SYLLABUS

Working curriculum for the discipline "Propaedeutics of Internal Diseases"

6B10117 – "Dentistry" educational program

1.	General informati	on about the discipline		
1.1	Discipline code:P\	<u>-</u>	1.6	Academic year:2025-2026
1.2	_	Propaedeutics of internal	1.7	Well:3
	diseases			
1.3	Prerequisites: Mor	phology and physiology.	1.8	Semester:6
1.4	Postrequisites: Fun		1.9	Number of credits (ECTS):4 credits
	Medicine			
1.5	Cycle:BP		1.10	Component: residential complex
2.		course (maximum 50 wor		
-				, percussion, and auscultation) examination
				stify the need for basic clinical examination
				nedical documentation. Planning laboratory
		c communication skills who	en interacting	with patients.
3.	Summative assess	ment form	1 2 5	
3.1	Testing ♥		3.5	Coursework
3.2	Writing		3.6	Essay
3.3	Oral	1 1 111 /	3.7	Project
3.4	Reception of practi		3.8	Other (specify)
4.	Objectives of the o		1 1 6.1	4 1 1 1 1 1 1 64
	_	=	_	e pathophysiological mechanisms of the cour
		•	examination	methods, and the choice of drugs in adults
	1	mes of internal diseases.		
5. RO 1.		comes (LO of the discipling		sics of semiotics and pathogenesis and
KO 1.				syndromes of internal diseases
RO 2.				collecting information when developing an
	examination plan;	outlines the scope of prin	nary and seco	ondary studies to clarify the syndrome of
	damage in patholog			
RO 3.				collecting information when developing an
				ondary studies to clarify the syndrome of
				omic diagnosis, fills out the medical history
RO 4.	_	<u> </u>	-	atients and their family members, and is
	-	al and deontological standa	ards in comm	unicating with patients, their relatives and
	colleagues	1-		
5.1	RO discipline			are associated with the discipline's RO
	RO 1		110	dge and skills in the biomedical, clinical,
				sciences that contribute to the development
	DO 2	•		ad outlook and culture of thinking.
	RO 2			ommunication skills, based on adherence to
				nciples, leading to effective information
		_	-	ts, their families, and healthcare
	DO 2			e of information technology.
	RO 3	KO 4. To provide effective	patient-cente	ered care that includes appropriate and

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		effective interventions for the diagnosis, treatment and prevention of dental diseases						
	RO 4	RO 7.Conduct educational and preventive work with patients, individually, in group and in communities, to strengthen and maintain their health and dynamically monito patients using medical information systems.						
6.	Detailed information	Detailed information about the discipline						
6.1	Venue (building, auditorium):Classes in internal medicine propaedeutics are held in the							
	department's classrooms and the Center for Practical Nursing, which are equipped with specialized					ipped with specialized		
	simulation models							
	The location of the							
	•					se call and/or email the		
		the SKMA JSC v	vebsite in the CA	LL-Center se	ection, Helpde	sk on the main page of		
()	the website.	T	D		SDOD.	CDO		
6.2	Number of hours	Lectures	Practical lesson		SROP	SRO		
	nours	8	32		56/12	12		
7.	Information abou		32		30/12	12		
No.	Full na		Degrees and position		T.	Email address		
110.	I un no		Degrees un	a position	_			
1.	Bekmurzaeva Elmira	Kuanyshevna	Head of Depart	ment,	Elmira-bel	@mail.ru		
		•	-	Doctor of Medical Sciences,				
			Professor					
2.	Sadykova Gulzhan Sa	parovna	PhD, Acting As	sociate	gulzhan21'	gulzhan2171@mail.ru		
	Professor							
			Professor					
3	Akhaeva Laura Zhaks		assistant			a00@mail.ru		
4	Baydullaev Bakhram	Muzaffarovich	assistant assistant		bbm2055@	mail.ru		
	Baydullaev Bakhram Toktarova Gulnaz Ab	Muzaffarovich dimalikovna	assistant		bbm2055@ Toktar_85	@mail.ru 85@mail.ru		
4 5 6	Baydullaev Bakhram Toktarova Gulnaz Ab Balabek Gauhar Bak	Muzaffarovich dimalikovna	assistant assistant		bbm2055@	@mail.ru 85@mail.ru		
4 5	Baydullaev Bakhram Toktarova Gulnaz Ab Balabek Gauhar Baky Thematic plan	Muzaffarovich dimalikovna ytzhankyzy	assistant assistant assistant	RO	bbm2055@ Toktar_85 balabek.g@	@mail.ru 85@mail.ru		

8.		i nematic pian						
Wed da		Topic Title		Summary	RO discipline s	Num ber of hours	Methods/ learning technologies	Forms/ evaluation methods
1	Qu pa au pa pa	lpation, percussion scultation of the cl tients with resp	n, and hest of iratory	Survey of patients with respiratory diseases: primary and secondary complaints, and their pathogenesis. Developmental and life history characteristics of the disease: the role of factors in the development of respiratory diseases. Static and dynamic examination of the chest. Determination of respiratory rate, type, and rhythm. Palpation of the chest. Determination of		1	Overview lecture	Feedback (Quick poll)

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	chest resistance and vocal				
	vibration.				
	Comparative percussion				
	of the lungs: methods of				
	implementation,				
	diagnostic value.				
	Topographic percussion				
	of the lungs: methods for				
	determining the upper and				
	lower boundaries of the				
	lungs, Kroening fields.				
	Diagnostic value.				
	Method for determining				
	the active mobility of the				
	lower edge of the lung,				
	diagnostic value of lung				
	auscultation				
Practical lesson.		RO 1.2	3	Discussion of	Checklist
	Survey of patients with respiratory diseases:	NO 1.2	3	the lesson	Checklist
Questioning, examination, palpation, percussion, and					
auscultation of the chest of				topic,	
	_ ·			acquisition of	
patients with respiratory	-			practical skills,	
pathology. Diagnostic value.	Developmental and life			solving situational	
value.	history characteristics of the disease: the role of				
				problems.	
	factors in the development of				
	1				
	respiratory diseases. Static and dynamic				
	examination of the chest.				
	Determination of				
	respiratory rate, type, and				
	rhythm. Palpation of the				
	chest. Determination of				
	chest resistance and vocal vibration.				
	Comparative percussion				
	of the lungs: methods of				
	implementation,				
	diagnostic value.				
	Topographic percussion				
	of the lungs: methods for				
	determining the upper and				
	lower boundaries of the				
	lungs, and the location of				
	the crening. Diagnostic				
	value.				
	Method for determining				

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		the active malilian of 1				
		the active mobility of the				
		lower edge of the lung,				
		diagnostic value of lung				
		auscultation				
	SROP. Consultation on the	Familiarization with the	RO 4	1/5	Reception of	Checklist
	implementation of SRO 2.	basic methods of			practical skills	
	SRO assignment	laboratory and				
	Subject:Diagnostic value of	instrumental research and				
	laboratory and instrumental					
	methods for examining the					
	respiratory system.					
	Examination of external					
	respiratory function.	the respiratory system.				
2	Lecture. Leading clinical	Predisposing factors and	RO 3	1	Overview	Feedback
	syndromes (pulmonary	causes leading to the	KO 3	1		
	1	\mathbf{c}			lecture	(Quick poll)
	tissue consolidation,	development of				
	bronchial obstruction,	pulmonary tissue				
	increased airiness in the	consolidation syndrome,				
	lung, the presence of fluid	bronchial obstruction, and				
	and cavities in the lung,	increased airiness in the				
	respiratory) in	lungs. Predisposing				
	pulmonology.	factors and causes leading				
		to the development of				
		fluid and cavity syndrome				
		in the lungs and				
		respiratory failure.				
		Clinical features.				
	Practical lesson: Leading	Predisposing factors and	RO 1.2	3	Discussion of	Checklist
	clinical syndromes	causes leading to the			the topic of the	
	(pulmonary tissue	development of			lesson,	
	-	pulmonary tissue			acquisition of	
		compaction syndrome,			practical skills,	
		impaired bronchial			work in small	
	presence of fluid and cavity				groups	
	in the lung, respiratory				groups	
	failure) in pulmonology.					
	Diagnostic value.	causes leading to the				
	Diagnostic value.					
		development of fluid and				
		cavity syndrome in the				
		lung, respiratory failure.				
	anon a trait	Clinical features.	D.C. 4	1 / 5	D .: c	C1 1.11
	SROP. Consultation on	Laboratory and	RO 4	1/6	Reception of	Checklist
	SRO implementation. SRO	instrumental research			practical skills	
	assignment	methods for leading				
	Subject:Diagnostic value of					
		luaaminakamu diaaaaa			1	
	llaboratory and instrumental	respiratory diseases.				
	llaboratory and instrumental research methods for leading clinical syndromes	respiratory diseases.				

