Приложение к рабочей программе

федеральное государственное бюджетное образовательное учреждение высшего образования «Приволжский исследовательский медицинский университет» Министерства здравоохранения Российской Федерации

Владимирский филиал ФГБОУ ВО «ПИМУ» Минздрава России

ФОНД ОЦЕНОЧНЫХ СРЕДСТВ ПО ДИСЦИПЛИНЕ

ИНОСТРАННЫЙ ЯЗЫК (АНГЛИЙСКИЙ)

Направление подготовки (специальность):**31.05.02 ПЕДИАТРИЯ**

Кафедра **ИНОСТРАННЫХ ЯЗЫКОВ**

Форма обучения: **ОЧНАЯ**

Владимир
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1. Фонд оценочных средств для текущего контроля успеваемости, промежуточной аттестации обучающихся по дисциплине/практике

Настоящий Фонд оценочных средств (ФОС) по дисциплине «Иностранный язык (английский)» является неотъемлемым приложением к рабочей программе дисциплины «Иностранный язык». На данный ФОС распространяются все реквизиты утверждения, представленные в РПД по данной дисциплине.

2. Перечень оценочных средств

Для определения качества освоения обучающимися учебного материала по дисциплине «Иностранный язык (английский) используются следующие оценочные средства:

№ п/п	Оценочное средство	Краткая характеристика оценочного средства	Представление оценочного средства в ФОС
1.	Диагностический тест.	Система стандартизированных заданий, позволяющая автоматизировать процедуру измерения уровня знаний и умений обучающегося	Фонд тестовых заданий
2.	Тесты.	Система стандартизированных заданий, позволяющая автоматизировать процедуру измерения уровня знаний и умений обучающегося	Фонд тестовых заданий
3.	Письменный перевод учебного текста, иноязычной статьи.	Средство, позволяющее оценить умение обучающегося максимально точно и адекватно извлекать основную информацию, содержащуюся в тексте, с учётом отсутствия смысловых искажений, соответствия норме и узусу языка перевода, включая употребление терминов.	Тематика текстов соответствует учебно-методической карте занятий, статьи подбираются индивидуально с учетом профессиональных интересов обучающегося
4.	Кейсы.	Проблемное задание, в котором обучающемуся предлагают осмыслить реальную профессионально-ориентированную ситуацию, необходимую для решения данной проблемы.	Задания для решения кейс-задания
5.	Аннотация, резюме, тезисы.	Средство, позволяющее оценить умение обучающегосяправильно извлечь информацию, адекватно реализовать коммуникативное намерение с учетом содержательности, смысловой и	Аннотация составляется к индивидуально подобранному тексту.Обучающиеся

		структурной завершённости, нормативности текста.	индивидуально выбирают 3-5 клише из предлагаемых клише.
6.	Терминологический словарь.	Средство контроля усвоения учебного материала темы, раздела или разделов дисциплины, организованное как учебное занятие в виде собеседования преподавателя с обучающимися.	Образец терминологического словаря
7.	Устное сообщение.	Средство, позволяющее оценить умение обучающегося продемонстрировать владение подготовленной монологической речью в ситуации общения в пределах программных требований.	Невозможно представить точный эталон ответа. Студенты составляют рассказ индивидуально. Клише и образец сообщения представлены в ФОС.
8.	Беседа.	Средство, позволяющее оценить умение обучающегося продемонстрировать владение диалогической речью в ситуации общения в пределах программных требований. Оценочные средства, позволяющие включить обучающихся в процесс обсуждения вопроса, проблемы и оценить умение обучающегося аргументироватьсобственную точку зрения.	Перечень вопросов для проведения беседы
9.	Презентация учебного/ научного материала.	Конечный продукт, получаемый в результате планирования и выполнения комплекса учебных и исследовательских заданий. Позволяет оценить умения обучающихся самостоятельно конструировать свои знания в процессе решения практических задач и проблем, ориентироваться в информационном пространстве и оценить уровень сформированности практических навыков по дисциплине.	Темы индивидуальных презентаций студентов. Невозможно представить точный эталон ответа. Студенты составляют презентацию индивидуально в соответствии со своей профессиональной и научной деятельностью. Клише представлены в

			ФОС.

3. Перечень компетенций с указанием этапов их формирования в процессе освоения образовательной программы и видов оценочных средств

Код и формулировка компетенции*	Этап формирования компетенции	Контролируемые разделы дисциплины	Оценочные средства
УК-4: способен применять современные коммуникативные технологии, в том числе на иностранном языке, для академического и профессионального взаимодействия;	Текущий	**Раздел 1.**Фонетика. **Раздел 2.**Лексика. **Раздел 3.**Грамматика. **Раздел 4.** Основы письменной коммуникации по специальности «Педиатрия». **Раздел 5.**Основы устной коммуникации по специальности «Педиатрия».	Перевод текста Аннотация Тест Сообщение Беседа Кейсы Презентация
УК-5:способен анализировать и учитывать разнообразие культур в процессе межкультурного взаимодействия;	Текущий	**Раздел 2.**Лексика. **Раздел 3.**Грамматика. **Раздел 4.** Основы письменной коммуникации по специальности «Педиатрия». **Раздел 5.**Основы устной коммуникации по специальности «Педиатрия».	Перевод текста Аннотация Тест Сообщение Беседа Кейсы Презентация
ОПК-1: Способен реализовывать моральные и правовые нормы, этические и деонтологические принципы в профессиональной	Текущий	**Раздел 2.**Лексика. **Раздел 3.**Грамматика. **Раздел 4**.Основы письменной коммуникации по специальности«Педиатрия». **Раздел 5.**Основы устной коммуникации по специальности «Педиатрия».	Перевод текста Аннотация Тест Сообщение Беседа Кейсы Презентация

деятельности			
УК-4: способен применять современные коммуникативные технологии, в том числе на иностранном языке, для академического и профессионального взаимодействия.	Промежуточный	**Раздел 2.**Лексика. **Раздел 3.**Грамматика. **Раздел 4.** Основы письменной коммуникации по специальности«Педиатрия».	Перевод текста Тест

Примечание: специфика обучения иностранному языку в неязыковом вузе не предусматривает его поаспектное (по разделам) преподавание. В силу ограниченного количества часов, отводимого на изучение данной дисциплины в медицинском вузе, все разделы иностранного языка преподаются студентам в комплексе

4. Содержание оценочных средств входного, текущего контроля

Входной/Текущий контроль осуществляется преподавателем дисциплины при проведении занятий в форме тестов,переводов иноязычных текстов,статей, аннотаций, кейсов, устного сообщения, беседы и презентации.

Оценочные средства для текущего контроля.

1. Входнойтест

1.The human body _____ of the head, the trunk and the extremities.

a) consists
c) was consisted
b) is consisted
d) consisted

2.

a) Where it hurts?
c) Where does it hurt?
b) Where is it hurt?
d) Where does it hurts?

