Ministry of Health of the Russian Federation

federal state budgetary educational institution
higher education
"North-Western State Medical University named after I.I. Mechnikov"

Ministry of Health of the Russian Federation

(Federal State Budgetary Educational Institution of Higher Education North-Western State Medical University named after I.I. Mechnikov of the Ministry of Health of Russia)

DISCIPLINE WORK PROGRAM

"Dermatovenereology"

Specialty: 31.05.01 General Medicine

Specialization: **Organization and provision of primary health care to the adult population in medical organizations**

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The work program of the discipline was discussed at a meeting of the Department of Dermatovenereology
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Approved by the Methodological Commission for the specialty 31.05.01 General Medicine
May 11, 2021

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1. The purpose of mastering the discipline

The purpose of mastering the discipline "Dermatovenereology" is to develop the student's competencies, prepare a specialist in skin diseases of non-infectious and infectious origin with the study of issues of etiology, pathogenesis, diagnosis, treatment and prevention, as well as the study of sexually transmitted infections, for further preparation of them to solve professional medical problems that are within the competence of the discipline "Dermatovenereology".

2. The place of discipline in the structure of the educational program

The discipline “Dermatovenereology” refers to the mandatory part of Block 1 “Disciplines (modules)” of the main professional educational program in the specialty 31.05.01 General Medicine (specialty level of education), Focus: Organization and provision of primary health care to the adult population in medical organizations. The discipline is mandatory to study.

3. List of planned learning outcomes in the discipline, correlated with the planned results of mastering the educational program

Code and name of competency	Code and name of the competency achievement indicator
OPK-4. Capable of using medical devices provided for by the procedure for providing medical care, as well as conduct examinations of the patient in order to establish a diagnosis	ID-2 OPK-4.2 Applies diagnostic methods, including the use of instrumental methods, when examining a patient in order to establish a diagnosis
OPK-7. Able to prescribe treatment and monitor its effectiveness and safety	ID-2 OPK-7.2 Selects medications, selects a specific dosage form, route of administration and rationally replaces drugs taking into account the patient's condition
PC-2. Capable of conducting a patient examination in order to identify the main pathological conditions, symptoms, disease syndromes, nosological forms	ID-1 PC-2.1. Conducts a survey and examination of the patient (collection of complaints, history of the patient’s life and illness, examination, palpation, percussion, auscultation) ID-2 PC-2.2. Formulates a preliminary diagnosis, draws up a plan and refers the patient for laboratory and/or instrumental examination if there are medical indications in accordance with the current procedures for the provision of medical care, clinical recommendations for the provision of medical care, taking into account the standards of medical care ID-3 PC-2.3. Refers the patient for consultation with medical specialists and/or for the provision of specialized medical care in an inpatient setting or in a day hospital if there are medical indications in accordance with the current procedures for the provision of medical care, clinical recommendations for the provision of medical care, taking into account the standards of medical care ID-4 PC-2.4. Conducts differential diagnosis with other diseases/conditions ID-5 PC-2.5. Establishes a diagnosis taking into account clinical classifications and the current International Statistical Classification of Diseases

	and Related Health Problems (ICD)
PC-3. Capable of managing and treating patients in need of medical attention	ID- 1 PC-3.1. Develops a plan and prescribes non-drug and drug treatment for patients, taking into account the diagnosis, age and clinical picture in accordance with the current procedures for the provision of medical care, clinical recommendations for the provision of medical care, taking into account the standards of medical care in primary health care settings ID-2 PC-3.2. Conducts assessments of the effectiveness and safety of the use of drugs, medical devices and nutritional therapy and other treatment methods in primary health care settings

Competency achievement indicator code	Learning outcomes (assessment indicators)	Evaluation tools
ID-2 OPK-4.2	**Knows: methods for diagnosing skin diseases and syphilis using instrumental methods in order to make a diagnosis.**	Situational tasks, test tasks, control questions, demonstration of practical skills, abstract
	Can: use medical devices (slides, spatulas, dermatoscope, Wood's lamp, magnifying lamp) to diagnose skin diseases and syphilis.	
	Has the skill of: using medical devices (slides, spatulas, dermatoscope, Wood's lamp, magnifying lamp) for the purpose of making a dermatological diagnosis, provided for in the procedures for providing medical care.	
ID-2 OPK-7.2	**Knows: the features of etiotropic, pathogenetic and symptomatic drug treatment of skin diseases and syphilis, the procedure for choosing a dosage form and route of administration of drugs depending on the type of dermatoses and the severity of the process, as well as rational replacement of the drug in case of possible intolerance or impossibility of administering the drug.**	Situational tasks, test tasks, control questions, demonstration of practical skills, abstract
	Able to: select the necessary drug therapy according to the nosological form of the disease, determine the dose of the drug depending on body weight, concomitant pathology, route of administration, taking into account the patient's condition.	
	Has the skill to prescribe rational drug therapy according to the nosological form of dermatosis, including the selection of dose and route of administration. If necessary, replace the drug depending on the general condition of the patient.	
ID-1 PC-2.1	**Knows: the features of conducting a patient interview, taking into account complaints, life history and disease development in patients with non-infectious and infectious skin diseases and STIs (syphilis). Features of a dermatological examination using practical skills.**	Situational tasks, test tasks, control questions, demonstration of practical skills, abstract, educational medical history
	Able to: make a diagnosis taking into account survey	

	data and patient complaints, anamnesis of the development of the disease, combine symptoms of damage to the skin and mucous membranes based on patient complaints, medical history and laboratory and instrumental research methods to make a diagnosis and determine treatment tactics. Draw up a plan for examination and consultation of related specialists	
	Has the skill to: collect patient complaints taking into account medical history, examine a patient with skin pathology using practical skills and laboratory and instrumental research methods in order to make a preliminary diagnosis. When conducting a dermatological examination, use practical skills (dermatographism, grattage, determination of the Wickham grid, psoriatic triad, symptom of probe failure, etc.) and laboratory and instrumental research methods (Wood's lamp, fingerprint smears, Balzer test, etc.)	
ID-2 PC-2.2	**Knows: the features of making a dermatological diagnosis, drawing up an examination plan using laboratory diagnostic methods in accordance with clinical recommendations for the provision of medical care.**	Situational tasks, test tasks, control questions, demonstration of practical skills, abstract, educational medical history
	Able to: formulate a correct preliminary diagnosis of a skin disease, draw up a plan for examining the patient, conduct laboratory and instrumental examinations taking into account clinical recommendations for this disease	
	Has the skill of making a preliminary diagnosis using laboratory tests in accordance with clinical guidelines for the provision of medical care.	
ID-3 PC-2.3	**Knows: indications for the provision of specialized dermatological medical care for the purpose of hospitalizing patients in hospitals or in a day hospital, depending on the existing medical indications in accordance with clinical guidelines for the provision of medical care.**	Situational tasks, test tasks, control questions, demonstration of practical skills, abstract, educational medical history
	Able to: determine the indications for a patient with dermatological pathology and syphilis for referral to a consultation with medical specialists to decide on the need for treatment, hospitalization in a hospital or day hospital if there are medical indications in accordance with clinical guidelines for the provision of medical care.	
	Has the skill of: referring a patient for consultation with medical specialists to decide on the need for treatment, hospitalization in a hospital or day hospital if there are medical indications in accordance with clinical guidelines for the provision of medical care.	
ID-4 PC-2.4	**Knows: the main nosological forms of skin diseases for differential diagnosis**	Situational tasks, test tasks, control questions, demonstration of practical skills, abstract, educational medical history
	Able to: conduct a differential diagnosis of skin pathology and syphilis based on the clinical picture, medical history, and also using laboratory diagnostic	

	methods.	
	Has the skill of: performing differential diagnosis of a specific patient with skin pathology and syphilis based on data from clinical manifestations, life history and disease using laboratory and instrumental examination methods	
ID-5 PC-2.5	**Knows: clinical classification of dermatoses according to the current International Static Classification of Diseases and Related Health Problems (ICD)**	Situational tasks, test tasks, control questions, demonstration of practical skills, abstract, educational medical history
	Able to: correctly make a diagnosis taking into account clinical classifications and the current international static classification of diseases and related health problems (ICD)	
	Has the skill of: making a dermatological diagnosis taking into account clinical classifications and the current international static classification of diseases and related health problems (ICD)	
ID-1 PC-3.1	**Knows: treatment plan for patients with skin pathology and syphilis with the prescription of drug and non-drug treatment, taking into account the dermatological diagnosis, age, clinical picture and concomitant pathology in accordance with the current procedures for the provision of medical care, clinical recommendations for the provision of medical care, taking into account the standards of medical care in primary health care settings**	Situational tasks, test tasks, control questions, demonstration of practical skills, abstract
	Able to: develop a plan for the diagnosis and treatment of patients with skin pathology and syphilis with the prescription of drug and non-drug treatment, taking into account age, clinical picture and concomitant pathology in accordance with the current procedures for the provision of medical care, clinical recommendations for the provision of medical care, taking into account the standards of medical care in primary health care settings	
	Has the skill of: prescribing therapy for patients with dermatological pathology and syphilis with the prescription of drug and non-drug treatment, taking into account age, clinical picture and concomitant pathology in accordance with the current procedures for the provision of medical care, clinical recommendations for the provision of medical care, taking into account the standards of medical care in primary health care settings	
ID-2 PC-3.2	**Knows: methods for assessing the effectiveness and safety of the use of drugs, medical devices and nutritional therapy and other treatment methods in primary health care settings**	Situational tasks, test tasks, control questions, demonstration of practical skills, abstract
	Able to: evaluate the effectiveness and safety of the use of medications prescribed to patients with dermatological pathology and syphilis, as well as medical devices and nutritional therapy and other treatment methods	
	Has the skill of: assessing the effectiveness and safety of the use of drugs, medical devices and medical nutrition and other treatment methods in primary	

	health care settings	

4. Scope of discipline and types of academic work

Type of educational work	Labor intensity	Semesters
		8
Contact work between students and teachers	76	76
Classroom work:	72	72
Lectures (L)	24	24
Practical exercises (PP)	48	48
Independent work:	**68**	**68**
during theoretical training	36	36
preparation for the exam	32	32
Interim certification: exam, including passing and group consultations	4	4
Total labor intensity: academic hours	**144**	
credit units	**4**	

