Syllabus
Department of Pediatrics-2
Working Curriculum of the Discipline: «Nursing of premature babies»
Educational Program 7R01131 «Neonatology»

1.	**General information about the discipline:**		
1.1	**Discipline code:** R-NPB	1.6	**Academic Year:** 2025–2026
1.2	**Name of the discipline:** «Nursing of premature babies».	1.7	**Year of Study:** 1 (first)
1.3	**Prerequisites:** Internship: «Children's diseases in ORP».	1.8	**Semester: –**
1.4	**Post-requirements:** Cycles of profile disciplines in the 2nd year of the residency program.	1.9	**Number of credits (ECTS):** 14 credits / 420 hours
1.5	**Cycle:** Major (PD)	1.10	**Component:** TMC(OK)
2.	**Content of the discipline (minimum 50 words):**		
The concept of prematurity. Anatomical and physiological features of a premature baby. Stages of nursing premature babies. Organizations of medical and protective regime. Feeding premature babies. Nursing of premature newborns at the first stage. Equipment for nursing newborns. Methods of respiratory therapy and strategies to prevent lung damage. Care and treatment of newborns after asphyxia. Nursing of children with neonatal pathologies.			
3.	**Summative evaluation form:**		
3.1	Oral examination +	3.5	CBL (Case-Based Learning) method +
3.2	Case analysis / situational problem solving +	3.6	SA +
3.3	Case study (case-based method) +	3.7	DOPS +
3.4	Assessment of practical skills at the patient’s bedside +	3.8	Testing +
4.	**Objectives of the discipline:**		
Mastering the medical skills of diagnosis, treatment and prevention, organization of nursing and feeding of premature newborns. The purpose of mastering the discipline "Premature baby" is to form appropriate competencies aimed at basic professional training, developing clinical thinking in residentsand studying the main groups of diseases in the neonatal period, their course, a differentiated approach to diagnosis, selection of therapy and rehabilitation measures.			
5.	**Final learning outcomes (RO disciplines):**		
LO 1.	Withпособthe manual пров, conduct an examination of the newborn child, formulate a clinical diagnosis in accordance with modern clinical protocols, prescribe a treatment plan and evaluate its effectiveness based on evidence-based practice at all levels of medical care, prevention of complications and iatrogenia.		

LO 2.	Withпособен the manual, you can find optimal solutions and effectively interact with the parents of a newborn child in need of examination and treatment or their legal representatives, their environment, and health professionals in order to achieve the best results for the patient.	
LO 3.	They are able toTheyare able to present their position in reasonable terms in adequate researchx questionsax, critically analyze professional literature, effectively use international databases in their daily activities, and are ready to participate in the work of the research team.	
5.1	**PO disciplines**	**The results of the OP training, which are associated with the PO disciplines**
	LO 1,2,	PO2. Patient supervision: able to conduct examinations and medical examinations of newborns, formulate a clinical diagnosis, prescribe a treatment plan and evaluate its effectiveness based on evidence-based practice using an international database and digital tools at all stages of neonatal care, and conduct preventive measures.
	LO 2,3	RO3. Public health: able to act within the legal and organizational framework of the health care system of the Republic of Kazakhstan in the provision of neonatal care, intensive care, resuscitation, provide basic assistance in emergency situations, work as part of interprofessional teams to implement policies to promote the health of the newborn
6.	**Detailed information about the discipline:**	
6.1	**Venue (building, auditorium):** Classes on the cycle "Nursing premature babies" are held in the classrooms of the department, which are equipped with computer systems. Location of the department: Shymkent, SCKP "Regional Children's Clinical Hospital". Nursat microdistrict, Argynbekov str., 125, Phone 8-7252 (408222), internal 2501, Department of Pediatrics-2, e-mail: **pediatrics-2@mail.ru.** If you have any questions about training and / or technical support, please contact us by phone and / or email specified on the SKMA website in the CALL-Center section, Helpdesk on the main page of the site.	

6.2	**Number of hours**	**of Lectures**	**of the Practical zan.**	**Lab.zzan.**	**WEDP**	**WED**
		-	**84**	**-**	**273**	**63**

7. Information aboutour academic curators:

No	**. Full name of**	**the Degree and position**	**Email address**	**Research interests, etc.**	**Achievements**
1	Bektenova Gulmira Yerseitovna	Head.department, professor	bekten_gulmira@mail.ru	Scientific direction: Pediatrics, Neonatology	Author of textbooks: "Diseases of young children", "Erte zhastagy balalar aurulary", "Emergency care for children in pediatric practice". Author of more than 95 scientific articles, holds 1 patent.

2	Karsybayeva Kulbala Romanovna	assistant	ulbalark@mail.ru	Scientific direction: Pediatrics, Neonatology	Author of the textbook: "Bala aurulary propaedeutics". Author of more than 60 scientific articles, holds 1 patent.
	Information about Clinical Mentorsax:				
1	Ashikbayeva Bakitkul Malbekovna	assistant	ashikbayeva.b@mail.ru.b@mail.ru	Scientific direction: Neonatology	Author of scientific publications - 4

8. Thematic plan:

Days	Title of the topic	Summary of	RO discipline	Number of hours	Forms/methods/ technologies of training	Forms/ methods of assessment
1	**Practical lesson.** Topic: Methodology of nursing and rehabilitation of sick and immature newborns.	Methodology of nursing and rehabilitation of sick and immature newborns. Physical development and maturity of newborns. The degree of morphological maturity of the infant. The Petruss table. Functional features of the body of a premature baby. The main indicators of physical development of a newborn child: percentile tables or average statistical indicators.	RO 1,2	2	We haveAnnual survey on the content of the topic.	Checklists: Assessment of current control (OTC). Oral response.
	SRRP. CRR topic and task: Physical development and maturity of newborns.	Physical development and maturity of newborns. The degree of morphological maturity of the infant. The Petruss table. Functional features of the body of a premature baby. The main indicators of physical development of a newborn child: percentile tables or average statistical indicators.	RO 2,3	6,5 / 1,5	Analysis of scientific articles. Presentation, creating a portfolio.	Checklists: Analysis of scientific articles. Preparation ofthematic messages in the form of presentations on the topic. Portfolio evaluation.
2	**Practical lesson.** Topic: Equipment for nursing newborns: monitoring their effectiveness.	Newborn care equipment: monitoring its effectiveness. Special equipment: cuvezes (incubators), ventilators, monitors, perfusers, phototherapy equipment (phototherapy),	RO 1,2	2	We haveAnnual survey on the content of the topic.	Checklists: Assessment of current control (OTC).

		nasogastric tube. General principles of working with newborn care equipment. Compliance with fire safety and safety regulations, sanitary and epidemiological regime. Measures, including timely informing the management, to eliminate violations of safety, fire and sanitary regulations that pose a threat to the activities of the health facility, its employees, patients and visitors.				Oral response.
	SRRP. Topic and task of the CRR: General principles of working with equipment for nursing newborns.	General principles of working with newborn care equipment. Compliance with fire safety and safety regulations, sanitary and epidemiological regime. Measures, including timely informing the management, to eliminate violations of safety, fire and sanitary regulations that pose a threat to the activities of the health facility, its employees, patients and visitors.	RO 2,3	6,5 / 1,5	Patient supervision. Presentation, creating a portfolio.	Checklist: "Criteria for evaluating practical skills". Portfolio evaluation.
3	**Practical lesson.** Subject: Primary examination of a premature baby.	Primary examination of a premature baby. Neonatal care for premature newborns. Weighing and measuring a child. Child care in neonatal wards. Daily toilet of a newborn.	RO 1,2	2	Analysis of a specific situation/ solving situational problems.	Checklists: Preparation and solution of situational tasks.
	SRRP. Topic and task of the CRR: Neonatal care for premature newborns.	Neonatal care for premature newborns. Weighing and measuring a child. Child care in neonatal wards. Daily toilet of a newborn.	RO 2.3	6.5 / 1.5	DOPS-assessment of mastering practical procedures. SA - Self Assessment.	Check lists: "DOPS-rating". "Criteria for evaluating practical skills". "Score 360^0".
4	**Practical lesson.** Topic: Determination of the anatomical and physiological	Determination of the anatomical and physiological state of a premature baby: anatomical and physiological features of the	RO 1,2	ROLE 2	Withase-study (method of specific situations).	Checklists: Preparation and solution of situational

	state of a premature baby.	skin, musculoskeletal, respiratory, cardiovascular, nervous, endocrine, immune systems, hematopoiesis in a premature baby.				tasks.
	SRRP. Topic and task of the CRR: Anatomical and physiological features of the skin, musculoskeletal, respiratory, cardiovascular, nervous, endocrine, immune systems, hematopoiesis in a premature baby.	Anatomical and physiological features of the skin, musculoskeletal, respiratory, cardiovascular, nervous, endocrine, immune systems, hematopoiesis in a premature baby.	RO 2,3	6,5 / 1,5	PS- Examination of the patient. Preparation ofpresentations, creation of a portfolio.	Checklists: Criteria for evaluating practical skills. Presentation of the topic. Portfolio evaluation.
5	**Practical lesson.** Topic: Primary toilet of a premature newborn: sucking mucus from the oropharynx, umbilical cord treatment.	Primary toilet of a premature newborn: suction of mucus from the oropharynx, treatment of the umbilical cord. Prevention of gonoblennorrhea. Removal of original grease. Weighing and measuring a child. Child care in neonatal wards. Daily toilet of a newborn. IStage I - children's intensive care. IIStage II-intensive care unit. "The Kangaroo Method". Creating an optimal temperature regime, ensuring rational feeding. Stage III (polyclinic): Medical examination. Rehabilitation. Sanitary and educational work.	RO 1,2	2	Clinical situational training, thematic patients.	Checklists: Psolving situational problems; to thecriteria for evaluating practical skills, professionalskills basic skills.
	SRRP. Subject and task of the CRR: Prevention of gonoblennorrhea.	Prevention of gonoblennorrhea. Removal of original grease. Weighing and measuring a child. Child care in neonatal wards. Daily toilet of a newborn.	RO 2,3	6,5 / 1,5	PA-partner's rating. Preparation ofpresentations, creation of a portfolio.	Check lists: "Score 360^0". Presentation of the topic. Portfolio evaluation.
6	**Practical lesson.** Topic: Determination of the anatomical and physiological	Determination of the anatomical and physiological state of a premature baby: features of the cellular composition of the	RO 1,2	2	We haveAnnual survey on the content of the	Checklists: Assessment of current control

	state of a premature baby: features of the cellular composition of the blood, gastrointestinal tract, water-electrolyte metabolism and urinary system of a premature baby.	blood, gastrointestinal tract, water-electrolyte metabolism and urinary system of a premature baby.			topic. Demonstration ofthe patient.	(OTC). Oral response. "Criteria for evaluating practical skills".
	SRRP. Topic and task of CRR: Features of the cellular composition of the blood, gastrointestinal tract, water-electrolyte metabolism and urinary system of a premature baby.	Features of the cellular composition of the blood, gastrointestinal tract, water-electrolyte metabolism and urinary system of a premature baby.	RO 2,3	6,5 / 1,5	PS -examination of the patient. Review ofthe clinical case.	Check lists: "Score 360^0" of the mentor. "Criteria for evaluating practical skills".
7	**Practical lesson.** Topic: Postnatal adaptation of children with intrauterine growth disorders, low body weight.	Postnatal adaptation of children with intrauterine growth disorders, low body weight. Features of examination of premature newborns, classification of their condition.	RO 1,2	2	Oral survey on the topic content.	Check lists: Assessment of current control (OTC). Oral response.
	SRRP. Topic and task of the CRR: Principles of nursing and feedingchildren with impaired intrauterine growth, low body weight.	Principles of nursing and feedingof children with impaired intrauterine growth, low body weight: 1) delivery in specialized hospitals with well-trained medical personnel and medical equipment available to care for such newborns; 2) creating an optimal temperature regime at the time of delivery and after birth; 3) ensuring adequate oxygenation; 4) ensuring a rational diet; 5) preventing hyperbilirubinemia; 6) replenishing high fluid losses, taking into	RO 2.3	6.5 / 1.5	DOPS-assessment of mastering practical procedures. Preparation ofpresentations, creation of a portfolio.	Check lists: Aboutthe costa of mastering резидентамиpractical skills by residents. Presentation of the topic. Portfolio evaluation.

