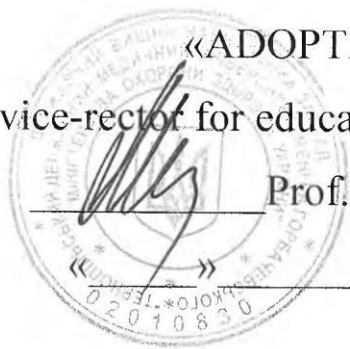


TERNOPIIL STATE MEDICAL UNIVERSITY
after I.YA. GORBACHEVSKY
Department of Surgery №2

«ADOPTED»
The vice-rector for educational work
Prof. A. Shulgay
2017



**SYLLABUS
FOR SURGERY
For the IV year students**

Direction of training: 1201 Medicine

Specialty : 7.12010005 «Stomatology »

Faculty: Stomatologic

Academic Year 2017-2018

The syllabus is worked out by: prof. I.K. Venger; ass. prof. A.R. Vayda

Adopted on the Department of Surgery №2

“29” June 2017, Protocol № 1

Head of the department
of Surgery №2

prof. I.K. Venger.

Ternopil –2017

DESCRIPTION DISCIPLINE

| | | | |
|---|---|--------------------------------|----|
| Name of indicators | Areas of expertise, training direction, education and qualification level | Characterization of discipline | |
| | | full-time education | |
| Total credits – 3,0 | Discipline ___1201 Medicine (code and name) | full-time education | |
| | | | |
| Modules – 1 | Specialty 7. 12010005 “Stomatology” | Year of training | |
| Content modules – 4 | | IV | |
| | | semester | |
| | | 7 -8 | |
| Total number of hours 90 hours | Educational qualification: ___ specialist___ | Lectures | |
| Weekly hours for fulltime study: audience - 4.5 independent work of the student - 1.8 | | 10 | 10 |
| | | Practical | |
| | | 18 | 24 |
| | | Laboratory | |
| | | hours | |
| | | Independent work | |
| | | 17 | 11 |
| | | Individual tasks: | |
| | | hours | |
| | Type of control: | | |
| test | exam | | |

Note. The ratio of hours of classes to independent and individual work is (%):
for full-time - 66.6: 33.4

2. THE AIMS AND OBJECTIVES OF THE DISCIPLINE

The aim is to develop in students the basics of clinical discipline, moral and deontological principles of medical specialist. Students must master the basics of organization and operation of the surgical hospital, acquire knowledge and learn the discipline and work out practical skills and some medical manipulations. They should get basic knowledge of surgery and patient examination to master the principles of surgical pathology. This will further focus in the clinical setting and continue studying surgical disciplines.

Objectives:

- Form a communicative, moral and ethical skills of medical specialist and principles of professional subordination in surgery;
- Learn basic position and organization of the surgery department;
- To study and learn the main themes of the course of surgery;
- Learn the rules of the clinical examination of the patient, to be able to interpret the results of surveys and form a diagnosis.

A study of the discipline the student must know:

- Etiology, pathogenesis, clinical presentation, diagnosis, treatment of thyroid and mammary glands;
- etiology, pathogenesis, clinical presentation, diagnosis, treatment of purulent diseases of lungs and pleura, diseases of the esophagus;
- etiology, pathogenesis, clinical presentation, diagnosis, treatment of abdominal hernia, acute appendicitis;
- etiology, pathogenesis, clinical presentation, diagnosis, treatment of acute cholecystitis. Acute pancreatitis;
- etiology, pathogenesis, clinical presentation, diagnosis, treatment of vascular disease.

Be able to:

- Analyze the results of examination of dental patients in general surgical pathology;
- Demonstrate the moral and ethical principles of medical specialist and principles of professional subordination in general surgery;
- Apply methods of statistical analysis of biomedical data;
- To conduct examination of the patient with dental abnormalities and deformities;
- Identify the most common symptoms and syndromes in the clinic of surgical diseases;
- Determine the tactics of dental patients with the most common surgical diseases and their complications;
- To provide emergency medical assistance in emergency conditions in surgery.
-

3. PROGRAM DISCIPLINE PART 2. SURGERY.

Surgical diseases of abdominal cavity. Surgical Emergencies.

