

SYLLABUS

General medical training (ophthalmology, neurology, including neurostomatology, module 3. Dermatology, venereology, psychiatry, narcology, medical psychology, physical rehabilitation, sports medicine, endocrinology)

Compulsory discipline

level of higher education	the second (master's) level of higher education
field of knowledge	22 "Healthcare"
specialty	221 «Dentistry»
academic qualification	Master of Denistry
professional qualification	Dentist
academic and professional program	221 «Dentistry»
mode of study	full-time
course and semester of study of the discipline	4 course, VIII semester

Module 3. Dermatology, venereology

INFORMATION ABOUT LECTURERS WHO DELIVER THE ACADEMIC DISCIPLINE

Last name, first name, patronymic of teachers, scientific degree, academic title	Ishcheikin Kostiantyn Yevhenovych, Professor Dudchenko Mykola Oleksiiovych, Professor Kravchenko Volodymyr Hryhorovych, Professor Popova Iryna Borysivna, Associate Professor Yemchenko Yana Oleksandrivna, Associate Professor Vasylyva Kateryna Volodymyrivna, Associate Professor Kameniev Volodymyr Ivanovych, Associate Professor Bezeha Olena Viktorivna, Assistant
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MAIN CHARACTERISTICS OF THE ACADEMIC DISCIPLINE

The scope of the academic discipline

Number of credits / hours - **1,5 / 45**, of which:

Lectures (hours) - **4**

Practical classes (hours) - **16**

Self-directed work (hours) - **25**

Type of control - **FMC**

The policy of the academic discipline

When organizing the educational process in PSMU teachers and students act in accordance with:

Regulations on the organization of the educational process in the Poltava State Medical University (https://www.pdmu.edu.ua/storage/department-npr/docs_links/EXHOB4YrpFJqaqUWjwI3e7GhMA6TcAWDd7yVXYjO.pdf);

Regulations on the academic integrity of higher education seekers and employees of the Poltava State Medical University (https://www.pdmu.edu.ua/storage/n_process_vimo/docs_links/WwK8jif9Fb1SzyjXCStiqjWVmat8x3J9QFHekKWx.pdf);

Rules of procedure for students of the Poltava State Medical University (https://www.pdmu.edu.ua/storage/department-npr/docs_links/OaN2nwysLPFAUDRvuDPvFSpzM1j9E9CwQQkgr93b.pdf) etc.

Students come to class according to the schedule. Late for classes is not allowed. Classes are held without a break. There is a dressing room in the hospital where students change clothes. During their stay, students at the department must adhere to a professional dress code, which provides a medical form - a robe and a medical cap, preferably white, perfectly clean, ironed. It is not allowed to wear hats in the department. It is forbidden to wear a medical uniform under outerwear and outside the area of the clinical base. Compliance with the specified dress code is ensured on the basis of moral self-control of each student.

Description of the academic discipline (summary). The study of module 3. Dermatology, venereology is based on the knowledge gained by students in the study of medical biology, normal and pathological anatomy, normal and pathological physiology, histology, embryology, microbiology, pharmacology, internal diseases, surgical diseases, hygiene, social medicine and integrates with these disciplines.

Acquired knowledge in the learning process, acquired at the end of the study of module 3. Dermatology, venereology necessary for the study of therapy, family medicine, endocrinology, pediatrics, surgery, urology, infectious diseases, oncology.

Prerequisites and postrequisites of the academic discipline (interdisciplinary links).

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Acquired knowledge in the learning process, acquired at the end of the study of module 3. Dermatology, venereology necessary for the study of therapy, family medicine, endocrinology, pediatrics, surgery, urology, infectious diseases, oncology.

The aim and tasks of the academic discipline:

- the aim of studying the academic discipline is to teach the discipline for the formation of systematic medical knowledge, skills and abilities in the diagnosis of skin and sexually transmitted diseases. It is assumed that

mastering the knowledge of the main clinical signs of skin and sexually transmitted diseases will allow general practitioners to recognize such diseases in time and refer the patient to a dermatologist. Awareness of the manifestations of sexually transmitted diseases and sexually transmitted infections (HIV, hepatitis B and C, papillomavirus infection, etc.) is an important component of dental training, and knowledge of preventive measures against these diseases is the responsibility of any doctor. -what is the specialty and specialization.