		account the propensity of the baby to give birth. hypernatremia, acute renal failure, hyperosmolarity, edematous syndrome; 7) monitoring the level of glucose and electrolytes in the blood serum and urine; 8) monitoring and correction of the disturbed balance of blood acids and bases; 9) antibacterial therapy from the first days of life in the presence of risk factors for intrauterine or postnatal infection. Methods of nursing premature babies of different weight groups.				
8	**Practical lesson.** Topic: Providing advice on feeding premature babies.	Providing advice on feeding premature babies. Features of the composition of breast milk in women with preterm birth, the importance of providing low-weight newborns with maternal breast milk, alternative methods of feeding with maternal breast milk, parenteral nutrition.	RO 1,2	2	We haveAnnual survey on the content of the topic. Demonstration ofthe patient. Metod SBL.	Check lists: Assessment of current control (OTC). Oral response. Criteria for evaluating practical skills.
	SRRP. Topic and task of the CRR: Features of the composition of breast milk in women with preterm birth.	Features of the composition of breast milk in women with preterm birth, the importance of providing low-weight newborns with maternal breast milk, alternative methods of feeding with maternal breast milk, parenteral nutrition.	RO 2,3	6,5 / 1,5	Participation in rounds and consultations. Participate in extracurricular consultations.	Checklists: Criteria for evaluating practical skills: Professional skills. Criteria for evaluating a resident's independent work (SRR).
9	**Practical lesson.** Topic: Feeding premature babies.	Feeding premature babies.Enteral nutrition. Feeding difficulties. SRRki started enteral feeding. Calculation of the power supply	RO 1,2	2	Andndividual work. Situational tasks.	Checklists: Assessment of current control

		volume. Breast-feeding. The technique of applying to the chest. Indications for later application to the breast. Contraindications to breast-feeding.				(OTC). Oral response.
	SRRP. CRR topic and task: Enteral nutrition. Feeding difficulties.	Enteral nutrition. Feeding difficulties. SRRki started enteral feeding. Calculation of the power supply volume. Breast-feeding. The technique of applying to the chest. Indications for later application to the breast. Contraindications to breast-feeding.	RO 2,3	6,5 / 1,5	PS- Examination of the patient. Analysis of scientific articles and preparation of presentations, portfolio formation.	Check lists: "Grade 360^0" (mentor, department head, resident, doctor on duty). Presentation of the topic. Portfolio evaluation.
10	**Practical lesson. Topic:** Proper advice on lactation and breastfeeding.	Proper advice on lactation and breastfeeding. Adapted mixtures for premature babies. Probe feeding. Parenteral nutrition. Fluid and electrolyte balance. Calorie correction.	RO 1,2	2	Oral survey on the topic content.	Checklists: Assessment of current control (OTC). Oral response.
	SRRP. CRR topic and task: Adapted mixtures for preterm infants.	Adapted mixtures for premature babies. Probe feeding. Parenteral nutrition. Fluid and electrolyte balance. Calorie correction.	RO 2.3	6.5 / 1.5	DOPS-assessment of mastering practical procedures. Preparation ofpresentations, creation of a portfolio.	Check lists: Aboutthe costa of mastering резидентамиpractical skills by residents. Presentation of the topic. Portfolio evaluation.
11	**Practical lesson. Topic:** Special equipment: cuvezes (incubators), ventilators, monitors, perfusors, equipment for phototherapy (phototherapy), nasogastric	Special equipment: cuvezes (incubators), ventilators, monitors, perfusers, phototherapy equipment (phototherapy), nasogastric tube. General principles of working with newborn care equipment. Compliance with fire safety and safety regulations, sanitary and	RO 1,2	2	We haveAnnual survey on the content of the topic.	Checklists: Assessment of current control (OTC). Oral response.

	probe.	epidemiological regime. Measures, including timely informing the management, to eliminate violations of safety, fire and sanitary regulations that pose a threat to the activities of the health facility, its employees, patients and visitors.				
	SRRP. Topic and task of the CRR: General principles of working with equipment for nursing newborns.	General principles of working with newborn care equipment. Compliance with fire safety and safety regulations, sanitary and epidemiological regime. Measures, including timely informing the management, to eliminate violations of safety, fire and sanitary regulations that pose a threat to the activities of the health facility, its employees, patients and visitors.	RO 2,3	6,5 / 1,5	Analysis of scientific articles. Presentation, creating a portfolio.	Checklists: Analysis of scientific articles. Preparation ofthematic messages in the form of presentations on the topic. Portfolio evaluation.
12	**Practical lesson.** **Topic:** Care for a newborn in the wards of joint stay of mother and child.	Care for a newborn in the wards of joint stay of mother and child. Basic principles of newborn care in the wards of shared stay of mother and child. Ensuring the "heat chain", conducting a complete oexamination of a newborn child, identifying signs of danger, maintaining lactation and breastfeeding, problems with breastfeeding, and conducting preventive vaccinations.	RO 1,2	2	We haveAnnual survey on the content of the topic.	Checklists: Assessment of current control (OTC). Oral response.
	SRRP. Topic and task of the CRR: BDetection of paraphysiological conditions in premature newborns.	Detection ofparaphysiological conditions in premature newborns. ДDiagnostics of diseases in newborns and indications for their transfer to specialized departments for sick newborns, detection of developmental disorders in progenesis (somatic and inherited gametopathies), in blastogenesis (twin	RO 2,3	6,5 / 1,5	Patient supervision. Presentation, creating a portfolio.	Checklist: "Criteria for evaluating practical skills". Portfolio evaluation.

		deformities, multiple pregnancies), in embryogenesis (formation of malformations), in fetogenesis (formation of SIDS, intrauterine infections) and in postnatal period period (postnatal diseases).				
13	**Practical lesson.** **Topic:** Newborn care at home.	Newborn care at home. Basic requirements for caring for newborns at home. Daily toilet. Changing clothes. Swimming. Walking in the fresh air.	RO 1,2	2	Analysis of a specific situation/ solving situational problems.	Checklists: Preparation and solution of situational tasks.
	SRRP. CRR topic and task: Working with parents, providing breast-feeding counseling, teaching them how to care for a newborn and recognize signs of danger.	PWork with parents, provide breast-feeding counseling, teach them how to care for a newborn and recognize signs of danger.	RO 2.3	6.5 / 1.5	DOPS-assessment of mastering practical procedures. SA - Self Assessment.	Check lists: "DOPS-rating". "Criteria for evaluating practical skills". "Score 360^0".
14	**Practical lesson.** **Topic:** Respiratory disorders in premature babies.	Respiratory disorders in premature infants. Respiratory distress syndrome. Etiology. Pathogenesis. Clinic. Diagnostics. Differential diagnosis. Treatment. Prevention.	RO 1,2	ROLE 2	Withase-study (method of specific situations).	Checklists: Preparation and solution of situational tasks.
	SRRP. CRR topic and task: Respiratory distress syndrome.	Respiratory distress syndrome. Etiology. Pathogenesis. Clinic. Diagnostics. Differential diagnosis. Treatment. Prevention.	RO 2,3	6,5 / 1,5	PS- Examination of the patient. Preparation ofpresentations, creation of a portfolio.	Checklists: Criteria for evaluating practical skills. Presentation of the topic. Portfolio evaluation.
15	**Practical lesson.** **Topic:** Perinatal pathology of the central nervous system in premature newborns, including those with low and extremely low body weight.	Perinatal pathology of the central nervous system in premature newborns, including those with low and extremely low body weight. Etiology. Pathogenesis. Clinic. Diagnostics. Differential diagnosis. Treatment. Prevention.	RO 1,2	2	Clinical situational training, thematic patients.	Checklists: Psolving situational problems; to thecriteria for evaluating practical skills,

						professionalskills basic skills.
	SRRP. Topic and task of CRR: Metabolic features of the adaptation period.	Metabolic features of the adaptation period. Transient hyperbilirubinemia. Hypoglycemia. Disorders of calcium, sodium, magnesium, and potassium metabolism.	RO 2,3	6,5 / 1,5	PA-partner's rating. Preparation ofpresentations, creation of a portfolio.	Check lists: "Score 360⁰". Presentation of the topic. Portfolio evaluation.
16	**Practical lesson. Topic:** The main syndromes of postnatal adaptation disorders in premature infants, including those with BMI at birth.	The main syndromes of postnatal adaptation disorders in premature infants, including those with BMI at birth. Hemodynamic disorders. A hemodynamically significant functioning ductus arteriosus. Disorders of the gastrointestinal tract. Disorders of the urinary system. Characteristic metabolic disorders. Characteristic disorders of the immune system. Violations of thermoregulation. Hematological disorders. Ophthalmological disorders.	RO 1,2	2	We haveAnnual survey on the content of the topic. Demonstration ofthe patient.	Checklists: Assessment of current control (OTC). Oral response. Checklist: "Criteria for evaluating practical skills".
	SRRP. CRR topic and task: Hemodynamically significant functioning ductus arteriosus.	A hemodynamically significant functioning ductus arteriosus. Disorders of the gastrointestinal tract. Disorders of the urinary system. Characteristic metabolic disorders. Characteristic disorders of the immune system. Violations of thermoregulation. Hematological disorders. Ophthalmological disorders.	RO 2,3	6,5 / 1,5	PS -examination of the patient. Review ofthe clinical case.	Check lists: "Score 360⁰". Mentor's assessment. "Criteria for evaluating practical skills".
17	**Practical lesson. Topic:** Principles of nursing premature babies.	Principles of nursing premature babies. Maintaining an adequate body temperature. Oxygen therapy and assisted ventilation. Prevention and treatment of conditions caused by functioning fetal communications.	RO 1,2	2	Oral survey on the topic content.	Check lists: Assessment of current control (OTC). Oral response.
	SRRP. Topic and task of the CRR: Features of feeding	Features of feeding premature babies with extremely low body weight. Infusion therapy	RO 2.3	6.5 / 1.5	DOPS-assessment of mastering	Check lists: Aboutthe costa of

