind
- E) blind and analytical

Version II

1. ~ subject to controlled clinical trials:

- A) environmental research
- B) to quasi-experiments
- C) classical clinical trials
- D) descriptive research
- E) research status-control

2. ~comparison of the drug or treatment with other drugs or procedures:

- A) uncontrolled research
- B) visualization of the experimental group
- C) controlled research
- D) typicality of the experimental group
- E) atypical absence of an experimental group

3. ~ more likely to detect treatment differences in studies:

- A) controlled
- B) uncontrollable
- C) case control
- D) cohort
- E) prospective

4. ~experience of using the drug, without comparison with other treatment option:

- A) controlled research to be carried out
- B) uncontrolled research carried out
- C) randomized controlled trials
- D) system reviews to be carried out
- E) to the meta-analyzes to be carried out

5. ~procedures without comparison with other treatment option are used in the following cases:

- A) uncontrolled research
- B) cohort tests
- C) notifications of circumstances
- D) research design
- E) controlled research

6. ~when driving... the probability of conducting a study to compare treatment is greater than when comparing a drug.
 - A) clinically controlled study
 - B) study without clinical control
 - C) clinical description of the condition
 - D) correctly prescribed treatment
 - E) correct diagnostic test
7. ~the main categories of clinical questions include:
 - A) Organization of clinical trials
 - B) visiting clubs of interest
 - C) attend lectures on topics
 - D) spread of diseases
 - E) participation in focus groups
8. ~the usual clinical problems facing the doctor when providing patient care include:
 - A) introduce the patient to drugs
 - B) stratification method
 - C) participation in the survey
 - D) participation in lectures conducted by specialists-doctors
 - E) healthy or sick
9. ~Risk Factors:
 - A) conducting mass sports events
 - B) change in the functioning of a medical organization
 - C) financing of the health system
 - D) typical clinical problems
 - E) conducting an audit in a medical organization
10. ~ correct diagnosis:
 - A) stratification method
 - B) audit method
 - C) the result of the disease
 - D) clinical problem
 - E) observational research.
11. ~predicting the course of the disease is:
 - A) a study in which patients are observed for certain characteristics
 - B) research in which the factor under study is a literature review
 - C) one of the categories of clinical questions
 - D) the subject of the study is observed
 - E) specially planned comparative study
12. ~treatment efficiency is:
 - A) category of clinical questions
 - B) evaluation of the results of previous interventions

- C) specially planned research
- D) research carried out on certain characteristics
- E) A special type of predictive research
- 13. ~includes requirements for conducting clinical trials:
 - A) management of medical organizations
 - B) proper organization (design) of the study and a mathematically based approach to randomization
 - C) Organization of a free food basket
 - D) participation in an experiment to control the quality of work
 - E) select an auditor
- 14. ~clearly defined and respected criteria are subject to inclusion in the study:
 - A) requirements for conducting clinical trials
 - B) probability of determining the results of the disease
 - C) compared to other treatment options
 - D) less common research
 - E) conducting procedures for reconciliation
- 15. ~properly established and respected criteria for exclusion from research:
 - A) in comparison with other procedures carried out
 - B) clinical trials and requirements for their conduct
 - C) identify differences in treatment
 - D) less common research
 - E) comparison of scientific sources
- 16. ~ correct selection of criteria for the outcome of the disease with or without treatment:
 - A) initial data of the onset of the disease
 - B) procedures carried out by comparison
 - C) research subject to clinical trials
 - D) clinical practice guidelines
 - E) the Latin square
- 17. ~ conducting clinical solutions includes:
 - A) delivery of the diagnosis
 - B) frequency of occurrence of this disease
 - C) place of research
 - D) increased risk of disease
 - E) consequences of illness in the family
- 18. ~duration of the disease refers to:
 - A) requirements for medical research
 - B) search for the most common diseases
 - C) make a diagnosis

