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Medical Faculty

Department of Therapeutic Dentistry Orthopedic Dentistry and Orthodontics Department Oral and Maxillofacial Surgery and Dentistry Department Department of Internal Diseases

**«APPROVE»** Vice-rector for Academic Affairs I. E. Poverinov «<u>13</u>» <u>04</u> 2022

#### PROGRAM

#### "FINAL STATE ATTESTATION"

Speciality - 31.05.03 Dentistry

Документ подписан простой электронной подписью

Directivity (profile) - Dentistry

Qualification of a graduate: DENTAL PRACTITIONER

The year when training started - 2022

Cheboksary - 2022

The program of final state attestation is based on the requirements of the Federal State Educational Standard of Higher Education - specialist's degree program in the specialty 31.05.03 Dentistry, approved by Order of the Ministry of Science and Higher Education of the Russian Federation No 984 dated August 12, 2020.

#### DRAFTERS:

Head of the Department, Candidate of Medical Sciences, Associate Professor, A.V. Karpunina Head of the Department, Doctor of Medical Sciences, Professor, Yu.N. Urukov Head of the Department, Candidate of Medical Sciences, Associate Professor, V.V. Trubin Head of the Department, Doctor of Medical Sciences, Professor, L.M. Karzakova

#### DISCUSSED:

at the meeting of the Department of Therapeutic Dentistry on March 10, 2022, record № 7 Head of the Therapeutic Dentistry Department, A.V. Karpunina

at the meeting of the Department of Orthopedic Dentistry and Orthodontics on March 25, 2022, record  $N_{2}14$ 

Head of Orthopedic Dentistry and Orthodontics Department, Yu.N. Urukov

at the meeting of Oral and Maxillofacial Surgery and Dentistry Department on March 25, 2022, record №10

Head of Oral and Maxillofacial Surgery and Dentistry Department, V.V. Trubin

at the meeting of the Departments of Internal Diseases on March 25, 2022, record №10 Head of Internal Diseases Department, L. M. Karzakova

## AGREED BY:

Dean of the Faculty V. N. Diomidova Acting Chief of the educational and methodological department, E.A. Shirmanova

#### CONTENT OF THE PROGRAM OF FINAL STATE ATTESTATION

#### **1. GENERAL PROVISIONS**

**Purposes and objectives of the Final State Attestation** The final state attestation is held in order to determine the conformity between the results of students' proficiency in basic educational programs and the relevant requirements of the Federal state educational standard (hereinafter – FSES).

The objectives of the state final examination are:

- identifying the level of professional competencies of graduates and their compliance with the requirements of the Federal State Educational Standard of Higher Education in the specialty 31.05.03 Dentistry;

- determining the degree of the graduate's readiness for the main and additional types of professional activity.

#### Types of final state attestation in the specialty 31.05.03 Dentistry.

In accordance with the Main Educational Program in the specialty 31.05.03 Dentistry, the following types of final state attestation are provided:

1. Preparation for and passing the state examination

# 2. Intended learning outcomes as a result of mastering the educational program

The results of mastering the educational program are determined by the competencies acquired by the graduate, i.e. his/her ability to apply knowledge, skills and abilities in accordance with the tasks of professional activity.

During the final state attestation, the maturity of the following universal, general professional and professional competencies is assessed:

Name of the catego- ry (group) of universal competencies	Code and name of the gradu- ate's universal competence	Code and name of the competence achieve- ment indicator
Systemic and critical think- ing	AC-1. He/she is able to carry out a critical analysis of prob- lem situations based on a sys- tematic approach, develop a strategy for actions	AC-1.1. He/she is aware of the task, searches for authentic and complete information for its solution from various sources, including offi- cial and unofficial, documented and undocu- mented AC-1.2. He/she is able to describe and critical- ly analyze information, distinguishing facts from assessments, opinions, interpretations, synthesizes information structures, systema- tizes them AC-1.3. He/she is able to apply a systematic approach to solving the task, identifying its components and connections; considers op- tions and algorithms for the task implementa- tion, assessing their advantages and disad- vantages
Development and imple- mentation of	AC-2. He/she is able to man- age a project at all stages of the life cycle	AC-2.1. He/she is able to determine the range of project tasks and the links between them within the framework of the set goal, the se-