	premature babies with extremely low body weight.	and parenteral nutrition. Survival rate in different gestational groups. Perinatal mortality.			practical procedures. Preparation ofpresentations, creation of a portfolio.	mastering резидентамиpractical skills by residents. Presentation of the topic. Portfolio evaluation.
18	**Practical lesson.** **Topic:** Long-term problems associated with prematurity.	Long-term problems associated with prematurity. Deviations in psychomotor development. Various visual impairments. Surgical and orthopedic pathology. Chronic lung diseases. Immunological abnormalities. Data from remote catamnestic observation. Basic principles of organization of dispensary monitoring of premature babies.	RO 1,2	2	We haveAnnual survey on the content of the topic. Demonstration ofthe patient. Metod SBL.	Check lists: Assessment of current control (OTC). Oral response. Criteria for evaluating practical skills.
	SRRP. Topic and task of CRR: Deviations in psychomotor development.	Deviations in psychomotor development. Various visual impairments. Surgical and orthopedic pathology. Chronic lung diseases. Immunological abnormalities. Data from remote catamnestic observation. Basic principles of organization of dispensary monitoring of premature babies.	RO 2,3	6,5 / 1,5	Participation in rounds and consultations. Participate in extracurricular consultations.	Checklists: Criteria for evaluating practical skills: Professional skills. Criteria for evaluating a resident's independent work (SRR).
19	**Practical lesson.** **Topic:** Perinatal CNS lesions in premature newborns.	Perinatal CNS lesions in premature newborns. Hypoxic-ischemic and hypoxic-hemorrhagic lesions of the central nervous system. Classification, clinic, diagnosis, and treatment. Differential diagnosis.	RO 1,2	2	Andndividual work. Situational tasks.	Checklists: Assessment of current control (OTC). Oral response.
	SRRP. Topic and task of CRR: Hypoxic-ischemic and hypoxic-hemorrhagic lesions of	Hypoxic-ischemic and hypoxic-hemorrhagic lesions of the central nervous system (CNS). Classification, clinic, diagnosis, and treatment.	RO 2,3	6,5 / 1,5	PS- Examination of the patient. Analysis of	Checklists: Score 360^0 (mentor, department

	the central nervous system.	Differential diagnosis.			scientific articles and preparation of presentations, portfolio formation.	head, resident, doctor on duty). Presentation of the topic. Portfolio evaluation.
20	**Practical lesson.** **Topic:** Features of meningitis in premature newborns.	Features of meningitis in premature newborns. Etiology, diagnosis, and treatment. Principles of antibacterial therapy.	RO 1,2	2	Oral survey on the topic content.	Checklists: Assessment of current control (OTC). Oral response.
	SRRP. Topic and task of CRR: Features of the course of purulent-inflammatory diseases.	Features of the course of purulent-inflammatory diseases: (local infections, sepsis) in premature babies.	RO 2.3	6.5 / 1.5	DOPS-assessment of mastering practical procedures. Preparation ofpresentations, creation of a portfolio.	Check lists: Aboutthe costa of mastering резидентомpractical skills by a resident. Presentation of the topic. Portfolio evaluation.
21	**Practical exercises.** **Topic:** Anemia of premature babies.	Anemia of preterm infants. Differential diagnosis of anemia. Diagnosis and treatment. Edematous syndrome in newborns.	RO 1,2	2	We haveAnnual survey on the content of the topic.	Checklists: Assessment of current control (OTC). Oral response.
	SRRP. Topic and task of CRR: Edematous syndrome in newborns.	Edematous syndrome in newborns. Reasons. Classification. Symptoms and complications. Diagnostics and differential diagnostics. Treatment. Prognosis and prevention.	RO 2,3	6,5 / 1,5	Analysis of scientific articles. Presentation, creating a portfolio.	Checklists: Analysis of scientific articles. Preparation ofthematic messages in the form of presentations on the topic. Portfolio evaluation.

	Boundary control No. 1	**The control includes the content of the topic of practical classes and CRR 1-21 daysand.**	**RO 1,2,3**			**Mini clinical exam to assess practical skills at the patient's bedside.**
22	**Practical lesson.** Topic: Clinical and laboratory features of intrauterine infections of the fetus and newborn.	Clinical and laboratory features of intrauterine infections of the fetus and newborn. Diagnostics, differential diagnosis, principles of treatment.	RO 1,2	2	We haveAnnual survey on the content of the topic.	Checklists: Assessment of current control (OTC). Oral response.
	SRRP. CRR topic and task: Cytomegalovirus infection.	Cytomegalovirus infection. Pathogenetic aspects of the disease. Clinical forms and manifestations, laboratory diagnostics, differential diagnosis. Prevention and treatment.	RO 2,3	6,5 / 1,5	Patient supervision. Presentation, creating a portfolio.	Checklist: "Criteria for evaluating practical skills". Portfolio evaluation.
23	**Practical lesson.** Topic: Features of pharmacotherapy of a premature новорожденewborn.	Features of pharmacotherapy of a premature новорожденewborn. Methods of drug administration. Binding of drugs to plasma proteins, distribution of drugs in the body, elimination of drugs.	RO 1,2	2	Analysis of a specific situation/ solving situational problems.	Checklists: Preparation and solution of situational tasks.
	SRRP. CRR topic and task: Principles of drug dosing in neonatology.	Principles of drug dosing in neonatology. Pharmacogenetics. Drug interactions.	RO 2.3	6.5 / 1.5	DOPS-assessment of mastering practical procedures. SA - Self Assessment.	Check lists: "DOPS-rating". "Criteria for evaluating practical skills". "Score 360^0".
24	**Practical lesson.** Topic: Pharmacotherapy during pregnancy and lactation.	Pharmacotherapy during pregnancy and lactation. Adverse effects of drugs and xenobiotics on the embryo and fetus. Medications used to treat newborns. Medicines for the treatment of infectious diseases. Pain and analgesia in neonatology. Medicinal	RO 1,2	ROLE 2	Withase-study (method of specific situations).	Checklists: Preparation and solution of situational tasks.

		products of various groups used in neonatology.				
	SRRP. Subject and task of CRR: Adverse effects of drugs and xenobiotics on the embryo and fetus.	Adverse effects of drugs and xenobiotics on the embryo and fetus. Medications used to treat newborns. Medicines for the treatment of infectious diseases. Pain and analgesia in neonatology. Medicinal products of various groups used in neonatology.	RO 2,3	6,5 / 1,5	PS- Examination of the patient. Preparation ofpresentations, creation of a portfolio.	Checklists: Criteria for evaluating practical skills. Presentation of the topic. Portfolio evaluation.
25	**Practical lesson.** Topic: Resuscitation of prematurebabies.	Resuscitation of prematurebabies. Factors that complicate the process of resuscitation of a premature newborn: weakly expressed adipose tissue of premature infants, the ratio of body surface area to weight, immaturity of the brain and the presence of a fragile germinal matrix, the development of intracranial hemorrhages after an episode of hypoxia or a sharp change in blood pressure and osmolarity in the vascular bed. Selective intubation for extremely premature infants (gestational age less than 28 weeks).	RO 1,2	2	Clinical situational training, thematic patients.	Checklists: PSolving situational problems. to thepractical skills assessment criteria includeprofessionalpo фессиональ skills.
	SRRP. Topic and task of CRR: Factors complicating the process of resuscitation of a premature newborn.	Factors that complicate the process of resuscitation of a premature newborn: weakly expressed adipose tissue of premature infants, the ratio of body surface area to weight, immaturity of the brain and the presence of a fragile germinal matrix, the development of intracranial hemorrhages after an episode of hypoxia or a sharp change in blood pressure and osmolarity in the vascular bed. Selective intubation for extremely premature infants (gestational age less than 28 weeks).	RO 2,3	6,5 / 1,5	PA-partner's rating. Preparation ofpresentations, creation of a portfolio.	Check lists: "Score 360^0". Presentation of the topic. Portfolio evaluation.

26	**Practical lesson.** Topic: Features of nursing newborns with extremely low body weight.	Features of nursing newborns with extremely low body weight. Prevention, early detection and treatment of retinopathy of prematurity. Performing CPAP, hardware ventilation of lungs, and oxygen therapy.	RO 1,2	2	We haveAnnual survey on the content of the topic. Demonstration ofthe patient.	Checklists: Assessment of current control (OTC). Oral response. Checklist: "Criteria for evaluating practical skills".
	SRRP. CRR topic and task: Prevention, early detection and treatment of retinopathy of prematurity.	Prevention, early detection and treatment of retinopathy of prematurity. Performing CPAP, hardware ventilation of lungs, and oxygen therapy.	RO 2,3	6,5 / 1,5	PS -examination of the patient. Review ofthe clinical case.	Check lists: "Score 360^0". Mentor's assessment. "Criteria for evaluating practical skills".
27	**Practical lesson.** Topic: Nursing of premature newborns at the I-stage.	Nursing of premature newborns at the I-stage. Nursing of premature newborns at the I-stage (maternity hospital): creating an optimal temperature regime. Aboutthe carelessness of rational feeding. Prevention of infection.	RO 1,2	2	Oral survey on the topic content.	Check lists: Assessment of current control (OTC). Oral response.
	SRRP. Topic and task of the CRR: Nursing of premature newborns at the I-stage (maternity hospital).	Nursing of premature newborns at the I-stage (maternity hospital): creating an optimal temperature regime. Aboutthe carelessness of rational feeding. Prevention of infection.	RO 2.3	6.5 / 1.5	DOPS-assessment of mastering practical procedures. Preparation ofpresentations, creation of a portfolio.	Check lists: Aboutthe costa of mastering резидентамиpractical skills by residents. Presentation of the topic. Portfolio evaluation.
28	**Practical lesson.** Topic: Work in the Department of neonatal Pathology.	Work in the Department of neonatal Pathology. Basic principles of newborn care in the pathology department. Features of a complete examination of a sick newborn. Conducting	RO 1,2	2	We haveAnnual survey on the content of the topic.	Check lists: Assessment of current control (OTC).

		proper examinations to confirm the diagnosis of diseases and their treatment, according to existing protocols based on the principles of safe perinatal technology.			Demonstration ofthe patient. Metod SBL.	Oral response. Criteria for evaluating practical skills.
	SRRP. Topic and task of the CRR: Basic principles of newborn care in the pathology department.	Basic principles of newborn care in the pathology department. Features of a complete examination of a sick newborn. Conducting proper examinations to confirm the diagnosis of diseases and their treatment, according to existing protocols based on the principles of safe perinatal technology.	RO 2,3	6,5 / 1,5	Participation in rounds and consultations. Participate in extracurricular consultations.	Checklists: Criteria for evaluating practical skills: Professional skills. Criteria for evaluating a resident's independent work (SRR).
29	**Practical lesson.** Topic: Monitoring plan for newborns of the main risk groups.	Monitoring plan for newborns of the main risk groups. The concept of risk groups. Risk factors. Frequency of examination, consultation of specialists. Clinical and laboratory studies.	RO 1,2	2	Andndividual work. Situational tasks.	Checklists: Assessment of current control (OTC). Oral response.
	SRRP. Topic and task of the CRR: The concept of risk groups. Risk factors.	The concept of risk groups. Risk factors. Frequency of examination, consultation of specialists. Clinical and laboratory studies.	RO 2,3	6,5 / 1,5	PS- Examination of the patient. Analysis of scientific articles and preparation of presentations, portfolio formation.	Checklists: Score 360^0 (mentor, department head, resident, doctor on duty). Presentation of the topic. Portfolio evaluation.
30	**Practical lesson.** Topic: Care and treatment of premature newborns after asphyxia.	Care and treatment of premature newborns after asphyxia. Principles of care for a premature newborn in the post-resuscitation period: creating an optimal microclimate and comfort for the patient (maintaining an optimal	RO 1,2	2	Oral survey on the topic content.	Checklists: Assessment of current control (OTC). Oral response.