5. The content of the discipline, structured by sections (topics) indicating the number of academic hours and types of training sessions

5.1.Content of discipline sections

No.	Name of discipline section	Annotated content of the discipline section	List of competencies formed in the process of mastering the section
1.	Dermatology	The concept of primary and secondary elements of the rash, pathomorphological features. Etiology, pathogenesis and clinical manifestations of diseases of the skin and mucous membranes.	OPK-4, OPK-7, PC-2, PC-3
2.	Venereology	Etiology of syphilis, characteristics of the pathogen, pathogenesis. Classification. Clinical manifestations of early, late and congenital syphilis. Diagnostics.	OPK-4, OPK-7, PC-2, PC-3

5.2.Thematic plan of lectures

No.	Name of discipline section	Lecture topics	Active forms of learning	Labor intensity (academic hours)

No.	Name of discipline section	Lecture topics	Active forms of learning	Labor intensity (academic hours)
1.	Dermatology	L.1 Introductory lecture. Dermatology as a science. Historical stages in the development of dermatology. Outstanding domestic dermatologists and their contribution to the development of science. Skin is a physiological barrier. Protective properties of the skin. Pathogenetic factors in the development of diseases.	-	2
		L.2 Simple contact dermatitis from exposure to mechanical, physical, chemical factors. Allergic dermatitis. Porphyria cutanea tarda. Chills. Etiology. Clinic, diagnostics. Treatment. Prevention.	-	2
		L.3 Toxicoderma. Etiology, pathogenesis, types of allergic reactions. Clinical varieties. Polymorphic exudative erythema. Stevens-Johnson syndrome. Lyell's syndrome. Hives. Clinic, diagnostics. Treatment. Prevention.	-	2
		L.4 Eczema. Etiology, pathogenesis, classification. Clinic, treatment, prevention. Atopic dermatitis. Classification. Pathogenesis, clinical picture, treatment. Prevention.	-	2
		L.5 Diffuse connective tissue diseases. Lupus erythematosus. Scleroderma. Etiology. Pathogenesis. Clinical manifestations. Diagnostics. Treatment. Clinical examination.	-	2
		L.6 True acantholytic pemphigus. Classification. Etiology, pathogenesis. Pathomorphology Clinical manifestations. Diagnostics. Treatment. Clinical examination.	-	2
		L.7 Viral dermatoses. Etiology, pathogenesis. Clinical varieties (herpes zoster, herpes simplex, warts, contagious molluscum contagiosum). Modern methods of treatment. Prevention.	-	2
		L.8 Opportunistic micromycetes. Classification of mycoses ICD-10. Pathogenetic factors. Malassezia. Etiology. Pathogenesis. Superficial candidiasis of the skin and mucous membranes. Clinical manifestations. Treatment. Prevention.	-	2
		L.9 Leprosy. Tuberculosis. Characteristics of the pathogen. Clinical varieties. Pathomorphology. Treatment, prevention.	-	2

No.	Name of discipline section	Lecture topics	Active forms of learning	Labor intensity (academic hours)
2.	Venereology	L.10 General course of syphilis. Historical stages of development. Epidemiology. Characteristics of the pathogen. Reinfection, superinfection. Modern classification ICD-10. Primary period of syphilis (early period) Typical, atypical and complicated chancre. Diagnostics.	-	2
		L.11 Secondary period of syphilis (early period). Classification. Clinical manifestations. Diagnostics. Serological reactions.	-	2
		L.12 Late period of syphilis. Clinical manifestations. Diagnostics. Treatment. Congenital syphilis. Transmission routes. Classification. Clinical manifestations. Diagnostics. Treatment. Criteria for cure. Prevention.	-	2
			TOTAL:	24

5.3.Thematic plan for practical classes

№ p/p	Name of discipline section	Topics of practical classes	Active forms of learning	Forms of current control	Labor intensity (academic hours)
1.	Dermatology	P.Z 1 Basics of diagnosing diseases of the skin and oral mucosa. Primary and secondary morphological elements and mechanisms of their formation. Principles of external therapy.	GD AC AIM dummies	Test questions, test tasks, situational tasks, demonstration of practical skills	4
		P.Z 2 Dermatitis. Etiology. Classification. Etiology. Simple contact and allergic dermatitis. Chills. Porphyria cutanea tarda. Treatment.	GD AC AIM dummies	Test questions, test tasks, situational tasks, demonstration of practical skills	4
		P.Z 3 Toxicoderma. Types of allergic reactions. Etiology, pathogenesis. Clinical varieties. Exudative erythema multiforme. Epidermal necrolysis (Stevens-Johnson syndrome, Lyell's syndrome). Hives. Definition, classification, clinical features. Treatment and prevention of various clinical forms.	GD AC AIM dummies	Test questions, test tasks, situational tasks, demonstration of practical skills	4
		P.Z 4 Atopic dermatitis. Eczema. Etiology, pathogenesis. Clinic,	GD AC AIM	Test questions, test tasks, situational tasks,	4

		diagnostics. Principles of general and local therapy. Prevention. Clinical examination.	dummies	demonstration of practical skills	
		P.Z 5 Diffuse connective tissue diseases. Lupus erythematosus. Scleroderma. Etiology. Pathogenesis. Clinical manifestations. Diagnostics. Treatment. Clinical examination.	GD AC AIM dummies	Test questions, test tasks, situational tasks, demonstration of practical skills	4
		P.Z 6 Analysis of patients with various forms of dermatoses. Writing an academic medical history.	GD AC AIM	Writing a medical history, demonstration of practical skills	4
		P.Z 7 Lichen planus. Psoriasis. Etiology, pathogenesis. Pathomorphology. Clinical manifestations. Treatment. Prevention.	GD AC AIM dummies	Test questions, test tasks, situational tasks, demonstration of practical skills	4
		P.Z 8 Opportunistic dermatomycetes. Pathogenetic factors. Malassezia (pityriasis versicolor, Malassezia folliculitis). Superficial candidiasis of the skin and mucous membranes. Treatment methods. Diagnostics, methods of therapy, prevention.	GD AC AIM dummies	Test questions, test tasks, situational tasks, demonstration of practical skills	4
		P.Z 9 Dermatophytosis. Pathogenic dermatomycetes. ICD-10 classification. Etiology. Characteristics of pathogens. Clinical manifestations. Diagnostic methods. Principles of treatment.	GD AC AIM dummies	Test questions, test tasks, situational tasks, demonstration of practical skills	4
		P.Z 10 Pyodermatitis. Acute and chronic staphyloderma. Pathogenetic factors of their development. Acute and chronic streptoderma. Clinical manifestations. Treatment and prevention. Scabies. Pediculosis. Etiology. Clinical varieties. Diagnostics. Principles of modern therapy.	GD AC AIM dummies	Test questions, test tasks, situational tasks, demonstration of practical skills	4
2.	Venereology	P.Z 11 General course of syphilis. Early syphilis (primary and secondary periods). Clinical manifestations. Diagnostic methods. Differential diagnosis. Medical ethics and	GD AC AIM dummies	Test questions, test tasks, situational tasks, demonstration of practical skills	4

		deontology. Serodiagnosis.			
		P.Z 12 Late syphilis. Differential diagnosis. Methods of treatment, prevention. Clinical and serological control.	GD AC AIM dummies	Test questions, test tasks, situational tasks, demonstration of practical skills	4
				TOTAL:	48

GD – group discussion
AS – situation analysis
AIM – analysis of simulation models

5.4. Thematic plan of seminars – not provided

5.5.Thematic plan of laboratory work - not provided

5.6. Independent work:

No.	Name of discipline section	Types of independent work*	Current control forms	Labor intensity (academic hours)
1	Dermatology	Working with lecture material. Working with educational literature. Preparation of abstracts	Test tasks, situational tasks, test questions, defending an essay, writing an educational medical history	20
2	Venereology	Working with lecture material Working with educational literature	Test tasks, situational tasks, test questions	16
			TOTAL:	36
			Preparing for the exam	32

5.6.1. Abstract topics:

1. 1. Characteristics of pathogens, epidemiology. Modern classification ICD-10.
2. Mycosis of the feet and hands. Epidemiology, characteristics of pathogens. Clinical manifestations. Diagnostics. Treatment, prevention.
3. Generalized mycosis, trichophytosis granuloma of Majocchi. Characteristics of pathogens. Clinical manifestations. Diagnostics. Treatment, prevention.
4. Onychomycosis. Epidemiology, characteristics of pathogens. Clinical varieties, diagnosis. Treatment and prevention.
5. Differential diagnosis of onychomycosis caused by opportunistic and pathogenic dermatomycetes.
6. Inguinal athlete's foot. Epidemiology, characteristics of the pathogen. Clinic, diagnostics. Treatment and prevention.
7. Microsporia. Epidemiology, characteristics of pathogens. Clinical manifestations, diagnosis. Treatment and prevention.