3. He _____ a severe heart attack six years ago.

a) had
c) has
b) has had
d) was having

4. He complains of the cough which he _____ for over 3 years.

a) had
b) was having

c) has had

d) has

5. I'd like you _____ me about this patient.

a) telling

b) told

c) tell

d) to tell

6. He doesn't mind _____ to the hospital.

a) to go

b) going

c) go

d) to going

7. _____ is harmful for you.

a) smoking

b) to smoke

c) the smoking

d) smoke

8. The woman _____ a child is our pediatrician.

a) to examine

b) examined

c) examining

d) examine

9. He said that he _____ 4 exams at the end of the year.

a) takes

b) would have taken

c) will take

d) would take

10. If you _____ heavy things you would not have damaged your spine.

a) didn't lift

b) don't lift

c) hadn't lifted

d) were not lifting

11. The conference was _____ in Moscow in May.

a) to be arranged

b) to arrange

c) being arranged

d) be arranged

12. You should _____ this medicine 3 times a day.

a) taken

b) to take

c) taking

d) take

13. All the patients were children, the eldest _____ 12 years old.

a) be
c) to be
b) being
d) is

14. He _____ a good doctor.
a) is said to be
c) is said being
b) says to be
d) d. has to said being

15. He must _____ malaria when he was travelling in Africa.
a) to have got
c) has got
b) get
d) have got

16. If you _____ much, you will feel a pain in the leg again .
a) will walk
c) walking
b) walked
d) walk

17. I wish an infant _____ to hospital in an ambulance.
a) were taken
c) is taken
b) was taken
d) was take

18. Passing the room, the doctor heard a child _____ badly.
a) coughs
b) coughing
c) to cough
d) coughed

2. Тестыдля оценки компетенции «УК-4, УК-5»

Тестовые вопросы и варианты ответов
1. STUDENTS … MANY PRACTICAL CLASSES IN IT LAST YEAR. 1) had; 2) has; 3) have had.
2. HE … HIS ENTRANCE EXAMS RECENTLY AND ENTERED THE MEDICAL UNIVERSITY. 1) passes; 2) are passing; 3) has passed.
3. 3. TOMORROW AT 3 O'CLOCK I … IN OUR SCIENTIFIC LABORATORY. 1) will be working; 2) has worked; 3) works.
4. ARTIFICIAL METAL JOINTS … IN MANY CASES NOW TO REPLACE THE DISEASED JOINTS. 1) used; 2) are used; 3) will use.
5. THE DOCTOR … DETERMINE THE ORIGIN OF THE DISEASE FOR ITS SUCCESSFUL TREATMENT. 1) must; 2) are able; 3) have.
6. THE DOCTOR SAW THAT THE PATIENT'S EYES … SWOLLEN. 1) is; 2) were; 3) has been.
7. THE PATIENT … TO THE HOSPITAL WAS A 45–YEAR–OLD FEMALE. 1) admitting; 2) are admitted; 3) admitted.
8. THE VESSELS … BLOOD TO THE HEART ARE CALLED VEINS. 1) carrying; 2) carried; 3) being carried.
9. NO PHYSICIAN CAN MAKE A PROPER DIAGNOSIS WITHOUT … THE PATIENT.

1) are examined;
2) having examined;
3) will be examined.

10. THE DOCTOR DETERMINED ORGANIC CHANGES IN THE MITRAL VALVE …
1) to be clearly marked;
2) has clearly marked;
3) marks clearly.

11. IN GASTRIC ULCERS PAIN IS FOUND … WORSE AFTER MEALS.
1) will be grown;
2) have been grown;
3) to grow.

12. THE PATIENT … THE OPERATION WELL, THE DANGER OF PERITONITIS WAS ELIMINATED.
1) have survived;
2) having survived;
3) are survived.

13.IF THE FOREIGN BODY HAD BEEN PRESENT IN THE EYE, THERE … AN EDEMA.
1) are;
2) would have been;
3) have been.

14. THEY … AN INTERESTING LECTURE ON BIOLOGY YESTERDAY.
1) has;
2) will have;
3) had.

15. USUALLY A SURGICAL NURSE …
INSTRUMENTS FOR THE OPERATION.
1) prepares;
2) have prepared;
3) are preparing.

16. HE … CONSTANTLY … AT THE
LIBRARY PREPARING FOR HIS CLASSES.
1) works;
2) is working;
3) have worked.

17. DURING THE OPERATION THE MUSCLES FROM HER BACK AND ABDOMEN … TO THE THIGH.
1) transplants;

2) has transplanted;
3) were transplanted.

18. THE HEART … PUMP BLOOD HARDER TO WARM THE BODY BETTER.
1) are able to;
2) am to;
3) has to.

19. THE DOCTOR WAS TOLD THAT THE PATIENT … WELL THE NIGHT BEFORE.
1) is sleeping;
2) will sleep;
3) had slept.

20.… THE NECESSARY FLUID WE COULD CONTINUE OUR EXPERIMENTS.
1) having obtained;
2) obtained;
3) is obtaining.

21. THE METHOD … BY HIM WILL HELP GREATLY TO CURE PEOPLE.
1) are developing;
2) developed;
3) have developed.

22. HE TOLD US OF HIS … TO FREQUENT HEART ATTACKS.
1) being exposed;
2) to be exposed;
3) exposed.

23. THE DOCTOR EXPECTED THE ANALYSES … NORMAL.
1) are;
2) was;
3) to be.

24. THE PATIENT WAS CONSIDERED … SOME KIDNEY DISEASE.
1) will have;
2) had had;
3) to have.

25. THE PHYSICAL EXAMINATION …, TENDERNESS IN THE LEFT LOWER PART OF THE ABDOMEN WAS REVEALED.
1) being carried on;
2) have carried on;
3) are carried on.

26. IF YOU FOLLOW THE PRESCRIBED TREATMENT, YOU … SOON.
1) to be recovered;
2) has recovered;
3) will recover.

27. STUDENTS … MANY SPECIAL SUBJECTS NEXT YEAR.
1) has;
2) will have;
3) are having.

28. LAST YEAR MY FATHER … FROM REGULAR ATTACKS OF CHEST PAIN.
1) suffered;
2) were suffered;
3) am suffered.

29. THE INVESTIGATOR … IMPORTANT FINDINGS BEFORE HE FINISHED HIS OBSERVATIONS.
1) are obtaining;
2) had obtained;
3) obtained.

30. A PATIENT … BY A FAMOUS CARDIOLOGIST NOW.
1) examine;
2) are examining;
3) is being examined.

Номер тестового задания	*Номер эталона ответа*
1	1
2	3
3	1
4	2
5	1
6	2
7	3
8	1
9	2
10	1
11	3
12	2
13	2
14	3
15	1
16	2
17	3
18	3
19	3
20	1

21	2
22	1
23	3
24	3
25	1
26	3
27	2
28	1
29	2
30	3

4.1. Аннотация (резюме) к прочитанному текстудля оценки компетенции «УК-4, УК-5, ОПК-1»

Обучающиеся индивидуально выбирают 3-5 клише из предлагаемых ниже клише. Аннотация составляется к индивидуально подобранному тексту.