Surgical diseases of the stomach and duodenum.

Specific objectives:

- Explore the clinical peculiarities of gastric ulcers and duodenal ulcers, to determine methods of conservative and surgical treatment;
- To diagnose and differential diagnosis of complications of gastric ulcers and duodenal ulcers using clinical and additional methods to determine medical tactics, indications for surgery and his technique with perforated ulcer, bleeding ulcer, stenosis;
- Learn the methods of diagnosis of gastric cancer, medical tactics and methods of surgery;
- Differentiate complication of gastric ulcer and duodenal ulcer: perforative ulcer, ulcer, stenosis bleeding ulcer;
- To determine the therapeutic tactics and learn surgery options for complications of peptic ulcer;
- Diagnosis of gastric cancer and determine treatment.

Surgery emergencies.

Specific objectives:

- Learn the general principles of surgical care in the conduct of war and emergency, the content, scope and organization of first medical and surgical care in a skilled stages of medical evacuation in wartime and peacetime emergencies. - Able to carry out medical and sorting medical evacuation
- Carry out general principles of first aid for fainting, collapse, shock, acute respiratory failure, traumatic and mechanical asphyxia, drowning, sopor, coma, cardiac arrest
- Assess the severity of condition, detect respiratory failure and circulatory lifethreatening
- To provide emergency assistance to carry out primary life support, cardiopulmonary resuscitation
- Emergency resuscitation measures in fainting, collapse, shock, acute respiratory failure, traumatic and mechanical asphyxia, drowning, sopor, coma, cardiac arrest
- Know the modern types of firearms and the possible structure of sanitary losses in combat surgical trauma

- To organize medical care to wounded with gunshot wounds and mineexplosive injuries at different stages of medical care, prevention of wound infection, depending on the severity of injuries, providing the first medical, medical care and urgent measures qualified surgical care
- To primary and secondary surgical treatment of gunshot wounds, drug treatment of gunshot wounds
- define the concept of traumatic shock, traumatic illness, her periods and major complications, modern methods of correction of hemodynamic, respiratory exchange and neuroendocrine disorders
- To anti shocks measures in military operations and emergency situations, provide emergency care for complications of traumatic disease
- Know the basic symptoms and possible complications of injuries of the head, neck, chest, abdomen, pelvis and extremities, especially the assistance of the stages of medical evacuation.
- Be able to diagnose and determine the severity of the damage suffered head, neck, chest, abdomen, pelvis and extremities, give them first medical, medical care and carry out urgent measures qualified surgical care in full.
- Learn the basic symptoms and possible complications of combined surgical mechanical trauma, thermal burn and cold injury, combined surgical trauma, learn the features of this help the victims on the stages of medical evacuation;
- The diagnosis and determine the severity of injuries in polytrauma mechanical, thermal burn and cold injury, combined surgical trauma to their first medical, medical care and urgent measures qualified surgical care in full - Demonstrate in defense of history the main methods of objective examination of surgical patients, treat the main symptoms, these additional methods of research that helped establish the diagnosis for this patient
- Based on survey data form the previous clinical and final diagnoses, to distinguish, identify therapeutic tactics, write the letter patient

Study the history of the disease.

Specific objectives:

- Learn how to conduct Supervision of the patient at his bed;
- Be able to collect complaints patient, history of illness, history of life;
- Describe the objective status of the patient with local disease status;
- A plan of survey, to distinguish;
- Identify and describe therapeutic tactics treatments; - Protect the educational history of the disease