8. Superficial trichophytosis. Epidemiology, characteristics of pathogens. Clinic, diagnostics. Treatment and prevention.
9. Chronic superficial trichophytosis. Epidemiology, characteristics of pathogens. Clinic, diagnostics. Treatment and prevention.
10. Infiltrative-suppurative trichophytosis. Epidemiology, characteristics of pathogens. Clinic, diagnostics. Treatment and prevention.
11. Differential diagnosis of vulgar and parasitic sycosis
12. Favus. Epidemiology, characteristics of pathogens. Clinic, diagnostics. Treatment and prevention.
13. Microscopic diagnosis of dermatophytosis.
14. Cultural diagnosis of dermatophytosis. Documentation for registration of dermatophytosis. Deregistration.
15. Principles of therapy for dermatophytosis. General and external treatment.
16. Scabies. Epidemiology, characteristics of the pathogen. Documentation for registration of scabies. Diagnostics. Prevention.
17. Clinical manifestations of scabies.
18. Anti-epidemic measures. Registration form, deregistration. Treatment of scabies.
19. Crusted scabies. Predisposing factors of its development. Clinical picture. Treatment.
20. Pediculosis. Epidemiology, characteristics of pathogens.
21. Clinical types of pediculosis. Diagnostics. Documentation for registration of pediculosis.
22. Acute superficial staphyloderma. Characteristics of ostiofolliculitis and folliculitis. Staphylococcal impetigo.
23. Epidemic pemphigus of newborns. Epidemiology. Clinical picture. Epidemiological measures.
24. Differential diagnosis of syphilitic and epidemic pemphigus in newborns.
25. Acute deep staphyloderma. Definition of a boil, clinical manifestations of a boil. Features of the course of a boil on the face. Principles of general and local therapy.
26. Definition and clinical manifestations of carbuncle, hidradenitis. Principles of general and local therapy.
27. Chronic staphyloderma. Pathogenetic factors of their development.
28. Vulgar sycosis. Furunculosis. Clinical picture. Principles of therapy, prevention.
29. Acute streptoderma. Definition of phlyctena (non-follicular pustule). Clinical varieties (impetigo, intertrigo, paronychia, angular stomatitis).
30. Acute and chronic diffuse streptoderma. Predisposing development factors. Clinical manifestations. Treatment.
31. Ecthyma vulgaris. Causes of occurrence. Clinical picture. Differential diagnosis with pustular syphilis. Treatment. Prevention.

5.6.2. Sample topics for medical history

1.Allergic dermatitis
2. Microbial eczema
3.Atopic dermatitis
4.Ordinary psoriasis
5. Herpes zoster
6.Scabies

6. Guidelines for students on mastering the discipline

For an effective and sufficient level of mastering the discipline, it is necessary to: systematically prepare for ongoing control in practical classes, both in the form of an interview using test questions, solving situational problems, and solving test tasks.
To successfully pass the intermediate certification exam, it is necessary to fully study and work through all assessment tools: interview questions, situational tasks.

Planning and organizing the time needed to study the discipline

An important condition for successful mastery of the discipline is the creation of a system of proper organization of work that allows you to distribute the educational load evenly in accordance with the schedule of the educational process. Drawing up a work plan for the semester, month, week, day can be of great help in this. Its presence will allow you to subordinate your free time to study purposes and work more successfully and efficiently. In the evening you should always distribute work for tomorrow. At the end of each day, it is advisable to summarize the work: carefully check whether everything was completed according to the plan, whether there were any deviations, and if there were, for what reason they occurred. It is necessary to exercise self-control, which is a necessary condition for successful study. If something remains undone, you need to find time to complete this part of the work without reducing the volume of the weekly plan. It is recommended to complete all tasks for practical classes, as well as tasks assigned for independent work, immediately after the corresponding topic of the lecture course, which contributes to better assimilation of the material, allows you to promptly identify and eliminate "gaps" in knowledge, systematize previously covered material, and on its basis begin to master new knowledge and skills.

The university education system is based on a rational combination of several types of training sessions (primarily lectures and practical classes), the work of which has a certain specificity.

Preparing for lectures

Introduction to the discipline occurs already at the first lecture, where you are required not only to pay attention, but also to independently prepare notes. When working with lecture notes, it is necessary to take into account the fact that some lectures provide answers to specific questions on the topic, while others only reveal relationships between phenomena, helping to understand the deep processes of development of the subject being studied, both in history and at the present time.

Lecture note-taking is a complex type of classroom work that involves intense mental activity of the student. A note is useful when the most essential things are written down and done by the student himself. There is no need to try to write down the entire lecture verbatim. This kind of "note-taking" does more harm than good. It is advisable to first understand the main idea presented by the lecturer and then write it down. It is advisable to record on one page of the sheet or leave fields on which later, when working independently with notes, you can make additional notes and mark unclear places.

It is better to divide the lecture notes into points, observing the red line. This will be greatly facilitated by the lecture plan questions proposed to the teachers. You should pay attention to the accents and conclusions that the lecturer makes, marking the most important points in the lecture material with the remarks "important", "well remember", etc. You can also do this using colorful markers or pens, emphasizing terms and definitions.

It is advisable to develop your own system of abbreviations, abbreviations and symbols. However, when further working with notes, it is better to replace the symbols with ordinary words for quick visual perception of the text.

When working on lecture notes, it is always necessary to use not only the textbook, but also the literature that was additionally recommended by the lecturer. It is this kind of serious, painstaking work with the lecture material that will allow you to deeply master the theoretical material.

Preparation for practical exercises

Careful thinking and study of the plan's issues is based on studying the current material of the lecture, and then studying the required and additional literature recommended for this topic. All new concepts on the topic being studied must be memorized and included in a glossary, which should be kept from the very beginning of the course.

The result of such work should be manifested in the ability to freely answer theoretical questions of the workshop, speak and participate in a collective discussion of issues on the topic being studied, and correctly perform practical tasks.

In the process of preparing for practical classes, it is necessary to pay special attention to independent study of the recommended literature. Despite the completeness of the lecture notes, it is impossible to present all the material in it due to the limit of classroom hours. Therefore, independent work with textbooks, teaching aids, scientific and reference literature, materials from periodicals and the Internet is the most effective method of obtaining additional knowledge, allows you to significantly intensify the process of mastering information, promotes a deeper assimilation of the material being studied, and forms the correct attitude to a specific problem.

Recommendations for working with literature

It is advisable to start working with literature by studying general works on the topic, as well as textbooks and teaching aids. Next, it is recommended to move on to the analysis of monographs and articles that consider individual aspects of the problems studied in the course, as well as official materials and unpublished documents (research papers, dissertations), which may contain the main issues of the problem being studied.

Working with sources should begin with introductory reading, i.e. view the text, highlighting its structural units. During introductory reading, bookmarks mark those pages that require more careful study.

7. Evaluation materials

Evaluation materials for the discipline for ongoing monitoring of progress and intermediate certification of students include examples of evaluation tools (Appendix A to the work program of the discipline), procedure and assessment criteria.

8. List of educational literature and Internet resources necessary for mastering the discipline

8.1. Educational literature:

1. Leprosy, cutaneous leishmaniasis: textbook / L.A. Karjakina, S.V. Klyuchareva, A.B. Piryatinskaya. – St. Petersburg: Publishing house North-Western State Medical University named after I.I. Mechnikov, 2013. – 26 p.
2. Dermatophytosis: microsporia, superficial and infiltrative-suppurative trichophytosis, favus: textbook / E.A. Belova, O.S. Nechaeva, S.N. Gusev. –SPb.: Publishing house North-Western State Medical University named after I.I. Mechnikov, 2015. - 42 p.
3. Histopathology of dermatoses: textbook / I.O. Smirnova, V.A. Piryatinskaya, S.V. Klyucharyova. – St. Petersburg: Publishing house North-Western State Medical University named after I.I. Mechnikov, 2015. ¬– 78 p.
4. Skin and venereal diseases: a textbook for students of medical universities / A.V. Samtsov, V.V. Barbinov - St. Petersburg: ELBI, 2002. - 314 p. – ISBN 5-93979-021-6.
5. Skripkin Yu.K. "Skin and venereal diseases", textbook for doctors and students of medical universities, M. 2005.

6. Diseases of the oral mucosa: textbook / ed. prof. K.I. Raznatovsky. – St. Petersburg: Publishing house North-Western State Medical University named after I.I. Mechnikov, 2016. –220 p.,
7. Methods of examining a dermatological patient: educational and methodological manual / ed. prof. K.I. Raznotovsky. – St. Petersburg: Publishing house North-Western State Medical University named after I.I. Mechnikov 2019. – 96 p.
8. Cheilitis: a textbook / A.M. Lalaeva (and others). – St. Petersburg: Publishing house North-Western State Medical University named after I.I. Mechnikov 2018. – 52 p.
9. Pretumors and tumors of the oral mucosa: textbook / S.V. Klyucharev - St. Petersburg: Publishing house North-Western State Medical University named after I.I. Mechnikov 2018. – 64 p.
10. Topical therapy of dermatoses: textbook / ed. Prof. K.I. Raznotovsky. – St. Petersburg: Publishing house North-Western State Medical University named after I.I. Mechnikov 2018. – 88 p.
11. Disease of the oral mucosa: textbook / ed. prof. K.I. Raznotovsky.-2nd ed., additional. – St. Petersburg: Publishing house North-Western State Medical University named after I.I. Mechnikov 2020. – 204 p. https://moodle.szgmu.ru/course/view.php?id=150&section=19
12. Skin and Venereal Diseases : textbook / ed. by O.Yu. Olisova. - Moscow: GEOTAR-Media, 2024. - 320 p. - ISBN 978-5-9704-8477-7, DOI: 10.33029/9704-8477-7-SVD-2024-1-320. - The electronic version is available on the website Electronic Library System "Student Consultant": [site]. URL: https://www.studentlibrary.ru/book/ISBN9785970484777.html
13. Allergodermatosis : study guide / O. S. Nechaeva [et al.]. – 2nd ed., revised ; English text by E. Yu. Lavrova. – Saint-Petersburg : NWSMU n. a. I. I. Mechnikov Publishing House, 2021. – 68 p. https://sdo.szgmu.ru/pluginfile.php/563135/mod_resource/content/1/Nechaeva_Allergodermathosis.pdf
14. Smirnova, O. N. Allergodermatosis : study guide / O. N. Smirnova [et al.]. – 2nd ed., revised ; English text by E. Yu. Lavrova. – Saint-Petersburg : NWSMU n. a. I. I. Mechnikov Publishing House, 2024. – 68 p. https://sdo.szgmu.ru/pluginfile.php/922503/mod_resource/content/1/Smirnova_Allergodermathosis.pdf
15. Skin diseases : study guide / edited K. I. Raznatovsky ; English text by N. G. Koroleva. – Saint-Petersburg : NWSMU n. a. I. I. Mechnikov Publishing House, 2024. – 212 p. https://sdo.szgmu.ru/pluginfile.php/989658/mod_resource/content/1/Raznatovsky_Dermatology.pdf

