


ОҢТҮСТІК ҚАЗАҚСТАН MEDISINA AKADEMIASY «Оңтүстік Қазақстан медицина академиясы» АҚ		SOUTH KAZAKHSTAN MEDICAL ACADEMY АО «Южно-Казахстанская медицинская академия»
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CONTROL AND MEASURING DEVICES

Questions of the program for midterm control 1

OP name: 6B10115"Medicine"

Discipline code: GS 3305

Title of discipline: "General surgery"

Amount of study hours/credits: 90 hours (3 credits)

Course and semester of study: 3rd year, V semester

Shymkent-2024 y.



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Originator

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Border control No. 1

Asepsis


1. History of the development of asepsis and antiseptics
2. The concept of asepsis, ways of infection penetration
3. Prevention of air and drip infections
4. Planning of surgical departments
5. Structure of the trauma center, trauma department
6. Operation block layout
7. Operation block zones
8. Cleaning the operating room
9. Preparation of hands for metod surgeryy in Spasokukotsky and Kochergin, S-4, chlorhexidineom bigluconate, novosept, AHD, AHD-special, eurosept, tserigelm, Degmin and degmicide.
10. Instrument sterilization
11. Type of laying of dressing material and linen (Schimmelbusch)
12. Preparation of the operational field (Grossich – Filonchikov)
13. Additional methods for the prevention of suppuration of surgical wounds
14. Autoclave. Device, operating principle of the autoclave
15. Control of sterilizations after autoclaving

Antiseptics

1. The concept of antiseptics, types of antiseptics
2. Physical antiseptics
3. Mechanical antiseptics
4. Chemical antiseptics
5. Biological antiseptics
6. Mixed antiseptics (sequence)
7. Group of antiseptic drugs
8. Group of halides
9. Oxidizing agents
10. Heavy metal salts
11. Group of aldehydes
12. Alcohols, phenols
13. Colorants
14. Chemotherapeutic drugs
15. The effect of antibiotics on the body
16. Side effects of antibiotics on the body
17. Mistakes when using antibiotics
18. Determination of the sensitivity test
19. Groups of antibiotics
20. Sulfonamide preparations
21. Nitrofurantoin derivatives
22. Basic methods of using antiseptics

Bleeding issues

1. The concept of bleeding
2. What is a hematoma and hemorrhage?
3. Classification of bleeding events
4. Common symptoms of bleeding

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5. Local symptoms of bleeding
6. Hemothorax; concept, clinic, treatment
7. Hemarthrosis: concept, clinic, treatment
8. Hemoperitoneum: concept, clinic, treatment
9. Hemopericardium: concept, clinic, treatment
10. Hemokrainium: concept, clinic, treatment
11. Risks and outcomes of bleeding
12. Temporary stopping of bleeding
13. Applying a pressure bandage
14. Finger pressure
15. Applying a tourniquet
16. Disadvantages of the method of stopping bleeding with a tourniquet
17. Final stop of bleeding.
18. Mechanical methods of stopping bleeding.
19. Thermal methods of stopping bleeding
20. Chemical methods for stopping bleeding
21. Biological methods of stopping bleeding
22. Causes of bleeding
23. Acute and chronic anemia
24. Compensatory reactions of the body during bleeding
25. Normal indicators of the general blood test

Blood type

1. History of blood transfusions
2. Blood type Formula
3. Agglutination, concepts, types, causes
4. Standard whey, storage rules, suitability
5. Determination of blood type with standard sera
6. Determination of blood type with standard red blood cells
7. Determination of blood type with tsoliklon
8. Defining individual compatibility
9. Determination of the Rh factor (express, simple method)
10. Determination of Rh factor compatibility
11. Biological sample
12. Правила Ottenberg's Rules

Blood transfusion

1. History of blood transfusions
2. Mechanism of action of transfused blood
3. Indications for blood transfusion
4. Contraindications to blood transfusion
5. Determination of the suitability of canned blood and its storage
6. Direct blood transfusion technique
7. Indirect blood transfusion technique
8. Intravenous transfusion technique
9. Intra-arterial transfusion technique
10. Venesection technique
11. Technique of intraosseous blood transfusion

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Complications of blood transfusion, blood substitutes.