THE STRUCTURE OF THE DISCIPLINE

| | Names of content modules and themes | Number of hours | | | | | |
|--|---|-----------------|----------|-----------|-------|---|-----------|
| | | full-time | | | | | |
| | | all | Includin | | | | |
| L | P | | Lab. | ind. | is w. | | |
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| SURGERY. | | | | | | | |
| Surgical diseases of abdominal cavity. SURGICAL EMERGENCIES. | | | | | | | |
| Surgical diseases of the stomach and duodenum. | | | | | | | |
| 1. | Peptic ulcer and duodenal ulcer. Etiology, pathogenesis, clinical picture, diagnosis, treatment. Surgical treatment of peptic ulcer. | 4 | | 6 | | | 2 |
| | Complications of peptic ulcer: perforative ulcer. Pathogenesis, clinical picture, diagnosis, treatment. Complications of peptic ulcer: Bleeding ulcer. Pathogenesis, clinical picture, diagnosis, treatment. Complications of peptic ulcer disease: stenosis, penetration, malignancy. Cancer of the stomach. | 5 | 2 | | | | 3 |
| | Total | 9 | 2 | 6 | | | 5 |
| Bowel disease. | | | | | | | |
| 2. | Acute intestinal obstruction. | 10 | 2 | 6 | | | 2 |
| 3. | Restricted form peritonitis. | 6 | 2 | 2 | | | 2 |
| | Common forms of peritonitis. Comprehensive treatment peritonitis. | 4 | 2 | | | | |
| 4. | Diseases of the colon. Crohn's disease. Nonspecific ulcerative kolit. Hirshprungs disease. | 6 | 2 | 2 | | | 2 |
| | Diseases of the rectum. Hemorrhoids. | 1 | | 1 | | | |
| | Cancer of colon and rectum. | 2 | | 1 | | | 2 |
| | Acute paraproctitis. | 3 | | 2 | | | 2 |
| | Total | 36 | 8 | 18 | | | 10 |
| Surgery emergencies. | | | | | | | |
| Modern surgical trauma in terms of mass damage during disasters and emergencies. Principles of treatment measures in modern conditions. Medical sort evacuation. Cardiopulmonary reanimations: restoration of patency of airway, breathing, circulation. Primary support life. | | | | | | | |
| 5. | Fighting surgical trauma. Fire wound. Explosion injury. Classification, clinical presentation. Wound ballistics, pathomorphology wound healing. Treatment of gunshot wounds. Primary and secondary surgical treatment of gunshot wounds. | 4 | | 2 | | | 2 |
| | Traumatic shock as the first period of traumatic disease. Degrees of severity of shock. Traumatic disease. Definition, etiology, pathogenesis, classification, clinical picture. Diagnostics and treatment at the stages of medical evacuation. Principles of intensive infusion therapy. | 6 | 2 | 2 | | | 2 |

| | | | | | | |
|----|--|-----------|-----------|-----------|--|----------|
| | Neurotrauma. Injuries face and neck. Classification of soft tissue injuries, upper respiratory tract - organs, eyes, facial skeleton. Pathomorphology, clinical picture, course, complications. Diagnostics and treatment at the stages of medical evacuation. | | | | | |
| | Total | 16 | 4 | 2 | | 2 |
| | Study the history of the disease. | | | 6 | | 6 |
| | Supervision of the patient. | | | 4 | | |
| 6. | Writing educational history - 1. | 4 | | 2 | | 2 |
| | Writing educational history - 2. | 4 | | 2 | | 2 |
| | Protection of medical history. | 4 | 2 | 2 | | 2 |
| 7. | Damage the chest. Pneumothorax. Hemotoraks. Slaughter and cardiac tamponade. Unstable chest. Classification. Diagnostics and treatment at the stages of medical evacuation. | 5 | 2 | 2 | | |
| | Damage to the stomach. Closed abdominal trauma. Crash-syndrome. Politravma. Combined radiation and chemical damage. Syndrome of mutual burden. Mechanisms of compensation for serious injuries. The thermal burn injury. Classification. Pathomorphology surgery process, determine the depth and area of damage. The thermal cold injury. The clinical picture, course, complications. First aid, treatment. Diagnostics and treatment at the stages of medical evacuation. | 2 | | 2 | | 1 |
| | Total | 23 | 4 | 2 | | |
| | Total | 90 | 20 | 12 | | 7 |
| | | | | | | |

4. TOPICS OF LECTURES

| № | Name of theme | Number of hours |
|-----|---|-----------------|
| 1. | Complications of gastric ulcers and duodenal ulcer. | 2 |
| 2. | Acute intestinal obstruction. | 2 |
| 3 | Peritonitis. Integrated treatment of peritonitis | 2 |
| 4 | Diseases of the colon. | 2 |
| 5 | Diseases of the rectum. | 2 |
| 6 | Cancer of the colon and rectum. | 2 |
| 7. | Closed trauma of the chest and abdomen. | 2 |
| 8. | Shock. Intensive care of shock. Extreme conditions. Cardio - pulmonary resuscitation. | 2 |
| 9. | Surgical trauma. Traumatic disease. Multiple injuries. Certain types of damage. | 2 |
| 10. | Acute surgical infection. Surgical sepsis | 2 |
| | Total | 20 |