8.2. Resources of the Internet information and telecommunications network:

Name of Internet resource	Email address of the resource
Information, reference and search systems	Medline, Pub–Med, WebofSciense
Russian National Electronic Library (Runeb)	www.elibrary.ru
Electronic resource: sexually transmitted infections / federal. target program “Prevention and control of diseases of a social nature 2007–2011	http://www.ippp.ru/
State Scientific Center of Dermatology and Cosmetology / Federal State Budgetary Institution “State. Scientific Center of Dermatology and Cosmetology” Ministry of Health of the Russian Federation.	http://www.cnikvi.ru.
Electronic version of the journal “Bulletin of Dermatology and Venereology”	http://www.mediasphera.ru/journals/vestnik.

Electronic resource: Dermatology in Russia	http://www.dermatology.ru/
Electronic version of the journal “Problems of Medical Mycology”	www.mycology.szgmu.ru/journal–problemi–med–mycologii
Electronic version of the magazine “Consilium Medicum”	http://dermatology.con–med.ru/
Electronic resource: site “mycology”	http://www.rusmedserv.com/mycology/index.html
Methodological manuals “Dermatology and venereology” Moodle North-Western State Medical University named after I.I. Mechnikov	https://moodle.szgmu.ru/course/view.php?id=150&section=19

9. List of information technologies used to master the discipline, including a list of software, professional databases and information reference systems

9.1. List of information technologies used in the educational process:

No.	Name of discipline section	Information technology
	Dermatology Venereology	posting of educational materials and control of knowledge - testing in EIEE FSBEI HE North-Western State Medical University named after I.I. Mechnikov https://moodle.szgmu.ru/course/view.php?id=833

9.2. List of software used in the educational process (licensed and freely distributed software, including domestically produced):

No.	Software product name	License validity period	Documents confirming right to use software products
licensed software			
1.	ESET NOD 32	1 year	Government contract № 07/2020
2.	MS Windows 8 MS Windows 8.1 MS Windows 10 MS Windows Server 2012 Datacenter - 2 Proc MS Windows Server 2012 R2 Datacenter - 2 Proc MS Windows Server 2016 Datacenter Core	Unlimited	State contract No. 30/2013-O; Government contract No. 399/2013-OA; Government contract No. 07/2017-EA.
3.	MS Office 2010 MS Office 2013	Unlimited	Government contract No. 30/2013-OA; Government contract No. 399/2013-OA.
4.	Academic LabVIEW Premium Suite (1 User)	Unlimited	Government contract № 02/2015
licensed software of domestic production			
1.	Anti-plagiarism	1 year	Government contract № 2409

2.	“WEBINAR (WEBINAR)” VERSION 3.0	1 year	Contract No. 347/2020-M
3.	"3KL e-learning environment"	1 year	Contract No. 348/2020-M
4.	TrueConf Enterprise	1 year	Contract No. 396/2020-EA
free software			
1.	Google Chrome	Unlimited	Open License Agreement GNU GeneralPublicLicense
2.	NVDA	Unlimited	Open License Agreement GNU GeneralPublicLicense
freely distributed software of domestic production			
1.	Moodle	Unlimited	Open License Agreement GNU GeneralPublicLicense

9.3. List of professional databases and information reference systems:

No.	Name software product	License validity period	Documents confirming right to use software products	Mode access for disabled students and persons with limited health capabilities
1.	Consultant Plus	1 year	Agreement No. 655/2020-EA	-
2.	EBS “Student Consultant”	1 year	Contract No. 307/2020-EA	http://www.studmedlib.ru/
3.	EMB “Doctor Consultant”	1 year	Contract No. 281/2020-EA	http://www.rosmedlib.ru/
4.	EBS "Ibooks.ru/ibooks.ru"	1 year	Contract № 06/2020	https://ibooks.ru
5.	EBS “IPRBooks”	1 year	Contract No. 08/2020-ZK	http://www.iprbookshop.ru/special
6.	Electronic library system “Bukap”	1 year	Contract № 05/2020	https://www.books-up.ru/
7.	EBS "Lan Publishing House"	1 year	Contract No. 395/2020-EA	https://e.lanbook.com/

10. Material and technical support of discipline

Classrooms for conducting lecture-type training sessions, group and individual consultations, ongoing monitoring of progress and intermediate certification of students, equipped with equipment and technical means of teaching: St. Petersburg, Piskarevsky Prospekt, 47, lit. I (building 14), room. No. 1,2,3,4 FSBEI HE North-Western State Medical University named after I.I. Mechnikov of the Ministry of Health of Russia;
Equipment: board (chalk); teacher's table, teacher's chair, student tables, student chairs.;
Technical teaching aids: multimedia projector, teacher’s laptop, system unit, monitor.
Special technical teaching aids: Roger Pen (Roger personal wireless transmitter in the form of a pen), Roger MyLink (Roger Pen system signal receiver) (for students with hearing impairments); IntelliKeys (wired keyboard with Russian Braille with a matte black finish), (St. Petersburg, Piskarevsky Prospekt, 47, lit. R (building 9), room No. 18.19, Federal State Budgetary Educational Institution of Higher Education North-Western State Medical University named after I.I. Mechnikov of the Ministry of Health of Russia).

Classrooms for conducting seminar-type training sessions, group and individual consultations, ongoing monitoring of progress and intermediate certification of students, equipped with equipment and technical means of training: St. Petersburg, Piskarevsky Prospekt, 47, lit. I (building 14), room. No. 1,2,3,4 FSBEI HE North-Western State Medical University named after I.I. Mechnikov of the Ministry of Health of Russia; During practical

classes, students study at the clinical base of the Department of Dermatovenereology at the address: st. Santiaga de Cuba 1/28.
Equipment: Simulation training using dummies: 526 pieces
Equipment, devices: slide projectors -4, overhead projector-1, personal computer-1, laptop - 2, multimedia - 3, slides-1000, microscope-7, histological preparations-20, tables-50, Dermatoscope, Wood's lamp, magnifying lamp.
Technical teaching aids: multimedia projector, teacher’s laptop, system unit, monitor.
Special technical teaching aids: Roger Pen (Roger personal wireless transmitter in the form of a pen), Roger MyLink (Roger Pen system signal receiver) (for students with hearing impairments); IntelliKeys (wired keyboard with Russian Braille with a matte black finish), (St. Petersburg, Piskarevsky Prospekt, 47, lit. R (building 9), room No. 18.19, Federal State Budgetary Educational Institution of Higher Education North-Western State Medical University named after I.I. Mechnikov of the Ministry of Health of Russia).

Premises for independent work of students, equipped with computer equipment with the ability to connect to the Internet and provided with access to the electronic information and educational environment of the University: St. Petersburg, Piskarevsky Prospekt, 47, lit. AE (building 32),
aud. No. 1, lit. R (building 9), room. No. 18.19 FSBEI HE North-Western State Medical University named after I.I. Mechnikov of the Russian Ministry of Health.

Appendix A

Ministry of Health of the Russian Federation

federal state budgetary educational institution
higher education
"North-Western State Medical University
named after I.I. Mechnikov"
Ministry of Health of the Russian Federation

(Federal State Budgetary Educational Institution of Higher Education North-Western State Medical University named after I.I. Mechnikov of the Ministry of Health of Russia)

EVALUATION MATERIALS

(for ongoing monitoring of progress and intermediate certification of students)

Specialty:	31.05.01 General medicine
Focus: Organization and provision of primary health care to the adult population in medical organizations	
Name of discipline:	Dermatovenereology
Implementation language:	Russian, English