projects		quence of actions; to assess the prospects and to predict the results of alternative solutions AC-2.2. He/she is able to choose the best ways to solve problems, taking into account current legal norms, available resources and limitations; to carry out ongoing monitoring of their actions in the development and imple- mentation of projects AC-2.3. He/she is able to present documented results with justification of completed project tasks
Teamwork and leader- ship	AC-3. He/she is able to or- ganize and manage the team's work, developing a team strategy to achieve the goal	AC-3.1. He/she understands the goals and objectives of the team, his/her role in social interaction and teamwork, taking into account his/her own personal and business qualities, the interests of the team; knows the basics of management AC-3.2. He/she is able to realize his/her role by interacting productively with other team members AC-3.3. He/she is able to comply with the rules of teamwork; be aware of personal responsibility for the results of activities and implementation of team goals and objectives
Communi cation	AC-4. He/she is able to apply modern communication tech- nologies, including those in a foreign language(s), for aca- demic and professional inter- action	AC-4.1. He/she has knowledge of the basics of business communication, specifics of ver- bal and nonverbal interaction, ethics of busi- ness communication; has a proper command of the state language of the Russian Federation and the state language of the federation sub- ject(s) and foreign language(s) necessary for communication AC-4.2. He/she is able to carry out business communication orally in the state language of the Russian Federation, the state language(s) of the federation's subject(s) and a foreign language(s), taking into account the peculiari- ties of communicators and the type of business communication AC-4.3. He/she is able to carry out business communication aC-4.3. He/she is able to carry out business communication in writing using the official business style in the state language(s) of the federation's subject(s) and in a foreign lan- guage(s), including taking into account
Inter- cultural communica- tion	AC-5. He/she is able to ana- lyze and take into account the diversity of cultures in the process of intercultural inter- action	AC-5.1. He/she is able to realize the society's intercultural diversity in its various contexts: socio-historical, ethical, philosophical AC-5.2. He/she is able to choose a way of ad-equate behavior in a multicultural community and observes general cultural ethical norms, resolves possible contradictions and conflicts

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		AC-5.3. He/she is able to carry out productive communication taking into account the diver- sity of social groups in socio-historical, ethical and philosophical contexts, including for solv- ing professional tasks
Self- organization and self- development (including health protec- tion)	AC-6. He/she is able to de- termine and implement priori- ties for his (her) own activi- ties and ways to improve them based on self- assessment and lifelong edu- cation	AC-6.1. He/she masters the basics of time management methods and tools to achieve goals and solve specific tasks AC-6.2. He/she is able to build and implement a personal development trajectory throughout his/her life based on the principles of educa- tion AC-6.3. He/she is able to make adjustments to the development of his/her professional activi- ty in connection with personal interests, the needs of the society and changes in external factors
	AC-7. He/ she is able to maintain a proper level of physical fitness to ensure full- fledged social and profes- sional activities	AC-7.1. He/ she is able to assess his/her state of health AC-7.2. He/she is able to maintain a proper level of physical fitness, promote physical ed- ucation, and actively participate in sports events AC-7.3. He/she is able to plan working hours to combine intellectual and physical activities, ensuring high efficiency in professional activi- ties
Life safety	AC-8. He/she is able to create and maintain safe living con- ditions in everyday life and in professional activities to pre- serve sustainable develop- ment of society, including in the event of a threat and ad- vent of emergencies and mili- tary conflicts	AC-8.1. He/she is able to identify and analyze natural and technology-related factors of harmful influence on the environment, social life and professional activities, and brings in- formation to the competent structures AC-8.2. He/she is able to create and maintain safe conditions of living and professional ac- tivities, comply with safety rules AC-8.3. He/she is able to act in accordance with available instructions and recommenda- tions, knowledge, experience; he/she is able to provide first aid to victims in emergency situa- tions
Inclusive competence	Ac-9. He/she is able to use basic defectologic knowledge in social and professional spheres	AC-9.1. He/she has a notion about nosologies related to health limitations AC-9.2. He/she is able to show tolerance to the peculiarities of persons with physical con- ditions in the social and professional spheres AC-9.3. He/she is able to interact with people with disabilities and physical conditions in the social and professional spheres
Economic culture, in-	AC-10. He/she is able to make reasonable economic	AC-10.1. He/she understands the basic principles of economic performance and economic