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	of respiratory diseases.					
3	Lecture. Questioning,	A survey of patients with	RO 3	1	Overview	Feedback
	examination, palpation,	cardiovascular			lecture	(Quick poll)
	percussion, and auscultation	pathologies. Data from				
	of patients with	physical examination				
	cardiovascular pathologies.	methods on the				
	Diagnostic significance.	physiological state of the				
		cardiovascular system.				
		General overview:				
		* general condition,				
		consciousness, position in				
		bed, posture, examination				
		of the skin and mucous				
		membranes, examination				
		of the nails and phalanges				
		of the fingers;				
		- a look at the heart area -				
		the heartbeat, its position.				
		Palpation of the heart				
		area:				
		- determination of the				
		cardiac tip beat, rules for				
		palpation of the cardiac				
		tip beat, its physiological				
		characteristics or				
		properties - localization,				
		volume, height, force.				
		Cardiac percussion: -				
		purpose of percussion;				
		rules and procedure for				
		cardiac percussion -				
		position of the physician,				
		volunteer, position of the				
		pleximeter, force of the				
		beat; - determination of				
		the boundaries of the				
		relative closure of the				
		heart - left, right and				
		upper, position of the				
		physician, volunteer,				
		position of the pleximeter,				
		force of the beat; - determination of the				
		boundaries of absolute				
		and relative closure of the				
		heart, - boundaries of the vascular bundle and				
<u></u>		configuration of the heart				

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	mulas and massadires				
	- rules and procedures,				
	position of the doctor,				
	volunteer, pleximeter -				
	finger placement, impact				
	force;				
	Cardiac auscultation:				
	heart sounds, their origin,				
	and the mechanism of				
	formation of the first and				
	second sounds.				
	Determining the				
	projection of the valves				
	on the anterior chest				
	surface, rules, procedure,				
	and technique of cardiac				
	auscultation—the order of				
	listening to the heart				
	valves, characteristics of				
	normal sounds.				
	Strengthening and				
	weakening of heart				
	sounds. Classification of				
	heart murmurs.				
D 11	Diagnostic value.	DO 1.0	2	D:	CI 111
Practical lesson.	Patient complaints	RO 1.2	3		Checklist
Questioning, examination,	Patient complaints characteristic of	RO 1.2	3	the lesson	Checklist
Questioning, examination, palpation, percussion and	Patient complaints characteristic of cardiovascular diseases,	RO 1.2	3	the lesson topic,	Checklist
Questioning, examination, palpation, percussion and auscultation of the chest of	Patient complaints characteristic of cardiovascular diseases, primary and secondary.	RO 1.2	3	the lesson topic, acquisition of	Checklist
Questioning, examination, palpation, percussion and auscultation of the chest of patients with cardiovascular	Patient complaints characteristic of cardiovascular diseases, primary and secondary. Examination of the heart	RO 1.2	3	the lesson topic, acquisition of practical skills,	Checklist
Questioning, examination, palpation, percussion and auscultation of the chest of patients with cardiovascular pathology. Diagnostic	Patient complaints characteristic of cardiovascular diseases, primary and secondary. Examination of the heart area, determination of the	RO 1.2	3	the lesson topic, acquisition of practical skills, solving	Checklist
Questioning, examination, palpation, percussion and auscultation of the chest of patients with cardiovascular	Patient complaints characteristic of cardiovascular diseases, primary and secondary. Examination of the heart area, determination of the diagnostic significance of	RO 1.2	3	the lesson topic, acquisition of practical skills, solving situational	Checklist
Questioning, examination, palpation, percussion and auscultation of the chest of patients with cardiovascular pathology. Diagnostic	Patient complaints characteristic of cardiovascular diseases, primary and secondary. Examination of the heart area, determination of the diagnostic significance of the detected changes.	RO 1.2	3	the lesson topic, acquisition of practical skills, solving	Checklist
Questioning, examination, palpation, percussion and auscultation of the chest of patients with cardiovascular pathology. Diagnostic	Patient complaints characteristic of cardiovascular diseases, primary and secondary. Examination of the heart area, determination of the diagnostic significance of the detected changes. Palpation of the heart	RO 1.2	3	the lesson topic, acquisition of practical skills, solving situational	Checklist
Questioning, examination, palpation, percussion and auscultation of the chest of patients with cardiovascular pathology. Diagnostic	Patient complaints characteristic of cardiovascular diseases, primary and secondary. Examination of the heart area, determination of the diagnostic significance of the detected changes. Palpation of the heart area. Heart tip stimuli:	RO 1.2	3	the lesson topic, acquisition of practical skills, solving situational	Checklist
Questioning, examination, palpation, percussion and auscultation of the chest of patients with cardiovascular pathology. Diagnostic	Patient complaints characteristic of cardiovascular diseases, primary and secondary. Examination of the heart area, determination of the diagnostic significance of the detected changes. Palpation of the heart area. Heart tip stimuli: definition, concept, and	RO 1.2	3	the lesson topic, acquisition of practical skills, solving situational	Checklist
Questioning, examination, palpation, percussion and auscultation of the chest of patients with cardiovascular pathology. Diagnostic	Patient complaints characteristic of cardiovascular diseases, primary and secondary. Examination of the heart area, determination of the diagnostic significance of the detected changes. Palpation of the heart area. Heart tip stimuli: definition, concept, and examination methods.	RO 1.2	3	the lesson topic, acquisition of practical skills, solving situational	Checklist
Questioning, examination, palpation, percussion and auscultation of the chest of patients with cardiovascular pathology. Diagnostic	Patient complaints characteristic of cardiovascular diseases, primary and secondary. Examination of the heart area, determination of the diagnostic significance of the detected changes. Palpation of the heart area. Heart tip stimuli: definition, concept, and examination methods. Causes of negative	RO 1.2	3	the lesson topic, acquisition of practical skills, solving situational	Checklist
Questioning, examination, palpation, percussion and auscultation of the chest of patients with cardiovascular pathology. Diagnostic	Patient complaints characteristic of cardiovascular diseases, primary and secondary. Examination of the heart area, determination of the diagnostic significance of the detected changes. Palpation of the heart area. Heart tip stimuli: definition, concept, and examination methods. Causes of negative cardiac stimuli.	RO 1.2	3	the lesson topic, acquisition of practical skills, solving situational	Checklist
Questioning, examination, palpation, percussion and auscultation of the chest of patients with cardiovascular pathology. Diagnostic	Patient complaints characteristic of cardiovascular diseases, primary and secondary. Examination of the heart area, determination of the diagnostic significance of the detected changes. Palpation of the heart area. Heart tip stimuli: definition, concept, and examination methods. Causes of negative cardiac stimuli. Examination and	RO 1.2	3	the lesson topic, acquisition of practical skills, solving situational	Checklist
Questioning, examination, palpation, percussion and auscultation of the chest of patients with cardiovascular pathology. Diagnostic	Patient complaints characteristic of cardiovascular diseases, primary and secondary. Examination of the heart area, determination of the diagnostic significance of the detected changes. Palpation of the heart area. Heart tip stimuli: definition, concept, and examination methods. Causes of negative cardiac stimuli. Examination and palpation of large vessels.	RO 1.2	3	the lesson topic, acquisition of practical skills, solving situational	Checklist
Questioning, examination, palpation, percussion and auscultation of the chest of patients with cardiovascular pathology. Diagnostic	Patient complaints characteristic of cardiovascular diseases, primary and secondary. Examination of the heart area, determination of the diagnostic significance of the detected changes. Palpation of the heart area. Heart tip stimuli: definition, concept, and examination methods. Causes of negative cardiac stimuli. Examination and palpation of large vessels. Arterial pulse	RO 1.2	3	the lesson topic, acquisition of practical skills, solving situational	Checklist
Questioning, examination, palpation, percussion and auscultation of the chest of patients with cardiovascular pathology. Diagnostic	Patient complaints characteristic of cardiovascular diseases, primary and secondary. Examination of the heart area, determination of the diagnostic significance of the detected changes. Palpation of the heart area. Heart tip stimuli: definition, concept, and examination methods. Causes of negative cardiac stimuli. Examination and palpation of large vessels. Arterial pulse examination. Changes in	RO 1.2	3	the lesson topic, acquisition of practical skills, solving situational	Checklist
Questioning, examination, palpation, percussion and auscultation of the chest of patients with cardiovascular pathology. Diagnostic	Patient complaints characteristic of cardiovascular diseases, primary and secondary. Examination of the heart area, determination of the diagnostic significance of the detected changes. Palpation of the heart area. Heart tip stimuli: definition, concept, and examination methods. Causes of negative cardiac stimuli. Examination and palpation of large vessels. Arterial pulse examination. Changes in the heart area during	RO 1.2	3	the lesson topic, acquisition of practical skills, solving situational	Checklist
Questioning, examination, palpation, percussion and auscultation of the chest of patients with cardiovascular pathology. Diagnostic	Patient complaints characteristic of cardiovascular diseases, primary and secondary. Examination of the heart area, determination of the diagnostic significance of the detected changes. Palpation of the heart area. Heart tip stimuli: definition, concept, and examination methods. Causes of negative cardiac stimuli. Examination and palpation of large vessels. Arterial pulse examination. Changes in the heart area during diseases. Cardiac	RO 1.2	3	the lesson topic, acquisition of practical skills, solving situational	Checklist
Questioning, examination, palpation, percussion and auscultation of the chest of patients with cardiovascular pathology. Diagnostic	Patient complaints characteristic of cardiovascular diseases, primary and secondary. Examination of the heart area, determination of the diagnostic significance of the detected changes. Palpation of the heart area. Heart tip stimuli: definition, concept, and examination methods. Causes of negative cardiac stimuli. Examination and palpation of large vessels. Arterial pulse examination. Changes in the heart area during diseases. Cardiac percussion: boundaries of	RO 1.2	3	the lesson topic, acquisition of practical skills, solving situational	Checklist
Questioning, examination, palpation, percussion and auscultation of the chest of patients with cardiovascular pathology. Diagnostic	Patient complaints characteristic of cardiovascular diseases, primary and secondary. Examination of the heart area, determination of the diagnostic significance of the detected changes. Palpation of the heart area. Heart tip stimuli: definition, concept, and examination methods. Causes of negative cardiac stimuli. Examination and palpation of large vessels. Arterial pulse examination. Changes in the heart area during diseases. Cardiac percussion: boundaries of absolute and relative	RO 1.2	3	the lesson topic, acquisition of practical skills, solving situational	Checklist
Questioning, examination, palpation, percussion and auscultation of the chest of patients with cardiovascular pathology. Diagnostic	Patient complaints characteristic of cardiovascular diseases, primary and secondary. Examination of the heart area, determination of the diagnostic significance of the detected changes. Palpation of the heart area. Heart tip stimuli: definition, concept, and examination methods. Causes of negative cardiac stimuli. Examination and palpation of large vessels. Arterial pulse examination. Changes in the heart area during diseases. Cardiac percussion: boundaries of	RO 1.2	3	the lesson topic, acquisition of practical skills, solving situational	Checklist