St. Petersburg – 2021

1. List of planned learning outcomes in the discipline

Competency achievement indicator code	Learning outcomes (assessment indicators)	Evaluation tools
ID-2 OPK-4.2	**Knows: methods for diagnosing skin diseases and syphilis using instrumental methods in order to make a diagnosis.**	Situational tasks, test tasks, control questions, demonstration of practical skills, abstract
	Can: use medical devices (slides, spatulas, dermatoscope, Wood's lamp, magnifying lamp) to diagnose skin diseases and syphilis.	
	Has the skill of: using medical devices (slides, spatulas, dermatoscope, Wood's lamp, magnifying lamp) for the purpose of making a dermatological diagnosis, provided for in the procedures for providing medical care.	
ID-2 OPK-7.2	**Knows: the features of etiotropic, pathogenetic and symptomatic drug treatment of skin diseases and syphilis, the procedure for choosing a dosage form and route of administration of drugs depending on the type of dermatoses and the severity of the process, as well as rational replacement of the drug in case of possible intolerance or impossibility of administering the drug.**	Situational tasks, test tasks, control questions, demonstration of practical skills, abstract
	Able to: select the necessary drug therapy according to the nosological form of the disease, determine the dose of the drug depending on body weight, concomitant pathology, route of administration, taking into account the patient's condition.	
	Has the skill to prescribe rational drug therapy according to the nosological form of dermatosis, including the selection of dose and route of administration. If necessary, replace the drug depending on the general condition of the patient.	
ID-1 PC-2.1	**Knows: the features of conducting a patient interview, taking into account complaints, life history and disease development in patients with non-infectious and infectious skin diseases and STIs (syphilis). Features of a dermatological examination using practical skills.**	Situational tasks, test tasks, control questions, demonstration of practical skills, abstract, educational medical history
	Able to: make a diagnosis taking into account survey data and patient complaints, anamnesis of the development of the disease, combine symptoms of damage to the skin and mucous membranes based on patient complaints, medical history and laboratory and instrumental research methods to make a diagnosis and determine treatment tactics. Draw up a plan for examination and consultation of related specialists	
	Has the skill to: collect patient complaints taking into account medical history, examine a patient with skin pathology using practical skills and laboratory and instrumental research methods in order to make a preliminary diagnosis. When conducting a dermatological examination, use practical skills	

	(dermatographism, grattage, determination of the Wickham grid, psoriatic triad, symptom of probe failure, etc.) and laboratory and instrumental research methods (Wood's lamp, fingerprint smears, Balzer test, etc.)	
ID-2 PC-2.2	**Knows: the features of making a dermatological diagnosis, drawing up an examination plan using laboratory diagnostic methods in accordance with clinical recommendations for the provision of medical care.**	Situational tasks, test tasks, control questions, demonstration of practical skills, abstract, educational medical history
	Able to: formulate a correct preliminary diagnosis of a skin disease, draw up a plan for examining the patient, conduct laboratory and instrumental examinations taking into account clinical recommendations for this disease	
	Has the skill of making a preliminary diagnosis using laboratory tests in accordance with clinical guidelines for the provision of medical care.	
ID-3 PC-2	**Knows: indications for the provision of specialized dermatological medical care for the purpose of hospitalizing patients in hospitals or in a day hospital, depending on the existing medical indications in accordance with clinical guidelines for the provision of medical care.**	Situational tasks, test tasks, control questions, demonstration of practical skills, abstract, educational medical history
	Able to: determine the indications for a patient with dermatological pathology and syphilis for referral to a consultation with medical specialists to decide on the need for treatment, hospitalization in a hospital or day hospital if there are medical indications in accordance with clinical guidelines for the provision of medical care.	
	Has the skill of: referring a patient for consultation with medical specialists to decide on the need for treatment, hospitalization in a hospital or day hospital if there are medical indications in accordance with clinical guidelines for the provision of medical care.	
ID-4 PC-2.4	**Knows: the main nosological forms of skin diseases for differential diagnosis**	Situational tasks, test tasks, control questions, demonstration of practical skills, abstract, educational medical history
	Able to: conduct a differential diagnosis of skin pathology and syphilis based on the clinical picture, medical history, and also using laboratory diagnostic methods.	
	Has the skill of: performing differential diagnosis of a specific patient with skin pathology and syphilis based on data from clinical manifestations, life history and disease using laboratory and instrumental examination methods	
ID-5 PC-2.5	**Knows: clinical classification of dermatoses according to the current International Static Classification of Diseases and Related Health Problems (ICD)**	Situational tasks, test tasks, control questions, demonstration of practical skills, abstract, educational medical history
	Able to: correctly make a diagnosis taking into account clinical classifications and the current international static classification of diseases and related health problems (ICD)	
	Has the skill of: making a dermatological diagnosis	

	taking into account clinical classifications and the current international static classification of diseases and related health problems (ICD)	
ID-1 PC-3.1	**Knows: treatment plan for patients with skin pathology and syphilis with the prescription of drug and non-drug treatment, taking into account the dermatological diagnosis, age, clinical picture and concomitant pathology in accordance with the current procedures for the provision of medical care, clinical recommendations for the provision of medical care, taking into account the standards of medical care in primary health care settings**	Situational tasks, test tasks, control questions, demonstration of practical skills, abstract
	Able to: develop a plan for the diagnosis and treatment of patients with skin pathology and syphilis with the prescription of drug and non-drug treatment, taking into account age, clinical picture and concomitant pathology in accordance with the current procedures for the provision of medical care, clinical recommendations for the provision of medical care, taking into account the standards of medical care in primary health care settings	
	Has the skill of: prescribing therapy for patients with dermatological pathology and syphilis with the prescription of drug and non-drug treatment, taking into account age, clinical picture and concomitant pathology in accordance with the current procedures for the provision of medical care, clinical recommendations for the provision of medical care, taking into account the standards of medical care in primary health care settings	
ID-2 PC-3.2	**Knows: methods for assessing the effectiveness and safety of the use of drugs, medical devices and nutritional therapy and other treatment methods in primary health care settings**	Situational tasks, test tasks, control questions, demonstration of practical skills, abstract
	Able to: evaluate the effectiveness and safety of the use of medications prescribed to patients with dermatological pathology and syphilis, as well as medical devices and nutritional therapy and other treatment methods	
	Has the skill of: assessing the effectiveness and safety of the use of drugs, medical devices and medical nutrition and other treatment methods in primary health care settings	

2. Examples of assessment tools and assessment criteria for ongoing monitoring

2.1. Examples of incoming control

1. Features of the structure and functions of the skin, the process of keratinization and melanogenesis
2. Skin appendages and their functions
3. Pathomorphological processes in the skin. The concept of proliferative and exudative inflammation.

Evaluation criteria, grading scale pass/fail

Rating	Description

Rating	Description
"passed"	Demonstrates a thorough understanding of the problem. All requirements for the task have been met
"not accepted"	Demonstrates a lack of understanding of the problem. Many requirements for the assignment have not been met. No answer. There was no attempt to complete the task.

2.2. Examples of test tasks:

ID-2 OPK-4
Question title: Question No. 1.
Select the test used to detect live Treponema pallidum

- a. Cultivation on nutrient media
- **b. Dark field research**
- c. Silvering according to Morozov
- d. Romanovsky-Giemsa staining

ID-2 OPK-7
Question name: Question No. 2
Select external remedies for the treatment of psoriasis

- a. nizaral ointment, clotrimazole cream
- b. heparin ointment, troxerutin gel
- **c. salicylic ointment, naftalan**
- d. lamisil cream, fucorcin solution

ID-1 PC-2
Question name: Question No. 3
Select the clinical sign of regional lymphadenitis in the primary period of syphilis

- **a. increased**
- b. fused to surrounding tissues
- c. the skin over the node is erythematous
- d. painful

ID-2 PC-2
Question name: Question No. 4
Select a method for diagnosing the primary period of syphilis

- a. ulcer biopsy with histological examination
- b. positive microprecipitation reaction
- c. inoculation on culture medium
- **d. pathogen detection by dark-field microscopy**

ID-3 PC-2
Question name: Question No. 5
It is necessary to urgently hospitalize the patient if the boil is localized:

- a. on the back of the neck
- **b. on the face**
- c. in the lumbosacral
- d. on the skin of the abdomen

ID-4 PC-2
Question name: Question No. 6
Select the dermatosis with which to carry out the differential diagnosis of lichen planus

- **a. Secondary syphilis**
- b. Scleroderma
- c. Primary syphilis
- d. Lupus erythematosus

ID-5 PC-2
Question name: Question No. 7
Select a sign of advanced stage of psoriasis

- a. presence of a pseudoatrophic Voronov's rim
- **b. the appearance of fresh rashes**
- c. absence of peeling along the periphery of papules
- d. decreased pain sensitivity in skin lesions

ID-1 PC-3
Question name: Question No. 8
Management tactics for forearm boils

- a. Dry heat (UHF local)
- **b. Ichthyol "cake"**
- c. Lotion with furacillin
- d. Surgical opening of the boil

ID-2 PC-3
Question name: Question No. 9
Choose the drug that will most quickly lead to the resolution of Quincke's edema

- a. fluconazole
- b. pipolfen
- **c. adrenaline**
- d. calcium gluconate

Evaluation criteria, test assignment grading scale

Rating		**Description**
"excellent"	5	Completed in full – 90%-100%
"good"	4	Not fully implemented – 80%-89%

Rating		Description
"satisfactory"	3	Completed with deviation – 70%-79%
"unsatisfactory"	2	Partially completed – 69% or less correct answers

2.3. Examples of algorithms for demonstrating practical skills

ID-2 OPK-4.2, ID-2 OPK-7.2, ID-1 PC-2.1, ID-2 PC-2.2, ID-3 PC-2, ID-4 PC-2.4
ID-5 PC-2.5, ID-1 PC-3.1, ID-2 PC-3.2

Algorithm for demonstrating practical skills

No.	Student action
1	Method of scraping (grattage) – psoriatic triad, Besnier-Meshchersky symptom for discoid and disseminated lupus erythematosus.
2	Determination of symptoms of Nikolsky, Asbo-Hansen, Sheklakov in true acantholytic pemphigus.
3	Balzer's test - staining with 2% alcohol iodine tincture of skin rashes with pityriasis versicolor.
4	Collecting fingerprint smears from the mucous membrane of the oral cavity and skin for the purpose of performing the Tzanck cytological method for acantholytic cells.
5	Lubrication with vegetable oil to identify the Wickham grid for lichen planus

Evaluation criteria, scale for demonstrating practical skills

Rating		Description
"excellent"	5	Knows the methodology for performing practical skills, indications and contraindications, possible complications, standards, etc., independently demonstrates the implementation of practical skills without errors
"good"	4	Knows the methodology for performing practical skills, indications and contraindications, possible complications, standards, etc., independently demonstrates the implementation of practical skills, allowing for some inaccuracies (minor errors), which he independently detects and quickly corrects
"satisfactory"	3	Knows the basic principles of the methodology for performing practical skills, indications and contraindications, possible complications, standards, etc., demonstrates the implementation of practical skills, making some mistakes that can be corrected when corrected by the teacher
"unsatisfactory"	2	Does not know the methodology for performing practical skills, indications and contraindications, possible complications, standards, etc., cannot independently demonstrate practical skills or performs them making gross mistakes

2.4. Examples of essay topics

ID-2 OPK-4
Microsporia. Epidemiology, characteristics of pathogens. Clinical manifestations, diagnosis. Treatment and prevention.

