# Educational program for outpatient therapy for 4<sup>th</sup> year foreign students

# Lesson 1: Organization of outpatient medical care in the Republic of Belarus. Organization of dispanserization. Class times - 8.00-13.00

#### By the end of the lesson, students should know:

- 1. Organization of ambulatory care in the Republic of Belarus.
- 2. The rights and duties of the district general practitioner.
- 3. Therapeutic and diagnostic workof the district general practitioner on an outpatient basis.
- 4. Organization of medical care at home.
- 5. Medical rehabilitation in work of the district general practitioner.
- 6. The main sections of the preventive work of the district general practitioner.
- 7. Basic medical documents of approved forms.
- 8. Types of temporary disability.
- 9. Documents certifying temporary disability (sheet of disability, a certificate of disability) and their functions.
  - 10. The rules governing the granting and renewal of sheet of disability and certificate of disability.
  - 11. The composition and functions of the medical advisory committee (MAC).

- 1. Identify the indications for referral to the laboratory and instrumental studies, consultation of aspecialist, referring to a hospital and sanatorium treatment.
  - 2. Understand the medical records.
  - 3. To make out prescriptions for drugs to various categories of patients.
  - 4. Calculate BMI, to assess the risk for cardiovascular SCORE
  - 5. To issue a document certifying the temporary disability.
  - 6. Extend disability sheet or a certificate.

Time	Theme, method	Content	Materials
8.00-9.30		Analysisofmaterialofthe me, familiarizationwiththe regulation documents	Basic forms of medical documents (ambulatory card, health certificate, recipes), regulation documents, sheet of disability, certificate of disability
9.30-9.45	Break		
9.45-10.00	Introduction	n to structural units of t	he polyclinic

10.00-11.15	Independent	Workinadoctor'soffice:	Directly	involved
	work of	calculationofBMI,		in
	students	evaluateriskfactorsin 5	communicatio	ons with patients,
		patients	prescribing of	f recipes, sheet of
			disability	
11.15-11.30		Break		
11.30-12.45	Independent	11.30-12.45	Independent v	vork of students
	work of			
	students			
12.45-13.00	Securingofmater	ial "What's new I've learn	ied today"	

**Independent work of students (IWS):**dispanserization of population, the concept of medicalrehabilitation expert board (MREB)

# After IWS student should know:

- 1. Organization of the dispanserization, analysis of its quality and efficiency.
- 2. Identify the group of dispanserization.
- 3. Persistent disability, group of disability.
- 4. Structure and functions of the medical rehabilitation expert board (MREB).
- 5. Indications and order of referral to the MREB.

# Lesson 2. Respiratory diseases. Acute respiratory infections, COVID-19 infections, acute tonsillitis: outpatient aspects of diagnosis and treatment

# Class times - 8.00-13.00

# By the end of the lesson, students should know:

- 1. Etiology of ARI, acute tonsillitis, acute bronchitis, pneumonia.
- 2. Features anamnesis and examination of patients with acute respiratory infections, COVID-19infection, acute tonsillitis, acute bronchitis, pneumonia.
- 3. The clinical picture of acute respiratory infections, COVID-19 infection, acute tonsillitis, acutebronchitis, pneumonia.

4. Plan for a patient examination with acute respiratory diseases.

- 5. Indications for hospitalization of patients with acute respiratory infections, acute tonsillitis, acutebronchitis, pneumonia.
- 6. Treatment of acute respiratory infections, COVID-19 infection, acute tonsillitis, acute bronchitis, pneumonia.
  - 7. Complications of ARI, acute tonsillitis, acute bronchitis, pneumonia.
  - 8. Examination of temporary disability in ARI, acute tonsillitis, acute bronchitis, pneumonia.
  - 9. Dispanserization and rehabilitation of patients with acute respiratory diseases.

# By the end of the session students will be able to:

- 1. To collect anamnesis and carry out inspection of patients with acute respiratory diseases.
- 2. Identify the need for hospitalization.
- 3. To formulate a diagnosis.
- 4. Determine the tactics of treatment in an outpatient setting.
- 5. Analyze the data of laboratory and instrumental methods of examination.
- 6. To appoint treatment to the patient in accordance with the diagnosis.
- 7. Carry out medical rehabilitation, dispanserization and preventive work.