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	SROP. Consultation on the	Method for determining the cardiac iliac joint, determining the right and left contours and configuration of the heart. Auscultation of the heartDiagnostic value. Introduction to the basic	RO 4	1/6	Reception of	Checklist
	implementation of SRO 3. SRO task Subject:Diagnostic value of laboratory research methods in cardiovascular diseases.	methods of laboratory research and		1/0	practical skills	Checking
4	Lecture. Leading clinical syndromes (high blood pressure and coronary heart disease, acute and chronic coronary insufficiency, valvular disease) in cardiology.	Predisposing factors and causes leading to the development of high blood pressure syndrome and ischemic heart disease. Predisposing factors and causes leading to the development of acute and chronic coronary insufficiency syndrome, valvular lesions. Clinical features.	RO 3	1	Overview lecture	Feedback (Quick poll)
	Practical lesson: Leading clinical syndromes (high blood pressure and ischemic heart disease, valvular damage) in cardiology. Diagnostic value	Predisposing factors and causes leading to the development of high blood pressure syndrome and ischemic heart disease, damage to the valvular apparatus. Clinical features.	RO 1.2	3	Discussion of the lesson topic, acquisition of practical skills, work in small groups.	Checklist
	SROP. Consultation on SRO implementation. SRO assignment Subject:Diagnostic value of laboratory studies in leading clinical syndromes of cardiovascular diseases.	Laboratory research methods for leading clinical syndromes of cardiovascular diseases.	RO 4	1/6	Reception of practical skills	Checklist
5	Lecture. Methods of examination of patients with digestive system pathology.Palpation, percussion, auscultation.	Survey of patients with gastrointestinal pathology. Data from physical examination methods of the digestive	RO 3	1	Overview lecture	Blitz survey on the topic

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Leading clinical syndromes	system under				
in	physiological conditions.				
in gastroenterology and	General examination of				
hepatology	patients with				
(gastric and intestinal	gastrointestinal				
dyspepsia, jaundice and	pathology. Objective				
liver failure)Diagnostic	examination methods:				
value.	examination of				
	gastrointestinal tract				
	diseases, diagnostic value				
	of superficial and deep				
	palpation of the				
	abdominal cavity,				
	percussion of the liver				
	and spleen, auscultation				
	of abdominal organs.				
	Examination of the skin,				
	oral cavity, and abdomen				
	in the sitting and supine				
	positions. Deep palpation				
	of the abdomen using the				
	Obraztsov method.				
	Detection of Shalpulsky				
	noise.				
	Predisposing factors and				
	causes leading to the				
	development of gastric				
	and intestinal dyspepsia				
	syndrome.				
	Predisposing factors and				
	causes leading to the				
	development of jaundice				
	and liver failure				
	syndrome. Clinical				
	features.				
Practical lesson.	Survey of patients with	RO 1.2	3	Discussion of	Checklist
Methods of examination of	gastrointestinal			the lesson	
patients with digestive	pathology. Data from			topic,	
system pathology. Palpation,	physical examination			acquisition of	
percussion, auscultation.	methods of the digestive			practical skills,	
Leading clinical syndromes	system under			solving	
in	physiological conditions.			situational	
in gastroenterology and	General examination of			problems.	
hepatology	patients with			Proofessio.	
(gastric and intestinal	gastrointestinal				
dyspepsia, jaundice and	pathology. Objective				
liver failure)Diagnostic	examination methods:				
value.	examination methods.				
value.	Examination 01				