Клише для введения

This text concerns the problem of … (the question of …)	Текст касается проблемы … (вопроса …)
The title of the article/text is …	Название статьи/текста – …
The article deals with …	Статья рассматривает вопрос …
The text/article/report/paper/issue is devoted to …	Текст/статья/доклад/статья/издание посвящен(а) …
The paper is about …	Статья повествует о …
The problem(s) of … is (are) presented/ discussed/ revealed/suggested/reported	Представлена(ы)/обсуждается(ются)/ показана(ы)/предлагается(ются)/ сообщается(ются) проблема(ы) …
The main purpose of the article is to show	Главная цель статьи – показать …
The aim/object/goal of the investigation is to reveal/confirm …	Цель исследования – показать/ подтвердить …

Клише для основной части

The text/article/paper/author tells us about (the problems of …)	Текст/статья/автор рассказывает нам о (проблеме …)
The text/article/paper/author presents gives a description of describes suggests the solution shows reveals reports covers	Текст/статья представляет даёт описание описывает предлагает решение показывает показывает сообщает охватывает

The	role problem importance method	of…	is	described reviewed considered discussed shown given examined studied investigated explored evaluated	Описывается Рассматривается Обсуждается Изучается Исследуется Определяется	роль проблема важность метод

Itinformsusabout …	Статья (текст, т.п.) информирует нас о …
It illustrates …	Статья (текст, т.п.) иллюстрирует...
Great attention is given to the question(s) of …	Огромное внимание уделено вопросу(ам) …
Particular attention is given/paid to …	Особое внимание уделено …
The author considers … to be of great importance	… автор считает очень важным
It is necessary to underline/emphasize that …	Необходимо подчеркнуть, что …
… is known to be the subject of particular active studies	Известно, что … является предметом пристального изучения
The author raises the question of …	Автор поднимает вопрос о …
The most striking observation is that …	Самое поразительное наблюдение состоит в том, что …
To assess the significance of these findings one must …	Чтобы оценить значение этих данных, нужно …
The author has clearly shown (that) …	Автор ясно показал, что …
As far as … is concerned, we may say …	Что касается … , нужно сказать, что …
It is worth mentioning that …	Стоит заметить, что …
From the point of view of the author/our scientists …	С точки зрения автора/наших учёных …
With regard to …	Чтокасается …
The author reports the instance of …	Автор сообщает о случае …
The author also believes that …	Автор также полагает, что …
Different aspects/factors affecting … are also included	Также включены различные аспекты/факторы, влияющие на …
The author tries to draw one’s attention to the fact …	Автор пытается привлечь ч.-л. внимание к факту …

Клишедлязаключения

The article is useful/ valuable/of interest/interesting for…	Статья полезна/интересна для …
The paper is/may be recommended to …	Статья рекомендована/может быть рекомендована …
The present data suggest that …	Настоящие данные говорят о том, что …

The author comes to the conclusion that …	Автор приходит к выводу, что …
Finally, /At last In summary	Наконец, … Вобщем, …
This text is an excellent approach to the problems of treating/preventing …	Данный текст является прекрасным подходом к проблеме лечения/ предотвращения …
It is a student-oriented text	Текст ориентирован на студентов
The paper serves as a deep source of information for …	Статья служит серьёзным источником информации, касающейся …
This text will provide interesting/invaluable/useful reference for scientists, dentists, …	Настоящий текст предоставляет интересную/ценную/полезную информацию для ученых, стоматологов, …
The book can serve as a valuable teaching tool for students and scientists.	Книга может служить в качестве полезного обучающего средства для студентов и ученых.
Reflecting the latest advances in this field, this paper will prove invaluable to a wide readership.	Отражая самые последние достижения в этой области, настоящая статья окажется полезной для широкого круга читателей.
Primarily intended for specialists in the nuclear medicine field, this volume will also be of considerable interest to clinicians, including cardiologists, oncologists, …	Первоначально предназначенное для специалистов в области радиологии, настоящее издание вызовет также значительный интерес у практикующих врачей, включая кардиологов, онкологов.
The article is addressed to everyone involved in internal medicine, pediatrics, intensive care and emergency medicine.	Статья адресована всем, кто занят в терапии, педиатрии, интенсивной терапии и неотложной медицинской помощи.
This volume provides state-of-the-art information about … for both clinicians and clinical researchers.	Данное издание предоставляет информацию о современном состоянии развития … как для практикующих врачей, так и для клинических исследователей.

4.2. **Кейсыдля оценки компетенции «УК-4,УК-5, ОПК-1»**
Задание 1.

Case-studies (кейсы)
Topic "Symptoms of diseases"

READ THE ELEVEN descriptions which follow, using your dictionary as and when necessary.

What is the disease or illness being described in each case?

1. A disorder of the nervous system in which there are convulsions and loss of consciousness due to disordered discharge of cerebral neurons. In its more severe form, the patient may lose consciousness and fall to the ground in convulsions.

2. A condition where tissues die and decay as a result of bacterial action because the blood supply has been lost through injury or disease of the artery. Infected limbs may have to be amputated.

3. A condition where the lens of the eye gradually becomes hard and opaque.

4. A slow, progressive disorder of elderly people, it affects the parts of the brain which control movement. The symptoms include trembling of the limbs, a shuffling walk and difficulty with speaking.

5. An infectious disease, its commonest form attacks the lungs, causing patients to lose weight, cough blood and have a fever. It is caught by breathing in germs or eating contaminated food, especially unpasteurised milk.

6. A hereditary disease of the pancreas or mucoviscidosis, leading to malfunction of the exocrine glands. Symptoms include loss of weight, abnormal faeces and bronchitis. If diagnosed early, it can be controlled with vitamins, physiotherapy and pancreatic enzymes.

7. A serious bacterial disease spread through infected food or water. The infected person suffers stomach cramps, diarrhoea, cramp in the intestines and dehydration. The disease is often fatal and vaccination is only effective for a relatively short period.

8. A serious, infectious disease of children, its first symptoms are a sore throat, followed by a slight fever, rapid pulse and swelling of the glands in the neck. A membrane-like structure forms in the throat and can close the air passages, asphyxiating the patient. The disease is often fatal for this reason or because the heart becomes fatally weakened.

9. A disorder of the brain, mainly due to brain damage occurring before birth or due to lack of oxygen during birth. The patient may have bad coordination of muscular movements, impaired speech, hearing and sight, and sometimes mental retardation.

10. A virus disease, it can take a long time, even years, for it to show symptoms. It causes a breakdown of the body's immune system, making the patient susceptible to any infection.

11. Inflammation of the membrane lining the intestines and the stomach, caused by a viral infection, and resulting in diarrhoea and vomiting.

Задание 2.Кейсы.

Case-studies (кейсы)
Topic "Triage system"

There has been a terrorist bomb attack at a railway station, and you and your partner are among the first at the scene. Use the triage categories below and decide with your partner how to classify each victim.

CATEGORY	**DESCRIPTION**
blue - dead or expected to die	So badly injured that victim will die soon. Should be given painkillers to ease passing.
red-immediate	Victim could survive with immediate treatment.
yellow - observation	Condition is stable for the moment but requires watching(would receive immediatepriority care under 'normal' circumstances).
green-wait	Victim will require a doctor's care within hours, but not immediately.
white-dismiss	Victim has minor injuries - first aid and home care are enough.