- the main tasks of studying the discipline are for students mastering the specialty "Medicine", the study is:
 - basics of theoretical dermatology (anatomical and microscopic structure of the skin and mucous membranes, physiology and pathology of the skin, basics of clinical pharmacology for the treatment of skin diseases);
 - the main clinical and diagnostic signs of common skin diseases, their prevention and treatment;
 - features of the clinical course of specific infections (including leprosy, tuberculosis), sexually transmitted diseases, HIV and other sexually transmitted infections.

Competences and learning outcomes in accordance with the educational and professional program, the formation of which is facilitated by the discipline (integral, general, special)

Discipline ensures the acquisition of students
competencies:

- *integral:*

Ability to solve complex problems and problems in the field of health care in the specialty "Dentistry" in a professional activity or in the learning process, which involves research and / or innovation and is characterized by uncertainty of conditions and requirements.

- *general:*

1. Ability to abstract thinking, analysis and synthesis.
2. Knowledge and understanding of the subject area and understanding of professional activity.
3. Ability to apply knowledge in practice.
4. Ability to communicate in the state language both orally and in writing.
5. Ability to communicate in English. Ability to use international Greco-Latin terms, abbreviations and clichés in professional oral and written speech.
6. Skills in the use of information and communication technologies.

7. Ability to search, process and analyze information from various sources.
8. Ability to adapt and act in a new situation.
9. Ability to identify, pose and solve problems.
10. Ability to be critical and self-critical.
11. Ability to work in a team.

- *special (professional, subject):*

1. Ability to collect medical information about the patient and analyze clinical data.
2. Ability to interpret the results of laboratory and instrumental research.
3. Ability to diagnose: determine the preliminary, clinical, final, concomitant diagnosis, emergencies.
4. Ability to plan and implement measures for the prevention of diseases of organs and tissues of the oral cavity and maxillofacial region.
5. Ability to design the process of providing medical care: to determine the approaches, plan, types and principles of treatment of diseases of organs and tissues of the oral cavity and maxillofacial region.
6. Ability to determine the rational mode of work, rest, diet in patients in the treatment of diseases of organs and tissues of the oral cavity and maxillofacial region.
7. Ability to determine the tactics of management of patients with diseases of organs and tissues of the oral cavity and maxillofacial region with concomitant somatic diseases.
8. Ability to perform medical and dental manipulations.
9. Ability to treat major diseases of organs and tissues of the oral cavity and maxillofacial region.
10. Ability to organize and conduct screening examinations in dentistry.
11. Ability to assess the impact of the environment on the health of the population (individual, family, population).
12. Ability to maintain regulatory medical records.
13. Processing of state, social and medical information.
14. Ability to organize and conduct rehabilitation measures and care for patients with diseases of the oral cavity and SLE.
15. Ability to legally support their own professional activities.

Program learning outcomes, the formation of which is facilitated by the discipline, including the study of module 3. Dermatology, venereology:

1. Identify and identify the leading clinical symptoms and syndromes (according to list 1); according to standard methods, using preliminary data of the patient's anamnesis, data of the patient's examination, knowledge about the person, his organs and systems, to establish a probable nosological or syndromic preliminary clinical diagnosis of a dental disease (according to list 2).
2. Collect information about the general condition of the patient, assess the psychomotor and physical development of the patient, the condition of the maxillofacial organs, based on the results of laboratory and instrumental studies to assess information about the diagnosis (list 5).
3. Assign and analyze additional (mandatory and optional) methods of examination (laboratory, radiological, functional and / or instrumental) according to list 5, patients with diseases of organs and tissues of the oral cavity and maxillofacial region for differential diagnosis of diseases (for list 2).
4. To diagnose emergencies under any circumstances (at home, on the street, in a medical institution), in an emergency, martial law, lack of information and limited time (according to list 4).
5. To determine the tactics of managing a dental patient with somatic pathology (according to list 3) by making an informed decision according to existing algorithms and standard schemes.
6. To organize carrying out of medical and evacuation actions among the population, military men, in the conditions of an emergency situation, including martial law, during the detailed stages of medical evacuation, taking into account the existing system of medical and evacuation support.
7. Determine the tactics of emergency medical care, using the recommended algorithms, under any circumstances on the basis of a diagnosis of emergency in a limited time (according to list 4).
8. Ability to perform medical and dental manipulations.
9. Ability to treat major diseases of organs and tissues of the oral cavity and maxillofacial region.
10. Ability to organize and conduct screening examinations in dentistry.
11. Ability to assess the impact of the environment on the health of the population (individual, family, population).
12. Ability to maintain regulatory medical records.
13. Processing of state, social and medical information.
14. Ability to organize and conduct rehabilitation measures and care for patients with diseases of the oral cavity and SLE.
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Program learning outcomes, the formation of which is facilitated by the discipline, including the study of module 3. Dermatology, venereology:

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2. Collect information about the general condition of the patient, assess the psychomotor and physical development of the patient, the condition of the maxillofacial organs, based on the results of laboratory and instrumental studies to assess information about the diagnosis (list 5).
3. Assign and analyze additional (mandatory and optional) methods of examination (laboratory, radiological, functional and / or instrumental) according to list 5, patients with diseases of organs and tissues of the oral cavity and maxillofacial region for differential diagnosis of diseases (for list 2).
4. To diagnose emergencies under any circumstances (at home, on the street, in a medical institution), in an emergency, martial law, lack of information and limited time (according to list 4).
5. To determine the tactics of managing a dental patient with somatic pathology (according to list 3) by making an informed decision according to existing algorithms and standard schemes.
6. To organize carrying out of medical and evacuation actions among the population, military men, in the conditions of an emergency situation, including martial law, during the detailed stages of medical evacuation, taking into account the existing system of medical and evacuation support.
7. Determine the tactics of emergency medical care, using the recommended algorithms, under any circumstances on the basis of a diagnosis of emergency in a limited time (according to list 4).
8. Analyze and evaluate government, social and medical information using standard approaches and computer information technology.
9. Assess the impact of the environment on the health of the population in a medical institution according to standard methods.
10. Form goals and determine the structure of personal activities based on the results of the analysis of certain social and personal needs.

Learning outcomes for the academic discipline:

After completing the module, students should:

know:

- structure and function of the skin, its appendages and mucous membranes of the oral cavity,
- principles of classification of skin diseases on the basis of etiological factors and pathomorphological manifestations, special dermatological terminology,
- etiology, pathogenesis and pathomorphology of the most common skin and venereal diseases,
- clinical signs and course of skin diseases,
- principles of diagnosis and bases of differential diagnosis of skin and venereal diseases,
- standards of rational treatment of dermatological diseases (topical and systemic therapy) and sexually transmitted infections,
- basics of primary and secondary prevention of skin diseases and sexually transmitted infections.

be able to:

- determine the etiological and pathogenetic factors of the appearance and subsequent clinical course of the most common skin and sexually transmitted diseases,
- describe pathological dermatological conditions,
- make a preliminary diagnosis of the most common skin and sexually transmitted diseases on the basis of clinical and anamnestic data,
- describe dermatological conditions and refer the patient with manifestations of dermatological and venereal diseases to a specialist,
- prescribe laboratory and / or instrumental examination, perform differential diagnosis of dermatoses,
- determine the basic principles of treatment of patients in accordance with their diagnosis,
- determine the tactics of management of patients with skin and sexually transmitted diseases,
- prescribe rational topical and systemic therapy.

Thematic plan of lectures specifying the basic issues, which are considered at the lecture

Seq. No.	Title of the topic	Number of hours
1	Dental manifestations of skin diseases. Lichen planus. Herpes infection of the skin and mucous membranes. Pemphigus. Erythema multiform. Precancerous mouth and mucous membranes.	2

2	Sexually transmitted diseases. Classification of infections that are transmitted sexually. Course of syphilis infection, major clinical manifestations of primary, secondary, tertiary and congenital syphilis, including on the mucous membranes of the mouth.	2
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Thematic plan of seminar classes - not provided.

Thematic plan of practical classes by modules and content modules, specifying the basic issues, which are considered at the practical class

Seq. No.	Title of the topic	Number of hours
1	Dermatology and Venereology, as an integral component of medical science: the subject and objectives of the discipline. The structure of the skin, its appendages and mucous membranes. Kinetics and function of the skin. Elements of skin rashes. Dental manifestations of skin diseases. Common clinical and special methods of diagnosis in dermatology. Relationship of Dermatology and Venereology with dental disciplines. Dental manifestations of skin disease. Scabies. Pyoderma.	2
2	Dermatitis and eczema. The clinical course, diagnosis and treatment. Examination of patients and writing a medical history.	2
3	Papular skin diseases and their manifestations in the mucous membranes of the oral cavity (lichen planus and psoriasis). Lichen planus and psoriasis. The clinical course, diagnosis and treatment.	2
4	Acantholytic pemphigus. Exudative erythema multiforme. Clinical course, diagnosis and treatment. Supervision of a dermatological patient. Writing a medical history.	2
5	Tuberculosis, herpes, cheilitis. The clinical course, diagnosis and treatment.	2
6	Keratomycosis and candidomycosis and dermatophytosis. The clinical course, diagnosis and treatment.	2
7	The primary period of syphilis. The secondary period of syphilis. Tertiary and congenital syphilis. Clinic, diagnosis and treatment of syphilitic infection.	2
8	Gonorrhea: classification and extra-genital forms. Non-	2