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		gastrointestinal tract				
		diseases, diagnostic value				
		of superficial and deep				
		palpation of the				
		abdominal cavity,				
		percussion of the liver				
		and spleen, auscultation				
		of abdominal organs.				
		Examination of the skin,				
		oral cavity, and abdomen				
		in the sitting and supine				
		positions. Deep palpation				
		of the abdomen using the				
		Obraztsov method.				
		Detection of Shalpulsky				
		noise.				
		Predisposing factors and				
		causes leading to the				
		development of gastric				
		_				
		and intestinal dyspepsia				
		syndrome.				
		Predisposing factors and				
		causes leading to the				
		development of jaundice				
		and liver failure				
		syndrome. Clinical				
		features.				
	SROP. Consultation on	Familiarization with the	RO 4	2/5	Reception of	Checklist
	SRO implementation. SRO	basic methods of			practical	
	assignment	instrumental research and			skills,protectio	
	Subject:Diagnostic value of				n of medical	
	instrumental research	diagnostic signs that are			history.	
	methods in leading clinical	criteria for pathological				
	syndromes of diseases of	processes of the gastro-				
	the gastro-hepatobiliary	hepatobiliary system.				
	system.					
	Border control No. 1	Control includes the				
		content of lectures,				
		practical classes and SRO				
		topics over the course of				
		1-6 days.				
6	Lecture. Leading clinical	Predisposing factors and	RO 3	1	Overview	Blitz survey
	syndromes (dysuric,	causes leading to the	110 5	1	lecture	on the topic
	nephrotic, nephritic,	development of dysuric,			icciuic	on the topic
	hypertensive, and renal	nephrotic, nephritic,				
	failure) in nephrology.	hypertensive syndromes				
	namare) in nepinology.	and (acute and chronic)				
		,				
1		renal failure.				

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	Practical lesson: Leading clinical syndromes (dysuric, nephrotic, nephritic, hypertensive, and renal failure) in nephrology. Diagnostic value.	Predisposing factors and causes leading to the development of dysuric, nephrotic, nephritic, and hypertensive syndromes and (acute and chronic) renal failure. Clinical features.	RO 1.2	3	Discussion of the lesson topic, acquisition of practical skills, work in small groups	Checklist
	SROP. Consultation on SRO implementation. SRO assignment Subject:Diagnostic value of Ilaboratory and instrumental research methods for leading clinical syndromes of diseases of the genitourinary system.	Laboratory and instrumental research methods for leading clinical syndromes of diseases of the genitourinary system.	RO 4	1/6	Reception of practical skills.	Checklist
7	Lecture. Leading clinical syndromes (hypohyperthyroidism and hypohyperglycemia) in endocrinology.	Predisposing factors and causes leading to the development of hypohyperthyroidism syndrome andhypo - hyperglycemia.	RO 3	1	Overview lecture	Feedback (Quick poll)
	Practical lesson: Leading clinical syndromes (hypo-hyperthyroidism and hypo-hyperglycemia) in endocrinology. Diagnostic value.	Predisposing factors and causes leading to the development of hypohyperthyroidism syndrome and Hypohyperglycemia. Clinical features.	RO 1.2	3	Discussion of the lesson topic, acquisition of practical skills, solving situational problems.	Checklist
	SROP. Consultation on SRO implementation. SRO assignment Topic: Diagnostic value of llaboratory research methods for leading clinical syndromes of endocrine diseases.	Laboratory research methods for leading clinical syndromes of endocrine system diseases.	RO 4	1/6	Reception of practical skills	Checklist
8	Lecture. Leading clinical syndromes (anemic, hemorrhagic, and thrombocytopenic) in hematology.	Predisposing factors and causes leading to the development of anemic,hemorrhagic and thrombocytopenic syndrome.	RO 3	1	Overview lecture	Feedback (Quick poll)
	Practical lesson: Leading clinical syndromes (anemic, hemorrhagic, and	Predisposing factors and causes leading to the development of	RO 1.2	3	Discussion of the lesson topic,	Checklist

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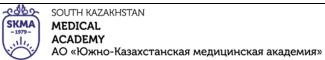
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	thrombocytopenic) in hematology. Diagnostic significance.	anemic,Hemorrhagic and thrombocytopenic syndrome. Clinical features.			acquisition of practical skills, solving situational problems.	
	SROP. Consultation on SRO implementation. SRO assignment Topic: Diagnostic value of llaboratory research methods for leading clinical syndromes of diseases of the hematopoietic system.	Laboratory research methods for leading clinical syndromes of diseases of the hematopoietic system.	RO 4	1/6	Reception of practical skills	Checklist
9	Practical lesson: Leading clinical syndromes in rheumatology. Diagnostic significance.	Principles of questioning, collecting anamnesis and objective method of examining patients with leading clinical syndromes (arthritis and arthrosis) of the musculoskeletal system.	RO 1.2	4	Discussion of the lesson topic, acquisition of practical skills, solving situational problems.	Checklist
	SROP. Consultation on SRO implementation. SRO assignment Subject: Laboratory testing methods for patients with musculoskeletal disorders. Diagnostic value.	Methods and techniques for examining the musculoskeletal system. The main symptoms of musculoskeletal diseases and acute allergies are of diagnostic value.	RO 4	1/5	Reception of practical skills	Checklist
10	Practical lesson: Leading clinical syndromes in neurology. Diagnostic significance.	Principles of questioning, collecting anamnesis and objective method of examining patients with leading clinical syndromes (meningeal and cerebrovascular accidents) of the nervous system.	RO 1.2	4	Discussion of the topic of the lesson, acquisition of practical skills, solving situational problems.	Checklist
	SROP. Consultation on SRO implementation. SRO assignment Topic: Diagnostic value of laboratory and instrumental research methods in leading clinical syndromes of the nervous system.	Laboratory research methods for leading clinical syndromes of diseases of the nervous system.	RO 4	2/5	Reception of practical skills, defense of medical history	Checklist

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	Border control No. 2	2 The control includes the			
		content of lectures,			
		practical classes and SRO			
		topics over the course of			
		7-12 days.			
	Preparation and conduct 12				
		of interim assessment			
9.	Methods of lear	ning and teaching			
9.1	Lectures	Overview			
9.2	Practical classes	Discussion of the topic, oral questioning, practical skills, solving situational			
		problems,work in small groups.			
9.3	SRO/SROP	Reception of practical skills, discussion of the topic			
9.4	Border control	Demonstration of practical skills, defense of medical history.			
10.	Evaluation crite	ria			

No.	Name of learning	Unsatisfactory	Satisfactorily	Fine	Great
RO	outcomes				
RO 1.	Demonstrates knowledge and understanding of the basics of semiotics and pathogenesis and morphogenesis of pathology in adults with the main clinical syndromes of internal diseases	1) is not able to determine the basics of semiotics and syndromology, the main parameters of laboratory and instrumental studies of pathological processes of organs and systems 3) does not explain the etiology and pathogenesis of various diseases.	1) has difficulty defining the basics of semiotics and syndromology 2) knows the basic parameters of laboratory and instrumental studies of pathological processes of organs and systems 3) has difficulty determining the etiology and pathogenesis of various diseases	1) defines the foundations of semiotics and syndromology 2) applies knowledge of the basic parameters of laboratory and instrumental studies of pathological processes of organs and systems 3) explains the etiology and pathogenesis of various diseases.	1) independently determines the basics of semiotics and syndromology 2) analyzes the main parameters of laboratory and instrumental studies of pathological processes of organs and systems. 3) analyzes issues of etiology and pathogenesis of various diseases.
RO 2.	Proficient in interviewing adults, uses clinical reasoning in collecting information when developing an	1) is not able to determine the basics of semiotics and syndromology,	1) has difficulty defining the basics of semiotics and	1) defines the foundations of semiotics and syndromology 2) applies	1) independently determines the basics of semiotics and syndromology 2) analyzes the main