		ambient temperature, methods for ensuring a comfortable position, adequate anesthesia, prevention of pressure sores, pneumonia, sepsis, etc.). Elimination of hypoxemia and normalization of blood circulation, treatment of meconeal aspiration, persistent pulmonary hypertension, HIE.				
	SRRP. CRR topic and task: Principles of care for a premature newborn in the post-resuscitation period.	Principles of care for a premature newborn in the post-resuscitation period: creating an optimal microclimate and comfort for the patient (maintaining an optimal ambient temperature, methods for ensuring a comfortable position, adequate anesthesia, prevention of pressure sores, pneumonia, sepsis, etc.). Elimination of hypoxemia and normalization of blood circulation, treatment of meconeal aspiration, persistent pulmonary hypertension, HIE.	RO 2.3	6.5 / 1.5	DOPS-assessment of mastering practical procedures. Preparation ofpresentations, creation of a portfolio.	Check lists: Aboutthe costa of mastering резидентамиpractical skills by residents. Presentation of the topic. Portfolio evaluation.
31	**Practical exercises.** Topic: Nursing of premature newborns with respiratory disorders.	Nursing of premature newborns with respiratory disorders. Intensive care of newborns with respiratory disorders (according to the severity of respiratory disorders, respiratory distress syndrome, transient tachypneaэ, meconium aspiration syndrome, persistent pulmonary hypertension, interstitial pulmonary emphysema, pneumotrax, pneumomediastinum, pneumopericardium, penvmoperitoneum, pneumonia, bronchopulmonary dysplasia).	RO 1,2	2	We haveAnnual survey on the content of the topic.	Checklists: Assessment of current control (OTC). Oral response.
	SRRP. CRR topic and task: Intensive care of premature	Intensive care of premature newborns with respiratory disorders (according to the severity	RO 2,3	6,5 / 1,5	Analysis of scientific articles.	Checklists: Analysis of scientific

	newborns with respiratory disorders.	of respiratory disorders, respiratory distress syndrome, transient tachypneaэ, meconium aspiration syndrome, persistent pulmonary hypertension, interstitial pulmonary emphysema, pneumotrax, pneumomediastinum, pneumopericardium, penvmoperitoneum, pneumonia, bronchopulmonary dysplasia).			Presentation, creating a portfolio.	articles. Preparation ofthematic messages in the form of presentations on the topic. Portfolio evaluation.
32	**Practical lesson.** Topic: Respiratory therapy.	Respiratory therapy. Traditional artificial lung ventilation. Pathophysiologically sound strategies of mechanical ventilation. Strategies for preventing ventilator — induced lung injury (VILI-ventilator induced lung injury). Strategies based on alternative ventilation modes. Indications for the use of high-frequency oscillatory ventilation of the lungs.	RO 1,2	2	We haveAnnual survey on the content of the topic.	Checklists: Assessment of current control (OTC). Oral response.
	SRRP. CRR topic and task: Traditional artificial ventilation.	Traditional artificial lung ventilation. Pathophysiologically sound strategies of mechanical ventilation. Strategies for preventing ventilator — induced lung injury (VILI-ventilator induced lung injury). Strategies based on alternative ventilation modes. Indications for the use of high-frequency oscillatory ventilation of the lungs.	RO 2,3	6,5 / 1,5	Patient supervision. Presentation, creating a portfolio.	Checklist: "Criteria for evaluating practical skills". Portfolio evaluation.
33	**Practical lesson.** Topic: Nursing of premature newborns withcardiovascular disorderscосудистой системы.	Nursing of premature newborns withcardiovascular disorderscосудистой системы. Intensive care of premature newborns with diseases of the cardiovascular system (myocardial diseases, heart failure, fetal and neonatal arrhythmias, congenital heart defects, open ductus arteriosus). Indications for	RO 1,2	2	Analysis of a specific situation/ solving situational problems.	Checklists: Preparation and solution of situational tasks.

		surgical interventions. Indirect heart massage, drug therapy.				
	SRRP. Topic and task of CRR: Intensive care of premature newborns with diseases of the cardiovascular system.	Intensive care of premature newborns with diseases of the cardiovascular system (myocardial diseases, heart failure, fetal and neonatal arrhythmias, congenital heart defects, open ductus arteriosus). Indications for surgical interventions. Indirect heart massage, drug therapy.	RO 2.3	6.5 / 1.5	DOPS-assessment of mastering practical procedures. SA - Self Assessment.	Check lists: "DOPS-rating". "Criteria for evaluating practical skills". "Score 360^0".
34	**Practical lesson.** Topic: Nursing of premature newborns with birth injuries.	Nursing of premature newborns with birth injuries. Intensive care of premature newborns with birth injuries.	RO 1,2	ROLE 2	Withase-study (method of specific situations).	Checklists: Preparation and solution of situational tasks.
	SRRP. Subject and task of the CRR: Perinatal brain damage. Birth trauma.	Perinatal brain damage. Birth trauma. Reasons. Classification. Features of clinical manifestations. Conducting and interpreting the results of special examination methods: NSDG, CT, MRI of the brain, ECG, X-ray of the skull, blood CBS indicators.	RO 2,3	6,5 / 1,5	PS- Examination of the patient. Preparation ofpresentations, creation of a portfolio.	Checklists: Criteria for evaluating practical skills. Presentation of the topic. Portfolio evaluation.
35	**Practical lesson.** Topic: Nursing of premature newborns with hypoxic damage to the central nervoussystem.	Nursing of premature newborns with hypoxic damage to the central nervoussystem. Emergency and resuscitation measures in the first minutes after birth. Primary resuscitation. Oxygen therapy (up to mechanical ventilation), warming the baby (radiant heat, incubator), replenishing the volume of circulating blood. Intensive care of the acute period. Creation of an optimal nursing regime, gentle care, oxygen therapy (mask, ventilator), replenishment of the volume of circulating blood (maintenance of blood pressure and stabilization of	RO 1,2	2	Clinical situational training, thematic patients.	Checklists: Psolving situational problems; to thecriteria for evaluating practical skills, professionalskills basic skills.

		microcirculatory disorders), hemostatic therapy, fight against brain edema.				
	SRRP. CRR topic and task: Emergency and resuscitation measures in the first minutes after birth.	Emergency and resuscitation measures in the first minutes after birth. Primary resuscitation. Oxygen therapy (up to mechanical ventilation), warming the baby (radiant heat, incubator), replenishing the volume of circulating blood. Intensive care of the acute period. Creation of an optimal nursing regime, gentle care, oxygen therapy (mask, ventilator), replenishment of the volume of circulating blood (maintenance of blood pressure and stabilization of microcirculatory disorders), hemostatic therapy, fight against brain edema. Treatment in the early recovery period. Fight against brain edema under the control of neurosonography, drug therapy, massage and physical therapy.	RO 2,3	6,5 / 1,5	PA-partner's rating. Preparation ofpresentations, creation of a portfolio.	Check lists: "Score 360^0". Presentation of the topic. Portfolio evaluation.
36	**Practical lesson.** Topic: Nursing недоношенных новорожденных of premature newborns with traumatic spinal cordinjuries.	Nursing недоношенных новорожденных of premature newborns with traumatic spinal cord injuries. Causes and classification of spinal cord injuries. Clinic. A complex of rehabilitation measures, including massage, therapeutic gymnastics, orthopedic correction, physiotherapy and medications. Forecast.	RO 1,2	2	We haveAnnual survey on the content of the topic. Demonstration ofthe patient.	Checklists: Assessment of current control (OTC). Oral response. Checklist: "Criteria for evaluating practical skills".
	SRRP. Topic and task of CRR: Diseases of the umbilical cord residue and umbilical wound in a premature newborn child.	Diseases of the umbilical cord residue and umbilical wound in a premature newborn child. Hernia of the umbilical cord. Reasons. Classification. Symptoms and complications. Diagnostics and differential diagnostics.	RO 2,3	6,5 / 1,5	PS -examination of the patient. Review ofthe clinical case.	Check lists: "Score 360^0". Mentor's assessment. "Criteria for evaluating practical

		Treatment. Prognosis and prevention.				skills".
37	**Practical lesson.** Topic: Intensive care of premature newborns with severe bacterial infections.	Intensive care of premature newborns with severe bacterial infections (sepsis, pneumonia, meningitis). Antibiotic therapy during the newborn period. The main groups of antibiotics used in premature newborns. Adverse reactions. Other chemotherapeutic agents. The use of antibiotics in infectious diseases in newborns. Complications of antibiotic therapy and methods of their prevention. Eubiotics. Form for the use of immunoglobulin preparations for intravenous infusion in neonatology.	RO 1,2	2	Oral survey on the topic content.	Check lists: Assessment of current control (OTC). Oral response.
	SRRP. Topic and task of CRR: The main groups of antibiotics used in premature newborns.	The main groups of antibiotics used in premature newborns. Adverse reactions. Other chemotherapeutic agents. The use of antibiotics in infectious diseases in newborns. Complications of antibiotic therapy and methods of their prevention. Eubiotics. Form for the use of immunoglobulin preparations for intravenous infusion in neonatology.	RO 2.3	6.5 / 1.5	DOPS-assessment of mastering practical procedures. Preparation ofpresentations, creation of a portfolio.	Check lists: Aboutthe costa of mastering резидентамиpractical skills by residents. Presentation of the topic. Portfolio evaluation.
38	**Practical lesson.** Topic: Determination of management and treatment tactics for premature newborns with diseases.	Determination of management and treatment of premature newborns with diseases such as diaper rash, sweating, seborrheic dermatitis, adiponecrosis, Leiner's erythroderma, toxic epidermal necrolysis, neonatal lupus erythematosus,,-vesiculopustulosis, pemphigus of newborns.	RO 1,2	2	We haveAnnual survey on the content of the topic. Demonstration ofthe patient. Metod SBL.	Check lists: Assessment of current control (OTC). Oral response. Criteria for evaluating practical skills.
	SRRP. Subject and task of the CRR: Temperature and	Temperature regime and humidity in the ward for premature babies. Heat loss and prevention	RO 2,3	6,5 / 1,5	Participation in rounds and	Checklists: Criteria for evaluating