1. Child, about 11 - no bleeding - dazed and confused - doesn't squeeze hand when asked_____
2. Pregnant woman - can walk and talk - some bleeding from head_____
3. Elderly man - very bloody leg - unconscious - no breathing - no pulse_____
4. Teenage girl - no signs of bleeding - coughing and clear fluid coming from ears_____
5. Man, mid-twenties - minor bleeding - conscious but not disorientated - slow breathing rate_____
6. Woman, about 50 - walking around - says she cannot hear anything - has pains in the chest_____
7. Teenage boy - cuts on face - very pale - sitting on the ground and falling asleep_____
8. Young woman - no pulse - no bleeding - no response when you clear her airway_____
9. Young woman - no signs of injuries - vomiting and constant shaking and will not stop crying - 30 breaths per minute_____
10. Middle-aged man - broken arm - large chest wound - unconscious - breathing erratic_____
11. Elderly woman - clear fluid running out of nose- walking around but is confused and angry_____
12. Elderly woman - coughing up blood, severe pain in her chest and difficulty breathing_____
13. Middle-aged man - has lost leg - massive bleeding - conscious and talking_____
14. Young man - bruises and some bleeding on arms and legs - confused and complaining of headache and ringing in the ears_____
15. Child, about four - clinging to his mother who is notinjured - pale, with moist skin - rapid breathing and rapid pulse_____
16. Child, about four - lying on ground with black skin caused by burns - appears not to be in pain_____
17. Young woman - skin has painful red burnt areas-has cuts on her leg but walking_____

Задание3. Кейсы.

Case Study

Using the prescribing information, which follows, choose the most appropriate antibiotic for these patients.

1. A four-year-old boy with meningitis due to pneumococcus. He is allergic to penicillin.
2. A 10-year-old girl with a history of chronic bronchitis now suffering from pneumonia. The causative organism is resistant to tetracycline.
3. A 7-year-old girl with cystitis.
4. A 4-year-old girl with septic arthritis due to haemophilus influenza.
5. A 12 -year-old boy with left leg fracture above the knee following a road traffic accident.
6. A 15-year-old girl with endocarditis caused by strep. viridans.
7. A 13-year-old girl with disfiguring acne.
8. An 8-year-old boy with tonsillitis due to ß-haemolytic streptococcus.
9. A 3-year-old boy with otitis media.
10. A 4-year-old unimmunised sibling of a 2-year-old boy with whooping cough.

Erythromycin

Indications: alternative to penicillin in hypersensitive patients; sinusitis, diphtheria and whooping cough prophylaxis; chronic prostatitis.
Cautions:hepatic impairment.
Contra-indications:contra-indicated in liver disease.
Side-effects:nausea, vomiting, diarrhoea after large doses.
Dose:*by mouth:* 250-500 mg every 6 hours;
CHILD: 125-250 mg every 6 hours,
Syphilis: 20 g in divided doses over 10 days .
*By slow intravenous injection or infusion:*2g daily; in divided doses, increased to 4 g in severe infections;
CHILD: 30-50 mg/kg daily in divided doses.

Gentamicin

Indications:septicaemia and neonatal sepsis; meningitis and other CNS infections; biliary tract infection, acute pyelonephritis or prostatitis, endocarditis caused by *Strep. viridans or faecalis* (with penicillin).
Cautions:increase dose interval in renal impairment (see below).
Contra-indications:pregnancy, myasthenia gravis.
Side-effects:vestibular damage, reversible nephrotoxicity.
Dose:*by intramuscular injection or slow intravenous injection or infusion*: 2-5 mg/kg daily, in divided doses every 8 hours. In renal impairment the interval between successive doses should be increased to 12 hours when the creatinine clearance is 30-70 ml/minute, 24 hours for 10-30 ml/minute, 48 hours for 5-10 ml/minute, and 3-4 days after dialysis for less than 5 ml/minute; CHILD: up to 2 weeks, 3 mg/kg every 12 hours; 2 weeks-12 years, 2 mg/kg every 8 hours. *By intramuscular injection*in divided doses every 8 hours.

Phenoxymethylpenicillin (Penicillin V)

Indications:tonsillitis, otitis media, rheumatic fever prophylaxis, endocarditis prophylaxis.
Cautions:Contra-indications: Side-effects:see under Benzylpenicillin.
Dose:250-500 mg every 6 hours, at least 30 minutes before food; CHILD: every 6 hours, up to I year 62.5 mg, 1-5 years 125 mg, 6-12 years 250 mg

Tetracycline

Indications:exacerbations of chronic bronchitis; infections due to brucella, chlamydia, myco-plasma, and rickettsia; severe acne vulgaris.
Cautions:breast-feeding; rarely causes photosensitivity. Avoid intravenous administration in hepatic impairment.
Contra-indications: renal failure, pregnancy, children under 12 years of age.
Side-effects:nausea, vomiting, diarrhoea; super-infection with resistant organisms; rarely allergic reactions.
Dose:*by mouth:*250-500 mg every 6 hours
Syphilis: 30-40 g in divided doses over 10-l5 days
Non-gonococcal urethritis: 500 mg 4 times daily for 10-21 days.
By intramuscular injection: 100 mg every 8-12 hours, or every 4-6 hours in severe infections.
*By intravenous infusion:*500 mg every 12 hours; max. 2 g daily

Ampicillin

Indications:urinary-tract infections, otitis media, chronic bronchitis, invasive salmonellosis, gonorrhoea.
Cautions:Contra-indications: Side-effects:see under Benzylpenicillin; also erythematous rashes in glandular fever and chronic lymphatic leukaemia; reduce dose in renal impairment.
Dose:*by mouth:*0.25-1 g every 6 hours, at least 30 minutes before food;
Gonorrhoea: 2g as a single dose repeated for women.
Urinary-tract infections: 500 mg every 8 hours.
By intramuscular injection or intravenous injection or infusion: 500 mg every 4-6 hours; higher doses in meningitis
CHILD: any route, 1/2 adult dose.

Benzylpenicillin
(Penicillin G)

Indications:tonsillitis, otitis media, streptococcal endocarditis, meningococcal and pneumococcal meningitis, prophylaxis in limb amputation.
Cautions: history of allergy; renal impairment.
Contra-indications: penicillin hypersensitivity.
Side-effects:sensitivity reactions, fever, joint pains; angioedema; anaphylactic shock in hypersensitive patients; diarrhoea after administration by mouth.
Dose:*By intramuscular injection*: 300-600 mg 2-4 times daily; CHILD up to 12 years: 10-20 mg/kg daily; NEONATE: 30 mg/kg daily
By intravenous infusion: up to 24 g daily
Prophylaxis in dental procedures and limb amputation.

Задание 4. Кейсы.