ID-2 OPK-7

Superficial trichophytosis. Epidemiology, characteristics of pathogens. Clinic, diagnostics. Treatment and prevention.

ID-1 PC-2
Chronic superficial trichophytosis. Epidemiology, characteristics of pathogens. Clinic, diagnostics. Treatment and prevention.

ID-2 PC-2
Crusted scabies. Predisposing factors of its development. Clinical picture. Treatment.

ID-3 PC-2
Ecthyma vulgaris. Causes of occurrence. Clinical picture. Differential diagnosis with pustular syphilis. Treatment. Prevention.

ID-4 PC-2
Acute deep staphyloderma. Definition of hidradenitis, clinical manifestations. Principles of general and local therapy.

ID-5 PC-2
Acute deep staphyloderma. Definition of carbuncle, clinical manifestations. Principles of general and local therapy.

ID-1 PC-3
Infiltrative-suppurative trichophytosis. Epidemiology, characteristics of pathogens. Clinic, diagnostics. Treatment and prevention.

ID-2 PC-3
Acute deep staphyloderma. Definition of a boil, clinical manifestations of a boil. Features of the course of a boil on the face. Principles of general and local therapy.

Evaluation criteria, abstract grading scale

Rating		**Description**
"excellent"	5	All requirements for writing and defending an abstract are met: the problem is identified and its relevance is justified, a brief analysis of various points of view on the problem under consideration is made and one's own position is logically presented, conclusions are formulated, the topic is fully disclosed, the scope is maintained, the requirements for external design are met, the correct answers to additional questions are given
"good"	4	The basic requirements for the abstract and its defense have been met, but there are some shortcomings; in particular, there are inaccuracies in the presentation of the material; there is no logical consistency in judgments; the scope of the abstract is not maintained; there are omissions in design; Incomplete answers were given to additional questions during the defense
"satisfactory"	3	There are significant deviations from the abstracting requirements; in particular: the topic is only partially covered; there were factual errors in the content of the abstract or in answering additional questions; no output

Rating		Description
		during protection
"unsatisfactory"	2	The topic of the abstract is not disclosed, a significant misunderstanding of the problem is revealed, or the abstract is not presented at all

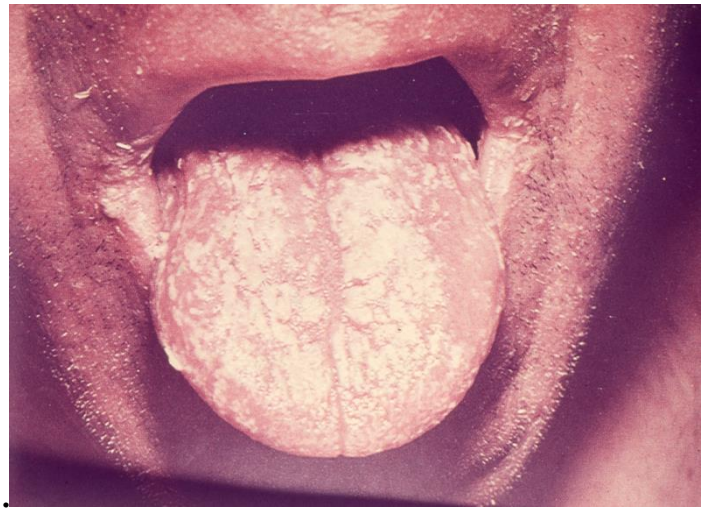
2.5.Examples of situational tasks

OBJECTIVE 1
ID-2 OPK-4
A 35-year-old patient complains of rashes that appear in paroxysms, last for 2-3 hours, and then disappear without a trace. On examination, the rash appears as a cavityless, dense, raised element of rounded outline, pink in color with a whitish tint in the center.



1-Suggest the most likely diagnosis
2-Justify your diagnosis
3-Carry out differential diagnosis
4-Define a plan for examining the patient
5- Determine treatment tactics

Task 2
ID-2 OPK-7
A 47-year-old patient complained of rashes on the oral mucosa, accompanied by a burning sensation, weight loss of 10 kg, and frequent ARVI. Objectively: on the mucous membrane of the cheeks, hard palate, and tongue, against the background of mild hyperemia, there are accumulations of whitish, crumb-like masses. In the corners of the mouth, fissure-like erosions and a macerated border of the epithelium are noted.



1-Suggest the most likely diagnosis
2-Justify your diagnosis
3-Carry out differential diagnosis
4-Define a plan for examining the patient
5- Determine treatment tactics

OBJECTIVE 3
ID-1 PC-2, ID-2 PC-2, ID-3 PC-2, ID-4 PC-2, ID-5 PC-2
A child came to the appointment with complaints of rashes on the facial skin. There are no subjective sensations. When examined on the skin of the face, superficial cavitary elements with a flaccid cover, cloudy purulent contents, surrounded by a halo of hyperemia, located out of touch with the follicles, are observed. In place of some elements there are crusts soaked in serous-purulent exudate.



1-Suggest the most likely diagnosis
2-Justify your diagnosis
3-Carry out differential diagnosis
4-Define a plan for examining the patient
5- Determine treatment tactics

Task 4
ID-1 PC-3, ID-2 PC-3
A 40-year-old patient was admitted to hospital treatment with complaints of widespread rashes. Considers himself sick for 20 years. The first elements appeared on the scalp. In the summer, he noted complete remission, exacerbation - in the autumn-spring period. The last exacerbation occurred a month before hospitalization and is associated with a stressful situation at work. The rashes became widespread. Upon examination, the elements of the rash are localized throughout the skin. The rashes are represented by cavityless elements that rise above the skin level, bright pink in color, the surface of which is covered with small, white, easily separated scales. The size of the rash is from 5mm to 6 cm in diameter.



1-Suggest the most likely diagnosis
2-Justify your diagnosis
3-Carry out differential diagnosis
4-Define a plan for examining the patient
5- Determine treatment tactics

Evaluation criteria, rating scale for situational tasks

Rating		**Description**
"excellent"	5	Explanation of the process of solving a situational problem is detailed, consistent, competent, with theoretical justifications, with the necessary schematic images and visual demonstrations, with correct and fluent use of terminology; answers to additional questions are correct and clear
"good"	4	Explanation of the process of solving a situational problem is detailed, but not logical enough, with isolated errors in details, some difficulties in theoretical justification, schematic images and visual demonstrations, answers to additional questions are correct, but not clear enough
"satisfactory"	3	Explanation of the process of solving a situational problem is insufficiently complete, inconsistent, with errors, weak theoretical justification, with significant difficulties and errors in schematic images and visual demonstrations, answers to additional questions are not clear enough, with errors in details
"unsatisfactory"	2	The explanation of the process of solving a situational problem is given incompletely, inconsistently, with gross errors, without theoretical justification, without the ability to provide schematic images and visual demonstrations or with a large number of errors, answers to additional questions are incorrect or missing

2.6.Examples of review questions

ID-2 OPK-4
- Urticaria. Quincke's edema. Etiology, pathomorphology. Clinic. Treatment, prevention.
- Eczema (true, dyshidrotic). Etiology, pathogenesis, pathomorphology. Clinic. Treatment and prevention.

ID-2 OPK-7

- Chronic streptoderma. Vulgar ecthyma. Clinic. Treatment, prevention.
- Scabies. Epidemiology, characteristics of the pathogen.. Clinic, diagnosis. Treatment, prevention.

ID-1 PC-2, ID-2 PC-2, ID-3 PC-2, ID-4 PC-2, ID-5 PC-2,
- Structure of the red border of the lips. Clinical manifestations of symptomatic cheilitis (atopic and eczematous cheilitis). Treatment, prevention
- Cheilitis as a manifestation of discoid lupus erythematosus. Etiology, pathogenesis. Clinical manifestations of discoid lupus erythematosus on the skin, red border of the lips and oral mucosa. Treatment, prevention

ID-1 PC-3, ID-2 PC-3
- Miliary ulcerative tuberculosis of the oral mucosa and red border of the lips. Clinical manifestations. Principles of therapy, prevention.
- Differential diagnosis of tubercular syphilide and tuberculous lupus.

Evaluation criteria, assessment scale for control questions

Rating		Description
"excellent"	5	Knows all the educational material, understands it perfectly and has thoroughly mastered it. Gives correct, conscious and confident answers to questions (within the program). In oral answers he uses literary correct language and does not make mistakes.
"good"	4	Knows all the required educational material, understands it well and has mastered it firmly. Answers questions (within the program) without difficulty. In oral answers he uses literary language and does not make gross mistakes
"satisfactory"	3	Knows basic educational material. Answers questions (within the limits of the program) with difficulty. In oral answers, he makes mistakes when presenting the material and in constructing his speech.
"unsatisfactory"	2	Does not know most of the educational material, answers, as a rule, only to the teacher’s leading questions, hesitantly. Makes frequent and serious mistakes in oral answers

2.7. Case study chart

ID-1 PC-2, ID-2 PC-2, ID-3 PC-2, ID-4 PC-2, ID-5 PC-2, ID-1 PC-3, ID-2 PC-3

On the title page:
Name of educational institution, name of department
Full name, manager department
Patient's name,
Main diagnosis

In the lower right corner:
cycle completion date,
Student's name, group number.
Teacher:Name

On the bottom line is the year it was written.