- D) a claim associated with an increased risk of the disease
- E) requirements related to the consequences of diseases
19. ~correct use of statistical processing methods:
- A) important requirements for medical research
- B) determining whether the patient is healthy
- C) determine if the patient is sick
- D) risk factors
- E) disease prognosis
20. ~specify a correctly compiled question to determine the frequency of occurrence of the disease:
- A) what methods of Disease Prevention do you know?
- B) how often does this disease occur?
- C) What factors are associated with this disease?
- D) What factors improve the course of the disease?
- E) What are the obvious consequences of the disease?
21. ~specify a correctly compiled question to determine the prognosis of the disease:
- A) How do you assess the patient's health?
- B) What are the consequences of treating the disease?
- C) How often does this disease occur and its consequences?
- D) What are the consequences of the disease?
- E) What factors are associated with the consequences of the disease?
22. ~specify a correctly compiled question to determine the treatment of the disease:
- A) How does the course of the disease change during treatment?
- B) is the patient healthy or sick after treatment?
- C) How often does this disease occur?
- D) What are the consequences of the disease?
- E) What factors are associated with an increased risk of the disease?
23. ~specify a correctly compiled question to determine the cause of the disease:
- A) are there methods to prevent the disease in healthy patients?
- B) does the course of the disease improve with its early recognition and treatment?
- C) What factors lead to the disease?
- D) What are the consequences of the disease?
- E) What factors are associated with an increased risk of the disease?
24. ~is a type of research:
- A) literary review
- B) meta-analysis
- C) filling in the medical history
- D) report on the problem posed

E) treatment effectiveness

25. ~Systematic Reviews:

- A) scientific work, in which the results of a number of unique studies on the same problem are the object of study, the results of the study are analyzed using approaches that minimize the possibility of systematic and random errors
- B) peak of evidence
- C) medical evaluation of clinical efficacy
- D) method of forming a group of test participants
- E) summary statistical indicators.

Version III

1. ~the purpose of a systematic review is:

- A) a differentiated and impartial study of the results of previous studies
- B) a quantitative systematic review of the literature to obtain summary statistical indicators
- C) review of the results of unique studies on a single problem
- D) science, which is a generally recognized benchmark for scientific research
- E) the method used to form a sequence of classifying test participants into groups

2. ~quality systematic review is:

- A) quantitative synthesis of primary data to obtain aggregate statistical indicators
- B) important scientific research
- C) review of the results of unique studies on the same problem or system, but no statistical analysis is carried out
- D) clinical science, which is a generally recognized benchmark for scientific research to assess clinical efficacy
- E) the method used to form a sequence of random assignment of test participants to groups

3. ~meta-analysis is:

- A) quantitative assessment of the total impact established on the basis of the results of all scientific research
- B) quantitative systematic review of literature or quantitative synthesis of primary data to obtain aggregate statistical indicators
- C) medical science, which is a generally recognized benchmark for scientific research to assess clinical efficacy
- D) the method used to form a sequence of random assignment of test participants to groups

E) review of the results of unique studies on the same problem or system, but no statistical analysis is carried out.

4. ~randomized controlled trials are:

A) quantitative systematic review of literature or quantitative synthesis of primary data to obtain aggregate statistical indicators

B) peak evidence and significant scientific research: a quantitative assessment of the cumulative effect established on the basis of the results of all scientific research

C) the "gold standard" is a generally recognized standard of scientific research for assessing clinical efficacy

D) modern medical science, which is a generally recognized benchmark for scientific research to assess clinical efficacy

E) the method used to form a sequence of random assignment of test participants to groups

5. ~specify the number of patient groups required to conduct randomized controlled trials.

A) group 1

B) Group 2

C) Group 3

D) Group 4

E) Group 5

6. the ~control group in randomized controlled trials is:

A) a group in which treatment is not carried out or standard, traditional (conventional) or patients receive a placebo

B) the group in which the treatment is carried out, with proven effectiveness

C) a group of patients in which "large" complications are observed

D) the group of patients in whom re-hospitalization is observed

E) absolutely healthy group of patients.