	humidity in the ward for premature babies.	of these losses. Methods of heating a premature baby. Neonatal cold trauma. The influence of sensory stimuli on a premature newborn (tactile stimuli, light, sound).			consultations. Participate in extracurricular consultations.	practical skills: Professional skills. Criteria for evaluating a resident's independent work (SRR).
39	**Practical lesson.** Topic: Determination of management and treatment tactics for premature newborns with diseases.	Determination of management and treatment of premature newborns with diseases-infectious diseases of the umbilical wound, umbilical cord residue and umbilical vessels. Determination of management and treatment tactics for newborns with diseases-of the musculoskeletal system-torticollis. Determination of indications for surgical treatment.	RO 1,2	2	Andndividual work. Situational tasks.	Checklists: Assessment of current control (OTC). Oral response.
	SRRP. Topic and task of the CRR: Features of skin and mucosal care.	Features of skin and mucosal care. Hygienic treatment of skin and mucous membranes. Hygienic and therapeutic baths. Massage and gymnastics. Purpose and features of carrying out depending on body weight and gestational age. Swimming in prematurebabies.	RO 2,3	6,5 / 1,5	PS- Examination of the patient. Analysis of scientific articles and preparation of presentations, portfolio formation.	Checklists: Score 360^0 (mentor, department head, resident, doctor on duty). Presentation of the topic. Portfolio evaluation.
40	**Practical lesson.** Topic: Pathology of premature babies. Metabolic features of the adaptation period.	Pathology of premature babies. Metabolic features of the adaptation period. Transient hyperbilirubinemia. Hypoglycemia. Disorders of calcium, sodium, magnesium, and potassium metabolism.	RO 1,2	2	Oral survey on the topic content.	Checklists: Assessment of current control (OTC). Oral response.
	SRRP. Topic and task of CRR: Non-infectious lung diseases.	Non-infectious lung lesions. Primary atelectasis. Pulmonary hemorrhage. Hyaline membrane disease. Wilson-Mikiti syndrome.	RO 2.3	6.5 / 1.5	DOPS-assessment of mastering practical	Check lists: Aboutthe costa of mastering

		Prevention and treatment of non-infectious lung lesions.			procedures. Preparation ofpresentations, creation of a portfolio.	резидентамиpractical skills by residents. Presentation of the topic. Portfolio evaluation.
41	**Practical exercises.** Topic: Pneumonia of premature babies.	Pneumonia of premature babies. Etiology, diagnosis, clinic, treatment and prevention.	RO 1,2	2	We haveAnnual survey on the content of the topic.	Checklists: Assessment of current control (OTC). Oral response.
	SRRP. CRR topic and task: Sepsis in premature newborns.	Sepsis in premature newborns. Risk groups. Etiology. Pathogenesis. Clinical forms. Diagnostics. Differential diagnosis. Complications. Management tactics.	RO 2,3	6,5 / 1,5	Analysis of scientific articles. Presentation, creating a portfolio.	Checklists: Analysis of scientific articles. Preparation ofthematic messages in the form of presentations on the topic. Portfolio evaluation.
42	**Practical lesson.** Subject: Apneaэ of prematurebabies.	Apneaэ of preterminfants. Algorithm for resuscitation of premature newborns in the delivery room. РеспираторнRespiratory supporta and therapy of respiratoryя disorders in premature newborns.	RO 1,2	2	We haveAnnual survey on the content of the topic.	Checklists: Assessment of current control (OTC). Oral response.
	SRRP. Topic and task of the CRR: Hemorrhagic diseases of premature newborns.	Hemorrhagic diseases of premature newborns. Etiology, diagnosis, clinic, treatment, prevention.	RO 2,3	6,5 / 1,5	Patient supervision. Presentation, creating a portfolio.	Checklist: "Criteria for evaluating practical skills". Portfolio evaluation.
	Boundary control No. 2	**The control includes the content of the topic of practical classes and CRR 22-42 daysand.**	**RO 1,2,3**			**Mini clinical exam to assess practical skills at the patient's**

						bedside.
	Preparation and conduct of interim assessment.			**42**		
9.1	Lectures:	The residency program does not include lectures.				
9.2	Practical exercises::	An oral survey. Analysis of a specific situation / solving situational problems. Withase-study (method of specific situations). Clinical situational training, thematic patients. Demonstration ofthe patient. Metod SBL.				
9.3	SRP/SRP:	Independent clinical work under the guidance of a clinical mentor includes: edaily participation in medical conferences, consultation ofat least 3neonatological patients whoare in the hospital under the supervision of a clinical mentor/teacher, maintaining medical documentation onthe electronicresource of the medical institution, participating in rounds with other doctors/teachers, consultations, clinical reviews; performing medical tasks. manipulations according to the resident's PPI. Patient supervision. DOPS-assessment of mastering practical procedures. SA - Self Assessment. PS - Examination of the patient. PA - the partner's rating. Review ofthe clinical case. Participate in rounds and consultations. Participate in extracurricular consultations. Analysis of scientific articles and preparation of presentations, portfolio formation. DOPS-assessment of mastering practical procedures. Preparation ofpresentations, creation of a portfolio. Independent work of a resident may include studying theoretical material, searching for relevant information in information resources (UpToDate, Cochrane, etc.). Portfolio development, clinic duties, research work, etc				
. 9, 4	Border control:	Mini clinical exam to assess practical skills at the patient's bedside.				
10.	**Evaluation criteria:**					
10.1	**Criteria for evaluating the discipline's learning outcomes:**					
no. LO	**LO disciplines**	**Unsatisfactory**	**Satisfactory**	**Good**	**Excellent**	
LO 1	Withthe helpthe manualof enconduct an examination of a newborn child, formulate a clinical diagnosis in accordance with modern clinical	It is not able to demonstrate knowledge and understanding when justifying and formulating a clinical diagnosis at the stages of neonatal care, and does not use the nosology classification. Unable to draw up a treatment plan, calculate medications, or evaluate the effectiveness of	Demonstrates insufficient knowledge and understanding when justifying and formulating a clinical diagnosis at the stages of neonatal care, does not use the classification of nosology based on the CP	Able to substantiate and formulate a clinical diagnosis at the stages of neonatal care, using the classification of nosology. He is able to determine treatment	Independently substantiates and formulates a clinical diagnosis at the stages of neonatal care, using the classification of nosology. Independently builds management tactics and treatment plan based on the CP of the Ministry of Health of the Republic of Kazakhstan, calculates drugs and, if necessary, infusion therapy, evaluates	

	protocols, prescribe a treatment plan and evaluate its effectiveness based on evidence-based practice at all levels of medical care, prevention of complications and iatrogeny.	therapy for neonatal patients. I haven't worked through the main literature yet.	of the Ministry of Health of the Republic of Kazakhstan. It admits inaccuracies and mistakes in treatment tactics, drug calculation, and evaluation of the effectiveness of therapy for neonatal patients. Doesn't fully use the literature recommended in syllabus.	tactics based on the CP of the Ministry of Health of the Republic of Kazakhstan, calculate drugs, and evaluate the effectiveness of therapy based on the principles of evidence-based practice for neonatal patients. Uses the literature recommended in syllabus.	indicators of therapy effectiveness. Analyzes appointments based on the principles of evidence-based practice at all levels of delivery, medical care пациентам for neonatal patients. Uses literature from scientific databases.
LO 2	Withhelpsен you find optimal solutions and effectively interact with the parents of a newborn child in need of examination and treatment or their legal representatives, their environment, and health professionals in order to achieve the	Does not apply the basics of communication skills for interacting with a neonatal patient and their environment. Makes gross mistakes when interacting with healthcare professionals. It does not achieve positive results for a neonatal patient.	Demonstrates insufficient communication skills in interacting with a neonatal patient and their environment. Makes mistakes when interacting with healthcare professionals. Does not fully achieve the best results for a neonatal patient.	Able to effectively interact with neonatal patients and their environment using communication skills. Able to interact with healthcare professionals in order to achieve better outcomes for the neonatal patient.	Independently effectively uses communication skills of interaction with the neonatal patient and his environment. Independently collaborates with healthcare professionals in order to achieve the best results for the neonatal patient.

	best results for the patient.				
LO 3	are able topresenttheir position reasonably in adequate researchx questionsax, critically analyze professional literature, effectively use international databases in their daily activities, and are ready to participate in the work of the research team.	Unable to formulate adequate research questions in the field of neonatology. He Unable to critically evaluate professional literature. Does not participate in the work of the research team.	Makes mistakes in the formulation of adequate research questions in the field of neonatology. Insufficiently able to critically evaluate professional literature. Passive to participate in the work of the research team.	Able to formulate adequate research questions in the field of neonatology. Able to critically evaluate professional literature. Heis involved in the work of the research team.	Independently formulates adequate research questions in the field of neonatology. Independently critically evaluates professional literature. Independently effectively uses international databases in its daily activities. Actively participates in the work of the research team.
10.2	**Evaluation criteria:**				
	Checklists for practical training:				
	Form of control	**Evaluation**	**Evaluation criteria**		
	Checklists: Aboutthe pricethe of current control (OTC): Oral response.	Excellent ccorresponds to the ratings: A (4.0; 95-100%) A- (3.67; 90-94%)	The resident did not make any mistakes or inaccuracies during the response. Focuses on the theory, concepts and directions of the discipline under study using monographs and manuals of recent years, from the Internet and gives them a critical assessment, uses scientific achievements of other disciplines. Together with the curator, he actively participated in medical rounds, consultations, reviewing medical records and providing neonatal care to newborns.		
		Good witho corresponds to estimates: B+ (3.33; 85-89%)	During the response, the resident did not make any gross mistakes in the response, made unprincipled inaccuracies, and managed to systematize the program material using a textbook. Malo participated with the curator in medical rounds, consultations, reviewing		

		B (3.0; 80-84%) B - (2.67; 75-79%) C+ (2.33; 70-74%)	medical records and providing neonatal care to newborns.
		Satisfactorily meetsthe following ratings: C (2.0; 65-69%); C- (1.67; 60-64%); D+ (1.3333; 55-5-59%) D (1.00; 50-54%)	The resident made inaccuracies and unprincipled mistakes during the response, limited himself only to widely known educational literature, and experienced great difficulties in systematizing the material. Rarely participated with the curator in medical rounds, consultations, reviewing medical records and providing neonatal care to newborns.
		Неудовлетворительно Unsatisfactorymeetsthe following ratings: FX (0.5; 25-49%) F (0; 0-224%)	The resident made fundamental mistakes during the answer, did not study the literature on the topic of the lesson; did not know how to use the scientific terminology of the discipline, answered with gross stylistic and logical errors. Did not participate with the curator in medical rounds, consultations, reviewing medical records and providing neonatal care to newborns.
	Checklists: Solving situational problems. Analysis of specific situations (Case study).	Excellent ccorresponds to the ratings: A (4.0; 95-100%) A- (3.67; 90-94%)	➢ Analysis of the clinical situation: a logical, consistent, in-depth analysis of the clinical problem; ➢ Correct formulation of the preliminary and / or clinical diagnosis: the diagnosis is formulated completely and correctly (with all the necessary characteristics); ➢ Justification of the diagnosis: clearly and reasonably, using clinical and laboratory data; ➢ Differential diagnosis: correctly selected and reasoned possible differential diagnoses; ➢ Examination plan: the examination is complete, corresponds to the clinical task; ➢ Treatment plan: treatment meets the standards, takes into account age characteristics; ➢ Prognosis and prevention: formulated correctly and reasonably; ➢ Design and logic of presentation: the solution is designed correctly, stated logically; Complete, logically constructed and reasoned analysis of the clinical situation. All key aspects are indicated: complaints, medical history, objective status, preliminary and differential diagnosis, examination plan, reasonable treatment and prevention. The solution complies with current clinical protocols and guidelines.
		Good witho corresponds to estimates: B+ (3.33; 85-89%)	➢ Analysis of the clinical situation: the analysis is partially correct, there are gaps or errors; ➢ Correct formulation of the preliminary and / or clinical diagnosis: the diagnosis is