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	outlines the scope of primary and secondary studies to clarify the syndrome of damage in pathology in adults with major clinical syndromes	parameters of laboratory and instrumental studies of pathological processes of organs and systems 3) does not explain the etiology and pathogenesis of various diseases.	2) knows the basic parameters of laboratory and instrumental studies of pathological processes of organs and systems 3) has difficulty determining the etiology and pathogenesis of various diseases	the basic parameters of laboratory and instrumental studies of pathological processes of organs and systems 3) explains the etiology and pathogenesis of various diseases.	laboratory and instrumental studies of pathological processes of organs and systems. 3) analyzes issues of etiology and pathogenesis of various diseases.
RO 3.	Proficient in interviewing adults, uses clinical reasoning in collecting information when developing an examination plan; outlines the scope of primary and secondary studies to clarify the syndrome of damage in pathology internal medicine, formulates a syndromic diagnosis, fills out the medical history	1) is unable to conduct questioning, physical examination of the patient, or draw up an examination plan.NHe cannot communicate normally with his colleagues.	1) makes inaccuracies when conducting questioning and physical examination of patients 2) has difficulty collecting information and drawing up an examination plan; 3) is unable to justify the plan of primary and additional studies to clarify the lesion syndrome. WIT Hcommunicate s falsely with colleagues.	1) conducts questioning and physical examination of patients 2) collects information when drawing up a survey plan; 3) justifies the planned volume of basic and additional studies to clarify the lesion syndrome. Communicates easily with colleagues.	1) is proficient in methods of conducting interviews and physical examinations 2) conducts independently questioning, physical examination of patients 3) uses clinical thinking in collecting information when preparing an examination plan 4) justifies the planned volume of basic and additional research to clarify the damage syndrome. Relationships with colleagues are at a very high level.
RO 4.	Reportsinformation, ideas, problems and solutions to patients and	1) is unable to conduct questioning,	1) makes inaccuracies when	1) conducts questioning and physical	1) is proficient in methods of conducting

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their	amily	members,	physical	conducting	examination of	interviews and
and is p	roficient	in ethical	examination of	questioning	patients	physical
and	deoi	ntological	the patient, or	and physical	2) collects	examinations
standard	ls	in	draw up an	examination of	information	2) conducts
commu	nicating	with	examination	patients	when drawing	independently
patients	their	relatives	plan.NHe	2) has	up a survey	questioning,
and coll	eagues		cannot	difficulty	plan; 3)	physical
			communicate	collecting	justifies the	examination of
			normally with	information	planned	patients
			his colleagues.	and drawing	volume of	3) uses clinical
				up an	basic and	thinking in
				examination	additional	collecting
				plan; 3) is	studies to	information when
				unable to	clarify the	preparing an
				justify the plan	lesion	examination plan
				of primary and	syndrome.	4) justifies the
				additional	Communicates	planned volume of
				studies to	easily with	basic and additional
				clarify the	colleagues.	research to clarify
				lesion		the damage
				syndrome.WIT		syndrome.
				Hcommunicate		Relationships with
				s falsely with		colleagues are at a
				colleagues.		very high level.

	Checklist for the practical lesson							
No			Level					
		Great	Fine	Satisfy	Dissatisfied			
				telno	telno			
	Practical classes:							
1	Possession of practical skills of	30	21	15	0			
	working in small groups							
2	Oral answer on questionsthis	30	21	15	0			
	task							
3	Completing test assignments	12	8	6	0			
4	Solving situational problems	28	20	14	0			
	General:	100	70	50	0			

Checklist for assessing a lesson					
Form of control	Grade	Evaluation criteria			
Discussion of the	Greatcorresponds to	- The student is proficient in interviewing and examining			
topic,	points:	patients. They correctly and accurately select questions when			
implementation	A (4.0; 95-100%);	collecting anamnesis, accurately analyze primary and secondary			
of practical	A- (3.67; 90-94%)	complaints, and are well-versed in the collected anamnesis and			
skills.		medical history.			
		- Conduct a physical examination accurately:			
		- general examination (examination of the skin and			
		subcutaneous fat, visible mucous membrane, measurement of			

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mobility, diameters, peristalsis, zones of pain, rigidity), - Percussion (determination of comparative, topographic boundaries of the lungs, area, excursion; determination of absolute and relative boundaries of the heart, configuration, diameter and vascular bundle; determination of the boundarie of the liver, spleen and stomach, percussion symptom); - auscultation (listening to vesicular and bronchial breathing, wheezing, crepitations, pleural friction rub in the lungs; listening to normal and pathological heart tones and murmurs diastolic and systolic murmur) Substantiates and makes a tentative syndromic diagnosis Used additional literature in preparation for the lesson. Systematizes material on the topic. Communicates effectively in medical practice, objectively conveys relevant information, and is proficient in and applies ethical and deontological standards when performing tasks. skill; - The trainee is proficient in interviewing and examining patients. They choose the right questions when collecting anamnesis, accurately analyze primary and secondary complaints, and are well-versed in the collected anamnesis an medical history It is good to conduct a physical examination: - general examination (examination of the skin and subcutaneous fat, visible mucous membrane, measurement of respiratory rate, heart rate, blood pressure); - palpation (determination of respistance, pain, vocal fremitus, localization, amplitude, area, strength, pulsation, consistency, mobility, diameters, peristalsis, zones of pain, rigidity), - Percussion (determination of comparative, topographic boundaries of the lungs, area, excursion; determination of absolute and relative boundaries of the heart, configuration, diameter and vascular bundle; determination of the boundarie of the liver, spleen and stomach, percussion symptom); - auscultation (listening to vesicular and bronchial breathing, wheezing, crepitations, pleural friction rub in the lungs;		·
Makes a presumptive syndrome diagnosis without	corresponds to B+ scores (3.33; 85-89%) B (3.0; 80-84%) B- (2.67; 75-79%)	 palpation (determination of resistance, pain, vocal fremitus, localization, amplitude, area, strength, pulsation, consistency, mobility, diameters, peristalsis, zones of pain, rigidity), Percussion (determination of comparative, topographic boundaries of the lungs, area, excursion; determination of absolute and relative boundaries of the heart, configuration, diameter and vascular bundle; determination of the boundaries of the liver, spleen and stomach, percussion symptom); auscultation (listening to vesicular and bronchial breathing, wheezing, crepitations, pleural friction rub in the lungs; listening to normal and pathological heart tones and murmurs, diastolic and systolic murmur). Substantiates and makes a tentative syndromic diagnosis. Used additional literature in preparation for the lesson. Systematizes material on the topic. Communicates effectively in medical practice, objectively conveys relevant information, and is proficient in and applies ethical and deontological standards when performing tasks. skill; The trainee is proficient in interviewing and examining patients. They choose the right questions when collecting anamnesis, accurately analyze primary and secondary complaints, and are well-versed in the collected anamnesis and medical history. It is good to conduct a physical examination: general examination (examination of the skin and subcutaneous fat, visible mucous membrane, measurement of respiratory rate, heart rate, blood pressure); palpation (determination of resistance, pain, vocal fremitus, localization, amplitude, area, strength, pulsation, consistency, mobility, diameters, peristalsis, zones of pain, rigidity), Percussion (determination of comparative, topographic boundaries of the lungs, area, excursion; determination of absolute and relative boundaries of the heart, configuration, diameter and vascular bundle; determination of the boundaries of the liver, spleen and stomach, percussion
	s to points	- The student is able to navigate through questioning and examining patients, analyzes primary and secondary complaints
C (2.0; 65-69%) with errors, and is poorly oriented in the collected anamnesis life and illness. D+ (1.33; 55-59%) There are errors in the physical examination:	C- (1.67; 60-64%)	