5. TOPICS OF SEMINARS

| № | Name of theme | Number of hours |
|--------------|---|-----------------|
| 1 | Peptic ulcer and duodenal ulcer. Etiology, pathogenesis, clinical picture, diagnosis, treatment. Surgical treatment of peptic ulcer. Complications of peptic ulcer: perforative ulcer, stenosis, penetration, malignancy. Bleeding ulcer. Pathogenesis, clinical picture, diagnosis, treatment. Cancer of the stomach. | 6 |
| 2. | Acute intestinal obstruction. Classification of acute intestinal obstruction. Mechanical intestinal ileus - acute obstructive ileus, acute bowel obstruction strangulative. Dynamic intestinal ileus. Etiology, pathogenesis, clinical manifestations, diagnosis, principles of conservative treatment, indications for surgery, surgical techniques. | 6 |
| 3. | Common forms of peritonitis. Classification, etiology, pathogenesis, clinical manifestations, symptoms of peritoneal irritation, diagnosis, treatment guidelines. Highlights of surgical intervention and drainage features of the abdominal cavity with widespread peritonitis. Causes of limited forms peritonitis. Pathogenesis, clinical presentation, diagnosis, symptoms of peritoneal irritation. Surgical treatment of limited forms peritonitis | 6 |
| 4. | Diseases of the colon. Crohn's disease. Ulcerative colitis. Disease of Hirshprunh. Etiology, pathogenesis, symptoms, diagnosis, treatment outcomes of endoscopic research method, conservative treatment. Diseases of the rectum. Etiology, pathogenesis, clinical course, diagnostic measures, treatment of hemorrhoids, fissure, rectal prolapse. Cancer of the colon and rectum. Classification, etiology, pathogenesis, variants of clinical course, diagnosis, treatment. Acute paraproctitis. Etiology, pathogenesis, clinical manifestations, diagnosis, treatment. | 6 |
| 5. | Modern surgical trauma in the face of massive damage during disasters and emergencies. Fundamentals of treatment and evacuation events in modern conditions. Medical sort evacuation. Cardiopulmonary resuscitation: restoration of airway, breathing, circulation. Primary support life. Fighting surgical trauma. Firearm wound. Blast injury. Classification, clinical picture. Wound Ballistics, pathomorphology wound healing. Varnishing gunshot wounds. Primary and secondary surgical treatment of gunshot wounds. Medication. Traumatic shock as the first period of traumatic disease. The degree of severity of shock. Traumatic disease. Definition, etiology, pathogenesis, classification, clinical picture. Diagnostics and treatment at the stages of medical evacuation. Fundamentals intensive infusion therapy. Neurotrauma. Injuries face and neck. Classification of soft tissue injuries, upper respiratory tract - organs, eyes, facial skeleton. Pathomorphology, clinical picture, course, complications. Diagnostics and treatment at the stages of medical evacuation. | 6 |
| 6. | Curation of the patient. Writing academic history. | 6. |
| 7. | Protecting of medical history. Damage to the chest. Pneumothorax. Hemothorax. Bruising and cardiac tamponade. Unstable chest. Classification. Diagnosis and treatment stages of medical evacuation. Damage to the stomach. Closed abdominal trauma. Cutlery and gunshot wounds. | 6. |
| Total | | 42 |

6. TOPICS OF PRACTICAL CLASSES - NOT PROVIDED

7. TOPICS LABORATORY - NOT PROVIDED

8. INDEPENDENT WORK

| № | Name of theme | Number of hours |
|--------------|---|-----------------|
| 1 | Peptic ulcer and duodenal ulcer. | 2 |
| 2 | Complications of peptic ulcer: perforative ulcer. Pathogenesis, clinical picture, diagnosis, treatment. | 2 |
| 3 | Cancer of the stomach. | 2 |
| 4 | Acute intestinal obstruction. | 2 |
| 5 | Common forms of peritonitis. | 2 |
| 6 | Diseases of the colon. | 2 |
| 7 | Cancer of the colon and rectum. | 2 |
| 8 | Acute proctitis. | 2 |
| 9 | Modern surgical trauma in terms of mass damage during disasters and emergencies | 2 |
| 10 | Fighting surgical trauma. | 2 |
| 11 | Traumatic shock as the first period of traumatic disease | 2 |
| 12 | Supervision of the patient. | 2 |
| 13 | Writing educational history - 1. | 2 |
| 14 | Writing educational history - 2. | 2 |
| Total | | 28 |