		B (3.0; 80-84%) B - (2.67; 75-79%) C+ (2.33; 70-74%)	partially formulated or with errors; ➢ Justification of the diagnosis: partially justified, incomplete analysis of data; ➢ Differential diagnosis: partially correct choice of diff. diagnoses; ➢ Examination plan: the examination is partially complete, there are shortcomings; ➢ Plan of diagnosis: partially complete, there are shortcomings. treatments: treatment is partially correct, there are inconsistencies; ➢ Prognosis and prevention: partially correct; ➢ Presentation design and logic: there are structural or language errors; Generally correct solution of the problem. The main stages of clinical thinking are indicated. There are some inaccuracies (for example, one of the points of the differential diagnosis is omitted or the choice of treatment is not fully justified) that do not affect the correctness of the main diagnosis and tactics.
		Satisfactorily meetsthe following ratings: C (2.0; 65-69%); C- (1.67; 60-64%); D+ (1.3333; 55-5-59%) D (1.00; 50-54%)	➢ Analysis of the clinical situation: superficial analysis, gross errors. ➢ Correct formulation of the preliminary and / or clinical diagnosis: incorrect diagnosis or no diagnosis. ➢ Justification of the diagnosis: there is no justification or does not correspond to the task data. ➢ Differential diagnosis: gross errors or lack of differentiation. ➢ Survey plan: incorrect or incomplete survey plan. ➢ Treatment plan: the treatment is incorrect or missing. ➢ Prognosis and prevention: there is no prognosis or it is unfounded. ➢ Presentation design and logic: unstructured or illegible response. Partially correct solution. There are significant omissions (for example, an unrecognized key link in the diagnosis or an incomplete examination plan). There may be 1-2 diagnostic or tactical errors, but a general understanding of the clinical situation is present.
		Неудовлетворительно Unsatisfactorymeetsthe following ratings: FX (0.5; 25-49%) F (0; 0-224%)	➢ Analysis of the clinical situation: gross errors. ➢ Correct formulation of the preliminary and / or clinical diagnosis: no diagnosis. ➢ Justification of the diagnosis: there is no justification for the diagnosis. ➢ Differential diagnosis: lack of differentiation. ➢ Survey plan: Incorrect survey plan. ➢ Treatment plan: no treatment available.

			➢ Prognosis and prevention: no prognosis. ➢ Presentation design and logic: unstructured response. Incorrect or unsystematic analysis of the situation. Key errors in the diagnosis or management of the patient. There is no clinical logic, and actions do not comply with current recommendations.
	Checklists: Criteria for evaluating practical skills, professionallevel skills.	Excellent ccorresponds to the ratings: A (4.0; 95-100%) A- (3.67; 90-94%)	Collection of medical history: systematically collected, the medical history fully reflects the dynamics of the disease; Physical examination: performed systematically, technically correctly and effectively; Making a preliminary diagnosis: correctly established, justified; Appointment of laboratory and instrumental methods of research for the disease: complete and adequate; Examination (interpretation) of the results of the patient's study): completely and correctly; Differential diagnosis: completely; Final diagnosis and its justification: complete, justified; Treatment choice: treatment is very adequate; Understand the mechanism of action of the prescribed treatment: completely; Determination of prognosis and prevention: adequate, complete.
		Good witho corresponds to estimates: B+ (3.33; 85-89%) B (3.0; 80-84%) B - (2.67; 75-79%) C+ (2.33; 70-74%)	Collection of medical history: systematically collected, but without sufficient clarification of the nature of the main symptoms and possible causes of their occurrence; Physical examination: systematic, but minor technical inaccuracies; Making a preliminary diagnosis: established correctly, but there is no justification; Appointment of laboratory and instrumental methods of research for the disease: adequate, but with minor shortcomings; Examination (interpretation) results of the patient's study): correct with minor inaccuracies; Differential diagnosis: proven, but not with all similar diseases; Final diagnosis and its justification: the diagnosis of the underlying disease is complete, but concomitant diseases are not specified; Treatment choice: correct, but not complete enough or polypharmacy; Understand the mechanism of action of the prescribed treatment: mistakes in insignificant details; Determining the prognosis and prevention: adequate, but not complete.

		Satisfactorily meetsthe following ratings: C (2.0; 65-69%); C- (1.67; 60-64%); D+ (1.3333; 55-5-59%) D (1.00; 50-54%)	Anamnesis collection: collected with a record of facts that do not give an idea of the essence of the disease and the sequence of symptoms; Physical examination: complete with failed errors; Making a preliminary diagnosis: the leading syndrome is identified, but there is no diagnostic conclusion; Appointment of laboratory and instrumental methods of research for the disease: not quite adequate; Examination (interpretation) of the results of the study the patient): partially correct with significant errors; Differential diagnosis: Incomplete; Final diagnosis and its justification: the diagnosis is insufficiently justified, no complications or concomitant diseases were detected; Treatment choice: treatment for the main and auxiliary diseases is incomplete; Understand the mechanism of action of the prescribed treatment: Half-hearted; Determination of prognosis and prevention: insufficiently adequate and incomplete.
		Неудовлетворительно Unsatisfactorymeetsthe following ratings: FX (0.5; 25-49%) F (0; 0-224%)	Anamnesis collection: randomly collected details that are not relevant for the diagnosis of facts; Physical examination: does not have manual skills; Making a preliminary diagnosis: an errorwas made; Appointment of laboratory and instrumental methods of research for the disease: contraindications were assigned; Examination (interpretation) of the patient's research results): in most cases, it is incorrect; Differential diagnosis: productive; Final diagnosis and its justification: the diagnosis is justified chaotically, less convincingly; Treatment choice: Reverse-acting drugs are prescribed; Understand the mechanism of action of the prescribed treatment: Cannot explain correctly; Determination of prognosis and prevention: I couldn't identifyit.
	CRR and CRR checklists:		
	Check lists: "Score 360⁰" of the mentor.	Excellent ccorresponds to the ratings: A (4.0; 95-100%)	Preparation: Continuous self-education: for example, anchors statements with appropriate references, compiles a short summary; Responsibility: Takes responsibility for your own learning: for example, manages your

		A- (3.67; 90-94%)	curriculum, actively strives for improvement, critically evaluates information resources; Participation: Actively participates in group learning: for example, actively participates in discussions, takes tasks carefully; Group skills: Demonstrates effective group skills, for example, takes the initiative, shows respect and decency towards others, helps in resolving misunderstandings and conflicts; Communication: Artificial in communicating with peers: for example, is prone to nonverbal and emotional signals, actively listens; Professionalism: Highly developed professional skills: for example, excellent participation, confidence, attentive perception of feedback and the ability to learn from it; Reflection: Withamoanalysis is high: for example, he is aware of the limitations of his knowledge or abilities, without becoming defensive or alerting others; Critical thinking: Highly developed critical thinking: demonstrates skills in performing basic tasks, such as generating hypotheses, applying knowledge to the results of practice, critically evaluating information, making conclusions out loud, explaining the thought process; Training: Effective learning skills: reflects a report on problematic issues related to the situation under consideration and in an appropriately structured manner. Uses notes or summarizes material for others to better remember; Practical skills: Committed to execution, looking for opportunities, reliable and qualified.
		Неудовлетворительно Unsatisfactorymeetsthe following ratings: FX (0.5; 25-49%) F (0; 0-224%)	Preparation: No desire for self-improvement, for example, insufficient study and study of problematic issues, insignificant contribution to the group's knowledge, does not accumulate material; Responsibility: Does not take responsibility for its own training: for example, in connection with others in the implementation of the training plan, hides mistakes, rarely critically analyzes resources; Participation: Inactive in the group learning process: for example, inactive in the discussion process, accepts tasks carefully; Group skills: Demonstrates ineffective group skills, such as inappropriate interference, demonstrates poor discussion skills, interrupts, evades answers or ignores others, dominates or shows intolerance; Communication: Communication with peers is difficult: for example, poor communication

			skills. listening skills are unable or inclined to pay attention to nonverbal or emotional cues; Professionalism: Lack of professional behavior: for example, behavior without a reason, uncertainty, difficulty receiving feedback; Critical thinking: Lack of critical thinking: for example, has difficulty performing basic tasks. As a rule, does not put forward hypotheses, does not apply knowledge in practice, or cannot critically evaluate information due to their lack, or due to inattention (lack of induction); Training: Ineffective training skills: low level of reports on problematic issues regardless of the situation under consideration and in a poorly structured style. Inefficient use of notes, doesn't prepare notes, can't summarize the material, can't explain the material to others; Practical skills: Uncomfortable, afraid, even refuses to perform basic procedures.
	Check lists: "Score 360⁰" department head.	Excellent ccorresponds to the ratings: A (4.0; 95-100%) A- (3.67; 90-94%)	Reliability: Responsible, committed to being useful; Response to instructions: Responds correctly, consistently improves, learns from mistakes; Training: Has a good knowledge and outlook, strives for more knowledge; Attitude to the patient: Reliable and captivating; Attitude to colleagues: Sets the tone for mutual respect and dignity; Attitude to medicalstaff: Sets the tone mutual respect and dignity; Acting under stress: Full self-management, constructive decisions; Group skills: Can organize work or be an effective team member; Maintaining a medical history: Competently, accurately, in a timelymanner; Practical skills: Committed to execution, looking for opportunities, reliable and qualified.
		Неудовлетворительно Unsatisfactorymeetsthe following ratings: FX (0.5; 25-49%) F (0; 0-224%)	Reliability: Unclear, unreliable; Response to instructions: No response, no improvement; Training: No desire, no knowledge; Attitude to the patient: No personal contact; Attitude to colleagues: Unreliable; Attitude to medicalstaff: Unreliable, rude; Actions under stress: Not adequate, stupor; Group skills: Unreliable or spoiler; Medical history management: Careless, incorrect, not on time; Practical skills: Inconvenient, he is afraid, even refuses to perform the basic procedures