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	I D. (4.0. 50. 545)	
	D- (1.0; 50-54%)	- general examination (examination of the skin and
		subcutaneous fat, visible mucous membrane, measurement of
		respiratory rate, heart rate, blood pressure);
		- palpation (determination of resistance, pain, vocal fremitus,
		localization, amplitude, area, strength, pulsation, consistency,
		mobility, diameters, peristalsis, zones of pain, rigidity),
		- Percussion (determination of comparative, topographic
		boundaries of the lungs, area, excursion; determination of
		absolute and relative boundaries of the heart, configuration,
		diameter and vascular bundle; determination of the boundaries
		of the liver, spleen and stomach, tingling symptom);
		- auscultation (listening to vesicular and bronchial breathing,
		wheezing, crepitations, pleural friction rub in the lungs;
		listening to normal and pathological heart tones and murmurs,
		diastolic and systolic murmur).
		- Incapable of correlating the relationship between primary
		symptoms and syndromes. Provides a presumptive syndrome-
		based diagnosis without supporting evidence.
		Low level of communication in medical practice; subjectively
		conveys appropriate information;
	Unsatisfactorycorrespon	The student has no idea about the main and secondary
	ds to FX points (0.5;	complaints and is not familiar with the collected anamnesis of
	25-49%)	life and illness.
		- Incapable of conducting practical exercises and interpreting
		their results. Doesn't see the connection between objective
		physical examination data:
		- general examination (examination of the skin and
		subcutaneous fat, visible mucous membrane, measurement of
		respiratory rate, heart rate, blood pressure);
		- palpation (determination of resistance, pain, vocal fremitus,
		localization, amplitude, area, strength, pulsation, consistency,
		mobility, diameters, peristalsis, zones of pain, rigidity),
		- Percussion (determination of comparative, topographic
		boundaries of the lungs, area, excursion; determination of
		absolute and relative boundaries of the heart, configuration,
		diameter and vascular bundle; determination of the boundaries
		of the liver, spleen and stomach, percussion symptom);
		- Auscultation (listening to vesicular and bronchial breathing,
		wheezing, crepitations, pleural friction rub in the lungs;
		listening to normal and pathological heart tones and murmurs,
		diastolic and systolic murmur).
	Unsatisfactorycorrespon	Doesn't find or correlate the relationship between the main
	ds to points	symptoms and syndromes. Makes a presumptive syndrome-
	F (0; 0-24%)	based diagnosis without substantiating the data.
	1 (0, 0 21/0)	- Did not participate in group work. Incapable of
		communicating in medical practice; does not convey
		appropriate information; does not possess or apply ethical and
		deontological standards when performing the skill. Gross errors
İ		acontological standards when performing the skin. Gloss errors

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when answering the instructor's questions. without using specific terminology in answers.

	Checklist of situational tasks						
No	Questions	Level					
•	. Great Fine Satisfactorily Unsatisfactor						
1	1 situational task on the topic	14	10	7	0		
2	2 situational tasks on the topic	14	10	7	0		
	Total:	28	20	14	0		

	Situational Task Assessment Sheet	
No.	Evaluation criteria	Points
1	Demonstrates original thinking when solving situational problems. Fully	"Excellent" 90-100%
	utilizes theoretical knowledge necessary for solving the problem.	
	Demonstrates excellent knowledge of reference biochemical parameters	
	when interpreting proposed biofluid analysis data.	
	Demonstrates the ability to draw logical conclusions from situational	
	problems while demonstrating a thorough understanding of the required	
	course material.	
2	Possesses the necessary knowledge to solve a given situational problem.	"Good" 70-89%
	Allows for minor inaccuracies when discussing a given case. Capable of	
	drawing correct conclusions based on the proposed situational problem.	
3	Allows minor inaccuracies when discussing a given problem, has difficulty	"Satisfactory" 50-69%
	interpreting the analyses proposed in the situational problem, and draws	
	conclusions with difficulty.	
4	Makes fundamental mistakes in discussing situational problems. Passive,	"Unsatisfactory" 0-49%
	unable to draw appropriate conclusions.	-

	SRO and SROP checklist				
N	Evaluation criteria			Level	
0.		Great	Fine	Satisfy	Dissatisfied
				telno	telno
	SRO and SROP:				
1	Practicing practical skills	50	35	25	0
2	Oral answers to the questions of this	50	35	25	0
	task				
	General	100	70	50	0

	Checklist for students' independent work (SRO)				
5	5 Implementatio Great Has good command of patient interviews and examination		Has good command of patient interviews and examinations.		
n of practical Corresp		Corresponds	Demonstrates practical skills in palpation, percussion,		
	skills	ratings:	auscultation, and general examination.		
A (4.0; 95-100%); The medical histo		A (4.0; 95-100%);	The medical history was written according to the algorithm		
	A- (3.67; 90-94%) and correctly, with no errors. He used more than five				
	sources and monographs on specific diseases to write the				
			medical history. He completed the test assignments 90-		

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	100%.
Fine	The student is proficient in questioning and examining
Meets the ratings:	patients, and has made minor inaccuracies or significant
B+ (3.33; 85-9%);	errors, which were corrected by the student. Demonstrates
B (3.0; 80-84%);	practical skills in palpation, percussion, auscultation, and
B- (2.67; 75-79%)	general examination.
C+ (2.33; 70-74%)	The medical history was written according to the algorithm
	and correctly, with minor errors. The patient used fewer than
	five sources and monographs on specific diseases to write
	the medical history. He completed test assignments at 70-
	89%.
Satisfactorily	He is able to navigate through questioning and examining
Meets the ratings:	patients. When demonstrating practical skills (conducting
C(2.0; 65-69%)	palpation, percussion, auscultation and general
C-(1.67; 60-64%)	examination), he showed incomplete knowledge of the
D+ (1.33; 55-59%)	material on the given topic, while making fundamental
D(1.0; 50-54%)	mistakes.
	The medical history was written according to the algorithm
	and correctly, but made some fundamental errors. He used fewer than three sources to write the medical history. He
	completes test assignments at 50-69%.
Unsatisfactory	Failed to demonstrate practical skills. Incorrect description
FX (0.5; 25-49%)	of medical history. Test assignments performed at 0-49%.
F (0: 0-24%)	of medical instory. Test assignments performed at 0-49%.
1 (0, 0-2470)	

Checklist for asse	Checklist for assessing written assignments during midterm assessment			
Form	Grade Evaluation criteria			
control				
Solving	"Great"	- The student accurately analyzes primary and secondary complaints		
situational	90-100%	and is well-versed in the collected anamnesis of life and illness.		
problems using		- Links data from objective physical examination (palpation,		
tickets		auscultation, percussion), correctly interprets data from laboratory and instrumental studies.		
		Able to evaluate pathophysiological patterns of research results.		
		- Finds and compares the relationship between the main symptoms		
		and syndromes.		
		- Substantiates and makes a tentative syndrome-based diagnosis.		
		-The student answered the question on the problem without any		
		errors.		
		based on understanding, knowledge and clinical thinking regarding		
		the given clinical situation.		
		- The student has an excellent understanding of primary and		
		secondary complaints and is well versed in the collected anamnesis		
		of life and illness.		
	"Fine"	- Links data from objective physical examination (palpation,		
	70-89%	auscultation, percussion), and incorrectly interprets data from		
		laboratory and instrumental studies.		
		-There are errors in assessing the pathophysiological patterns of the		

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		research results.
		- Finds and compares the relationship between the main symptoms
		and syndromes.
		- Makes a presumptive syndrome diagnosis without substantiating
		the data
		-The student did not answer the question on the problem in full for
		this clinical situation.
		- The student analyzes primary and secondary complaints with errors
		and is poorly oriented in the collected anamnesis of life and illness.
	«Satisfactory" 50-	- Links data from objective physical examination (palpation,
	69%	auscultation, percussion), correctly interprets data from laboratory
		and instrumental studies.
		-Unable to evaluate the pathophysiological patterns of research
		results.
		-Unable to compare the relationship between the main symptoms and
		syndromes.
		- Makes a presumptive syndrome diagnosis without substantiating
		the data
		-The student answered the question on the task without
		-
		understanding, knowledge, and clinical thinking regarding the given clinical situation.
	!!T.T 4 : - C 4 !!	
	"Unsatisfactory"	- The student has no idea about the main and secondary complaints
	0-49%	and is not familiar with the collected anamnesis of life and illness.
		- Does not see the connection between objective physical
		examination data (palpation, auscultation, percussion), and
		incorrectly interprets laboratory and instrumental examination data.
		- Does not know how to evaluate the pathophysiological patterns of
		research results.
		- Does not find and is not able to compare the connection between
		the main symptoms and syndromes.
		- Makes a presumptive syndrome diagnosis without substantiating
		the data.
		-The student gave an incorrect answer to the question on the task.
L	1	