cluding finan- cial literacy	decisions in various areas of life.	development, the goals and forms of state par- ticipation in the economy AC-10.2. He/she is able to apply personal economic and financial planning methods to achieve current and long-term financial goals AC-10.3. He/she is able to use financial in- struments to manage personal finances (per- sonal budget), control economic and financial risks in various areas of life
Civic position	AC-11. He/she is able to form an intolerant attitude towards corrupt behavior.	AC-11. 1. He/she understands the meaning of the main legal categories, the essence of cor- rupt behavior, the forms of its manifestation in various spheres of public life AC-11.2. He/she demonstrates knowledge of the Russian legislation, as well as anti- corruption standards of conduct, respect for justice and the law. He/she identifies and evaluates corruption risks, shows an intolerant attitude to corrupt behavior AC-11.3. He/she is able to analyze, interpret and apply the norms of law in various spheress of social activity, as well as in the field of an- ti-corruption. He/she carries out social and professional activities on the basis of devel- oped legal awareness

Universal competencies of graduates and indicators of their achievement

Name of the category (group) of universal competencies	Code and name of the gradu- ate's universal competence	Code and name of the competence achieve- ment indicator
Ethical and legal bases of professional activity	GPC-1. He/she is able to im- plement moral and legal norms, ethical and deontolog- ical principles in his/her pro- fessional activity	GPC-1.1 He/she is able to adhere to moral and ethical norms, rules and principles of profes- sional medical behavior GPC-1.2 He/she is able to respect the rights of the patient and the doctor GPC-1.3. He/she is capable of being guided in professional activity by documents regulating the mutual relations between the patient and the medical staff
	GPC-2 He /she is able to ana- lyze the results of their own activities to prevent profes- sional mistakes	GPC-2.1 GPC-2.1 He/she is able to analyze the effectiveness and safety of medical interven- tions GPC-2.2 GPC-2.2 He/she is able to plan measures aimed at preventing complications of medical interventions GPC-2.3 He/she is able to conduct and moni- tor the effectiveness of measures to prevent complications of medical interventions

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	GPC-3. He/she is capable of countering the use of doping in sports and combating it	GPC-3.1. He/she is able to analyze information about the problem of doping in sports GPC-3.2. He/she is able to plan activities aimed at preventing the use of doping in sports GPC-3.3. He/she is able to carry out activities aimed at preventing the use of doping in sports
Formation of a healthy life- style	GPC-4. He/she is able to car- ry out and monitor the effec- tiveness of preventive measures, healthy lifestyle formation and sanitary and hygienic education of the population	GPC-4.1. He/she is able to analyze the patient's commitment to a healthy lifestyle GPC-4.2. He/she is able to plan activities aimed at preventing diseases and forming a healthy lifestyle GPC-4.3. He/she is able to carry out and mon- itor the effectiveness of preventive measures, healthy lifestyle formation and sanitary and hygienic education of the population
Diagnosis and treatment of diseases	GPC-5. He/she is able to ex- amine a patient to make a di- agnosis when solving profes- sional tasks	GPC-5.1. He/she is able to apply the patient examination algorithm GPC-5.2. He/she is able to apply patient ex- amination skills (taking complaints, history taking, physical examination) GPC-5.3. He/she is able to analyze the infor- mation obtained during examination of the patient
	gpc-6. He/she is able to pre- scribe, monitor the effective- ness and safety of non- pharmacological and phar- macological therapy in solv- ing professional tasks	GPC-6.1. He/she is able to determine indica- tions and contraindications when prescribing medicamentous, non-medicamentous and other methods of treatment GPC-6.2. He/she is able to assess the risks as- sociated with the use of medicamentous, non- medicamentous and other methods of treatment GPC-6.3. He/she is able to evaluate the effec- tiveness of medicamentous, non- medicamentous and other methods of treat- ment
	GPC-7. He/she is able to or- ganize work and make pro- fessional decisions in urgent conditions, in emergency sit- uations, epidemics and in centers of mass destruction	GPC-7.1. He/she is able to apply the algorithm of providing primary health care in emergency conditions GPC-7.2. He/she is able to identify conditions requiring rendering primary health care, in- cluding clinical signs of sudden cessation of blood circulation and respiration GPC-7.3. He/she is able of providing primary health care to patients in conditions that pose a threat to the patients' life, including clinical death (arrest of vital functions of the human body (blood circulation and (or) respiration)
Fundamentals of back- ground and natural sci-	GPC-8. He/she is able to use basic physico-chemical, mathematical and natural sci- ence concepts and methods	GPC-8.1. He/she has knowledge of basic phys- ico-chemical, mathematical and natural science concepts and methods GPC-8.2. He/she is able to analyze the pro-