	of checklists: "Rating 360⁰" of a resident.	Excellent ccorresponds to the ratings: A (4.0; 95-100%) A- (3.67; 90-94%)	Reliability: Responsible, strives to be useful; Response to instructions: Responds correctly, consistently improves, learns from mistakes; Training: Has a good knowledge and outlook, strives for more knowledge; Attitude to the patient: Reliable and captivating; Attitude towards colleagues: Sets the tone of mutual respect and dignity; Attitude towards medicalstaff: Sets the tone of mutual respect and dignity; Actions under stress: Full self-management, constructive decisions; Group skills: Can organize work or be an effective team member; Maintaining a medical history: Competently, accurately, in a timelymanner; Practical skills: Committed to execution, looking for opportunities, reliable and qualified.
		Неудовлетворительно Unsatisfactorymeetsthe following ratings: FX (0.5; 25-49%) F (0; 0-224%)	Reliability: Unclear, unreliable; Response to instructions: No response, no improvement; Training: No desire, no knowledge; Attitude to the patient: No personal contact; Attitude to colleagues: Unreliable; Attitude to medicalstaff: Unreliable, rude; Actions under stress: Not adequate, stupor; Group skills: Unreliable or interrupted; Medical history management: Careless, incorrect, not on time; Practical skills: Inconvenient, afraid, even refusing to perform basic procedures.
	Check lists: "Score 360⁰" of the doctor on duty.	Excellent ccorresponds to the ratings: A (4.0; 95-100%) A- (3.67; 90-94%)	Reliability: Responsible, committed to being useful; Response to instructions: Responds correctly, consistently improves, learns from mistakes; Training: Has a good knowledge and outlook, strives for more knowledge; Attitude to the patient: Reliable and captivating; Attitude to colleagues: Sets the tone for mutual respect and dignity; Attitude to medicalstaff: Sets the tone mutual respect and dignity; Acting under stress: Full self-management, constructive decisions; Group skills: Can organize work or be an effective team member; Maintaining a medical history: Competently, accurately, in a timelymanner; Practical skills: Committed to execution, looking for opportunities, reliable and qualified.
		Неудовлетворительно	Reliability: Unclear, unreliable;

		Unsatisfactorymeetsthe following ratings: FX (0.5; 25-49%) F (0; 0-224%)	Response to instructions: No response, no improvement; Training: No desire, no knowledge; Attitude to the patient: No personal contact; Attitude to colleagues: Unreliable; Attitude to medicalstaff: Unreliable, rude; Actions under stress: Not adequate, stupor; Group skills: Unreliable or interrupted; Medical history management: Careless, incorrect, not on time; Practical skills: Inconvenient, afraid, even refusing to perform basic procedures.
	Check lists: DOPS rating.	Excellent ccorresponds to the ratings: A (4.0; 95-100%) A- (3.67; 90-94%)	The procedure was performed completely correctly, competently and safely. All steps are met. Communication is at a high level. The design was completed correctly.
		Good witho corresponds to estimates: B+ (3.33; 85-89%) B (3.0; 80-84%) B - (2.67; 75-79%) C+ (2.33; 70-74%)	Generally correct execution, but there are 1-2 minor errors (for example, small deviations in technique or wording). Patient safety is not compromised.
		Satisfactorily meetsthe following ratings: C (2.0; 65-69%); C- (1.67; 60-64%); D+ (1.3333; 55-5-59%) D (1.00; 50-54%)	The procedure was performed with several errors, but no gross violations. The clinical outcome is achieved, but there are gaps in logic, technique, or communication.
		Неудовлетворительно Unsatisfactorymeetsthe following ratings: FX (0.5; 25-49%) F (0; 0-224%)	Serious violations of methods, techniques, or safety rules. Lack of understanding of the procedure. Errors that may affect the patient's condition.
	Checklists:	Excellent ccorresponds to the	The presentation was made independently, on the designated time frame, with a volume of

	Preparation ofthematic messages in the form of presentations on the topic.	ratings: A (4.0; 95-100%) A- (3.67; 90-94%)	at least 20 slides. At least 5 literary sources were used. The slides are informative and concise. During the defense, the author demonstrates deep knowledge of the topic. Makes no mistakes when answering questions during a discussion.
		Good witho corresponds to estimates: B+ (3.33; 85-89%) B (3.0; 80-84%) B - (2.67; 75-79%) C+ (2.33; 70-74%)	The presentation was made independently, on the designated time frame, with a volume of at least 20 slides. At least 5 literary sources were used. The slides are informative and concise. During the defense, the author demonstrates good knowledge of the topic. Makes unprincipled mistakes when answering questions that he corrects himself.
		Satisfactorily meetsthe following ratings: C (2.0; 65-69%); C- (1.67; 60-64%); D+ (1.3333; 55-5-59%) D (1.00; 50-54%)	The presentation was made independently, on the designated time frame, with a volume of at least 20 slides. At least 5 literary sources were used. The slides are not informative. When defending, the author makes fundamental mistakes when answering questions.
		Неудовлетворительно Unsatisfactorymeetsthe following ratings: FX (0.5; 25-49%) F (0; 0-224%)	The presentation is not delivered in the designated SRRk, the volume is less than 20 slides. Less than 5 literary sources were used. The slides are not informative. When defending, the author makes gross mistakes when answering questions. It doesn't know its own content.
	Checklists: Criteria for evaluating a resident's independent work. Analysis of scientific articles.	Excellent ccorresponds to the ratings: A (4.0; 95-100%) A- (3.67; 90-94%)	Demonstrates knowledge and understanding of research in the field of medicine: Knowledge is systematic, fully reflects the understanding of research in the field of medicine; Is able to solve problems within their qualifications based on scientific approaches: The solution is correct; Uses scientific information and principles of evidence-based medicine for development within their qualifications: fully justified; Demonstrates introspection skills: Uses in full; Uses public speaking and public speaking at nosocomial conferences, seminars, discussions: In full, adequately; Is able to conduct research and work for scientific results: Participates and tells, wins the

			audience, convinces itsown; Research in the field of medicine shows knowledge and understanding: Conducts research, summarizes results research, publishes.
		Good witho corresponds to estimates: B+ (3.33; 85-89%) B (3.0; 80-84%) B - (2.67; 75-79%) C+ (2.33; 70-74%)	Demonstrates knowledge and understanding of research in the field of medicine: Knowledge with a record of facts that do not give a complete picture of the essence of the research; Is able to solve problems within the framework of their qualifications based on scientific approaches: The solution is correct; Uses scientific information and principles of evidence-based medicine to develop within the framework of their qualifications: grounds partially; Demonstrates introspection skills: Partially uses; Uses public speaking and public speaking at in-hospital conferences, seminars, discussions: adequate, but with minor errors; Is able to conduct research and work on scientific results: Unimportant speeches and reports; Research in the field of medicine shows knowledge and understanding: Conducts research, partial conclusions, incomplete analysis.
		Satisfactorily meetsthe following ratings: C (2.0; 65-69%); C- (1.67; 60-64%); D+ (1.3333; 55-5-59%) D (1.00; 50-54%)	Demonstrates knowledge and understanding of research in the field of medicine: clarification of facts, does not matter; Is able to solve problems within their qualifications based on scientific approaches: Makes decisions with difficulty, can not justify; Uses scientific information and principles of evidence-based medicine for development within their qualifications: Uses unreliable or incomplete information; Demonstrates introspection skills: the diagnosis is not detailed, there is little trust; Uses public speaking and public speaking at nosocomial conferences, seminars, discussions: Rarely participates, without enthusiasm Is able to conduct research and work for scientific results: Conducts research, but systematizes them; Research in the field of medicine shows knowledge and understanding: With clarification of facts that do not matter.
		Неудовлетворительно	Demonstrates knowledge and understanding of medical research: Does not show;

		Unsatisfactorymeetsthe following ratings: FX (0.5; 25-49%) F (0; 0-224%)	Is able to solve problems within their qualifications based on scientific approaches: Cannot solve problems; Uses scientific information and principles of evidence-based medicine for development within their qualifications: Does not use; Demonstrates introspection skills: Does not show; Uses public speaking and public speaking at public events. in-hospital conferences, seminars, discussions: Does not participate; Is able to conduct research and work for scientific results: Does not conduct research; Research in the field of medicine shows knowledge and understandingof: it doesn't showup.
	Check lists: Portfolio evaluation.	Excellent ccorresponds to the ratings: A (4.0; 95-100%) A- (3.67; 90-94%)	➢ The portfolio contains all the required sections (topics, reports, reflections, presentations, etc.). ➢ Each part is made efficiently, logically, and neatly designed. ➢ There is clearly an individual work, an independent approach. ➢ There are examples of participation in research activities (questionnaires, analyses, statistics, reviews, etc.). ➢ Modern sources are used, ethical standards are observed.
		Good witho corresponds to estimates: B+ (3.33; 85-89%) B (3.0; 80-84%) B - (2.67; 75-79%) C+ (2.33; 70-74%)	➢ All the main sections are present. ➢ Most of them are executed correctly, but in some places there are stylistic or logical flaws. ➢ There is some analysis and conclusions, but they are not always deep enough. ➢ The design is generally neat, but with minor flaws.
		Satisfactorily meetsthe following ratings: C (2.0; 65-69%); C- (1.67; 60-64%); D+ (1.3333; 55-5-59%) D (1.00; 50-54%)	➢ The portfolio sections are partially missing or incomplete. ➢ The content is fragmentary, and some topics are covered superficially. ➢ A lot of formal material, little analytics. ➢ The design is sloppy or doesn't meet the requirements.
		Unsatisfactory	➢ The portfolio is missing or almost completely unfilled.

		Unsatisfactorymeetsthe following ratings: FX (0.5; 25-49%) F (0; 0-224%)	➢ The content does not reflect the work in the discipline. ➢ Basic requirements for the structure and design were violated.
	Checklist forborder control:		
	Check lists: Standard control.убежный контрол Mini clinical exam to assess practical skills at the patient's bedside.	Excellent ccorresponds to the ratings: A (4.0; 95-100%) A- (3.67; 90-94%)	РезиThe patient confidently and competently performs all stages of the child's examination. Demonstrates a deep knowledge of the age norm, clinical thinking, and the correct examination technique. Communication with parents and children is correct and professional. There are no errors.
		Good witho corresponds to estimates: B+ (3.33; 85-89%) B (3.0; 80-84%) B - (2.67; 75-79%) C+ (2.33; 70-74%)	The task was completed correctly, but minor inaccuracies were made (in the sequence of actions, in the formulation of the diagnosis, or in the explanation). These shortcomings do not affect the outcome and safety of the patient. Communication is generally good.
		Satisfactorily meetsthe following ratings: C (2.0; 65-69%); C- (1.67; 60-64%); D+ (1.3333; 55-5-59%) D (1.00; 50-54%)	There are significant shortcomings: missed examination stages, partially incorrect interpretation of data, or a superficial medical history. Communication needs improvement. Clinical thinking is not always logical. The mistakes are not gross, but they are significant.
		Unsatisfactory Unsatisfactorymeetsthe following ratings: FX (0.5; 25-49%) F (0; 0-224%)	Serious mistakes in technique, logic, or professional behavior. Misunderstanding of the task. The basic principles of interaction with the child and parents are violated. Clinical thinking is poorly developed. There is a risk for the patient.
	Multi-global knowledge assessment system.		