9. TEACHING METHODS

According to sources of knowledge, the following teaching methods: word - narration, explanation, lecture, briefing, visual - demonstration, illustration, practical - practical work tasks.

The nature of the logic of knowledge, the following methods: analytical, synthetic, analytical and synthetic, inductive, deductive.

In terms of individual mental activity used methods: problematic, partly retrieval, research.

10. METHODS OF CONTROL

Forms Control and Evaluation.

In assessing students' knowledge preferred standardized methods of control: test (oral, written, computer), structured written work, structured monitoring of practical skills.

Evaluation, discipline is defined as the assessment for the module, followed by a structured training course.

Assessment for the module is defined as a sum of the current training and assessment of the final module control and expressed per 200 point system.

Forms of control

The current control is performed on each class to suit specific purposes topic. All workshops used objective monitoring of theoretical training and learning .

Forms of this control:

Theoretical knowledge - the tests, computer tests , individual surveys, interviews , written work .

Practical skills and - independent individual tasks and the ability to draw conclusions on their own ability to perform certain transactions , writing schemes and algorithms. Final control is based on theoretical knowledge, practical skills and abilities.

Final control of the module takes place at the end of study unit relevant content modules on a test and is considered passed if the student scored at least 50 points.

Forms of final control:

Theoretical knowledge - a system for writing and testing computer.

Practical skills and abilities - putting practical skills by matrykulis.

13. Distribution points that students receive

The maximum number of points assigned to students in mastering the module (test credits) - 200, including the current educational activity - 120 points, the r

Evaluation of current training activities:

Student at each stage of practical sessions (practical part, seminar discussions, written control) assigned rating for the 12-point scale. Then derived the arithmetic mean of the three estimates, which is exposed to the log.

In the practical part of each phase of the assigned rating as follows: results of final module control - 80 points.

In the practical part of each phase of the assigned rating as follows:

1. At the beginning of the practical part, students must commit to carrying out practical work (they need to know the progress of the practical part of training , etc.). . During this stage the student can gain a maximum of 2 points.

2. By doing practical work carefully monitors the teacher at the end of it assesses the results. Maximum for this type of work a student can get 4 points.

3. Protection of practical work. At this stage, the student may receive a maximum of 6 points.

At the end of the practical part of the teacher gave the arithmetic mean of the score for each of the classes and exposes it to every student.

DISTRIBUTION POINTS FOR AWARDED TO STUDENTS

| № | Module number 1 (current testing) | Rating |
|----------|---|-------------------|
| 1 | Context module 1 | |
| | lesson 1 | 12 |
| | lesson 2 | 12 |
| | lesson 3 | 12 |
| 2 | Context module 2 | |
| | lesson 4 | 12 |
| | lesson 5 | 12 |
| 3 | Context module 3 | |
| | lesson 6 | 12 |
| | lesson 7 | 12 |
| 4 | Context module 4 | |
| | lesson 8 | 12 |
| | lesson 9 | 12 |
| | lesson 10 | 12 |
| 5 | Context module 5 | |
| | lesson 11 | 12 |
| | lesson 12 | 12 |
| | lesson 13 | 12 |
| | Average score for the class is put in the scale of assessment | 120 points |
| | Final control of the | 80 |
| | Total amount of points for mastering plug | 200 |

Minimum GPA to which the student is allowed to take final control module - 4 points.
 The maximum amount that can be collected by a student during a module is 120 points.

Modular final control:

Modular control is final at the end of the module . Before final control students who complete all work stipulated curriculum, and in the study module took score not less than the minimum .

The form of the final evaluation should be standardized and include control of theoretical and practical training. Specific forms of control of the foundations of economic theory are defined in the work study program.