1. Classification осложненияof blood transfusion complications.
2. Air embolism, causes, clinic, diagnosis, treatment
3. Thromboembolism, causes, clinic, diagnosis, treatment
4. Acute dilation of the heart, causes, clinic, diagnosis, treatment
5. Тромбоэмболия артерии Horse artery thromboembolism, causes, clinic, diagnosis, treatment
6. Blood transfusion shock: causes, clinic, diagnosis, treatment
7. Anaphylactic shock: causes, clinic, diagnosis, treatment
8. Citrate shock: causes, clinic, diagnosis, treatment
9. Blood transfusion pyrogenic reaction, causes, clinic, diagnosis, treatment
10. Prevention of blood transfusion complications
11. Blood components and their use
12. Hemodynamic blood substitutes
13. Blood substitutes of detoxification action
14. Blood substitutes for parenteral nutrition

General questions of anaesthesiology

1. History of anesthesia and theory of anesthesia
2. General anesthesia or anesthesia (concept, types of anesthesia)
3. Means for inhalation anesthesia
4. Methods and methods of inhalation anesthesia
5. Preparing the patient for anesthesia
6. Indications and contraindications, complications of inhalation anesthesia
7. Essential anesthesia, indications and contraindications for the use of essential anesthesia
8. Clinical course of ether anesthesia
9. Post-sarcotic complications
10. Intubation anesthesia, concept. Indications and contraindications of intubation anesthesia.
11. Technique of intubation anesthesia
12. Complications of intubation anesthesia
13. Features of gas anesthesia, indications of nitrous oxide anesthesia
14. Non-inhalation anesthesia. Technique of intravenous anesthesia.
15. Curare-like drugs
16. Antidepolarizing and depolarizing relaxants
17. Combined anesthesia

Local anesthesia

1. Preparations for local anesthesia
2. The effect of local anesthesia
3. Indications and contraindications of local anesthesia
4. List methods of local anesthesia
5. Lubrication anesthesia technique
6. Technique of infiltration anesthesia
7. Method of local anesthesia according to Vishnevsky
8. Methods of conducting anesthesia
9. Methods of intraosseous anesthesia
10. Methods of intravenous and intra-arterial local anesthesia
11. Cooling anesthesia

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12. History and concept of spinal and epidural anesthesia
13. Preparation of the patient for spinal and epidural anesthesia
14. Technique of spinal anesthesia
15. Contraindications to spinal anesthesia
16. Complications of spinal anesthesia: during its implementation and after the introduction of an anesthetic
17. Types of Novocain Blockades
18. Vagosympathetic blockade (indications and contraindications, technique)
19. Paraneural novocaine blockade (indications and contraindications, technique)
20. Blockade of Shkolnikov-Silevanov

Local purulent infection

1. Furuncle, furunculosis: concept, etiology, clinic, diagnosis, treatment.
2. Carbuncle: a concept, pat.anatomy, etiology, clinic, diagnosis, treatment.
3. Lymphangitis (reticular, stem) concept, etiology, clinic, diagnosis, treatment.
4. Lymphadenitis: concept, etiology, clinic, diagnosis, treatment.
5. Hydraadenitis, concept, etiology, clinic, diagnosis, treatment.
6. Erysipelid: concept, etiology, clinic, diagnosis, treatment.
7. Erysipelas: concept, etiology, clinic, diagnosis, treatment.
8. Phlegmon, concept, etiology, clinic, diagnosis, treatment.
9. Abscess, concept, etiology, clinic, diagnosis, treatment.
10. Mumps, concept, etiology, clinic, diagnosis, treatment.
11. Mastitis: concept, etiology, clinic, diagnosis, treatment.
12. Panaritium: concept, classification, etiology, clinic, treatment.
13. Purulent pleurisy, concept, etiology, clinic, diagnosis, treatment.
14. Paraproctitis: concept, classification, etiology, clinic, diagnosis, treatment.
15. Thrombophlebitis, concept, etiology, clinic, diagnosis, treatment.
16. Bursitis, purulent arthritis: etiology, pathogenesis, clinic, treatment.
17. Peritonitis: etiology, pathogenesis, clinic, treatment.

Sepsis


1. The concept of sepsis, etiology.
2. Pathogenesis of sepsis (3 factors)
3. Foci of microbial introduction and their toxins in sepsis (4 types)
4. 3 types of reactions in sepsis
5. Pathoanatomic picture (9 types)
6. Classification of sepsis
7. Clinical picture of sepsis
8. General and local symptoms
9. Sepsis complications (6)
10. Infection control
11. Sepsis treatment
12. Main tasks of general and local treatment
13. Specific types of sepsis
14. Purulent-resorptive fever
15. Bacterial-toxic shock
16. Diagnosis of sepsis

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Test questions:

I- variant


1. Goals of modern premedication:
 - A. prevention of common complications during anesthesia
 - B. reducing the dose of basic anesthetics to facilitate the management of body functions during anesthesia
 - C. addressing the causes of metabolic acidosis
 - D. prevention of excessive accumulation of carbon dioxide in the blood as a result of insufficient lung function or increased dead space
 - E. increased secretion of mucous membranes and salivary glands, introduction to anesthesia
2. Type of anesthesia during surgery for the tendon panaritium of the V finger of the hand, complicated by phlegmon of the forearm:
 - A. Lukashovich-Oberst conducting anesthesia
 - B. intubation anesthesia with muscle relaxants
 - C. intravenous local anesthesia
 - D. intravenous anesthesia
 - E. intraosseous anesthesia
3. При Anesthesia is indicated for panaritias:
 - A. intubation system
 - B. cerebrospinal fluid
 - C. intravenous
 - D. by Oberst-Lukashovich
 - E. by Vishnevsky
4. An anesthetic most commonly used for local anesthesia:
 - A. cocaine
 - B. trimecain
 - C. lidocaine
 - D. sovkaïn
 - E. novocaine
5. 30-40 minutes before the operation as preparation for anesthesia is performed
 - A. premedication
 - B. hibernation
 - C. hypotension
 - D. psychological training
 - E. hypovolemia
6. A solution used for muscle relaxation
 - A. promedol
 - B. tubocurarine
 - C. diphenhydramine
 - D. tramadol
 - E. atropine
7. Goals of modern premedication:
 - A. prevention of excessive accumulation of carbon dioxide in the blood as a result of insufficient lung function or increased dead space
 - B. prevention of common complications during anesthesia
 - C. addressing the causes of metabolic acidosis
 - D. reducing the dose of basic anesthetics to facilitate the management of body functions during anesthesia

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- E. increased secretion of mucous membranes and salivary glands, introduction to anesthesia
- 8.** Type of anesthesia during surgery for the tendon panaritium of the V finger of the hand, complicated by phlegmon of the forearm:
- intraosseous anesthesia
 - intubation anesthesia with muscle relaxants
 - intravenous local anesthesia
 - Lukashevich-Oberst conducting anesthesia
 - intravenous anesthesia
- 9.** Anesthesia is indicated for panaritias:
- by Vishnevsky
 - cerebrospinal fluid
 - intravenous
 - intubation system
 - by Oberst-Lukashevich
- 10.** An anesthetic most commonly used for local anesthesia:
- trimecain
 - novocaine
 - lidocaine
 - sovkain
 - cocaine
- 11.** 30-40 minutes before the operation as preparation for anesthesia is performed ...
- hypotension
 - hibernation
 - premedication
 - psychological training
 - hypovolemia
- 12.** A solution used for muscle relaxation
- tubocurarine
 - promedol
 - diphenhydramine
 - tramadol
 - atropine

II- variant

- 1.** Strict operation block mode includes:
- sterilization, operating room
 - washing, sterilizing, and anaesthetic rooms
 - pre-surgery, corridor, hardware room
 - preoperative, car wash, anesthesia
 - preoperative, sterilization, and hardware treatment
- 2.** The type of bix laying that is superimposed on several materials is called:
- a special one
 - targeted
 - segmental information
 - a special one
- 3.** The most common complication of antibiotic therapy is:
- CNS lesion

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- B. allergic reactions
- C. ototoxicity
- D. nephrotoxicity
- E. hepatotoxicity
- 4.** Proteolytic enzymes are characterized by:
 - A. dehydration effect
 - B. bactericidal effect
 - C. anti-inflammatory effect
 - D. anticoagulation effect
 - E. lysis of nonviable tissues
- 5.** To определениdetermine the blood type, you must:
 - A. calcium chloride
 - B. universal serum
 - C. standard serums
 - D. heporin
 - E. patient's blood serum
- 6.** There is no difference between plasma and serum in serum:
 - A. proteins
 - B. agglutinins
 - C. gammaglobulins
 - D. fibrinogens
 - E. albumins
- 7.** Blood products and components:
 - A. polyglucin, polyfer, alvezin
 - B. plasma, albumin, leucocytic mass
 - C. aminocrovin, an aminopeptide
 - D. glyugicir, citroglucophosphate
 - E. aminocapronic acid, gelatinol
- 8.** Late complication after blood transfusion:
 - A. blood transfusion shock
 - B. allergic reaction
 - C. anaphylactic shock
 - D. thromboembolism
 - E. acute renal failure
- 9.** When transfusions ... protein incompatibility is rarely detected.
 - A. serums
 - B. albumin content
 - C. red blood cell mass массы
 - D. native plasma
 - E. whole blood
- 10.** If the group membership is incompatible, the first signs appear:
 - A. low back pain, headaches, dizziness, nausea, feeling hot
 - B. hypothermia, apathy
 - C. anuria, hemoglobinuria
 - D. anisocoria, bradycardia
 - E. bradypnea, vomiting
- 11.** For chronic anemia, it is effective to transfuse:
 - A. albumin, protein