	<p>chronic lesions of the genitourinary system.</p> <p>Gonorrhea of men. The causative agent of gonorrhea. Biological features. Conditions and routes of infection. The incubation period, classification. Clinic of fresh and chronic gonorrhea urethritis in men, methods for its diagnosis. Complications of gonorrhea. Extragenital gonorrhea. Non-thoracic urethritis. The concept of urogenital chlamydia, mycoplasmosis, trichomoniasis and mixed infection of the genitourinary organs, their diagnosis and social significance. Methods of social and individual prevention of sexually transmitted infections. Protection of the educational history of the disease. Final modular control. Final module control.</p>	
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Self-directed work

Seq. No.	Title of the topic	Number of hours
1	Preparation for practical classes - theoretical preparation and development of practical skills	8
2	<p>Unassisted training – studying of extra-curricular subjects:</p> <p>History of world dermatology in the XIX-XX centuries.</p> <ul style="list-style-type: none"> - Ukrainian dermatological school. Subject and tasks of dermatology. - Subject and tasks of dermatovenereology. <p>The main stages of development of dermatovenereology.</p> <ul style="list-style-type: none"> - Features of the psychological response of patients - Deontological approaches in the treatment of skin diseases. <p>Skin as an immune organ of the human body.</p> <ul style="list-style-type: none"> - Immune functions of the skin. - Langerhans cells, their structure, location, functions. <p>General characteristics of syphilis. congenital syphilis.</p> <ul style="list-style-type: none"> - Etiology, pathogenesis, clinic, diagnosis, treatment. - The principles of prevention. 	<p>2</p> <p>3</p> <p>3</p> <p>3</p>
3	Preparation for the final modular control	6
	Total:	25

Individual tasks are performed by students independently under the guidance of a teacher. Individual tasks include: reports of case histories in practical classes, conducting sanitary and educational work.

The list of theoretical questions for students' preparation for the final module control:

1. History of domestic dermatology.

2. Moscow and St. Petersburg dermatological schools.
3. Achievements of Soviet dermatology.
4. The structure of the epidermis,
5. The structure of the dermis.
6. The structure of the hair and hair follicle.
7. Sebaceous glands, the importance of sebum for the skin.
8. Sweat glands, the importance of sweating for humans.
9. The role of the nervous system in dermatological practice.
10. The participation of the skin in water, mineral, protein, fat, vitamin metabolism.
11. Functions of the skin: protective, thermoregulatory, excretory.
12. Skin - the sense organ.
13. Relationship of skin diseases with internal pathology.
14. The importance of exogenous, endogenous and social factors in the occurrence of skin diseases.
15. The concept of sensitization and allergy in dermatology.
16. Skin diseases with hereditary predisposition and the importance of genetic factors.
17. Acute and chronic inflammation of the skin.
18. Acanthosis, parakeratosis, hyperkeratosis. Histology, examples.
19. Acantholysis. Histology, examples.
20. Methods of examination of a skin patient.
21. Primary and secondary morphological elements.
22. The primary element is a stain. Varieties.
23. The primary element is a papule. Understood> and, varieties.
24. The primary element is a hump. Concepts A, varieties.
25. The primary element is a node. The concept of variety, example.
26. The primary element is a blister. Understand .I, an example.
27. The primary element is the bubble and the bubble. Concept.
28. The primary element is a pustule. Concepts, varieties.
29. Secondary elements: crust, scales. Concept, example.
30. Secondary elements: scar, atrophy. Concept.
31. Secondary elements: erosion, excoriation.
32. Secondary elements: lichenization. Concept, example.
33. Secondary elements: ulcer, crack. Concept, example.
34. The mechanism of action of drugs in dermatology. Examples of recipes for hyposensitizing therapy.
35. Forms of drug use in dermatology. Example recipe, ointment, shepherd.
36. Pustular skin diseases. Classification, pathogenesis, treatment. Recipe.
37. Staphyloдерmia. Clinic, varieties, treatment. Recipe.
38. Streptoderma. Clinic, treatment. Recipe.
39. Epidemic vesicles of newborns, etiology, clinic, diff. diagnosis.
40. Scabies. Diagnosis, treatment, recipe.

