

Line 5

Infectious diseases

«Curation of patient with viral (acute or chronic) hepatitis»

Collection of patient complaints, anamnesis and epidemiological anamnesis

- To prepare to communication with a patient and examination (mask, clean warm hands, cutoff nails, if necessary - gloves, spatula, needed instruments).
- Greeting and identification (name, level of competence), get the agreement of patient.
- At the receiving of agreement of patient to set confidential mutual relations (a friendly face, respect and concern, soft talk during conversation).
- To take complaints, anamnesis of disease and epidemiologic anamnesis, to explain to the patient the reason of finding out of separate questions (contact with an infectious patient, home and wild animals, use of poor quality meal and others like that), which are typical for chronic hepatitis
- To explain the results of questioning.

Physical examination of the patient and interpretation of the laboratory-instrumental methods results

- To explain to the patient, what examination will be done and its reasonability, to get an agreement.
- To notify about the possibility of the occurrence of unpleasant feelings during examination.
- To conduct the physical examination of patient with chronic hepatitis (examination of skin and of mucus, tongue, superficial and deep palpation of stomach, determining sizes of liver, palpation, percussion of liver and spleen)
- To explain the results of examination understandably for patient.
- To estimate the changes of common blood analysis at a patient with chronic hepatitis
- To estimate changes in biochemical blood test, characteristic for chronic hepatitis
- To estimate the results of USI of organs of abdominal region at a patient with chronic hepatitis
- To estimate the results of determination of markers of viral hepatitis
- To estimate the results of PCR at a patient with chronic hepatitis
- To explain the results of laboratory-instrumental investigation understandably for patient.
- To finish a conversation, thank for communication, wish favorable flow of illness and rapid convalescence.

Line 5

Infectious diseases

«Curation of patient with acute intestinal infection»

Collection of patient complaints, anamnesis and epidemiological anamnesis

- To prepare to communication with a patient and examination (mask, clean warm hands, cutoff nails, if necessary - gloves, spatula, needed instruments).
- Greeting and identification (name, level of competence), get the agreement of patient.
- At the receiving of agreement of patient to set confidential mutual relations (a friendly face, respect and concern, soft talk during conversation).
- To take complaints, anamnesis of disease and epidemiologic anamnesis, to explain to the patient the reason of finding out of separate questions (contact with an infectious patient, home and wild animals, use of poor quality meal and others like that), which are typical for intestinal infection
- To explain the results of questioning.

Physical examination of the patient and interpretation of the laboratory-instrumental methods results

- To explain to the patient, what examination will be done and its reasonability, to get an agreement.

- To notify about the possibility of the occurrence of unpleasant feelings during examination.
- To conduct the physical examination of patient with intestinal infection (examination of skin and of mucus, tongue, superficial and deep palpation of stomach, determining sizes of liver, palpation, percussion of liver and spleen)
- To explain the results of examination understandably for patient.
- To estimate the changes of common blood analysis at a patient with intestinal infection
- To estimate changes in biochemical blood test, characteristic for intestinal infection
- To estimate the results of USI of organs of abdominal region at a patient with intestinal infection
- To estimate the result of bacteriological research of stool and serologic diagnostics (reaction of agglutination, reaction of passive hemagglutination) at a patient with the intestinal infection
- To estimate the results of bacteriological research of vomiting masses, washing waters at a patient with the intestinal infection

Line 5

Infectious diseases

«Curation of patient with herpetic diseases »

Collection of patient complaints, anamnesis and epidemiological anamnesis

- To prepare to communication with a patient and examination (mask, clean warm hands, cutoff nails, if necessary - gloves, spatula, needed instruments).
- Greeting and identification (name, level of competence), get the agreement of patient.
- At the receiving of agreement of patient to set confidential mutual relations (a friendly face, respect and concern, soft talk during conversation).
- To take complaints, anamnesis of disease and epidemiologic anamnesis, to explain to the patient the reason of finding out of separate questions (contact with an infectious patient, home and wild animals, use of poor quality meal and others like that), which are typical for chickenpox, herpes zoster, infectious mononucleosis
- To explain the results of questioning.

Physical examination of the patient and interpretation of the laboratory-instrumental methods results

- To explain to the patient, what examination will be done and its reasonability, to get an agreement.
- To notify about the possibility of the occurrence of unpleasant feelings during examination.
- To conduct the physical examination of patient with chickenpox, herpes zoster, infectious mononucleosis (examination of skin and of mucus, tongue, pharynx, inspection of lymphatic nodes, superficial and deep palpation of stomach, determining sizes of liver, palpation, percussion of liver and spleen)
- To explain the results of examination understandably for patient.
- To estimate the changes of common blood analysis at a patient with chickenpox, herpes zoster, infectious mononucleosis
- To estimate changes in biochemical blood test, character for herpetic diseases
- To estimate the results of USI of organs of abdominal region at a patient with infectious mononucleosis
- To estimate the result of immunological research of blood at a patient with chickenpox, herpes zoster, infectious mononucleosis
- To estimate the results of serologic investigation at a patient with chickenpox, herpes zoster, infectious mononucleosis
- To explain the results of laboratory-instrumental investigation understandably for patient.