10.2 Letter Grading System Assessments					
Letter grading	Digital equivalent of	Percentage	Assessment according to the		
system	points	content	traditional system		
A	4.0	95-100	Great		
A -	3.67	90-94			
B +	3.33	85-89	Fine		
IN	3.0	80-84			
IN -	2.67	75-79			
C +	2.33	70-74			
WITH	2.0	65-69	Satisfactorily		
WITH -	1.67	60-64			
D+	1.33	55-59			
D-	1.0	50-54			
FX	0.5	25-49	Not satisfactory		

OŃTÚSTIK-QAZAQSTAN MEDISINA AKADEMIASY «Оңтүстік Қазақстан медицина академиясы» АҚ ОЙТÚSTIK-QAZAQSTAN MEDICAL ACADEMY ACADEMY AO «Южно-Казахстанская медицинс	кая академия»
Department of Propaedeutics of Internal Diseases	47 / 11 ()
Work program (syllabus) for the discipline "Propaedeutics of Internal Diseases"	P.20out of 24

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11. Educational resources	
Electronic resources	EL 4 ' 1'I COZMA 144 // 1'I I I I I
Electronic resources	D 11' I ' EI ' I'I (DIEI)
	• Republican Interuniversity Electronic Library (RIEL) – http://rmebrk.kz/
	Digital library "Aknurpress" - https://www.aknurpress.kz/ Electronic library "Enigraph" http://www.alib.kg/
	Electronic library "Epigraph" - http://www.elib.kz/ Epigraph
	• Epigraph - a portal for multimedia
	textbooks <u>https://mbook.kz/ru/index/</u>
	• EBS IPR SMARThttps://www.iprbookshop.ru/auth
	• information and legal system "Заң» - https://zan.kz/ru
	Medline Ultimate EVSCO Proclamatical Collection ERSCO
	eBook Medical Collection EBSCO
	Scopus - https://www.scopus.com/
Electronic textbooks	1) Ivashkin, VTInternal diseases propedeutics [Electronic resource]:
	textbook Electronic text data. (142 MB) M: GEOTAR - Media,
	2017 electronic optical disc
	2) Ishki aurular./Bimurzaev G.N., Zaripova G.K., 2020.
	https://aknurpress.kz/reader/web/2594
	3) Ishki aurular clinics. Erzhanova G.A., Mukhanova A.K.,
	2016/https://aknurpress.kz/reader/web/2370
	4) Ishki aurular propedeuticsynan zhardayattyk tapsyrmalar
	Orazova B.O., Marchenko T.V.,
	2016/https://aknurpress.kz/reader/web/2348
	5) Akhmetov Kayyrgali Zhaleluly. Ishki aurular propaedeutics for
	clinics. Almaty: "Evero", 2020. – 262 bet
	https://elib.kz/ru/search/read_book/22/
	6) Internal non-infectious diseases with clinical radiological
	assessment. KSU named after A. Baitursynov, 2011. – 94 p.
	http://rmebrk.kz/book/1024356
	7) Ajay K. Singh. Joseph Loscalzo. The Brigham Intensive Review of
	Internal Medicine Question and Answer Companion:Oxford: Oxford
	University Press. 2014 // eBook Collection EBSCO
	8) Thomas Ciesielski .Washington Manual General Internal Medicine
	Consult: Third edition. Philadelphia: Wolters Kluwer Health. 2017 //
	eBook Collection EBSCO
	9) Internal Medicine. Vol. 1 [Electronic resource]: textbook / edited
	by V. S. Moiseev 3rd ed., corrected and supplemented Electronic
	text data. (66.5 MB) M .: GEOTAR - Media, 2015 960
	10) Internal Medicine. Vol. 2 [Electronic resource]: textbook / edited
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	11) Propaedeutics of internal diseases: Textbook. / T.S. Ryabova,
	E.S. Ryss, V.Ya. Plotkin et al St. Petersburg: SpetsLit, 2015 414
	p. http://rmebrk.kz/book/1174389
	12) Internal diseases in the work of a general practitioner: Study
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OŃTÚSTIK-QAZAQSTAN

MEDISINA

AKADEMIASY
«Оңтүстік Қазақстан медицина академиясы» АҚ

ОҢТҮСТІК Қазақстан медицина академиясы» АҚ

Department of Propaedeutics of Internal Diseases

Work program (syllabus) for the discipline "Propaedeutics of Internal Diseases"

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Turkestan: Turan, 2017. - 96 p. http://rmebrk.kz/book/1167635

13) Propaedeutics of Internal Diseases: Textbook. – 6th edition, Volume I

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- 14) Propaedeutics of Internal Diseases: Textbook. 6th ed., Volume IIrevised and supplemented (Textbook for students of medical universities). Almaty: Evero, 2020. 212 p.https://elib.kz/ru/search/read_book/682
- 15) Propaedeutics of Internal Diseases: Textbook. 6th ed., Volume III, revised and supplemented (Textbook. For students of medical universities). Almaty: Evero, 2020. 208 p. https://elib.kz/ru/search/read_book/684/
- 16) Nursultanova S.D., Bakirova R.E., Mamashalieva S.B., Bekov E.K., Madieva L.S. Zhurek tamyr zhuyesinin aurular bar naukastardy tekseru ədisi zhəne tekhnikasy. Oku-ədistemelik kural.- Almaty, "Evero" baspasy. -2020. https://elib.kz/ru/search/read_book/705/17) Ishki afza aurular propaedeutics. Okulyk Aitmbet B.11- Almaty "Evero" 2018, -568 bet. https://elib.kz/ru/search/read_book/3086/18) Stryuk, Raisa Ivanovna.Internale diseases: in 3 parts: Part 1 textbook / R. I. Stryuk, I. V. Maev; [First. Moscow State Medical University named after I. M. Sechenov]. Almaty: Evero, 2016. -
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- 21) Pimenov, Yu. S. Internal Medicine. Volume 1: study guide / Yu. S. Pimenov, I. V. Roganova, L. N. Finko. Moscow: REAVIZ, 2008. 146 p. / Digital educational resource IPR

SMART:https://www.iprbookshop.ru/10141.html

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- 1) Vasilenko, V. Kh. PRopedeutics of internal diseases. T. 1.: Textbook / V. Kh. Vasilenko, V.
- V. Vasilenko; . Almaty: Newbook, 2021. 400. p.
- 2) Vasilenko, V. Kh. PRopedeutics of internal diseases. T. 2.: Textbook / V. Kh. Vasilenko, V.
- V. Vasilenko; . Almaty: Newbook, 2021. 212. p.
- 3) Vasilenko, V. Kh. PRopedeutics of internal diseases. T. 3.: Textbook / V. Kh. Vasilenko, V.
- V. Vasilenko; . Almaty: Newbook, 2021. 208. p.