Case Study

Below is a list of the medical specialties. Choose from this list to identify the specialist(s) likely to handle each situation below.

allergist and immunologist	orthopedic surgeon
anesthesiologist	otolaryngologist
colon and rectal surgeon	pathologist
dermatologist	pediatrician
emergency physician	physiatrist
family practice physician	plastic surgeon
Internist	preventive medicine physician
neurological surgeon	psychiatrist
neurologist	radiologist
nuclear medicine specialist	general surgeon
obstetrician-gynecologist	thoracic surgeon
ophthalmologist	urologist

1. Juan Rodriguez fell out of a tree. Now his arm hurts. Which specialist can read the X-ray and determine if the arm is broken? _____ .If there is a fracture, which specialist should Juan see? _____ .
2. George Lewis flunked out of law school last week, and since then, he's been too depressed to get out of bed. Which specialist should his family consult? _____.
3. IlyaFreyman's TV antenna punctured a hole in his eardrum, leaving him with a substantial

hearing loss. Which specialist, should he consult? _____.

4. Mona Patel has a rash on her hands. It itches and stings. Which specialist can help? _____.
5. During the late summer, Young Ran Kim sneezes about 200 times a day. Name two specialists who might treat her for this common problem. _____.
6. Sofia Miller felt a lump in her breast. Which doctors might she go to for an opinion about what to do next? _____.
7. Jose Perez had an emergency appendectomy last week. Who probably operated on him?
8. George Jones was murdered last week. The specialist performing the autopsy to determine the cause of death is a forensic _____.
9. Boris Rothman went to a health fair and had his blood pressure taken. He was told that it was elevated and that he should see a doctor. Which specialist did he probably consult? _____.

Эталоны ответов:

Задание1. Кейсы.
1. epilepsy 2. gangrene 3. cataracts 4. Parkinson's disease 5. tuberculosis 6. cystic fibrosis
7. cholera 8. diphtheria 9. cerebral palsy 10. AIDS 11. gastroenteritis

Задание2.Кейсы.
1. Red 2. Green 3. Blue 4. Red 5. Yellow 6. Yellow 7. Red 8. Blue 9. Red 10. Blue 11. Yellow 12. Red 13. Red 14. Green 15. Red 16. Red 17. White

Задание3. Кейсы.
1. gentamicin
2. benzylpenicillin, erythromycin
3. ampicillin
4. cefuroxime
5. benzylpenicillin
6. benzylpenicillin, gentamicin
7. erythromycin, tetracycline
8. benzylpenicillin, phenoxymethylpenicillin
9. tetracycline
10.erythromycin

Задание4. Кейсы.
1. radiologist, orthopedic surgeon
2. psychiatrist
3. otolaryngologist
4. dermatologist
5. allergist and immunologist, otolaryngologist
6. family practice physician, thoracic surgeon
7. general surgeon
8. pathologist
9. Internist, familypracticephysician

4.3.Переводтекстадляоценкикомпетенции «УК-4, УК-5

Выполните перевод текста (изучающее чтение по теме «Медицинские учреждения»).

ТЕКСТ 1.

Polyclinic

institution [institju: n] учреждение
ringup (rangup, rungup) звонить, вызывать по телефону
call [k :ll] вызов; **callin**вызывать (врача)
physician [fi`zin] врач
complain [kəm`plein] жаловаться (на) **(of)**
complaint [kəm`pleint] жалоба
correct [kə `rekt] правильный; исправлять, поправлять
administer [əd`ministə] назначать; давать (лекарство)
consult [kən`slt] обращаться (кврачу); **consultinghours**приёмныечасы;
consulting roomкабинетврача
reception [ri`sepn] приём; получение; принятие
serious [`si(ə)riəs] серьёзный; вызывающий опасение (о болезни)
sick [sik] больной
sick-leave больничный лист
tobeonasick-leaveнаходиться на больничном листе
definite [`definit] определённый, точный
chart [ta:t] таблица, график, диаграмма, схема, карта;
temperaturechart температурный лист
patient'scard карточка больного
fill inзаполнять; вписывать, вносить

In our country there is a wide network of medical institutions to protect the health of our people. One of such medical institutions is the polyclinic.

If a person falls ill, he will ring up his local polyclinic and call in a doctor. When his condition isn't very poor and he has no high temperature, he will go to the local polyclinic and a physician will examine him there.

Many specialists including therapists, neurologists, surgeons and others work at the polyclinic. During the medical examination a physician usually asks the patient what he complains of and according to the complaints carries on the medical examination. The physician listens to the patient's heart and lungs and measures his blood pressure and if necessary, asks the patient to take the temperature. The laboratory findings which include blood analysis, the analysis of urine (urinalysis) and other tests help the physician to make a correct diagnosis and administer a proper treatment.

In addition to their consulting hours at the polyclinic local physicians go out to the calls to examine those patients who are seriously ill and whose condition is bad. Such sick persons receive a sick-leave. They usually follow a bed regimen.

Any physician of the polyclinic knows his patients very well because he treats only a definite number of patients. At the local polyclinic every patient has a personal patient's card which is filled in by his physician. Everything about the patient – the diagnosis of the disease, the administrations made by the doctor, the course of the disease, the changes in the patient's condition after the treatment – are written down in the card.

If it is necessary a nurse will come to the patient's house to give him the administered injections or carry out any of the doctor's administrations.

4.4 Вопросы для сообщения по теме: «Приволжский исследовательский медицинский университет»,компетенции «УК-4, УК-5»:

Privolzhsky Research Medical University

to establish – устанавливать
independent – независимый
to acquire the status – получатьстатус
department – кафедра
currently – в настоящее время
the course of training = the course of study – курсобучения
to last – длиться
tuition – обучение
the Faculty of General medicine – лечебныйфакультет
the Pediatric faculty – педиатрическийфакультет
the Faculty of Preventive medicine – медико-профилактическийфакультет
the Faculty of Dentistry – стоматологическийфакультет
the Pharmaceutical faculty – фармацевтическийфакультет
the Faculty of Foreign students – факультетобученияиностранныхстудентов
togethighereducation – получать высшее образование
publichealth – общественное здравоохранение
topreventdiseases – предотвращатьболезни
applicant – абитуриент
thepost-graduateFaculty – факультетпослевузовскойподготовки
graduate – выпускник
postgraduatetraining –послевузовскоеобразование
to gain a scientific degree – получатьученуюстепень
international activities – международнаядеятельность
the department of international services – международныйотдел
facilities – возможности
practitioner - практикующийврач
entrance exams - вступительныеэкзамены
to be admitted to - поступитьв
to attend (lectures, classes) - посещать (лекции, занятия)
to join a scientific society - вступатьвнаучноеобщество
to provide facilities for - создаватьусловиядля
hostel - общежитие
to rent a room - сниматькомнату
to be eager to do smth. – оченьхотетьчто-тоделать

Privolzhsky Research Medical University is a major centre for training medical practitioners in Russia. Its history goes back to March 21, 1920 when a medical faculty was established at the University of Nizhny Novgorod. That was an official birthday of medical education in Nizhny Novgorod.