Time	Theme, method	Content	Materials
8.00-9.30	Students survey	Analysisofmaterialoftheme,	Regulation documents
		familiarizationwiththe	
		regulation documents	
9.30-9.45	Brea	ak	
9.45-11.15	Independent work	Workinadoctor'soffice:	Participation in the
	ofstudents	examination of	examination
		theoropharynx;	patients,
		- palpation of lymphatic	prescribing of
		nodes	recipes and
		- auscultation of the thorax	certificates
11.15-11.30	Brea	ak	1
11.30-12.00	Discussion,	Clinicalanalysisofpatients:	Patient,
	skill	taking of throat swab	ambulatorycard
	sdemonstration		
12.00-12.30	Group	Solving situational	Situational problems
	work.Brainstor	problems from case	
	m	report	
12.30-13.00	Securingofmaterial "	What's new I've learned today	<i>y</i> <sup>,</sup> ,

Lesson 3. Diseases of the cardiovascular system. Primary and secondary arterial hypertension. Somatoform dysfunction of the autonomic nervous system: outpatient aspects of diagnosis and treatment. Emergency aidin hypertensive crisis in an outpatient setting

Class times - 8.00-13.00

# By the end of the lesson, students should know:

- 1. Definition and classification of arterial hypertension.
- 2. Plan of inspection of patients with high blood pressure in the outpatient setting.
- 3. Principles of the treatment of arterial hypertension.
- 4. Indications for hospitalization of patients with arterial hypertension.

- 5. The classification of hypertensive crises.
- 6. Tactics provide emergency medical care for hypertensive crises in the outpatient setting.
- 7. Dispanserization and prevention of arterial hypertension.
- 8. Classification, principles of diagnosis and treatment of somatoform dysfunction of the autonomic nervous system.

- 1. Measure the blood pressure.
- 2. Assign the required inspection plan for patients with high blood pressure.
- 3. Interpret laboratory and instrumental data.
- 4. Assign a treatment for patients with arterial hypertension.
- 5. Urgent care in hypertensive crises.
- 6. To conduct dispanserization.
- 7. To recommend methods of prevention.

Time	Theme, method	Content	Materials
8.00-9.30	Students survey	Analysis of material of theme, familiarization with the regulationdocuments	-
			documents
9.30-9.45	F	Break	1
9.45-11.15	Independent	Workinadoctor'soffice:	Participation in the
	work	assessment of risk factors in	examination
	of students	hypertension;	patients, prescribing
		measurement of blood	of recipes
		pressure (3patients)	
11.15-11.30	E	Break	1
11.30-12.15	Discussion,	Clinical analysis of patient	Patient, ambulatory
	demonstration		card, visiting of
	ofpractical		manipulation room,
	skills		familiarity with the
			first-aid kit
12.15-12.45	Brainstorm	Establishing a defined of risk	Situational problems,
		factors by SCORE scale, GFR	ambulatory card
		calculation by CKD-EPI	
		formula	
12.45-13.00	Securing of mater	rial "What's new I've learned tod	ay"

Lesson 4. Coronary heart disease: aspects of outpatient diagnosis of various forms of it.Emergency aid in anginal attack and acute coronary syndrome in outpatient settings

#### Class times - 8.00-13.00

#### By the end of the lesson, students should know:

- 1. Classification and risk factors for coronary heart disease.
- 2. Plan of inspection and diagnosis of angina.
- 3. Indications for hospitalization.
- 4. Treatment of patients with angina pectoris in an outpatient setting.
- 5. Indications to the referring on the MREB.
- 6. Dispensary observation of patients with angina.
- 7. The algorithm providing emergency care when anginal attack and acute coronary syndrome in theoutpatient setting.

- 1. To collect complaints and anamnesis in patients with coronary heart disease.
- 2. To prepare the patient's plan of survey with coronary heart disease.
- 3. Determine the tactics of treating a patient with coronary artery disease.
- 4. Provide emergency medical aid in anginal attacks and acute coronary syndrome.
- 5. Interpreting the data of laboratory and instrumental studies.
- 6. Carry out personal preventive measures.