7. ~the active treatment group in randomized controlled trials is:

A) untreated or standard, traditional (conventional) patient groups or patients receive a placebo

B) absolutely healthy patient group

C) a group of patients in which "large" complications are observed

D) the group of patients in whom re-hospitalization is observed

E) the group of patients for whom the treatment is carried out, the effectiveness of which is studied

8. ~placebo is:

A) an effective drug in relation to the studied indicator (most often the drug "gold standard" is used - well studied, has been used for a long time and is widely used in practice)

B) clinical features of the disease and concomitant pathology

- C) patient groups should be comparable and homogeneous
- D) this indifferent substance (procedure) is used to compare its effect with the effect of a specific drug or other intervention
- E) age, gender, race
9. ~Active Control is:
- A) this indifferent substance (procedure) is used to compare its effect with the effect of a specific drug or other intervention
- B) an effective drug in relation to the studied indicator (most often the drug "gold standard" is used - well studied, has been used for a long time and is widely used in practice)
- C) clinical features of the disease and concomitant pathology
- D) patient groups should be comparable and homogeneous
- E) age, gender, race.
10. ~ indicate the signs that determine the homogeneity of groups.
- A) patient groups should be comparable and homogeneous in terms of concomitant pathologies
- B) patient groups should be comparable and homogeneous with healthy people
- C) patient groups should be comparable and homogeneous in terms of family ties
- D) groups of patients should be comparable and homogeneous at the place of residence
- E) groups of patients should be comparable and homogeneous in area of residence.
11. ~representative of the groups:
- A) the division of patients into groups should be carried out at the discretion of the participants in the experiment
- B) patient groups should be comparable and homogeneous in terms of concomitant pathologies
- C) patient groups should be comparable and homogeneous by age
- D) the number of patients in each group should be sufficient to obtain statistically correct results
- E) patient groups should be comparable and homogeneous by gender
12. ~of Representative types of groups ... there are types.
- A) 1
- B) 2
- C) 3
- D) 4
- E) 5

13. ~digital representation is:

- A) the number of patients in each group should be sufficient to obtain statistically correct results
- B) the number of observations that guarantee the receipt of statistically accurate data
- C) Division of patients into groups by random sampling
- D) represents the structural identity of the sample and general sets
- E) procedure used to compare the effects of drugs

14. ~ specific criteria for treatment effectiveness:

- A) development of national clinical guidelines
- B) select the required number of participants in the experiment
- C) the process of adding participants to the experiment
- D) main indications related to the patient's breathing
- E) the process of excluding participants from the experiment

15. ~true efficiency criteria include:

- A) a sufficient number of patients to obtain statistically correct results
- B) the sample and the structural identity of the general sets
- C) improve the quality of life, reduce the frequency of complications, relieve symptoms
- D) minimize the possibility of influence on the results of the study by its participants
- E) open clinical trial

16. ~one of the true criteria for treatment effectiveness:

- A) simple "blind" method
- B) the results of laboratory and instrumental studies associated with the true endpoints of treatment
- C) a method that ensures a proportional distribution of test subjects by groups
- D) minimize the possibility of influence on the results of the study by its organizers
- E) structural identity of the general set

17. ~when conducting randomized clinical trials, the criteria for the final results include:

- A) objectivity
- B) representation
- C) subjectivity
- D) competence
- E) morality

18. ~simple "blind" method:

- A) does not know the patient who belongs to a certain group, but the doctor knows
- B) the patient and the doctor do not know if they belong to a certain group
- C) a method that ensures a proportional distribution of test subjects by groups

D) a method of reducing the conscious or unconscious possibility of influencing the results of the study by its participants

F) the patient, doctor and organizers do not know who belongs to a particular group (statistical processing)

19. ~the double "blind" method is:

A) a method of belonging to a certain group that the patient does not know, but the doctor knows

B) a method that ensures a balanced distribution of test subjects by groups

C) a method of belonging to a certain group that neither the patient nor the doctor knows

D) a method of reducing the possibility of conscious influence on the results of the study by its participants

E) neither the patient, nor the doctor, nor the organizers know the method of belonging to a particular group

20. ~the triple "blind" method is:

A) the "blindness" method, in which the patient does not know that he belongs to a certain group, but the doctor knows

B) the method of "blindness", in which the patient and the doctor do not know about belonging to a certain group

C) the method of "blindness", which provides a proportional distribution of patients into groups, taking into account factors affecting the results of treatment

D) the method of "blinding", in which the patient, doctor and organizers do not know whether they belong to a particular group (statistical processing)

E) a method to reduce the unconscious possibility of influencing the results of the study on the part of the participants

21. ~open research method is:

A) simple "blindness" method, that is, the patient does not know that he belongs to a certain group, but the doctor knows

B) all study participants are informed about the clinical trial

C) double "blindness" method, that is, the patient and the doctor do not know if they belong to a certain group

D) a method that ensures a balanced distribution of test subjects by groups, taking into account factors that have a significant impact on the results of treatment

E) a method of reducing the conscious or unconscious possibility of influencing the results of the study by its participants

22. ~considered important and informative ... refusal to continue participating in randomized clinical trials.