More than 600 teachers work in more than 75 departments of the university. Currently about 3000 students are being trained here. The course of training lasts 6 years, though dentists and pharmacists study for 5 years. Tuition is given at the following faculties:

1. ***The faculty of general medicine*** is the biggest one. About half of the students study to specialize in surgery, therapy, obstetrics and gynaecology, ophthalmology, neurology and others.
2. At ***the pediatric faculty*** physicians are taught to treat children.
3. ***The faculty of preventive medicine*** trains hygienists and epidemiologists who introduce the main prophylactic principles of public health to prevent diseases.
4. At ***the faculty of dentistry*** specialists are trained in the following branches: dental therapy, dental surgery, dental orthopedics and pediatric dentistry.
5. ***The pharmaceutical faculty*** trains pharmaceutists.
6. ***The faculty of foreign students*** provides training for international students in general medicine, dentistry, pediatrics and pharmacy.

7. ***The post-graduate faculty*** aims to provide graduates with postgraduate training in more than 20 specialties. Those who make real advances in research gain their scientific degrees.

International activities are also very important for the university. The department of international services has established long-term contacts with international organizations and cooperates with foreign universities in Germany, France, Shri-Lanka and Malaysia on the students' and teachers' exchange programmes.

As for me, I finished school in … and after passing competitive entrance examinations successfully I was admitted to the university. Now I am a first- (second)-year student of the … faculty. During the first two years we study a lot of basic subjects. According to the time-table we study Organic and Inorganic, Analytical, Physical and Colloidal Chemistry, Biology, Botany, Physics, Physiology, Microbiology, Latin and other subjects. I like … most of all. I spend much time in the laboratory and attend all lectures and practical classes in this discipline. Besides, I joined the scientific society and did my first research in this field.

To add to this, our research university provides various facilities for the students and the staff. Among them there is a well-stocked library, a students' campus with a number of hostels, a computer centre, gyms. I live with my parents/at a hostel/rent a room. It takes me much time to study. But I still do sports. I took up playing badminton at school. I was eager to continue it here and I am lucky to have such an opportunity. I think there is a huge range of accessible sporting activities. I have made a lot of friends here and we often spend time together. They are not only medicine-oriented, but share my views and interests. I have no regrets in choosing my profession and this medical university in particular.

4.5. Вопросы собеседования,компетенции «УК-4, УК-5».

Answer the questions:

1. When was Medical Institute established in Nizhny Novgorod?
2. How long does the course of training last in each faculty?
3. How many faculties are there at the university? Say briefly about each faculty.
4. What does the department of international services do? What foreign countries does the university have contacts with?
5. What facilities does PIMU provide for the students and the staff?

4.6.Задание по презентации по темам: «Детские болезни»,«Онкологические заболевания», компетенции «УК-4, УК-5, ОПК-1».

а). Outlining the Presentation

Introduction

The subject/topic of my lecture/talk/presentation is…

I'm going to focus/talk about/inform you/explain …

Let me begin/start **by** (with)…

We should make a start.

Right. If everyone's ready, let's start.

My purpose/objective/aim today is…

What I want to do is…

I'd like to give you some information **about**…

We are here today to decide/agree/learn **about**…/update you **on**…/give you the background **to**…

Is everybody ready to begin?

в) Importance

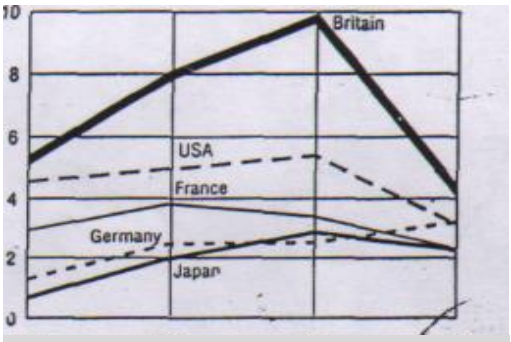
In particular/especially…
It should be said (noted, mentioned) that…
It is interesting to know that…
That's one thing I'd like to stress very heavily.
Do remember! / Keep in mind…
This is very important.
I want to reinforce the following…
The following is extremely informative (badly needed).
I'd like (want) to call (to draw, to invite) your attention **to**…

c). <u>Linking with a Previous Point</u>

As I've said/mentioned (before)…
As it was said earlier…
As I said **at** the beginning…
At the beginning (of the talk) I said…
As you've heard/understood/seen…
In my last point I mentioned (that)…
I've already explained…
There are three questions I'd like to ask / answer.
There are several questions we need to think **about**.
I'll answer each of these questions one **by** one.
That's the issue **in** general, now let's look at the first problem **in** (more) detail.
Now, let's take a more detailed look.
Let's now turn **to** specific questions / problems / issues.

Примерная модель доклада-презентации

Amodelofapresentation



Medical equipment prices % change on previous years.

<u>Notes:</u>

1. Introduces presentation
2. Presents Britain
3. Refers to visuals
4. Changes topic to Japan
5. Turns to Germany
6. Finishes

1 – ***Good morning***, ladies and gentlemen. Today, ***I'm going to talk about*** changes in medical equipment prices in Britain, the US, France, Germany and Japan during the period 2018 to 2020.

2 – ***First of all***, ***let's look at*** a country whose price inflation was the *<u>highest</u>*during this period.

3 – ***As you can see from*** the graph, price inflation in Britain stood**<u>at</u>***<u>around</u>* 5% in 2018, *<u>rising</u>* **<u>to</u>** almost 10% in 2020, before *<u>falling back</u>***to** 4% in 2019.

4 – ***Now, if we turn to*** Japan, we can see that the situation is *<u>different</u>*. Price inflation in Japan was *<u>as low as</u>* 1% in 2018, and even though it *<u>subsequently rose</u>*, it was always *<u>below</u>*4%.

5

- ***Finally, let's look at*** Germany, the only country experiencing *an upward trend in* inflation in 2019. *This rise**from** around* 2% in 2018 **to** over 3% in 2019 was due to the extra costs of Germany.
- ***In conclusion, we can observe*** that Britain had *the highest rate* of inflation of the five countries.

4.6.Задания (оценочные средства), выносимые на зачёт.

1. Лексико-грамматический тест. (УК-4)
https://sdo.pimunn.net/mod/quiz/view.php?id=201462

2. Перевод научно-медицинского текста (УК-4, УК-5, ОПК-1)

Текст 1. HEMOLYTIC STREPTOCOCCUS DISEASE

Hemolytic streptococci of group A were isolated from the throats or the nasopharynges of 342 men whose disease of the respiratory tract was believed to be the result of infection by these organisms. An antibody response was demonstrated in 300, or 87,7% of the patients, indicating that the diagnosis was usually accurate. Those in whom an increase in antibody failed to develop cannot be proved to have streptococci disease, but it is known that in from 10 to 20 per cent of all instances of scarlet fever patients fail to exhibit an antistreptolysin or antifibrinosin response.

Infection by streptococci cannot be excluded on the base of the study of these antibodies. The critical clinical study is based on the 300 patients in whom the disease was proved to be streptococci. There is striking parallelism between the manifestations of the infectious process in the two groups.

Symptoms. Sore throat was the most characteristic symptom of hemolytic streptococcus disease of the respiratory tract. It was severe or extremely severe in 78 per cent of all patients. Swallowing was unusually difficult for these men.