ence knowledge	when solving professional problems	cesses described by the basic physico- chemical, mathematical and natural science concepts and methods GPC-8.3. He/she is able to make decisions based on physico-chemical, mathematical and natural science concepts and methods
	GPC-9. He/she is able to as- sess morphofunctional, phys- iological conditions and pathological processes in the human body to solve profes- sional tasks	GPC-9.1. He/she is able to recognize morpho- functional, physiological states and pathologi- cal processes in the human body GPC-9.2. He/she is able to analyze morpho- functional, physiological states and pathologi- cal processes in the human body GPC-9.3. He/she si able to diagnose morpho- functional, physiological states and pathologi- cal processes in the human body
Organization and manage- ment	gpc-10. He/she is able to or- ganize the work of junior and secondary medical personnel for taking care of patients	GPC-10.1. He/she is able to analyze the rules, procedures and functional responsibilities of medical personnel when providing patient care GPC-10.2. He/she is able to develop an action plan for patient care GPC-10.3. He/she is able to organize and mon- itor the effectiveness and safety of patient care activities
	GPC-11. He/she is able to implement the principles of quality management in pro- fessional activities	GPC-11.1. He/she is able to perform profes- sional activities of proper quality GPC-11.2. He/she is able to analyze and criti- cally evaluate the quality of professional ac- tivity according to the specified indicators GPC-11.3. He/she is able to develop an action plan to achieve an appropriate level of quality of professional activity
Medical reha- bilitation	GPC-12. He/she is able to implement and monitor the effectiveness of medical re- habilitation of a dental patient	GPC-12.1. He/she masters the algorithm for medical rehabilitation of a dental patient GPC-12.2. He/she is able to form a program of measures for medical rehabilitation of a dental patient GPC-12.3. He/she is able to implement a den- tal patient's medical rehabilitation program and to evaluate its effectiveness
Information literacy	GPC-13. He/she is able to understand the operational principles of modern infor- mation technologies and use them to solve problems of professional activity	GPC-13.1. He/she is able to understand mod- ern information technologies in professional activities GPC-13.2. He/she is able to use modern infor- mation technologies in professional activities GPC-13.3. He/she is able to solve the tasks of professional activity using modern information technologies

Professional competencies indicators of their achievement:

Troissional competencies indicators of their active venticit.			
<b>Professional stand-</b>	The task of	Code and name of pro-	Code and name of the