41. Pediculosis, diagnosis, treatment.
42. Microsporia. Epidemiology, clinic, diagnosis, formulation.
43. Superficial trichophytia. Clinic, diagnosis, epidemiology, formulation.
44. Deep trichophytia. Epidemiology, diagnosis, clinic. Recipe.
45. Epidermophytia. Etiology, varieties, clinic, treatment, formulation.
46. Rubrophytia. Clinic, diagnosis, treatment, recipe.
47. Mycoses of the feet. Clinic, varieties, treatment, recipe.
48. Prevention of mycoses.
49. Simple contact dermatitis. Clinic, varieties, treatment, recipe.
50. Allergic contact dermatitis. Clinic, varieties, treatment, recipe.
51. Toxiderma. Clinic, varieties, treatment, recipe.
52. Etiology and pathogenesis of eczema. Classification.
53. Microbial and true eczema. Characteristics, differential diagnosis, treatment, formulation.
54. Psoriasis. Clinic, varieties, treatment, recipe.
55. Lichen planus, limited and diffuse. Clinic, treatment.
56. Pemphigus. Clinic, varieties, course, treatment, recipe.
57. Duhring's herpetiform dermatitis. Clinic, course, treatment, recipe.
58. Multiform exudative erythema. Etiology, clinic, treatment.
59. Simple and shingles.
60. Ordinary and pink acne. Etiology, features of the clinic and treatment,
61. Malignant tumors of the skin.
62. The concept of reticulosis of the skin.
63. Allergic vasculitis.
64. Viral skin diseases. Warts, acute condyloma, contagious mollusk.
65. Etiology of syphilis. The main biological properties of the pathogen.
66. Ways of infection with syphilis.
67. Primary seronegative and seropositive syphilis.
68. Atypical forms of primary syphilis.
69. Complications of primary syphilis
70. Differential diagnosis of the primary period of syphilis.
71. Secondary period of syphilis.
72. Cancellation of secondary fresh syphilis from secondary recurrent.
73. Roseola rash in patients with secondary syphilis.
74. Papular rashes in patients with secondary syphilis.
75. Pustular rashes in patients with secondary syphilis.
76. Features of mucosal lesions in syphilis.
77. Diagnosis and differential diagnosis of secondary syphilis.
78. Causes of tertiary syphilis. Clinic and diagnosis.
79. Rubber lesions in patients with tertiary syphilis.
80. Congenital syphilis. Ways of infection, causes, clinical forms.
81. Syphilis of the fetus, placenta. Early congenital syphilis. Late congenital syphilis. Features of the clinic. Prevention of congenital syphilis.

82. Serological diagnosis of syphilis in different periods. Principles of treatment of patients with syphilis. Recipe. Criteria for the treatment of syphilis.
83. Etiology of gonorrhea. Biological properties of the pathogen. Ways of infection with gonorrhea. Acute anterior gonorrheal urethritis. Clinic, diagnosis, treatment, recipe. Total acute gonorrheal urethritis. Clinic, diagnosis. Treatment, recipe.
84. Gonorrheal epididymitis and prostatitis.
85. Non-gonorrheal venereal urethritis in men.
86. Organization of the fight against sexually transmitted diseases.

The list of practical skills required for the final module control:

1. Clinical examination of a skin patient.
2. Palpation.
3. Diascopia.
4. Scraping the hearth.
5. Reproduction and evaluation of dermographism.
6. Temperature determination, tactile and pain sensitivity.
7. Definition of the psoriatic triad.
8. Uikhema grid definition.
9. Method for the determination of the Kebner phenomenon.
10. Staging of allergological samples and their interpretation.
- 11 Conducting a Balzer sample with an alcohol solution of iodine.
12. Fluorescence diagnostics using a Wood lamp.
13. Collection of material for fungal diseases.
14. The method of obtaining the phenomenon of "honeycomb cells".
15. Method of investigation of scabies mites.
16. The method of obtaining the phenomenon of Nikolskaya and Asbot-Hansen.
17. A fence of smears-prints and their coloring by Romanovsky-Giemsa on acantholytic cells.
18. The procedure for setting the Yadason test with ointment, which contains 50% potassium iodide.
19. The method of setting and evaluating and evaluating the phenomena of "failure of the probe" and "apple jelly".
20. The method of detecting the positive symptom Bening-Meshchersky.
21. Take the material for research on a pale treponemu.
22. Method of blood sampling for serological examination..
23. Fence removal in men for examination on gonococci and Trichomonas.
24. Picking up swabs in women for examination on gonococci and Trichomonas.
25. Thomson's two-shot test for examination of patients with urethritis.
26. Drawing up of an individual card of an outpatient patient (s. 25).
27. Drawing up a case history of a stationary patient.
28. Filling emergency notification (f. 281) on patients with scabies, mycoses, venereal diseases, etc.
29. Registration of 30 dispensary patients.

Teaching methods

- Verbal: lectures, explanations, story, conversation, instruction;
- Visual methods: illustration, demonstration, observation;
- Practical methods: performing practical work and solving situational tasks to develop skills and abilities;
- Independent work of students on comprehension and assimilation of new material;
- Thematic discussions;
- Brain storm;
- Analysis of specific situations (case method);
- Presentations.

The form of final control of academic performance – FMC

The system of continuous and final control

Control measures for assessing the educational activities of students include current and final control of knowledge, skills and abilities students.

Control measures are based on the principles: compliance with standards higher education; use of standardized and unified system diagnostics aimed at applying knowledge; definiteness of criteria evaluation; objectivity and transparency of control technology.

On a 4-point scale	Assessment in ECTS	Evaluation criteria
5 (excellent)	A	The student shows special creative abilities, is able to acquire knowledge independently, without the help of the teacher finds and processes the necessary information, is able to use the acquired knowledge and skills for decision-making in unusual situations, convincingly argues answers, independently reveals own talents and inclinations, possesses not less than 90 % of knowledge from topics both during the survey and all types of control.
4 (good)	B	The student is fluent in the studied amount of material, applies it in practice, freely solves exercises and problems in standardized situations, independently corrects errors, the number of which is insignificant, has no less than 85% of knowledge on the topic both during the survey and all types of control.

3 (satisfactorily)	D	The student reproduces a significant part of theoretical material, shows knowledge and understanding of the basic provisions with the help of a researcher can analyze educational material, correct errors, among which there are a significant number of significant, has at least 65% knowledge of the topic, and during the survey, and of all kinds control.
	E	The applicant has educational material at a level higher than the initial, a significant part of it reproduces on reproductive level. has at least 60% knowledge of the topic both during the survey and all types of control.
2 (not satisfactorily)	FX	The student has the material at the level of individual fragments that make up a small part of the material, has less than 60% knowledge of the topic as during the survey, and all types of control.
	F	The student has the material at the level of elementary recognition and reproduction of individual facts, elements, has less than 60% knowledge of the topic as during surveys, and all types of control.

Input control.

Entrance control is carried out at the beginning of the study of a new discipline in order to determine the readiness of higher education students to master it. The control is carried out with the help of diagnostic tools in academic disciplines, usually test tasks.

Control results are analyzed at the departmental (interdepartmental) meetings, at the meetings of the councils of faculties (institutes) and the central methodical commission together with the teachers who conducted classes on the respective academic discipline, according to the graphological structure of the OP. According to the results of the entrance control, the organization of individual work with applicants for higher education, adjustment of working curricula, etc. is envisaged.

Current control.

Current control is carried out by scientific and pedagogical (pedagogical) workers during seminars and practical classes, industrial practice. The main purpose of current control is to provide feedback between the researcher and the graduate in the learning process and the formation of learning motivation of higher

education. The information obtained during the current control is used both by the researcher and pedagogical worker - to adjust technologies, methods and teaching aids, and by applicants for higher education - to plan independent work.

Current control can be carried out in the form of oral interviews, solving situational problems, assessment of manipulations, written control, written or program computer testing in practical classes, assessment of performances of higher education students when discussing issues in seminars, discussions, etc. Forms of current control and evaluation criteria are defined in the work program specifically for each discipline.

The current control is carried out by the scientific - pedagogical (pedagogical) worker systematically, during carrying out of practical and seminar employments, industrial practice, performance of the concrete kind of works provided by the working curriculum on disciplines.