Time	Theme, method	Content	Materials
8.00-9.30	Students survey	Analysis of material of theme, familiarization with the regulation documents	Regulation documents
9.30-9.45	Brea	ak	1
9.45-11.15	Independent workof students	Workinadoctor'soffice: - assessment of risk factors of cardiovascular diseases (3 patients)	Directly involved in communication s with patients, prescribing recipes
11.15-11.30	Brea	ak	1

	Discussion, demonstration of practical skills	<b>5</b> I	Patient, ambulatorycard
12.00-12.45			Situational problems (2)
12.45-13.00	Securingofmateria	al "What's new I've learned to	day"

Lesson 5. Diseases of the digestive system. Functional dyspepsia, chronic gastritis, peptic ulcer and duodenal ulcer: outpatient aspects of diagnosis and treatment. Medical tactics and emergency medical care for suspected gastrointestinal bleeding in an outpatient setting

Class times - 8.00-13.00

# By the end of the lesson, students should know:

- 1. Features of the history collection and examination of patients with diseases of the digestive system.
  - 2. Methods of laboratory and instrumental examination and interpretation.
- 3. Clinic, diagnosis and treatment of functional dyspepsia, chronic gastritis, gastric and duodenalulcers.
  - 4. Clinic of gastrointestinal bleeding.
  - 5. Dispanserization of patients with chronic gastritis, gastric and duodenal ulcers.
  - 6. The prevention of diseases of the digestive system.

- 1. To collect complaints and anamnesis.
- 2. Inspect the abdomen (palpation, percussion, auscultation).
- 3. To prepare a survey plan.
- 4. Tactics emergency treatment in case of gastrointestinal bleeding.

Time	Theme, method	Content	Materials
3.00-9.30		Analysisofmaterialoftheme, familiarizationwiththe regulationdocuments	Regulation documents
9.30-9.45	Bre	ak	

9.45-11.15	Independent	Workinadoctor'soffice:	Directly
	workof students	Collection of complaints	involved in
		andanamnesis - Examination of the tongue Examination of the	communications with patients,
		abdomen (2persons)	prescribing recipes, sheet of disability
11.15-11.30	Bre	ak	
11.30-12.00	Demonstration ofpractical skills	Clinicalanalysisofpatient	Patient in day-
			offstationer
12.00-12.45	Brainstorm	Solving situational problems from case report (system	Situational problems (2)
		SOCRATES)	
12.45-13.00	Securingofmateri	al "What's new I've learned to	oday"

# Lesson 6. Chronic cholecystitis, biliary functional disorder races, chronic pancreatitis: outpatient aspects of diagnosis and treatment. Emergency aid in hepatic colic in an outpatient setting

# Class times - 8.00-13.00

# By the end of the lesson, students should know:

- 1. Anamnesis taking and examination of patients with diseases of the biliary system.
- 2. Methods of laboratory and instrumental examination and interpretation.
- 3. Clinic, diagnosis and treatment of chronic cholecystitis, biliary functional disorders, chronic pancreatitis.
- 4. Clinic of biliary colic.
- 5. Dispanserization of patients with chronic cholecystitis, chronic pancreatitis.
- 6. The prevention of diseases of the biliary system.

- 1. To collect complaints and anamnesis.
- 2. Carry out inspection of patients with diseases of the biliary system.
- 3. To prepare a survey plan.
- 4. Tactics emergency treatment in hepatic colic in an outpatient setting.

Time	Theme, method	Content	Materials
8.00-9.30	Students survey	Analysis of material of theme, familiarization with the regulation documents	e
9.30-9.45	Bro	eak	
9.45-11.15	Independent workof students	Workinadoctor'soffice: Collection of complaintsand anamnesis; - Examination of the abdomen	Directly involved in communications with patients, prescribing of recipes and sheet of disability
	DI		
11.30-12.00	Summary questions	Summary	Writing
12.00-12.30	Demonstration of skills	Examination of patients	Patient in day- caredepartment
12.30-13.00	Conclusions		

# Work in the simulation center

	vv or k in the sinduction center	
	- Height, weight, BMI	
	- Glucometer	
Theme 2	- Oropharyngoscopy, Otoscopy (normal otitis)	
	- Wheezing with bronchitis and pneumonia	
	- GC emergency – GU tasks and bag stacking	
Theme 3	- Ambulatory BP monitoring	
	- BP measurement	
Theme 4	- Coronary heart disease: emergency care for acute coronary	
	syndrome	
Theme 5-6	- Hepatic colic	