Letter system score	Digital equivalent Points	Percentage	Traditional system score
A	4.0	95-100	**Excellent**
A -3.67	3,67	90-94	

B +	3.33	85-89	**Good**
B	3.0	80-84	
B -2.67	2,67	75-79	
C +	2.33	70-74	
C	2.0	65-69	**Satisfactory**
C -1.67	1,67	60-64	
D+	1.33	55-59	
D-	1.0	50-54	
FX	0.5,5	25-49	**Not satisfactory**
F	0	0-24	

11.	**Training resources:**
Electronic resources, including, but not limited to: databases, animation simulators, professional blogs, websites, and other electronic reference materials (such as videos, audio, and digests):	1. SKMA Electronic Library - https://e-lib.skma.edu.kz/genres 2. Republican Interuniversity Electronic Library (RSEB) – http://rmebrk.kz/ 3. Aknurpress Digital Library «Aknurpress- https://www.aknurpress.kz/4 . Epigraph Electronic Library - http://www.elib.kz / 5. Epigraph-portal of multimedia textbooks https://mbook.kz/ru/index/ 6. EBS IPR SMART https://www.iprbookshop.ru/auth 7. Information andlegal system "Abroad" - https://zan.kz/ru 8. Cochrane Library - https://www.cochranelibrary.com/Электронные
tutorials:	1. Children's diseases, Vol. 1 [Electronic resource] : textbook / A.M. Zaprudnov, K. I. Grigoriev, L. A. Kharitonova. - 2nd ed. - Electron. text messages. (108Mb). - M. : GEOTAR - Media, 2013. - 768 p . 2. Detsky bolezni, Vol. 2 [Children's diseases] : textbook / A.M. Zaprudnov, K. I. Grigoriev, L. A. Kharitonova. - 2nd ed., reprint. and an additional Electron . text data - M.: GEOTAR-Media, 2013. - 752 p. 3. Нәрестелердегі физиологиялық және неонатальды сарғаю кезіндегі ана сүтімен емізудің ерекшеліктері / Г. Н. Түктібаева [және т.б.] // ОҚМФА хабаршысы. - 2016. - №1. - С. 106-108. 4. Жаңа туған нәрестенің жаәдайының ана жасына байланыстылығы/ А. Ж. Даниярова [және т. б.] // ОҚММА хабаршысы. - 2004. - No. 18-19. - 199 bet. Бектенова Г.Е., Моренко М.А. Ерте жастағы балалар аурулары. Оқу құралы. 2017

	https://aknurpress.kz/reader/web/1573 5. Zholdybaeva A.M., R. R. Eleuova. Балалар аурулары: Оқу құралы. 2015. ЦБ Aknurpress / https://aknurpress.kz/reader/web/2473 6. Әбдірахманов Қ.Б. оқу құралы / Қ.Б. Әбдірахманов. - Almaty: Evero, Neonatology: 2020. - 312 b. Epigraph/ https://www.elib.kz/ru/search/read_book/5/Журналы
(electronic journals):	
References:	**main page:** 1. Балалар аурулар : оқулық / ред. басқ. А. А. Баранов; қаз. тіліне аударған және жауапты ред. Б. Т. Түкбекова. - 2-бас., түзет. және толықт. - М. : ГЭОТАР - Медиа, 2015. - 1024 бет. 2. Приз, В. Н. Балалар мен жасөспірімдердің денсаулық жағдайын және сырқаттанушылығын бағалау : оқу құралы = Assessment of the state of health and morbidity in children and adolescents: textbook. manual / V. N. Priz, G. N. Talieva. Almaty : Evero Publ., 2013, 116 bet. 3. Запруднов, А. М. Балалардың жалпы күтімі : тәжірибелік сабақтар мен мейіргерлік практикаға нұскаулық: оқу құралы / А. М. Запруднов, К. И. Григорьев ; қаз.тіл.ауд.Б. С. Қошқарбаева. - M-vo obraz. and Science of the Russian Federation. Rec. GOE DPO " Ros. med. acad. postgraduate education", Moscow: GEOTAR-Media, 2018. 4. Shabalov, N. P. Neonatology. In 2 vols. Vol. 1: textbook. manual / N., P. Shabalov. 5. Shabalov, N. P. Neonatology, Moscow : Medpress-inform, 2009, 736 p. (in Russian). In 2 vols. Vol. 2: textbook. manual / N. P. Shabalov. -5th ed., ispr. and add. - Moscow : Medpress-inform, 2009. - 768 p . 6. Neonatology: a textbook for students. higher level. study. institutions / N. N. Volodin [et al.]; edited by N. N. Volodin. Moscow: Publishing Center "Akademiya", 2005, 448 p. 7. Clinical protocols of neonatological diseases of the Ministry of Health of the Republic of Kazakhstan. **additional information:** 1. Әбдірахманов, Қ. Б.Неонатология : оқу құралы / ҚР ДСМ; Мед. білімі мен ғыл. инновациялық технологиялар Респ. Орталығы; М. Оспанов атындағы БҚММУ. Almaty : Evero Publ., 2010, 312 bet. 2. Grigoriev K. I. Pediatrics: handbook of a practical doctor / K. I. Grigoriev. - 3rd ed. - Moscow: Medpress-inform, 2014. - 816 p.: il 3. Clinical guide to parenteral nutrition in pediatrics and neonatology (short version): brochure. -

Astana : B. I., 2013.
4. A premature newborn. Modern approaches to medical examination at the pediatric site: textbook. the manual. / Kazan State Medical University. akad; comp. by N. L. Rybkin. Kazan, 2016, 36 p.
5. Late premature newborns. Features of observation in the neonatal period: textbook. the manual. / Kazan State Medical University. akad; comp. N. L. Rybkin]. - Kazan, 2016. - 28 p. - 10
6. Alyamovskaya G. A., Keshishyan E. S., Sakharova E. S. Osobennosti fizicheskogo razvitiya glubokogo nedonoshennykh detey [Features of physical development of deeply premature infants] // Russian Bulletin of Perinatology and Pediatrics.-2015.-No. 4.-pp. 11-18-.

12. Discipline Policy:

Requirements for a resident, attendance, behavior, grading policy, penalty measures, incentive measures, etc.

1. Come to classes in a uniform (dressing gown, cap);
2. Be punctual and mandatory;
3. Attendance of SRRN classes is mandatory. In case of absence of a resident on the SRR, a mark "n" is made in the educational and electronic journal;
4. Actively participate in the educationalin process;
5. Don't be late, don't skip classes. In case of illness, submit a certificate and a work-out list indicating the completiondate, which is valid for 30 days from the moment it is received at the dean's office;
6. Missed classes for disrespectful reasons are not worked out. A residentwho skips classes for a disrespectful reason in the electronic journal next to the "h" mark is given a score of " 0 " and penalty points are deducted:
   - the penalty point for skipping 1 lecture is 1.0 points from the border control assessments;
   - the penalty point for skipping 1 SRN lesson is 2.0 points from the SRN assessments;
7. Each resident must complete all forms of CRR assignments and complete them on schedule.
8. For each practical session and SRR, all residents should prepare in a timely and precise manner and take an active part in the discussion of the topic.
9. All types of written works of residents (essays, presentations, etc.) are checked for plagiarism.
10. Be responsible for the sanitary condition of your workplace and personal hygiene.
11. Eating in classrooms is strictly prohibited.
12. Follow the safety regulations in classrooms.
13. Comply with the Academy's internal regulations and ethics of conduct.
14. Be tolerant, open and friendly to fellow students and teachers.
15. Carefully treattheproperty of the department.
16. Turn off cell phones during school hours.

13. Academic policy based on the moral and ethical values of the Academy:

13.1	Clause 4 of the Resident's Code of Honor.
13.2	RATING POLICY: **Policies and procedures:** general requirements of the department for a resident in the course of study, penalties for non-compliance with sections of work, etc. ***For example:*** 1. in the absence of a health record for a practical lesson; 2. strict compliance with medical uniforms (dressing gowns, masks, cap, additional shoes); 3. strict compliance with personal hygiene and safety in the hospital; 4. duty in the emergency department; 5. strict compliance with internal regulations, warm communication with patients, doctors, with the staff of the department. ***Penalties:*** A resident who skipped 3 classes without a valid reason is issued a report to the residency department. Missed classes are compensated for by being on duty in the hospital, a literature review and an abstract. Final control: the exam is conducted in 2 stages: testing /interview and evaluation of practical methods. Residents who have fully mastered the program of the discipline and scored a threshold rating are allowed to take the exam. ***Calculation of the pass rating:*** Assessment of residents ' knowledge is carried out according to a point-rating letter system, according to which 60% is current control, 40% is final control. **The finalая assessment of the discipline** is calculated automatically based on the average assessment of the current control, the average assessment of border controls and the assessment of the final control: Final assessment (100%) = Admission rating (60%)+ Final control (40%). Admission rating (60%) = Average score of border controls (20%)+ Average rating of the current control (40%). Average score of border controls = Border control 1 + Border control 2 / 2 Average score of the current control=the arithmetic mean sum of the current scores, taking into account the average score for the CRR. Final score (100%) = RKsr x 0.2 + TKsr x 0.4 + IR x 0.4 RKsr – average score of boundary controls; TKsr – average score of current control; IR-score of final control. A resident who has completed the training program and completed the individual curriculum is allowed to complete the Final Certification. The purpose of the final certification is to assess the learning outcomes and competencies achieved upon completion of the residency program. **The final certification** is carried out in accordance with the final results of training and includes two stages:

	1) knowledge assessment (computer testing); **2) skills assessment.** The purpose of the final certification is to assess the professional readiness of graduates upon completion of the study of the educational residency program. Upon receiving positive results of the assessment of knowledge and skills in the program, the resident is issued a certificate of completion of the residency. These data are also the basis for issuing a specialist certificate. **Final Assessment Appeal rules:** If the resident is dissatisfied with his / her grades obtained during the exam or test control; If there is a disagreement between the teacher and the resident on some issues (tests and tickets); If the exam tickets or test questions are compiled incorrectly or incorrectly and do not correspond to the topic. A residentwho does not agree with the result of the final control, submits an appeal no later than 13: 00 hours of the next business day after the exam results are issued. The appeal commission must review the application within one day and make an appropriate decision on reviewing the assessment or maintaining the original assessment received. The decision of the appeal commission is made on the basis of re -examination of the resident's work. The decision of the appeal commission is reflected in the application of the resident, on the basis of which the exam sheet is compiled. The decision of the appeals commission is sent to the registrar's office in writing, together with the examination report.

14.	Approval and revision:		
Date of approval	Protocol No	. Full name of the Headof the Department and Chairman of the AK OP	Signature
Date of approval with the Library and Information Center	Protocol No. _7_	Darbicheva R.I.	
04.06.2025			
Date of approval at the department	Protocol No. _11_	Bektenova G. E.	
24.06.2025			
Date одобрof approval for ATo OP	Protocol No. _52_	Bektenova G. E.	
26.06.2025			
Date of revision	Protocol No. ___	Bektenova G. E.	
Date of revision on ATo OP	Protocol No. ___	Bektenova G. E.	