ard (PS) indicating	professional	fessional competence	competence achievement
the generalized la-	activities	ressional competence	indicator
bor function (GLF)			
Task types of profession	onal activities: med	ical	
<ul> <li>1 ask types of profession</li> <li>02.005 PS "Dental practice"</li> <li>GLF A Providing medical care for dental diseases</li> <li>LF A/01.7 Conducting a patient examination in order to make a diagnosis</li> </ul>	Initial and re- peated examina- tion of the pa- tient, referral for examinations in order to make a diagnosis	PC-1He/she is able to conduct examinations of the patient in order to make a diagnosis	PC-1.1. He/she is able to conduct a physical exami- nation of the patient (tak- ing complaints and histo- ry, examination, palpation, percussion) PC-1.2. He/she is able to analyze the information obtained during the physi- cal examination, addition- al examination methods, formulate an initial diag- nosis PC-1.3. He/she is able to formulate a diagnosis
			based on the information received
Task types of profession			
02.005 PS "Dental practice" GLF A Providing medical care for den- tal diseases LF A/02.7 Prescrib- ing, monitoring the effectiveness and safety of non-drug and pharmacological treatment	Providing medi- cal care in emergency and urgent forms for acute dental diseases, condi- tions, exacerba- tion of chronic diseases that pose a threat to the patient's life or without ob- vious signs of a threat to the pa- tient's life	PC-2 He/she is able to prescribe, monitor the effectiveness and safety of non-drug and pharma- cological treatment	PC-2.1. He/she is able to develop a treatment plan, prescribe pharmaceutical drugs, non-drug treatment, medical devices in ac- cordance with current or- der of rendering medical aid, clinical recommenda- tions (treatment protocols) on issues related to ren- dering medical aid PC-2.2. He/she is able to monitor the effectiveness and safety of treatment prescribed, if necessary, to adjust it in accordance with the current proce- dures for providing medi- cal care, clinical recom- mendations (treatment protocols) on issues relat- ed to rendering medical aid PC-2.3. He/she is able to develop a treatment plan, prescribe pharma- ceutical drugs, non-drug treatment, medical devices and therapeutic nutrition in accordance with current order of rendering medical aid, clinical recommenda- tions (treatment protocols)

			dering medical aid
Types of tasks of profe	essional activity: m	edical: research	
<b>02.005 PS</b> "Dental		PC-3 He/she is able to	PC-3.1. He/she is able to
practice"		develop, implement and	develop an individual re-
GLF A Providing	Development,	monitor the effectiveness	habilitation program
medical care for den-	implementation	of individual rehabilita-	PC-3.2. He/she is able to
tal diseases	and monitoring	tion programs	implement and monitor
LF A/03.7	an individual	tion programs	the effectiveness of the
Development, im-	rehabilitation		developed individual re-
plementation and	plan for a pa-		habilitation program
monitoring the effec-	tient with max-		naointation program
tiveness of individu-	illofacial dis-		
al rehabilitation pro-	eases		
-			
grams	nal activitios: mod	lical, organizational-manage	riol
02.005 PS "Dental		PC-4 He/she is able to	PC-4.1. He/she is able to
	Conducting and		
practice"	monitoring the effectiveness of	conduct and monitor the	develop a plan of sanitary-
GLF A Providing		effectiveness of sanitary-	epidemic and preventive
medical care for den-	preventing den-	epidemic and other pre-	measures to protect public
tal diseases	tal diseases,	ventive measures to pro-	health
LF A/04.7	those of paro-	tect public health	PC-4.2. He/she is able to
Conducting and	dontium, oral		conduct and monitor the
monitoring the effec-	mucosa, lips,		effectiveness of developed
tiveness of sanitary	bone tissue of		sanitary-epidemic and
and anti-epidemic	the jaws, pe-		preventive measures to
and other preventive	ripheral nervous		protect public health
measures to protect	system of the		
public health	maxillofacial		
	region, tem-		
	poromandibular		
	joint, salivary		
	glands	· 1 · 1	
<b>02.005 PS</b> "Dental		nizational-managerial	PC-5.1. He/she is able to
	Conducting san-	PC-5 He/she is capable	
practice"	itary and hy-	of implementing organi-	use regulatory documenta-
GLF A Providing	gienic education	zational and managerial	tion adopted in healthcare
medical care for den-	among patients	activities	PC-5.2. He/she is able to
tal diseases	(their relatives /		provide and control good
LF A/05.7 Conduct-	legal representa-		working practice of sec-
ing sanitary and hy-	tives) and medi- cal workers in		ondary and junior medical
gienic education	order to form a		personnel in medical or-
among the popula-			ganizations
tion and medical	healthy lifestyle		PC-5.3. He/she is able to
workers in order to			analyze medical and sta-
form a healthy life-			tistical indicators of mor-
style	Control 1		bidity, disability and mor-
<b>02.005 PS</b> "Dental	Control and		tality to assess the health
practice"	management of		of the population
GLF A Providing	medical workers		
medical care for den-	holding posi-		
tal diseases	tions of second-		
LF A/06.7 Organiza-	ary and junior		
tional and manageri-	medical person-		
al activities	nel, mainte-		