# List of preparations for discharge on recipes

# CLASS №1,2

- 1. Azithromycin 0.5
- 2. Ambroxol 0.03/100 ml (5 ml 0.03)
- 3. Amoxicillin 0.5/1.0
- 4. Amoxicillin klavulanate

9. Clarithromycin 0.5

- 10. Levofloxacin 0.5/0.75
- 11. Oseltamivir 0.75

12. Prenoxidiazine 0.1

- 0.5 + 0.125 / 0.875 + 0.125
- 5. Acetylcysteine 0.2/0.6
- 6. Ibuprofen 0.2/0.4
- 7. Ibuprofen+paracetamol 0.4+0.325
- 8. Inosine pranobex 0.5

- 13. Paracetamol 500ml
- 14. Umifenovir 0.1/0.2
- 15. Cefdinir 0.3
- 16. Cefpodoxim 0.2
- 17. Cefuroxim 0.5

#### CLASS №3,4

- 1. Amlodipin 0.005/0.01
- 2. Atorvastatin 0.01/0.02/0.04
- 3. Acetylsalicylic acid 0.075/0.325/0.5
- 4. Bisoprolol 0.0025/0.005/0.01
- 5. Valsartan 0.08/0.16
- 6. Valsartan+ Hydrochlorothiazide
- 0.08 + 0.0125 / 0.16 + 0.025
- 7. Verapamil 0.04/0.08
- 8. Hydrochlorothiazide 0.025
- 9. Glyceryl trinitrate 0.0004/10.0
- 10. Diltiazem 0.06/0.09/0.18
- 11. Mononitrate isosorbide 0.02/0.04
- 12. Indapamid 0.0025
- 13. Candesartan 0.008/0.016/0.032
- 14. Carvedilol 0.00625/0.0125/0.025
- 15. Clopidogrel 0.075
- 16. Lisinopril 0.005/0.01/0.02
- 17. Lisinopril+Amlodipin
- 0.01+0.005/0.02+0.01
- 18. Lozartan 0.05/0.1
- 19. Metoprolol 0.025/0.05/0.1
- 1.Aluminum phosphate 230.0 Amoxicillin 0.5/1.0
- 3. Bismuth subcitrate 0.12
- 4. Domperidone 0.01
- 5. Drotaverine 0.04
- 6. Clarithromycin 0.5
- 7. Levofloxacin 0.5/0.75
- 8. Mebeverin 0.2
- 9. Metronidazole 0.25

- 20. Moxonidine 0.0002/0.0004
- 21. Molsidomin 0.002/0.004
- 22. Nebivalol 0.005
- 23. Nitroglycerin 0.0005
- 24. Nifecard 0.01/0.02
- 25. Perindopril 0.002/0.004/0.008
- 26. Perindopril+Indapamid
- 0.004+0.00125/0.008+0.0025
- 27. Ramipril 0.0025/0.005/0.01
- 28. Ramipril+ Hydrochlorothiazide
- 0.005 + 0.025 / 0.01 + 0.025
- 29. Ramipril+Amlodipin
- 5+5/10+5/5+10/10+10
- 30. Rosuvastatin 0.005/0.01/0.02
- 31. Spironolactone 0.025/0.05
- 32. Telmisartan 0.08/0.16
- 33. Torasemid 0.005/0.01/0.02
- 34. Trimetazidine 0.035/0.08
- 35. Phenophobe 0.145
- 36. Furosemide 0.04
- 37. Esetimib 0.01
- 38. Enalapril 0.005/0.01/0.02
- CLASS №5,6
  - 10. Omeprazole 0.02
  - 11. Pancreatine 10000 IU
  - 12. Pantoprazol 0.02/0.04
  - 13. Amoxicillin 0.5+ Clarithromycin
  - 0.5+Omeprazole 0.02
  - 14. Tetracycline 0.1/0.5
  - 15. Ursodesoxycholic acid 0.25
  - 16. Famotidin 0.02/0.04
  - 17.Esomeprazol 0.02/0.04

# Detailing pain for **SOCRATES** system:

Detail pain by SOCRATES system:

- S Site, Localization;
- O Onset, Beginning (sharp, gradual);
- C Character, Character;
- R Radiation, Irradiation;
- A Association, Related;
- T Timing, Duration;
- E Exacerbation, What is enhanced/eased;
- S Severity, Intensity.