CHART OF THE HISTORY OF A SUPERVISED PATIENT

Last name First name Patronymic
Age
Place of work and profession
Date of admission to the clinic
Diagnosis of the disease
Complications
Concomitant illnesses
Patient's complaints upon admission

1. Anamnesis of the skin disease: duration of the disease, initial localization and primary signs of the disease, subsequent course, relapses and their seasonality, what is associated with the onset of the disease and relapses, previous therapy, where. When, what is the result. The beginning of a real relapse. Since when has he had sick leave?
2. Life history: health of parents, diseases in the family (tuberculosis, syphilis, skin diseases, etc.), development in childhood, past illnesses, injuries, obstetric and gynecological history, marital status, working and living conditions, occupational hazards, bad habits, psycho-emotional experiences. Allergological, epidemic history.
3. Objective data: general properties of the skin: color, turgor, sweating, sebum secretion, dermographism, hair, nails, mucous membranes, subcutaneous fat, lymph nodes, condition of bones, joints, muscular system, digestive organs: oral cavity, condition of teeth, tonsils, stomach, intestines, liver, spleen. Cardiovascular and respiratory system. Digestive system. Genitourinary system. Nervous system: excitability, memory, sleep, reflexes. Tendon, pupillary. Pathology of reflexes. Sense organs: vision, hearing, smell, touch.
4. Dermatological status: general characteristics of the pathological process (limited, multifocal, symmetrical, disseminated, diffuse), Predominant localization, taking into account the greater degree of damage to closed or open areas, as well as the severity of inflammatory, proliferative or destructive changes. Nature of inflammation (acute, subacute, chronic), Determination of the mono- and polymorphic nature of the rash (true or false polymorphism), Description of the primary rash element: color (including shades), size, edge, shape, consistency, surface features, boundaries (clear, fuzzy). In the presence of cavity elements: the degree of tension of the tire (flaccid, tense), the nature of the contents, the presence or absence of a peripheral inflammatory zone around. The ability of rashes to group, isolation, tendency to merge, the presence of peripheral growth. Secondary elements - as a result of the evolution of the primary ones (resolution by peeling, erosion, ulceration, crust formation with the characteristic of a crust, epithelization, scarring, atrophy, secondary hypo- or hyperpigmentation). Changes in the mucous membranes of the mouth, nose, and genitals (hyperemia, edema, papular, bullous, erosive changes, plaque).

Additional dermatological symptoms:

1) symptom of layered scraping (psoriatic triad)
2) staining of the lesion with aniline dyes (detection of hidden peeling)
3) lubricating the surface of the rash with vegetable oil (Wickham grid)
4) besnier-Meshchersky symptom
5) Jadassohn's symptom
6) Pospelov's symptom
7) vitropression, diascopy
8) glow in the rays of a Wood's lamp

9) Ardi-Meshchersky symptom.

Differential diagnosis (carried out with 2 diseases). Cover the following points:

a) give a description and a brief clinical picture of the disease being diagnosed;

b) describe why the disease was taken for differentiation. What is common between the disease in the supervised patient and the disease with which differential diagnosis is carried out? Be based only on the clinical picture that exists in the patient being supervised;

c) on what basis is this disease excluded; what is the difference.

Individual treatment plan: regimen, diet, general therapy. External treatment.
Prevention of disease relapse.
Literature used.

Case report topics:

1) Acute allergic dermatitis (albucid instillation)
2) Spotted tokiskoderma to ampicillin
3) Fixed erythema to analgesics (one lesion)
4) Erythema multiforme exudative to doxycycline
5) True (endogenous) eczema of the hands
6) Atopic dermatitis, adult stage 16 years
7) Psoriasis vulgaris, progressive stage
8) Lichen planus with lesions of the skin and mucous membranes of the oral cavity
9) Zoster on the left side of the chest
10) Discoid lupus erythematosus on the skin of the face
11) Plaque scleroderma on the skin of the abdomen, 2 lesions
12) Candidiasis of the oral mucosa (OD)
13) Primary syphilis (erosive chancre of the genital organs)

Grading scale for coursework (case histories)

Rating		**Descriptors**		
		Disclosure of the problem	**View**	**Design**
"excellent"	5	The problem is fully resolved. The problem was analyzed using additional literature. A differential diagnosis of the disease in the supervised patient with 2 other diseases was carried out, indicating the common signs of these dermatoses, as well as the distinctive data of the dermatoses. The indicated treatment (including physiotherapy) corresponds to modern concepts of therapy for this nosology, indicating medications, doses, routes,	The information presented is systematized, consistent and logically connected. More than 5 professional terms were used. The patient's complaints and medical history were collected and written in full and in detail. The dermatological status is competently presented, indicating the main dermatological symptoms observed in the patient. The diagnosis of the supervised patient was	The medical history is drawn up according to the main points of the medical history, the sequence of chapters of the medical history is preserved. The title page contains the name of the educational institution, full name and title of the head. department, full name and title of the teacher, full name and group number of the student, full name of the patient with a clinical diagnosis, the year the medical history was written is indicated. The information presented corresponds to

Rating		Descriptors		
		Disclosure of the problem	**View**	**Design**
		frequency and duration of administration, depending on the stage of the disease. The principles of prevention are indicated.	correctly established.	the points in the chapters. There are no errors in the information provided. The list of references is listed.
Okay	4	Problem resolved. The problem was analyzed without the use of additional literature. A differential diagnosis of the disease in the supervised patient with 2 other diseases was carried out without indicating the common signs of these dermatoses, as well as the distinctive data of the dermatoses. The indicated treatment corresponds to modern concepts of therapy for this nosology, indicating medications, doses, routes, without frequency and duration of administration, depending on the stage of the disease. The principles of prevention are not fully specified	The information presented is systematized, consistent and logically connected. More than 2 professional terms were used. Patient's complaints and history were collected and written. The dermatological status is correctly presented without indicating the main dermatological symptoms observed in the patient. The diagnosis of the supervised patient was correctly established.	The medical history is drawn up according to the main points of the medical history; there are minor shortcomings in the sequence of writing the medical history. The title page contains the name of the educational institution, full name and title of the head. department, full name and title of the teacher, full name and group number of the student, full name of the patient with a clinical diagnosis, the year the medical history was written is indicated. The information presented corresponds to the points in the chapters. There are minor errors in the information provided. The list of references is listed.
"satisfactory "	3	The problem is not fully resolved. A differential diagnosis of the disease was carried out in a supervised patient with 1 disease. The indicated treatment is not presented in full with the indication of medications. The principles of prevention are not fully specified	The information provided is not organized and/or consistent. 1-2 professional terms were used. The patient's complaints and medical history were written. The dermatological status is not fully disclosed without indicating the main dermatological symptoms observed in the patient. The diagnosis of the supervised patient was	The medical history is drawn up according to the main points of the medical history; there are minor shortcomings in the sequence of writing the medical history. The title page contains the name of the educational institution, full name and title of the head. department, full name and title of the teacher, full name and group number of the student, full name of the

Rating		Descriptors		
		Disclosure of the problem	**View**	**Design**
			correctly established.	patient with a clinical diagnosis, the year the medical history was written is indicated. The information presented corresponds to the points in the chapters. There are minor errors in the information provided. Bibliography listed
Not satisfactory	2	The problem is not resolved. No differential diagnosis of the disease was carried out in the supervised patient The indicated treatment does not correspond to the clinical diagnosis. The principles of prevention are not fully specified .	The information presented is not logically connected. Professional terms are not used. The dermatological status is not described correctly, the diagnosis of the supervised patient is incorrectly established.	The medical history is drawn up according to the main points of the medical history; there are minor shortcomings in the sequence of writing the medical history. The title page contains the name of the educational institution, full name and title of the head. department, full name and title of the teacher, full name and group number of the student, full name of the patient with a clinical diagnosis, the year the medical history was written is indicated. The information presented corresponds to the points in the chapters. There are minor errors in the information provided. Bibliography listed

3. Current control procedure

Current monitoring of progress in the discipline is carried out in the form of: interviews, test tasks, situational tasks, demonstration of practical skills, writing an educational medical history, defense of abstracts.

4. Examples of assessment tools and assessment criteria for intermediate certification

4.1. Sample checklist of questions to prepare for the exam:

ID-2 OPK-4

Vulgar pemphigus. Etiology, pathogenesis, pathomorphology, diagnosis. Clinical manifestations on the skin, oral mucosa and red border of the lips. Principles of therapy, clinical examination.

ID-2 OPK-7
Toxicoderma. General characteristics, pathogenesis, types of allergic reactions. Clinical types, features of damage to the oral mucosa. Treatment, prevention

ID-1 PC-2
Atopic dermatitis. Etiology, pathogenesis. Infant Stage Clinic. Treatment, prevention.

ID-2 PC-2
Lichen planus. Etiology, pathogenesis. Clinical manifestations on the skin, oral mucosa and red border of the lips, diagnosis, pathomorphology. Principles of therapy, prevention

ID-3 PC-2
Atopic dermatitis. Etiology, pathogenesis. Clinic for pediatric and adult stages. Treatment, prevention.

ID-4 PC-2
Early period of syphilis: primary period. Chancre, clinical manifestations. Diagnostics. Principles of therapy, prevention

ID-5 PC-2
Zoster. Etiology, pathogenesis. Clinical varieties. Treatment, prevention.

ID-1 PC-3
Viral dermatoses. Herpes simplex. Etiology. Clinic. Treatment, prevention.