Текст 2. ANTITUBERCULOSIS AGENTS

Effective treatment of tuberculosis was known to begin with discovery of streptomycin in 1944. Previously, tuberculosis was “managed” by quarantine and isolation. However, the use of streptomycin alone was quickly found to lead to resistant strains of the bacillus Mycobacterium tuberculosis. This necessitated use of multiple drug therapy that is standard practice today and was made possible by development of other chemotherapeutic agents active against tuberculosis. In 1949, p-amino salicylic acid (PAS) was identified for use in tuberculosis, although generally this agent is no longer used. In 1952, isoniazid was shown to be effective, and remains a standard antituberculosis drug. Originally two three-drug regimens proved to be used for periods of 18 to 24 months to treat tuberculosis. In the 1960s, rifampin was introduced and shorter treatment periods of six to nine months with two or three drugs became possible.

Since infection in humans is considered to be by way of the respiratory tract trough inhalation of the organism, this disease and its management is of special interest to clinicians in respiratory

care. Diagnosis of tuberculosis infection is aided by means of the tuberculin reaction, which is a delayed, lymphocyte-mediated immune one.

Текст 3. ARE VITAMINS ALWAYS GOOD FOR YOU?

The discovery of vitamins in the first quarter of the XXth century and the study of their functions made it possible to abolish scurvy, rickets and many other diseases. This soon led to general recognition of the beneficial effects of vitamins and universal interest in vitamin preparations. The saying "vitamins mean health" became widespread. Today, however, vitaminologists agree that an excess of vitamins can entail serious and sometimes even irreparable damage to health.

Take this example. Children all over the world are generally known to be given vitamin D for the prevention of treatment of rickets. However, medical statistics have shown that when children suffering from rickets were given large doses of vitamin D, they were not cured, and in a number of countries rickets became even more widespread. This paradox was eventually cleared up through experimental research. It was found that if the intake of vitamin D is not stopped at the proper time; irreversible lesions can arise in the bones and internal organs as a result of bone decalcification and calcification of internal organs and tissues.

Vitamin A is another vitamin that should be taken in moderation. If excessive doses are given, serious poisoning develops. Cases of this have been known to occur in the Arctic due to the consumption of large quantities of bear liver, which, like seal and cod liver, is very rich in vitamin A. it must be said, though, that cases of vitamin A poisoning are rare.

Текст 4. COURSE OF FATAL HEPATITIS

Three distinct phases in the clinical course of fatal hepatitis may be recognized: a pre-icteric, an intermediate and a final phase. The intermediate phase is known to begin with the onset of jaundice and, in these fatal cases, usually ends abruptly with the appearance of new grave symptoms that presage the fatal termination. The time relation of the three phases is shown in a graph, where the ordinates give the number of cases, and the abscissae - the duration. The pre-icteric phase in the great majority of cases lasted 7 days or less, and shows little scattering. In the intermediate phase, however, there is considerable scattering, though in the majority of cases the duration was 26 days or less. The final phase, in the majority of cases, is known to run a course of 10 days or less.

The most common initial manifestations of the disease are anorexia, nausea, dark urine, abdominal distress, vomiting, malaise and weakness. It should be emphasized that whereas approximately half the patients gave a history of nausea, only a quarter of the patients vomited. Intermediate Phase. In the majority of cases the clinical picture in the intermediate phase gave no indication that the disease was not going to run the usual benign course

Текст 5. LIMITING SUGAR IN CHILDREN'S DIET

One of the biggest challenges for parents is to limit the amount of sugar in their children's diets.

The American Heart Association recommends that sugar intake for children is limited to 3 teaspoons (12 grams) a day. Cutting back on candy and cookies is only part of the solution. Large amounts of added sugar can also be hidden in foods such as bread, canned soups and vegetables, frozen dinners, ketchup, and fast food.

- **Don't ban sweets entirely.** Having a no sweets rule is an invitation for cravings and overindulging when given the chance.
- **Avoid sugary drinks.** One 12-oz soda has about 10 teaspoons of sugar in it, more than three times the daily recommended limit for children! Try adding a splash of fruit juice to sparkling water instead.
- **Cut down on processed foods,** such as white bread and cakes, which cause blood sugar to go up and down, and can leave kids tired and sapped of energy.
- **Create your own popsicles and frozen treats.** Freeze 100% fruit juice in an ice-cube tray with plastic spoons as popsicle handles. Or try freezing grapes, berries, banana pieces, or peach slices.

Avoid foods that impair mood.

- Soda or sweetened fruit drinks, including diet versions, increase the risk for child's depression.
- Excessive amounts of caffeine from soda, energy drinks, or coffee drinks can trigger anxiety in kids and teens and may also aggravate feelings of depression when the caffeine wears off.

Текст 6. ULTRASOUND EXAMINATION

Medical ultrasound (also known as **diagnostic sonography** or **ultrasonography**) is a diagnostic imaging technique based on the application of ultrasound. It is used to see internal body structures such as tendons, muscles, joints, vessels and internal organs. Its aim is often to find a source of a disease or to exclude any pathology. The practice of examining pregnant women using ultrasound is called obstetric ultrasound, and is widely used.

Ultrasound is sound waves with frequencies which are higher than those audible to humans (>20,000Hz). Ultrasonic images also known as sonograms are made by sending pulses of ultrasound into tissue using a probe. The sound echoes off the tissue; with different tissues reflecting varying degrees of sound. These echoes are recorded and displayed as an image to the operator.

Compared to other prominent methods of medical imaging, ultrasound has several advantages. It provides images in real-time, it is portable and can be brought to the bedside, it is substantially lower in cost, and it does not use harmful ionizing radiation. Drawbacks of ultrasonography include various limits on its field of view including patient cooperation and physique, difficulty in imaging structures behind bone and air, and its dependence on a skilled operator.

Текст 7. ROLE OF NERVOUS SYSTEM

The work of nervous system in our body is often compared to that of a centralized computer which controls the functioning of an entire system. This analogy explains the working of the nervous system in one of the best ways possible.

The nervous system regulates the activities of the different organs and of the entire organism. Muscular contractions, glandular secretion, heart action, metabolism and the many other processes continuously operating in the organism are controlled by the nervous system. The nervous system coordinating all the activities and ensuring the integrity of the organism, links the various organs and systems.

The working of each organ or system of organs may be affected by various conditions. A change in the function of one organ or system of organs leads to changes in the functions of other organs and systems. For example, during physical work involving intensive muscular contraction, the metabolism in the muscles increases, which consequently increases the requirement in nutrient; and oxygen. A reflex response causes the lungs and the heart to work more intensively, with the result that flow of the blood to muscles increases. At the same time heart production and heart losses increase, the excretory organs work harder. The unity of the organism and its external environment is affected trough the nervous system.

Текст 8. INFECTIOUS DISEASES

The results of continued research of antibiotic agents and their practical application held the chief interest in the field of infectious disease.