nance o	f medi-	
cal docu	umenta-	
tio	on	

#### Structure of the final state attestation

Seq. N	Name of the section (in accordance with the curriculum)	The section's (stage) content
1.	Preparation for and passing the state exam- ination	State examination

The total labor intensity of the final state attestation is 3 credits, 108 hours, including the scope of contact work is 2 hours.

#### The fields and spheres of graduates' professional activity.

The field of professional activity and areas of professional activity in which graduates who have mastered the specialist's degree program can carry out professional activities are as follows:

02 Healthcare (in the field of providing primary health care to the population in medical organizations: polyclinics, outpatient clinics, inpatient polyclinic institutions of the municipal healthcare system and medical and preventive institutions providing primary health care to the population); professional standard. Dental practitioner, approved by Order of the Ministry of Labor and Social Protection of the Russian Federation № 227n dated May 10, 2016 (registered in the Ministry of Justice of the Russian Federation on June 2, 2016, registration No. 42399).

According to the results of mastering the educational program of higher education, the graduate should be ready to solve the tasks of professional activity of the following types:

#### - medical:

-prevention of the occurrence of diseases among the population through preventive and anti-epidemic measures;

- participation in preventive medical examinations, preventive screenings, follow-up monitoring;

- carrying out collection and medical and statistical analysis of information on the indicators of dental morbidity in various age and gender groups and its impact on their health;

- diagnosing dental diseases and pathological conditions of patients;

- performing temporary disability examination and participation in other types of medical examination;

- providing dental care in outpatient settings of a day patient facility;

- participating in providing medical assistance in emergency situations, including participation in medical evacuation

participation in carrying out medical rehabilitation and sanatorium treatment of patients with dental diseases;

- forming motivation among the population, patients and their family members aimed at preserving and improving their health and the health of people around them;

- teaching patients basic hygienic measures of a health-improving nature, contributing to the prevention of dental diseases and health promotion;

#### - research;

- analysis of scientific literature and official statistical reviews, participation in statistical analysis and public presentation of the results obtained;

- participation in the solution of individual research and scientific-applied tasks in the field of healthcare in diagnosis, treatment, medical rehabilitation and prevention;

#### - organizational-managerial;

- application of the basic principles of dental care organization in medical organizations and their structural subdivisions;

- creation of favorable conditions in medical organizations of the dental profile for the stay of patients and the work of medical personnel;

- maintaining medical records in medical organizations;

- participation in the organizing the assessment of the quality of dental care for patients;

- compliance with the basic requirements of information security.

#### **3. PROGRAM OF THE STATE EXAMINATION**

The procedure and form of holding the exam. The state examination is conducted in the disciplines of GP of HE, the learning outcomes of which are essential for the professional activity of the graduates. The state examination is conducted according to the approved program and in accordance with the requirements of regulatory legal acts, including local documents of the university.

#### The list of disciplines that form the programme of the state examination:

The program of the state examination is formed by the following disciplines:

- B1.O.47 Therapeutic dentistry
- B1.O.49 Orthopedic dentistry
- B1.O.48 Surgical dentistry
- B1.O.43 Internal diseases

The final state attestation is carried out in 2 stages: final testing, assessing the level of the graduate's clinical proficiency through an interview.

The first stage of the final state attestation is carried out in the form of testing. The purpose of the test is to check the theoretical knowledge of students acquired during their studies at the higher educational institution while receiving higher education in the specialty 31.05.03 Dentistry.

The set of test tasks contains questions that reflect the main theoretical competencies of the graduate required to perform professional actions in accordance with the Federal State Educational Standard for the specialty "Dentistry".