With the beginning of teaching the discipline scientific - pedagogical (pedagogical) worker must bring to the notice of higher education students the requirements for the current control of knowledge.

The teacher must assess the success of each student in each class on a four-point (traditional) scale, taking into account standardized, generalized criteria for assessing the knowledge of higher education.

Assessment of success is integrated (all types of work of the applicant are evaluated, both in preparation for the lesson and during the lesson) according to the criteria that

are communicated to the applicants for higher education at the beginning of the study of the discipline.

The grade is given by the teacher in the "Journal of attendance and student performance" and synchronously in the "Electronic Journal of PSMU" (hereinafter EJ) at the end of the lesson or after checking individual tests (written work, solving typical or situational problems and tests), but not later than 2 calendar days after the lesson (in accordance with the "Regulations on the electronic journal of success").

Final control.

The components of the final control are: semester control and final certification of applicants for higher education, which is regulated by the "Regulations on the State certification of applicants for higher education of educational and qualification levels specialist in the field of training "Medicine" in the specialty 7.12010005 "Dentistry" of the Poltava State Medical University".

Final modular control (PMC) - a form of final control, which consists in assessing the mastering of higher education educational material in a particular discipline (or part thereof) on the basis of current control and individual tasks performed in the last lesson. Semester PMC is planned in the absence of an exam or test.

Regulations for PMC.

PMC is carried out upon completion of the study of the program material of

the module in the discipline and is held at the last lesson of the module.

Applicants for higher education who have scored the required minimum number of points during the current control (average grade point average 3.0 and above), do not have missed passes of lectures and practical classes, have mastered the topics for independent work within the module and met all requirements in the academic discipline, which are provided by the working curriculum in the discipline (protection of medical history, positive assessments of the content modules, received permission to compile PMC during the test control).

For PMC the hours provided in the working curriculum are used. PMC is accepted by scientific and pedagogical workers appointed by the head of the department.

In order to objectively impartial assessment of knowledge of higher education students are involved in the reception of PMC research and teaching staff, departments that have not conducted practical classes in these academic groups in this category of students.

The PMC score is evaluated in points and is not converted into a traditional 4-point score. The maximum number of PMC points is 80 points. The minimum number of PMC points at which the control is considered completed is 50 points. The maximum number of points per module is 200 points (of which up to 120 points for current performance).

The questions (test tasks, situational tasks) that are submitted to the PMC are formulated in such a way that the reference answer of the higher education applicant to each lasts approximately 3-5 minutes. The questions cover the most important sections of the working curriculum, which are sufficiently covered in the literature sources recommended as the main (basic) in the study of the discipline.

Examination tickets for PMC are formed on the issues, which are approved at the meeting of the department. The total number of questions (tasks, situational tasks) in each ticket should not exceed three. The PMC must be asked questions, which are determined for self-study within the module.

In case of violation of the rules of academic integrity by the applicant of higher education (p.2.2.5. Of the Rules of Procedure), the results of the assessment obtained during the preparation of the PMC student is graded "unsatisfactory".

Applicants for higher education who, during the study of the module from which the final control is conducted, had an average score of the current grade from 4.50 to 5.0 are exempted from the PMC and automatically (by agreement) receive a final grade, respectively (to Annex 1), therefore, the presence of the applicant at the PMC is mandatory.

In case of disagreement with the assessment, the specified category of applicants for higher education is PMC according to the general rules. The obtained points for the module are presented by the researcher in the "Statement of final module control" and the individual curriculum of the student.

Information on students who are not enrolled in PMC, with the exact reason for non-enrollment is also entered in the "Statement of final module control" and individual curricula of students. The reasons for non-enrollment may be the

following:

- a) the applicant for higher education has unfulfilled absences from classes and (or) lectures, industrial practice. Mark "n / v" (failed) in the column "points for PMC";
- b) the applicant of higher education attended all classes (practical, seminar, lecture), but did not score the minimum number of points for the current educational activity and is not allowed to PMC. Mark "n / a" (not allowed) in the column "points for PMC";
- c) the higher education student attended all classes, scored points for current educational activities and was admitted to the PMC, but did not appear at the PMC. The mark "n / z" (did not appear) in the column "points for PMC".

The applicant for higher education has the right to compile and re-compile two PMC. In exceptional cases, additional reorganization of the PMC may be carried out with the personal permission of the rector or the first vice-rector for scientific and pedagogical work.