The intensive investigation of the chemical structure of antibiotic s and development of better methods for their commercial production are known to be in progress. The use of penicillin to combat many serious infections such as the bacterial pneumonias» infections with hemolytic streptococci and subacute bacterial endocarditis is known to have brought a great reduction in their incidence and mortality rate. The mortality from degenerative cardiac, renal and other diseases is said to have also declined as a result of their control of incidental infections which commonly cause death in such patients. This decline has been continuous for many years. Many advances in knowledge are known to have come from extensive investigation of diseases affecting the armed forces particularly epidemic infections of the respiratory tract, hepatitis, malaria and exotic diseases. There have also been alarming developments pertaining to the possibilities of future biologic warfare.

Текст 9. TOP TIPS TO PROMOTE HEALTHY CHILDHOOD EATING

Healthy eating can stabilize children's energy and sharpen their minds. By encouraging healthy eating habits now, you can make a huge impact on your children's lifelong relationship with food and give them the best opportunity to grow into healthy, confident adults.

The childhood impulse to imitate is strong, so it's important you act as a role model for your kids. It's no good asking your child to eat fruit and vegetables while you gorge on potato chips and soda.

- **Have regular family meals.** Knowing dinner is served at approximately the same time every night and that the entire family will be sitting down together is comforting and enhances appetite. Breakfast is another great time for a family meal. Kids who eat breakfast are known to do better in school.
- **Cook more meals at home.** Eating home cooked meals is healthier for the whole family and sets a great example for kids about the importance of food.
- **Get kids involved.** Children enjoy helping adults to cook. It's also a chance for you to teach them about the nutritional values of different foods, and (for older children) how to read food labels.
- **Make a variety of healthy snacks available instead of empty calorie snacks.** Keep plenty of fruits, vegetables, and healthy beverages (water, milk, pure fruit juice) around and easily accessible for kids.
- **Limit portion sizes.** Don't insist on your child's "cleaning" the plate, and never use food as a reward or bribe.
- **Limitsugarandsalt.**

Текст 10. PREMATURE INFANTS

The staff of every maternity home which includes physicians we 1 acquainted with anatomo-physiological distinction of the newborn and trained pediatric nurses is fully responsible for the health of all newborn babies. Special care is given to babies who have sustained birth injuries or who have been born with asphyxia or prematurity.

An infant that is born earlier than 280 days after conception is considered to be premature or preterm infant. Prematurity may result from maternal diseases, artificial abortions and hard physical work.

The main characteristic features of prematurity are birth weight less than 2*500 g; crown-heel length less than 45 cm; unproportionally large head; open posterior and lateral fontanels; skin covered with lanugo.

According to some authors premature infants with birth weights approximately ls500 g. sometimes manifest a certain delay in both length and weight for quite a longtime. However investigations carried out by the staff of the Pediatric Institute of the Academy of Medical Sciences

have proved that with sufficient nutrition and care even infants born long before term soon catch up with Ill-term babies and subsequently do not differ from them.

5. Содержание оценочных средств промежуточной аттестации.

Промежуточная аттестация проводится в виде зачёта.

Содержание зачёта:

1. Лексико-грамматический тест.https://sdo.pimunn.net/mod/quiz/view.php?id=201454
2. Перевод научно-медицинского текста (1200 печатных знаков –60 минут).

5.1 Перечень контрольных заданий и иных материалов, необходимых для оценки знаний, умений, навыков и опыта деятельности

5.1.1. Вопросы к зачёту по дисциплине иностранный язык (английский)

Вопрос	Код компетенции (согласно РПД)
1. Лексико-грамматический тест	**УК-4,**
2. Перевод научно-медицинского текста.	**УК-4,УК-5,ОПК-1**

6. Критерии оценивания результатов обучения

Результаты обучения	**Критерии оценивания**	
	Не зачтено	**Зачтено**
Полнота знаний	Уровень знаний ниже минимальных требований. Имели место грубые ошибки.	Уровень знаний в объеме, соответствующем программе подготовки. Могут быть допущены несущественные ошибки
Наличие умений	При решении стандартных задач не продемонстрированы основные умения. Имели место грубые ошибки.	Продемонстрированы основные умения. Решены типовые задачи, выполнены все задания. Могут быть допущены несущественные ошибки.
Наличие навыков (владение опытом)	При решении стандартных задач не продемонстрированы базовые навыки. Имели место грубые ошибки.	Продемонстрированы базовые навыки при решении стандартных задач. Могут быть допущены несущественные ошибки.
Мотивация (личностное отношение)	Учебная активность и мотивация слабо выражены, готовность решать поставленные задачи качественно отсутствуют	Проявляется учебная активность и мотивация, демонстрируется готовность выполнять поставленные задачи.
Характеристика сформированности компетенции*	Компетенция в полной мере не сформирована. Имеющихся знаний, умений, навыков недостаточно для решения практических (профессиональных) задач. Требуется повторное обучение	Сформированность компетенции соответствует требованиям. Имеющихся знаний, умений, навыков и мотивации в целом достаточно для решения практических (профессиональных) задач.
Уровень сформированности компетенций*	Низкий	Средний/высокий

6.1Для тестирования:

Оценка «5» (Отлично) - баллов (100-90%)
Оценка «4» (Хорошо)- балла (89-80%)
Оценка «3» (Удовлетворительно) - балла (79-70%)
Менее 70% –Неудовлетворительно – Оценка «2»

6.2 Для перевода:

ЗАЧТЕНО			НЕ ЗАЧТЕНО
ИЗУЧАЮЩЕЕ ЧТЕНИЯ (ПЕРЕВОД)			
Полный перевод (100%) адекватный смысловому содержанию текста на русском языке. Текст – грамматически корректен, лексические единицы и синтаксические структуры, характерные для научного стиля речи, переведены адекватно	Полный перевод (100%–90%). Встречаются лексические, грамматические и стилистические неточности, которые не препятствуют общему пониманию текста, однако не согласуются с нормами языка перевода и стилем научного изложения.	Фрагмент текста переведён не полностью (2/3 – ½) или с большим количеством лексических, грамматических и стилистических ошибок, которые препятствуют общему пониманию текста.	Неполный перевод (менее ½). Непонимание содержания текста, большое количество смысловых и грамматических ошибок.

Критерии оценки:

1. Изучающее чтение оригинального текста(перевод)

Уровни знаний	**Описание уровня**	**Баллы**
Высокий оценивается «отлично»	Полный перевод (100%) адекватный смысловому содержанию текста на русском языке. Текст – грамматически корректен, лексические единицы и синтаксические структуры, характерные для научного стиля речи, переведены адекватно.	5
Выше среднего оценивается «хорошо»	Полный перевод (100% - 90%). Встречаются лексические, грамматические и стилистические неточности, которые не препятствуют общему пониманию текста, однако не согласуются с нормами языка перевода и стилем научного изложения.	4
Средний оценивается «удовлетворительно»	Фрагмент текста, предложенного на экзамене, переведён не полностью (2/3 – ½) или с большим количеством лексических, грамматических и стилистических ошибок, которые препятствуют общему пониманию текста.	3
Низкий оценивается «неудовлетворительно»	Неполный перевод (менее ½). Непонимание содержания текста, большое количество смысловых и грамматических ошибок.	2-1

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