The content of each test includes questions on the disciplines of the specialty. Typical test tasks include the following disciplines of the specialty:

- 1. Therapeutic dentistry;
- 2. Orthopedic dentistry;
- 3. Dental surgery;

4. Pediatric dentistry combines the disciplines of pediatric therapeutic and pediatric surgical dentistry.

To obtain a reliable result of testing the theoretical knowledge of students, the number of test tasks is 100 units.

In the curriculum for the specialty 31.05.03 Dentistry, the time required for the study of each discipline (module) is approved. Therefore, the percentage of the discipline's entry into the test is determined by the total hours of the discipline. The internal structure of the test also has a logically complete structure.

Testing is a controlled type of activity of the student, which makes it possible to massively test the knowledge of students, quickly evaluate their knowledge, make sure that the student is able to navigate the flow of knowledge. The set of test tasks is unique. The uniformity of the test is achieved only by its structure.

The test results are recorded on paper and in the protocols of the meeting of the State Examination Board of the Medical Faculty of the FSBEI of HE "I. N. Ulianov Chuvash State University" in the specialty 31.05.03 "Dentistry".

To obtain a reliable result of testing the theoretical knowledge of students, the number of test tasks is 100 units.

The test completion time is 100 minutes. Each correctly completed task is evaluated with one point. A list of sample test questions is provided in *Appendix 1*.

Students must answer the required number of questions (70 or more), in this case, the rating "credited" will be given.

The second stage (interview) of the final state attestation in sections of the core and related clinical disciplines is carried out using examination papers, including situational tasks and fully conforming to the curriculum and approved by the educational-methodical commission of the Medical Faculty of FSBEI of HE "I. N. Ulianov Chuvash State University". The exam evaluates the ability to solve specific professional tasks, reveals the clinical thinking of the graduate, the

ability to link the presence of pathological changes in the oral cavity with diseases of internal organs and body systems.

The structure of the examination cards for the second stage of the interdisciplinary state examination is presented in *Appendix 2*.

The overall assessment based on the results of the first and second stages is given after a discussion at a meeting of the State Examination Board. Students are given a sufficient amount of time (45 minutes) to prepare for answering the card questions.

Documentation of all stages of the state examination is carried out in the form of protocols and reports. On the basis of a two-stage state examination, an examination score is formed. The final grade is defined as the average of the two component grades: testing, practical training, and interview. The prevailing score is the interview score.

When preparing for the state exam, the student must follow the content of the subjects of the state exam, use basic and additional literature, software and Internet resources.

A sample list of questions for the state exam (*Appendix 3*) for the sections of the main and related clinical disciplines is updated annually, discussed and approved at graduate departments.

Questions and examples of situational tasks, as well as the means for their evaluation, are presented in the evaluation materials (the fund of evaluation tools) of the final state examination.

#### 5. RECOMMENDATIONS FOR STUDENTS TO PREPARE FOR THE STATE EXAMINATION

The graduate's answer at the state examination can be rated as "excellent", "good", "satisfactory", "unsatisfactory". The key to successful passing of the exam is systematic, conscientious studies of the student throughout the entire training period. However, this does not exclude the need for special work immediately before taking the exam. A specific task at this time is revising, generalizing and systematizing all the material that has been studied during the entire training period.

#### 4.1. Organization of preparation for the state examination

The exam and preparation for it should be treated as an important part of learning, as an opportunity for self-development, and not as an obstacle to be overcome:

- build your daily routine in such a way that there is enough time for a full rest. Do not save time on sleep, as this can reduce the productivity of intellectual activity;

- determine for yourself short-term periods for rest (10-15 minutes) during the preparation. Take a break, do some simple physical exercises - this will allow you to better assimilate the material than you will sit for several hours at a textbook without getting up from your seat;

- learn (repeat) the material sequentially, returning to each question up to three times (getting to know - detailed study - repetition) - this is how information is absorbed more effectively;

- if possible, prepare for the exam in a group of 3-4 students, so you can distribute the questions that will be individually prepared in order to engage in mutual learning later. You can also read the answers out loud, and then repeat them one by one;

- it is more effective to learn the material not by questions, but by semantic sections. Pay attention to the connection of various questions – what knowledge can be applied to the answers to a variety of questions in the course;

- it is useful to make mini-answers, schematic images and short notes of answers to comprehend and systematize the content of questions;

- tune in to success – it increases confidence and is reflected in the quality of the response.