PMC rearrangement regulations.

Permission to rearrange PMC is issued by the dean of the faculty, director of the institute (or his deputy) in the form of "Personal statement of rearrangement of final control" which the student receives in the dean's office under personal signature upon presentation of individual curriculum and (if necessary) information from the department. debt elimination (absence of "nb", average grade point average of 3.0 and more). In the case of organized reorganization of the PMC by a group of applicants for higher education, the general statement is used.

The personal statement of re-assembly of the final modular control (general statement) is filled in by the head of the department or his authorized person in two copies, one of which remains at the department, the other is returned to the dean's office by the head of the department (responsible teacher). Applicants for higher education have the right to retake PMC, until the end of the study of the discipline

If the applicant for higher education has not passed the PMC, in the discipline, except for the semester control in the form of an examination, he may not be admitted to the semester control in the relevant discipline.

An uncompiled PMC in one discipline is not a ground for not admitting a student of higher education to compile the final semester control in another discipline, except for admission to the final certification.

Unified table of correspondence of scores for current performance, scores for PMK, exam, and traditional four-point score

Average score for current performance (A)	Points for current success in the module (A * 24)	Points for FMC with module (A * 16)	Points for the module and / or exam (A * 24 + A * 16)	ECTS category	By 4-point scale

2	48	32	80	F FX	2 unsatisfactorily
2,1	50	34	84		
2,15	52	34	86		
2,2	53	35	88		
2,25	54	36	90		
2,3	55	37	92		
2,35	56	38	94		
2,4	58	38	96		
2,45	59	39	98		
2,5	60	40	100		
2,55	61	41	102		
2,6	62	42	104		
2,65	64	42	106		
2,7	65	43	108		
2,75	66	44	110		
2,8	67	45	112		
2,85	68	46	114		
2,9	70	46	116		
2,95	71	47	118		
3	72	50	122		
3,05	73	50	123		
3,1	74	50	124		
3,15	76	50	126		
3,2	77	51	128		
3,25	78	52	130	D	
3,3	79	53	132		
3,35	80	54	134		
3,4	82	54	136		
3,45	83	55	138		
3,5	84	56	140	C	4 good
3,55	85	57	142		
3,6	86	58	144		
3,65	88	58	146		
3,7	89	59	148		
3,75	90	60	150		
3,8	91	61	152		
3,85	92	62	154		
3,9	94	62	156		
3,95	95	63	158		
4	96	64	160		
4,05	97	65	162		
4,1	98	66	164		
4,15	100	66	166		
4,2	101	67	168		
4,25	102	68	170		
4,3	103	69	172		

4,35	104	70	174	B	
4,4	106	70	176		
4,45	107	71	178		
4,5	108	72	180		
4,55	109	73	182	C	5 excellent
4,6	110	74	184		
4,65	112	74	186		
4,7	113	75	188		
4,75	114	76	190		
4,8	115	77	192		
4,85	116	78	194		
4,9	118	78	196		
4,95	119	79	198		
5	120	80	200		

Methodical support:

1. Working curriculum
2. Methodical development of lectures
3. Methodical recommendations for teachers
4. Methodical instructions for independent work of students during preparation for a practical lesson and in class
5. List of recommended reading
6. Materials for control of knowledge, skills and abilities of students:
 - tests of different levels of difficulty
 - situational tasks
 - medical history, examination results, examination algorithms, kits for care;
 - multimedia presentations of the lecture course of the department.

Recommended literature:

Basic:

1. Lim, H.W., Kohen, L.L., Schneider, S., Yeager, D.G. / Practical Guide to Dermatology - Springer International Publishing, 2020.-309p.
2. Sewon Kang / Fitzpatrick's Dermatology, Ninth Edition –McGraw-Hill Education – Europe, 2019.
3. Richard B. Weller , Hamish J. A. Hunter , Margaret W. Mann. / Clinical Dermatology– John Wiley & Sons Inc, 2018. – 456p.

Supplementary:

1. Anthony Du Vivier. / Atlas of Clinical Dermatology– John Wiley & Sons Inc, 2018. – 740p.

Information resources:

1. <https://skinven.pdmu.edu.ua/>
2. <https://www.osmosis.org/home/dashboard>
3. <https://www.medscape.com/dermatology>
4. <https://www.healthline.com/>
5. <https://www.ncbi.nlm.nih.gov/>