A) $\leq 5\%$

B) $\geq 5\%$

C) $<10\%$

D) $>10\%$

E) $\leq 10\%$

23. ~ the importance and informativeness of the experiment in a randomized clinical trial ... "no," he said.

- A) during a sufficiently long period of control
- B) during a short period of control
- C) during a short period of control
- D) in the absence of the need for an observation period
- E) when the control period is 3 years

24. ~true criteria for treatment effectiveness ... corresponds to the level.

- A) zero
- B) the fourth
- C) the fifth
- D) sixth
- E) Secondary

25. ~in randomized clinical trials, objective criteria for the final results include:

- A) indication in the general set
- B) indications related to the patient's breathing
- C) mortality from this disease
- D) results of laboratory and instrumental studies,
- E) determination of the necessary factors in the exhibiting group

Option IV

1. ~when conducting randomized clinical trials, the objective criteria for the final results include:

- A) total death
- B) decrease in the frequency of complications
- C) relieve symptoms
- D) planned life expectancy
- E) minimize the possibility of influencing the results of the study by participants

2. ~in randomized clinical trials, objective criteria for the final results are used:

- A) the law of large numbers
- B) frequency of development of "large" complications
- C) increase the indicator of life expectancy
- D) using the random sampling method
- E) using the "blind" method

3. ~the criteria for the final results of a randomized clinical trial include:

- A) determination of factors in the exponential group
- B) determination of life expectancy indicators

- C) frequency of re-admission
- D) objectivity of clinical indications
- E) determination of the risk factor
- 4. ~specify the size of the final results of a randomized clinical trial.
 - A) infant mortality
 - B) mortality from age
 - C) quality of life assessment
 - D) maternal death
 - E) perinatal mortality
- 5. ~ cohort research is:
 - A) lifestyle hypothesis
 - B) select a group of patients for a similar sign that will be observed in the future
 - C) preventive measures
 - D) selection of patient groups for dissimilar symptoms
 - E) a method of minimizing the conscious or unconscious possibility of influence on the results of the study by its participants.
- 6. ~Case-Control Research is:
 - A) a study in which the proportion of people who do not participate in the test is compared
 - B) study of people exposed to a risk factor
 - C) study of people who have not been exposed to the risk factor
 - D) an organized study to determine the relationship between any risk factor and the clinical outcome
 - E) development of educational programs
- 7. ~the descriptive study includes:
 - A) conditions: presence of disease or outcome
 - B) Multiple research hypotheses
 - C) results of laboratory and instrumental studies
 - D) at the beginning of the study, the result is unknown
 - E) main indications related to the patient's breathing
- 8. ~A Retrospective Study is:
 - A) meta-analysis
 - B) Case Study-control
 - C) cohort study
 - D) Literary Review
 - E) systematic review
- 9. ~ specify the definition of clinical guidelines.
 - A) an effective means of continuous, measurable improvement in both the provision of daily medical services and the improvement of the quality of medical services

B) description of a series of cases-the study of the same intervention in individual patients who were systematically connected without a control group

C) guidance in which a certain number of characteristics of interest in small groups of patients under observation are described

D) The Division of patients into groups should be carried out by Randomized, that is, by a random sampling method that allows you to exclude all possible differences between the compared groups that are likely to affect the result of the study

E) a method of minimizing the conscious or unconscious possibility of influence on the results of the study by its participants.

10. ~indicate the purpose of applying clinical guidelines in practice.

A) improve the quality of life, reduce the frequency of complications, relieve the symptoms of the disease

B)highlighting the main indicators depending on the patient's breathing (death from any cause or Main-from the disease under study, recovery from the disease under study)

C) improving the effectiveness of treatment, the effectiveness of treatment costs, the quality of treatment, the scientific approach to treatment

D) increase the satisfaction of secondary medical personnel

E) improving the PHC organization

11. ~ specify the requirements for the development of KPR.