АО «Южно-Казахстанская медицинская академия»

Department of Propaedeutics of Internal Diseases

Work program (syllabus) for the discipline "Propaedeutics of Internal Diseases"

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- 4) Mukhin, N. A.**Ішкі аурлар**ргораеdeutics: okulyk. M.: GEOTAR Media, 2015 Akhmetov, K. Zh. Zh. Akhmetov. - Almaty: New book, 2022. - 266 p.
- 5) Vasilenko, V. Kh.Ishki aurular propaedeutics. T. 1. :okulyk / mem. tilge aud. K. Askambay. - Almaty: Evero, 2015. - 336 b. With
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- 8) Makolkin, V. I.Ishki aurular: okulyk. M.: GEOTAR Media, 2014. 976 bet Grebenev, A. L. Propaedeutics of Internal Diseases: textbook / A. L. Grebenev. - 5th edition, revised and enlarged. - Almaty: Evero, 2014. - 520 p.
- 9) "Tynys alu zhuyesi"моулі: интересланғанокулық = Module "Respiratory system": integrated textbook / S. K. Zhaufasheva [f. b.]. - M.: "Litterra", 2014. - 272 bet.
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- 12) "ZərshyFaruzyyesi" modules: integrationlanganokulyk = Module "Urinary system": integrated textbook / S.K. Zhaugasheva [f. b.]; zhauapt ed. S. B. Zhutikova, S. D. Nursultanova. - M.: Litterra, 2014. - 256 bet. With. : ill.
- 13) "Kan tuzushi zhuyesi" modules: integrationlangan okulyk = Module "Hematopoietic system": integration textbook / S. K. Zhaugasheva [f. b.]; zhauapt ed. S. B. Zhutikova, S. D. Nursultanova. - M.: "Litterra", 2014. - 288 bet. With.
- 14) "Endocrindic zhuye" modules: integrationlangan okulyk = Module "Endocrine system": integration textbook / S.K. Zhaugasheva [f. b.]; zhauapt ed. S. B. Zhutikova, S. D. Nursultanova. - M.: "Litterra", 2014. - 328 bet. With.
- 15) "Tirek-kimylzhuyesi" modules:integrationlanganokulyk = Module "Musculoskeletal system": integrated textbook / S.K. Zhaugasheva [f. b.]; zhauapt ed. S. B. Zhutikova, S. D. Nursultanova. - M.: Litterra, 2014. - 240 bet. With. : ill.
- **16)** ""Modules": integrationlanganokulyk = Module "Nervous system": integrated textbook / S.K. Zhaugasheva [f. b.]; zhauapt ed. S. B. Zhutikova, S. D. Nursultanova. - M.: "Litterra", 2014. - 264 bet. With. : ill.
- 17) Vasilenko, VK Propaedeutics of internal diseases. 1-volume: textbook / Almaty: "Evero", 2017. - 364 p.
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- 20) Ivashkin, VTInternal diseases propedeutics: textbook / VT Ivashkin, AV Okhlobystin. -; The book is recommended by the Educational and Methodological association on Medical and Pharmaceutical Education of Russia. - M.: GEOTAR-Media, 2016. - 176 p.
- 21) AitbembetB. N. Ishki afza aurularyn propedeutics: okulyk / B. N. Aitbembet. Almaty: ESPI, 2023
- 22) Diagnosis of diseases internal organs. Formulation, classification: a tutorial / edited by V. A. Akhmedov. - M.: GEOTAR - Media, 2016. - 256

Косымша:

	OŃTÚSTIK-QAZAQSTAN	2962	SOUTH KAZAKHSTAN	
	MEDISINA	(SKMA)	MEDICAL	
	AKADEMIASY	1 1	ACADEMY	
•	«Оңтүстік Қазақстан медицина академиясы» АҚ		АО «Южно-Казахстанская медицинс	кая академия»
	Department of Propaedeutics of 1	Internal I	Diseases	47 / 11 ()

1) Omarov, T. R.Emergency conditions in the clinic of internal diseases: a tutorial / T. R. Omarov, V. A. Omarova. - Karaganda: AKN¥R, 2019. - 518 p.

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A. Akhmedov. - M.: GEOTAR - Media, 2016. – 256

Work program (syllabus) for the discipline "Propaedeutics of Internal Diseases"

Mukhin, N. A.Selected lectures on internal diseases: lecture / N. A. Mukhin. - 2nd ed. - M.: GEOTAR - Media, 2017. - 328 p.

- 3) Ishki aurular boyinshaobjectivetendirilgen κγramdastyrylgan klinikalyk emtikhan: okuadistemelik kural = Objective structured clinical examination in internal medicine: educational methodological manual / M. Ospanov atyndagy BKMMU; Kuras. K. Zh. Akhmetov [reinforced concrete]. M.: "Litterra", 2016. 368 b.
- 4) Сырқатнама: oku-adistemelik kural / G. M. Yesenzhanova [Zh. b.] ; KR DS Zh Θ D Minister of League. 2-bass tolyk. zhene Θ Hd. Karaganda: Residential complex "Aknur", 2015. 80 s

K. Akhmetov

- 5) Akhmetov K. Zh.Ishki aurular propaedeutics pəniniң klinikalyk dəristeri: oku kuraly / k. Zh. Akhmetov. Almaty: New book, 2022. 266 p.
- 6) Diagnosis of internal diseases by syndromes: training manual / EK Bekmurzaeva. Almaty: Epigraph, 2022. 128 s.
- 7) Seydakhmetova A. A.Ishki aurular meteorology and factors of taueldiligi: monograph / A. A. Seidakhmetova. Shymkent, 2025. 108 b. Matin.

12. Discipline policy

Student expectations, attendance, behavior, grading policies, penalties, incentives, etc.

- 1. During classes, wear special clothing (gown, cap).
- 2. Mandatory attendance of lectures, practical classes and SROPS according to the schedule.
- 3. Don't be late or miss lectures or classes. If you are sick, provide a medical certificate and a work permit stating the due date, valid for 30 days from the date it is received from the dean's office.
- 4. Unexcused absences are not made up. Students who miss classes without an excuse are assigned a "0" next to the "n" mark in their electronic journal and receive penalty points:
 - the penalty point for missing 1 lecture is 1.0 point from the midterm assessment grades;
 - The penalty point for missing 1 SRO lesson is 2.0 points from the SRO assessment.
- 5. Attendance at SRO classes is mandatory. If a student is absent from SRO classes, an "n" mark is added to the student's academic record and electronic journal.
- 6. Each student must complete all forms of SRO assignments and submit them according to the schedule.
- 7. For each practical lesson and SRO, all students must prepare promptly and clearly and take an active part in the discussion of the topic.
- 8. Be responsible for the sanitary condition of your workplace and personal hygiene.
- 9. Eating food in the classrooms is strictly prohibited.
- 10. Observe safety regulations when working with simulation dummies
- 11. Observe the Academy's internal regulations and ethics of conduct.
- 12. Be tolerant, open and friendly towards fellow students and teachers.
- 13. Treats the department's property with care.

	13.	Academic policy based on the moral and ethical values of the academy
Ī	13.1	P. 4 Student Honor Code
Ī	13.2	GRADING POLICY

OŃTÚSTIK-QAZAQSTAN MEDISINA AKADEMIASY

SKMA
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ACADEMY
AO «Южно-Казахстанская медицинская академия»

«Оңтүстік Қазақстан медицина академиясы» АҚ

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- 1. Several forms of knowledge assessment are used in class. The average grade is entered into the gradebook.
- 2. A student who does not achieve a passing score (50%) in one of the types of tests (current control, midterm control No. 1 and/or No. 2) is not admitted to the exam in the discipline.
- 3. The final rating for admission to the exam in a discipline must be at least 50 points (60%), which is calculated automatically based on the average score of the current control (40%) + the average score of the interim controls (20%).
- 4. Final certification is carried out in two stages: acceptance of proactive skills and testing.

14. Утверждение и пересмотр	是一些知识别是由	Ingliance of the control of the cont	Подпись
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Дата утверждения на кафедре	Протокол №	Ф.И.О. заведующего кафедрой	Подпись
<u>"26» 06,</u> 2025г.	11	Кафедра «Пропедевтика внутренних болезней» д.м.н., профессор Бекмурзаева Э.К.	Ser5