- To finish a conversation, thank for communication, wish favorable flow of illness and rapid convalescence.

Line 5

Infectious diseases

«Curation of patient with prolonged fever (epidemic typhus, typhoid fever, paratyphus A and B, leptospirosis, malaria)»

Collection of patient complaints, anamnesis and epidemiological anamnesis

- To prepare to communication with a patient and examination (mask, clean warm hands, cutoff nails, if necessary - gloves, spatula, needed instruments).
- Greeting and identification (name, level of competence), get the agreement of patient.
- At the receiving of agreement of patient to set confidential mutual relations (a friendly face, respect and concern, soft talk during conversation).
- To take complaints, anamnesis of disease and epidemiologic anamnesis, to explain to the patient the reason of finding out of separate questions (contact with an infectious patient, home and wild animals, use of poor quality meal and others like that), which are typical for epidemic typhus, typhoid fever, paratyphus A and B, leptospirosis, malaria
- To explain the results of questioning.

Physical examination of the patient

- To explain to the patient, what examination will be done and its reasonability, to get an agreement.
- To notify about the possibility of the occurrence of unpleasant feelings during examination.
- To conduct the physical examination of patient with epidemic typhus, typhoid fever, paratyphus A and B, leptospirosis, malaria (examination of skin and of mucus, tongue, superficial and deep palpation of stomach, determining sizes of liver, palpation, percussion of liver and spleen), to find out the symptoms of hyperthermia, intoxication (pulse rate, BP, quantity of urine, temperatura)
- To explain the results of examination understandably for patient.

Interpretation of the laboratory-instrumental methods results

- To estimate the changes of common blood analysis at a patient with epidemic typhus, typhoid fever, paratyphus A and B, leptospirosis, malaria
- To estimate changes in biochemical blood test, characteristic for epidemic typhus, typhoid fever, paratyphus A and B, leptospirosis, malaria
- To estimate the results of USI of organs of abdominal region at a patient with epidemic typhus, typhoid fever, paratyphus A and B, leptospirosis, malaria
- To estimate the result of thick and thin blood smears, bacteriological research of blood, urine and serologic investigation (reaction of agglutination, reaction of passive hemagglutination) at a patient with epidemic typhus, typhoid fever, paratyphus A and B, leptospirosis, malaria
- To explain the results of laboratory-instrumental investigation understandably for patient.
- To finish a conversation, thank for communication, wish favorable flow of illness and rapid convalescence.

Line 5

Infectious diseases

«Curation of patient with tonsils' lesions (acute tonsillitis, diphtheria, infectious mononucleosis)»

Collection of patient complaints, anamnesis and epidemiological anamnesis

- To prepare to communication with a patient and examination (mask, clean warm hands, cutoff nails, if necessary - gloves, spatula, needed instruments).

- Greeting and identification (name, level of competence), get the agreement of patient.
- At the receiving of agreement of patient to set confidential mutual relations (a friendly face, respect and concern, soft talk during conversation).
- To take complaints, anamnesis of disease and epidemiologic anamnesis, to explain to the patient the reason of finding out of separate questions (contact with an infectious patient, home and wild animals, use of poor quality meal and others like that), which are typical for acute tonsillitis, diphtheria, infectious mononucleosis
- To explain the results of questioning.

Physical examination of the patient

- To explain to the patient, what examination will be done and its reasonability, to get an agreement.
- To notify about the possibility of the occurrence of unpleasant feelings during examination.
- To conduct the physical examination of patient with acute tonsillitis, diphtheria, infectious mononucleosis (examination of skin and of mucus, tongue, throat, superficial and deep palpation of stomach, determining sizes of liver, palpation, percussion of liver and spleen)
- To explain the results of examination understandably for patient.

Interpretation of the laboratory-instrumental methods results

- To estimate the changes of common blood analysis at a patient with acute tonsillitis, diphtheria, infectious mononucleosis
- To estimate changes in biochemical blood test, character for acute tonsillitis, diphtheria, infectious mononucleosis
- To estimate the results of serological investigation at a patient with acute tonsillitis, diphtheria, infectious mononucleosis
- To estimate the results of determination of markers of acute tonsillitis, diphtheria, infectious mononucleosis
- To estimate the results of PCR at a patient with acute tonsillitis, diphtheria, infectious mononucleosis
- To explain the results of laboratory-instrumental investigation understandably for patient.
- To finish a conversation, thank for communication, wish favorable flow of illness and rapid convalescence.

Line 5

Infectious diseases

«Curation of patient with a flu and other acute respiratory viral infections (ARVI)»

Collection of patient complaints, anamnesis and epidemiological anamnesis

- To prepare to communication with a patient and examination (mask, clean warm hands, cutoff nails, if necessary - gloves, spatula, needed instruments).
- Greeting and identification (name, level of competence), get the agreement of patient.
- At the receiving of agreement of patient to set confidential mutual relations (a friendly face, respect and concern, soft talk during conversation).
- To take complaints, anamnesis of disease and epidemiologic anamnesis, to explain to the patient the reason of finding out of separate questions (contact with an infectious patient, home and wild animals, use of poor quality meal and others like that), which are typical for flu and other ARVI
- To explain the results of questioning.