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- B. whole blood
 - C. white blood cell mass
 - D. red blood cell mass массы
 - E. platelet mass
- 12.** Cramer's splint immobilization is performed for bone injuries:
- A. clavicles and shoulder blades
 - B. pelvis
 - C. lower thoracic and lumbar vertebrae
 - D. neck and upper thoracic vertebrae
 - E. upper and lower extremities


III- variant

- 1.** Mechanism of action of transfused platelet mass on the body:
 - A. transportation of carbon dioxide
 - B. infection control
 - C. blood clotting
 - D. transportation of nutrients
- 2.** When determining blood groups, blood drops five times smaller than serum drops were taken and mixed with a single glass rod, the results were evaluated after 3 minutes. Mistakes ошибки made:
 - A. blood and serum should be in a ratio of 1: 10. группы сыворотки A separate glass wand is required for each serum group. The plate 5 мин is gently shaken for 5 minutes, after which the reaction is evaluated
 - B. each drop of serum is mixed in separate glass rods with a nearby drop of blood
 - C. the results are evaluated after 5 minutes
 - D. a drop of blood should be 10 times smaller than a drop of serum
 - E. the results are evaluated after 3 minutes
- 3.** A woman at the second birth gave birth to a child with symptoms of hemolytic disease. The woman's blood type is A (II) Rh (-), the newborn's blood type is B (III) Rh (+), and the newborn's father is also B (III) Rh (+). The probable cause of the immune conflict is:
 - A. conflict over AB0
 - B. conflict over AB antigens
 - C. conflict by antigen in
 - D. rhesus conflict
 - E. conflict by antigen A
- 4.** A full-term newborn baby was diagnosed with hemolytic disease of newborns according to the Rh factor. The indicator of bilirubin content is critical. The baby's blood type is B (III), the mother's is A (II). A replacement blood transfusion is scheduled. To do this, you need to select a blood donation:
 - A. In (III) Rh (-)
 - B. 0 (I) Rh (-)
 - C. A (II) Rh (+)
 - D. A (II) Rh (-)
 - E. In (III) Rh (+)
- 5.** Patient I., 42 years old, was admitted to the surgical department with acute gastrointestinal bleeding. There was a need for blood transfusion. Blood type B (III), Rh-positive. A test for individual compatibility according to the AB0 system and Rh-compatibility was conducted. For a blood transfusion, another biological sample must be taken. The correct method of conducting

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it:

- A. pour blood twice in a jet of 15-20 ml with an interval of 3 minutes
 - B. pour blood three times in a jet of 15-20 ml at intervals of 3 minutes
 - C. twice pour blood 15-20 ml at intervals of 5 minutes drip
 - D. pour blood three times in a jet of 15-20 ml with an interval of 10 minutes
 - E. simultaneously pour in 15 ml of blood jet
- 6.** The agent used for intracardiac injections in clinical death:
- A. heparin
 - B. papaverine
 - C. adrenaline rush
 - D. glucose
 - E. cordiamine
- 7.** A symptom of dislocation is:
- A. crepitus
 - B. change in the absolute length of the limb
 - C. abnormal mobility in the damaged joint
 - D. change in the relative length of the limb and emptiness in the articular surface:
 - E. subcutaneous emphysema
- 8.** The spikelike bandage is applied to:
- A. cyst fingers
 - B. on the shoulder joint area
 - C. elbow area and forearm
 - D. neck and occipital region of the head
 - E. chest and stomach
- 9.** If the shoulder joint is dislocated, a bandage is applied:
- A. spikelike
 - B. T-shaped
 - C. cruciform
 - D. slingshot-shaped
 - E. Dezo
- 10.** The turtle patch is applied to:
- A. fingers of the hand
 - B. limb stumps
 - C. the scalp
 - D. shoulder and hip joints
 - E. knee and elbow joints
- 11.** The T-shaped bandage is applied to:
- A. clavicle area
 - B. nose and chin area
 - C. perineum
 - D. hip and shoulder area
 - E. the scalp
- 12.** A bandage is applied to the amputated stump of the lower leg and thigh:
- A. spiral shape
 - B. returning page
 - C. circular
 - D. T-shaped
 - E. slingshot-shaped

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13. Immobilization with a Dieterichs splint is performed for bone fractures:

- A. forearms
- B. shoulder area
- C. pelvis
- D. the spine
- E. thighs and shins