A) demonstrate prevention and rehabilitation, diagnosis and treatment, their continuity, improvement of the patient-oriented quality of life

B) rehabilitation and improvement of the quality of life, minimization of resources

C) should indicate an improvement in the quality of life, a decrease in the frequency of complications, a relief of the symptoms of the disease

D) reduce the irrational use of resources, indicate the causes of the disease

E) demonstrate an optimal standard of living, ensure continuity and continuity in diagnosis, treatment, prevention and rehabilitation

12. ~ based on Clinical Practice Guidelines:

A) literature review and meta-analysis

B) best practice, clinical protocols

C) clinical protocols and laws of the Republic of Kazakhstan

D) clinical protocols and guidelines

E) literary and systematic review

13. ~the most common type of clinical guidelines:

- A) Advanced guidelines based on statistical indicators-the disease under study, systematic review, meta-analysis
- B) quantitative systematic review of literature or quantitative synthesis of primary data to obtain aggregate statistical indicators
- C) consensus-based guidance, quantitative assessment of the cumulative effect established on the basis of the results of all scientific research
- D) extensive guidelines based on evidence, clinical protocols and consensus
- E) consensus-based guidance, quantitative assessment of the established aggregate effect based on the results of all scientific studies, clinical protocols

14. ~indicate the correct stage in the development of clinical guidelines.

- A) choose a topic to write clinical practice guidelines based on the most severe characteristics of the disease (morbidity, mortality, and other factors)
- B) the procedure for systematic review and scientific research and statistical indicators on this disease, development of draft recommendations
- C) collection of Anamnesis, doctors ' opinions, systematic review behavior on this disease and scientific research and statistical indicators
- D) quantitative systematic review of literature or quantitative synthesis of primary data to obtain aggregate statistical indicators
- E) develop draft recommendations, conduct a systematic literature review and identify systematic errors, conduct an audit (internal and external audit)

15. ~indicate the stages of development of the implementation of evidence-based clinical guidelines.

- A) conduct a systematic review and meta-analysis
- B) conduct a systematic review of programs in the media and the Academy of Sciences
- C) develop a draft of recommendations, complete the development of the NTC and obtain approval from key stakeholders
- D) development on the basis of evidence and consensus, statistical indicators
- E) development based on consensus and severe disease characteristics (morbidity, mortality, etc. factors)

16. ~advantages of clinical guidelines:

- A) used to conduct prospective studies, in which patients are included in the intervention group to identify causal relationships between medical intervention and clinical outcome

- B) used to develop brief reference books for practical health workers and handouts for patient training

- C) used as methodological material for the development of information and educational materials
- D) used to separate patients by randomized groups, that is, by a random sampling method that allows you to exclude all possible differences between the compared groups that are likely to affect the results of the study
- E) to carry out a quantitative systematic review of the literature to obtain aggregate statistical indicators or to quantify the synthesis of primary data
17. ~the statement that "the process of developing and evaluating guidelines should focus on the most important results for consumers" is a reference:
- A) the principle of developing clinical guidance
- B) type of clinical guidance
- C) the principle of standard clinical management developments
- D) basic principle of clinical guidance development
- E) stage of development of clinical practical guidelines based on evidence
18. ~ specify the principle of development of clinical guidelines.
- A) the development of clinical guidelines should be based on a quantitative synthesis of primary data to obtain aggregate statistical indicators
- B) the development of clinical guidelines must be prepared within 10 years, including a distribution and implementation plan
- C) the development of clinical guidelines should be based on the analysis of the medical interventions carried out
- D) guidelines should be based on the results of clinical and economic analysis and the best results of a systematic review
- E) the guidelines must be based on the best evidence and contain guidelines for the level of evidence of the individual provisions provided by the CPR
19. ~the development of a clinical protocol in a medical organization includes the following steps:
- A) integration of research; introduction of clinical guidance in the teaching methodology of medical universities; formation of a research group
- B) Organization of the research group; clinical guidance; includes the Working Group (managers, health organizers, auditors)
- C) formation of a working group; formation of the text of the clinical protocol; implementation of the clinical protocol in the activities of a medical organization
- D) formation of a research group (Hospital and polyclinic managers, auditors, health managers); implementation of clinical practical guidance in health practice
- E) development of clinical practical guidance; formation of a management research group, implementation in health practice
20. ~developed clinical protocol sections are available:

- A) patient model, payroll model
 - B) patient model, list of drugs in the main and additional range, standard operations and procedures for fulfilling the requirements of the protocol
 - C) patient model, list of drugs in the main and additional range
 - D) model of remuneration of medical workers, standard operations and procedures for compliance with the requirements of the protocol
 - E) list of medicines of the main and additional assortment, standard operations and procedures for fulfilling the requirements of the protocol
21. ~indicate the most likely content of the clinical protocol:
- A) monitoring compliance with the action plan for the introduction of new treatment methods
 - B) standardized approaches to the diagnosis, treatment and Prevention of diseases based on the principles of evidence-based medicine
 - C) regulatory support of the quality management system of medical care in a medical organization
 - D) justification of the program of state guarantees for the provision of medical care to the population
 - E) allows the use of drugs that are not effective for patients
22. benefits of CPR for the practitioner:
- A) Faced with a freelance situation, the practitioner can always seek clinical guidance and prescribe evidence-based medicine-based treatment for the patient
 - B) excludes the possibility of using clinical thinking
 - C) allows the use of more expensive methods of diagnosis and treatment
 - D) excludes the possibility of using methods of diagnosis and treatment based on evidence-based medicine
 - E) allows the use of drugs that are not effective
23. ~demonstrate the benefits of using evidence-based guidance.
- A) clinical protocols developed by managers of hospitals and outpatient clinics, handouts for patient training are based on consensus and require an assessment of usefulness
 - B) used to develop brief clinical reference books for practical health workers and other tasks
 - C) development of protocols and standards for hospital and outpatient managers, Health Planning and other tasks that address the state problems of medical institutions, and used as a model for the development of specific budgets
 - D) development of realistic budgets, development of standards, protocols
 - E) it takes time to create a working group that includes all interested representatives
24. ~point out the disadvantages of using evidence-based guidelines.
- A) with all possible approaches, the maximum number of test participants is required to compare all positive and negative effects

- B) time is required for the distribution of patients by randomized groups, that is, by a random sampling method that allows you to exclude all possible differences between the compared groups that are likely to affect the results of the study
- C) an indifferent substance (procedure) used is required to compare its effect with the effect of a specific drug or other intervention
- D) it takes time to create a working group that includes all interested representatives
- E) Time is required for a quantitative systematic review of the literature and a quantitative synthesis of the source data to obtain summary statistical indicators
25. ~ KPR evaluation is carried out for the following reasons:
- A) the high quality of CPR plays an important role in health care
- B) poor quality CPR can put many patients at serious risk
- C) quality KPR is used to make recommendations all over the world
- D) KPR has internal reliability and generalization
- E) KPR does not apply in practice

Answers

1 option		2 option		3 option		4 option	
1.	B	1.	C	1.	A	1.	A
2.	C	2.	C	2.	C	2.	B
3.	A	3.	A	3.	B	3.	C
4.	B	4.	B	4.	C	4.	C
5.	C	5.	A	5.	B	5.	B
6.	D	6.	B	6.	A	6.	D
7.	B	7.	D	7.	E	7.	A
8.	A	8.	E	8.	D	8.	B
9.	D	9.	D	9.	B	9.	A
10.	B	10.	D	10.	A	10.	C
11.	B	11.	C	11.	E	11.	E
12.	C	12.	A	12.	B	12.	B

ОҢТҮСТІК-ҚАЗАҚСТАН

**MEDISINA
AKADEMIASY**

«Оңтүстік Қазақстан медицина академиясы» АҚ



SOUTH KAZAKHSTAN

**MEDICAL
ACADEMY**

АО «Южно-Казахстанская медицинская академия»

Department of "social health insurance and public health"

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13.	C	13.	B	13.	D	13.	D
14.	A	14.	A	14.	D	14.	A
15.	C	15.	B	15.	C	15.	C
16.	B	16.	C	16.	B	16.	B
17.	A	17.	C	17.	A	17.	A
18.	D	18.	A	18.	A	18.	E
19.	D	19.	A	19.	C	19.	C
20.	C	20.	B	20.	D	20.	B
21.	B	21.	D	21.	B	21.	A
22.	A	22.	A	22.	C	22.	A
23.	C	23.	C	23.	A	23.	C
24.	B	24.	B	24.	E	24.	D
25.	A	25.	A	25.	C	25.	B