Physical examination of the patient and interpretation of the laboratory-instrumental methods results

- To explain to the patient, what examination will be done and its reasonability, to get an agreement.

- To notify about the possibility of the occurrence of unpleasant feelings during examination.
- To conduct the physical examination of patient with flu and other ARVI (examination of skin and of mucus, tongue, examination of lymphatic nodes, palpation, percussion of liver and spleen, auscultation of lungs)
- To explain the results of examination understandably for patient.
- To estimate the changes of common blood analysis at a patient with flu and other ARVI
- To estimate changes in biochemical blood test, character for flu and other ARVI
- To estimate the results of USI of organs of abdominal region at a patient with chronic hepatitis
- To estimate the results of serologic investigation for flu and other ARVI

Line 5

Infectious diseases

«Curation of patient with exanthemas (leptospirosis, measles, meningococcal infection, epidemic typhus, typhoid fever, paratyphoids A & B) »

Collection of patient complaints, anamnesis and epidemiological anamnesis

- To prepare to communication with a patient and examination (mask, clean warm hands, cutoff nails, if necessary - gloves, spatula, needed instruments).
- Greeting and identification (name, level of competence), get the agreement of patient.
- At the receiving of agreement of patient to set confidential mutual relations (a friendly face, respect and concern, soft talk during conversation).
- To take complaints, anamnesis of disease and epidemiologic anamnesis, to explain to the patient the reason of finding out of separate questions (contact with an infectious patient, home and wild animals, use of poor quality meal and others like that), which are typical for leptospirosis, measles, meningococcal infection, epidemic typhus, typhoid fever, paratyphoids A & B
- To explain the results of questioning.

Physical examination of the patient and interpretation of the laboratory-instrumental methods results

- To explain to the patient, what examination will be done and its reasonability, to get an agreement.
- To notify about the possibility of the occurrence of unpleasant feelings during examination.
- To conduct the physical examination of patient with leptospirosis, measles, meningococcal infection, epidemic typhus, typhoid fever, paratyphoids A & B (examination of skin and of mucus, tongue, to describe character and localization of exanthemas, superficial and deep palpation of stomach, determining sizes of liver, palpation, percussion of liver and spleen)
- To explain the results of examination understandably for patient.
- To estimate the changes of common blood analysis at a patient with exanthemas
- To estimate changes in biochemical blood test, character for leptospirosis, measles, meningococcal infection, epidemic typhus, typhoid fever, paratyphoids A & B
- To estimate the results of USI of organs of abdominal region at a patient with leptospirosis, measles, meningococcal infection, epidemic typhus, typhoid fever, paratyphoids A & B
- To define the terms of taking material for confirmation of etiologic diagnosis at a patient with exanthemas (leptospirosis, measles, meningococcal infection, epidemic typhus, typhoid fever, paratyphoids A & B)
- To estimate the results of serologic diagnostics at a patient with exanthemas (leptospirosis, measles, meningococcal infection, epidemic typhus, typhoid fever, paratyphoids A & B)

Line 5

Infectious diseases

«Curation of patient with the infectious diseases of skin and subcutaneous fat (erysipelas, Lyme disease, erysipelas suis)»

Collection of patient complaints, anamnesis and epidemiological anamnesis

- To prepare to communication with a patient and examination (mask, clean warm hands, cutoff nails, if necessary - gloves, spatula, needed instruments).
- Greeting and identification (name, level of competence), get the agreement of patient.
- At the receiving of agreement of patient to set confidential mutual relations (a friendly face, respect and concern, soft talk during conversation).
- To take complaints, anamnesis of disease and epidemiologic anamnesis, to explain to the patient the reason of finding out of separate questions (contact with an infectious patient, home and wild animals, use of poor quality meal and others like that), which are typical for infectious diseases of skin and subcutaneous fat (erysipelas, Lyme disease, erysipelas suis)
- To explain the results of questioning.

Physical examination of the patient and interpretation of the laboratory-instrumental methods results

- To explain to the patient, what examination will be done and its reasonability, to get an agreement.
- To notify about the possibility of the occurrence of unpleasant feelings during examination.
- To conduct the physical examination of patient with infectious diseases of skin and subcutaneous fat (erysipelas, Lyme disease, erysipelas suis) (examination of skin and of mucus, tongue, describe character and localization of exanthemas, examination of the lymphatic nodes)
- To explain the results of examination understandably for patient.
- To estimate the changes of common blood analysis at a patient with infectious diseases of skin and subcutaneous fat (erysipelas, Lyme disease, erysipelas suis)
- To estimate the results of serologic investigation of a patient with infectious diseases of skin and subcutaneous fat (erysipelas, Lyme disease, erysipelas suis)
- To explain the results of laboratory-instrumental investigation understandably for patient.
- To finish a conversation, thank for communication, wish favorable flow of illness and rapid convalescence.