The maximum amount of the final control points is 80.

The final module control is passed if the student scored at least 50 points.

Evaluation of:

Evaluation of general surgery exposed only to students who have completed all modules in the discipline.

The number of points that a student comes into the discipline, is defined as the average number of points of the modules of the final discipline and control of the module number 1.

Objectivity of assessment of learning activities students must be checked by statistical methods (correlation coefficient between the current progress and results of the final module control).

Conversion of scores hirurhiyu total score for the scale ECTS and 4-ball (traditional)

The number of points in the discipline, which is credited to the students converted to ECTS scale as follows:

| Rating ECTS | Statistical index |
|-------------|----------------------|
| A | Top 10% of students |
| B | Next 25% of students |
| C | Next 30% of students |
| D | Next 25% of students |
| E | Last 10% of students |

Percentage of students is determined on the sample of students of the course within the relevant specialty.

The number of points in the discipline, which is credited to the students converted to 4-point scale as follows:

| Rating ECTS | Score from 4-point scale |
|-------------|--------------------------|
| A | «5» |
| B, C | «4» |
| D, E | «3» |
| FX, F | «2» |

Evaluation discipline FX and F («2») is assigned to a student who is not enrolled at least one module of discipline.

Score FX («2») is assigned to students who score a minimum number of points for the current academic activities, but did not pass the final module control. They have the right to repeat the final module control, not more than 2 times during the winter holidays and for two (additional) weeks after the end of the spring semester schedule approved by the Rector.

Students who receive an assessment study completed in F courses (not completed the training program at least one module, or not yet in the current learning activity module minimum number of points) must undergo re-training for individual curriculum.

Grading scale: national and ECTS

| Total points for all kinds of learning activities | Rating ECTS | Evaluation on the national scale | |
|---|-------------|--|--|
| | | for examination, course project (work) | for credit |
| | A | perfectly | Accepted |
| | B | good | |
| | C | | |
| | D | satisfactorily | |
| | E | | |
| | FX | with the possibility of unsatisfactory re-assembly | not reckoned with the possibility of re-drafting |
| | F | unsatisfactory with mandatory re-learning courses | not reckoned with the obligatory re-learning courses |

14. Methodological Support

1. Materials preparation for seminars
2. Materials preparation for lectures.
3. Presentation of lectures.
4. Methodological guidelines for seminars.
5. Options for individual tasks and individual work of students.
6. Tests for the final test testing.
7. Tests for daily control.
8. Variations of theoretical questions for self-study.

14. LITERATURE

Basic:

1. Hyperthyroidism And Other Causes Of Thyrotoxicosis: Management Guidelines Of The American Thyroid Association And American Association Of Clinical Endocrinologists, 2015
2. WSES Jerusalem Guidelines For Diagnosis And Treatment Of Acute Appendicitis, 2014
3. Protocol for Diagnosis and Treatment of Peptic Ulcer in Adults //American International Health Alliance: Clinical Practice Guidelines for General Practitioners, 2017
4. Clinical Guideline For The Treatment Of CAPD Peritonitis, 2015
5. EASL Clinical Practice Guidelines on the Prevention, Diagnosis and Treatment of Gallstones, 2014
6. Practice Guidelines in Acute Pancreatitis, 2014
7. European Hernia Society guidelines on the treatment of inguinal hernia in adult patients, 2017
8. Practice Parameters for the Management of Hemorrhoids (Guidelines 2010)

Additional:

1. L.Ya.Kovalchuck, Yu.P.Spizhenko, V.F.Sayenko and others. "Hospital surgery". Ternopil: Ukrmendknyga, 1999.
2. M.I.Kuzin "Surgical diseases" – M.:-Medicina,2004.
3. "Facultative Surgery" under the edition of V.O.Shidlovsky – Ternopil: Ukrmedknyga, 2002.
4. Guidelines for intensive care. Ed. A.I. Treschinskogo, F.S. Glumchera K.: High School, 2004.
5. Medical ambulance. For Ed. FS Glumchera, VF K. Moskalenko: "Medicine" - 2006.

1.**2. 14. Information Resources**

1. Materials to prepare students for practical training.
2. Materials to prepare students for lectures.