ID-2 PC-3
Hives. Quincke's edema. Etiology, pathogenesis. Clinical picture. Treatment and emergency assistance.

Evaluation criteria, assessment scale for control questions

Rating		Description
"excellent"	5	Knows all the educational material, understands it perfectly and has thoroughly mastered it. Gives correct, conscious and confident answers to questions (within the program). In oral answers he uses literary correct language and does not make mistakes.
"good"	4	Knows all the required educational material, understands it well and has mastered it firmly. Answers questions (within the program) without difficulty. In oral answers he uses literary language and does not make gross mistakes
"satisfactory"	3	Knows basic educational material. Answers questions (within the limits of the program) with difficulty. In oral answers, he makes mistakes when presenting the material

Rating		Description
		and in constructing his speech.
"unsatisfactory"	2	Does not know most of the educational material, answers, as a rule, only to the teacher's leading questions, hesitantly. Makes frequent and serious mistakes in oral answers

4.2. Examples of situational tasks:

ID-2 OPK-4

A 32-year-old patient consulted a doctor about the appearance of a profuse roseola rash on her torso. On the eve of the appearance of the rash, malaise and an increase in temperature to 38.0°C were noted. Objectively: abundant rashes in the form of brightly colored spots, randomly located. In the groin area on the right there is lymphadenitis. RSK diluted 1/640.



1. Suggest the most likely diagnosis
2. Justify your diagnosis
3. Perform differential diagnosis
4. Define a plan for examining the patient
5. Define treatment tactics

ID-2 OPK-7

A 46-year-old woman came to see her district physician with complaints of pain in the left side of her head, which appeared three days ago and, despite taking analgesics, tends to intensify. Upon examination, there are pink, slightly swollen spots on the skin of the forehead on the right. Against the background of some of them, the appearance of small grouped

bubbles is noted, with the phenomenon of conjunctivitis.



1. Suggest the most likely diagnosis
2. Justify your diagnosis
3. Perform differential diagnosis
4. Define a plan for examining the patient
5. Define treatment tactics

ID-1 PC-2

A 65-year-old patient consulted an ophthalmologist regarding redness, peeling and mild itching of the skin of the eyelids. The patient has been observed by this doctor for 5 years with a diagnosis of cataracts in the right eye. Constantly puts vitamin drops into the eyes as prescribed by the doctor. In the last two months, I began to feel discomfort in the form of burning and redness of the skin of the eyelids and conjunctiva. Objectively: the skin of the eyelids is slightly swollen and hyperemic. Against this background there are a few small scales. The mucous surface of the eyelids and eyeball is hyperemic, and injection of scleral vessels is noted.



1. Suggest the most likely diagnosis
2. Justify your diagnosis
3. Perform differential diagnosis
4. Define a plan for examining the patient
5. Define treatment tactics

ID-2 PC-2

A patient came to you with flour-like peeling on the soles and palms, mainly along the skin grooves. All toenails are grayish-yellow, thickened and partially destroyed.



1. Suggest the most likely diagnosis
2. Justify your diagnosis
3. Perform differential diagnosis
4. Define a plan for examining the patient
5. Define treatment tactics

ID-3 PC-2

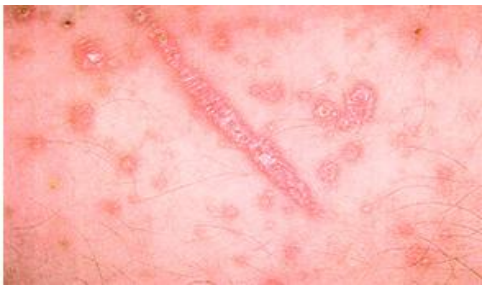
A 47-year-old patient, suffering from vulgar psoriasis for 20 years, consulted a doctor. The last exacerbation began 2 months ago after a stressful situation. After active baths (several times a day) with sea salt, the process took over the entire skin. My general health deteriorated and my temperature rose every evening. On examination: the skin lesions are universal. The skin is swollen, infiltrated in places, bright red in color, covered with a large number of large and small dry whitish scales that easily fall off when clothing is removed. There is an increase in inguinal and axillary lymph nodes. Body temperature 37.5º C. Subjective: feeling of skin tightness and chilling.



1. Suggest the most likely diagnosis
2. Justify your diagnosis
3. Perform differential diagnosis
4. Define a plan for examining the patient
5. Define treatment tactics

ID-4 PC-2

A 29-year-old patient came to you with complaints of itchy rashes that appeared 2 weeks ago at the site of cat scratches. Within a week, the rash spread to other places. He was treated independently with corticosteroid ointments with little effect. Over the past year, I have repeatedly suffered from various acute respiratory viral diseases. On examination: on the flexor surface of the forearms there are pinkish-lilac small papules, 2 - 5 mm in diameter, shiny in lateral lighting, in the center of some there is an umbilical depression. On the back of the hands, at the site of cat scratches, papules are arranged linearly. Subjective: severe itching bothers me.

1. Suggest the most likely diagnosis
2. Justify your diagnosis
3. Perform differential diagnosis
4. Define a plan for examining the patient
5. Define treatment tactics

ID-5 PC-2

The patient consulted a dermatovenerologist. On examination: there were abundant papular elements with a diameter of up to 0.5 cm, located on the skin of the back and lateral surfaces of the body, as well as in the area of the palms and soles, papular tonsillitis, hoarseness of voice (raucedo). Complement fixation reaction with treponemal and cardiolipin antigen 4+, titer 1:160. From the anamnesis it is known that about 5 months ago there was erosion on the head of the penis, which resolved on its own within a month.

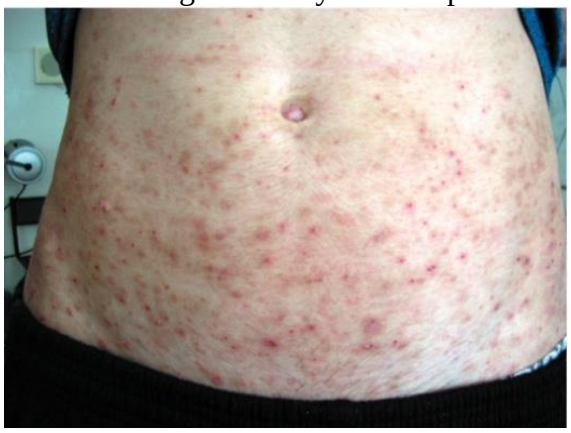


1. Suggest the most likely diagnosis
2. Justify your diagnosis
3. Perform differential diagnosis
4. Define a plan for examining the patient
5. Define treatment tactics

ID-1 PC-3

A 23-year-old man, unemployed, consulted a doctor with complaints of skin rashes accompanied by severe night itching. Upon examination, the skin of the penis and abdomen

contains numerous vesicles, up to 3-4 mm in diameter, and single papules. On the abdomen, the vesicles are arranged linearly in some places.



1. Suggest the most likely diagnosis
2. Justify your diagnosis
3. Perform differential diagnosis
4. Define a plan for examining the patient
5. Define treatment tactics

ID-2 PC-3

A 7-year-old boy came to the local doctor on an emergency basis, accompanied by his mother, with signs of increasing swelling of the face and signs of difficulty breathing. According to the mother, these phenomena began to develop two hours ago after the child returned from school, where the premises had recently been renovated.



1. Suggest the most likely diagnosis
2. Justify your diagnosis
3. Perform differential diagnosis
4. Define a plan for examining the patient
5. Define treatment tactics

Evaluation criteria, rating scale for situational tasks

Rating		**Description**
"excellent"	5	Explanation of the process of solving a situational problem is detailed, consistent, competent, with theoretical justifications, with the necessary schematic images and visual demonstrations, with correct and fluent use of terminology; answers to additional

		questions are correct and clear
"good"	4	Explanation of the process of solving a situational problem is detailed, but not logical enough, with isolated errors in details, some difficulties in theoretical justification, schematic images and visual demonstrations, answers to additional questions are correct, but not clear enough
"satisfactory"	3	Explanation of the process of solving a situational problem is insufficiently complete, inconsistent, with errors, weak theoretical justification, with significant difficulties and errors in schematic images and visual demonstrations, answers to additional questions are not clear enough, with errors in details
"unsatisfactory"	2	The explanation of the process of solving a situational problem is given incompletely, inconsistently, with gross errors, without theoretical justification, without the ability to provide schematic images and visual demonstrations or with a large number of errors, answers to additional questions are incorrect or missing

Evaluation criteria, final grading scale (exam)

Rating		**Description**
"excellent"	5	The student answered the theoretical question(s) correctly. Demonstrated excellent knowledge of the training material. Completed the practical task(s) correctly. Demonstrated excellent skills and proficiency in applying acquired knowledge and skills when solving problems within the framework of the educational material. Answered all additional questions
"good"	4	The student answered the theoretical question(s) with minor inaccuracies. Demonstrated good knowledge of the training material. Completed the practical task(s) with minor inaccuracies. Demonstrated good skills and proficiency in applying acquired knowledge and skills when solving problems within the framework of the educational material. Answered most additional questions
"satisfactory"	3	The student answered the theoretical question(s) with significant inaccuracies. Demonstrated satisfactory knowledge of the course material. Completed the practical task(s) with significant inaccuracies. Demonstrated satisfactory skills and abilities to apply the acquired knowledge and skills when solving problems within the framework of the educational material. Made many inaccuracies when answering additional questions
"unsatisfactory"	2	The student, when answering the theoretical question(s) and performing the practical task(s), demonstrated an insufficient level of knowledge and skills in solving problems within the educational material. There were many incorrect answers when answering additional questions.

5. Interim assessment procedure

Intermediate assessment in the discipline is carried out in the form of an exam. The exam includes: situational tasks, control questions.