#### Working with educational literature (lecture notes):

- Prepare necessary information and reference (dictionaries, reference books) and recommended scientific and methodological literature (textbooks, manuals) to obtain comprehensive information on each examination question. - Specify the presence of the content and volume of material in lectures and educational literature to expand the issue (skimming lecture notes or textbooks). Preparation for expanding the problem from various sources is the key to deep and thorough preparation.

- Supplement the notes with missing information on certain aspects, without which a complete answer is impossible, use color, font highlighting, as well as diagrams, graphs, tables – this helps to better remember the material.

- Distribute all the material into parts, taking into account their complexity, make a schedule of preparation for the exam, providing for switching from work to rest.

- Prepare the workplace for classes: order, cleanliness, convenience, availability of office accessories in good condition and in the right quantity.

- Postpone, if possible, all the things to do and meetings that distract from preparation to the post-examination period.

- Carefully read the material of the lecture notes, textbook or other source of information in order to clarify certain provisions, information to be structured, supplementing work records.

- Re-read the content of the question, skipping or skimming through those parts of the material that were learned at the previous stage.

- Read again the material with the mindset to memorize. It is not the text that should be remembered, but its meaning and logic. First of all, it is necessary to memorize the terms, basic definitions, concepts, laws, principles, axioms, properties of processes and phenomena under study, the main influencing factors, their interrelations.

- Repeatability of the material with its gradual "compression" in volume contributes to good assimilation and memorization.

- On the last day of preparation for the exam, pronounce short answers to all the questions, and turn your attention in more detail to those that raise doubts, .

- On the eve of the exam day, ensure a normal sleep regime. In the morning – quickly review all the questions, silently briefly answer them and confidently go to the examination.

#### 4.2. Recommendations for preparing for the answer

After you have taken the examination paper, take your place at the study table and start preparing.

Preparation for the answer takes 30-40 minutes:

- Carefully read the content of the question, focus on the keywords. Try to remember the essence of the information that expands the question, trying to visually represent all the elements of the system in question, their functions, the connections between them, the norms of functioning and the basic properties of the system.

- Make short notes, structure the information and silently pronounce the answer. Make a written response plan, outlining the key points and their interconnection. Fill the plan with facts.

- If you can't remember everything, you can use the following technique: the page is divided into two parts: one column – "I know", the second – "I don't know". Write down on the left side of the page any information (relevant to the question) that you managed to remember. As you recall, transfer the content to the right column. After 10 - 15 minutes of such work, rewrite everything on a clean sheet, building the answer in a logical sequence and mentally designing your answer.

- Pay attention to what you say at the beginning of the answer. It is better to begin the presentation with something where you feel deep confidence. This can make a favorable impression on the examiners.

- Think over the final phrases of the answer. It will be good if we can summarize what has already been said.

#### **4.3.** Recommendations for the answer to the examination paper

The duration of the answer during the examination is usually no more than 30 minutes.

In your answer give the essence of the question, and do not replace it with an answer to another question. Otherwise, the examiners will notice that it is not about what is being asked and will conclude that you have poor knowledge of the course or do not understand the essence of the question.

Don't keep silence. It is better to repeat the same idea several times in different versions, concretizing it with practical examples, than to remain silent. Long pauses, silence instead of an answer – are perceived by examiners as evidence of poor preparation and lack of necessary knowledge.

Be respectful to the examination board:

- if the question is not clear, ask again or clarify it;

- listen carefully, without interrupting, to the examiners' remarks;

- demonstrate knowledge of the rules of conducting a business conversation, the ability to listen to the interlocutor and conduct a dialogue, which also evidences the quality of your professional proficiency.

#### 5. Criteria for grading at the state examination.

The main criteria for assessing the level of training of a graduate are:

- the level of mastering universal, general professional and professional competencies by the examinee;

- readiness to solve the tasks of professional activity of medical, research, organizational and managerial, pedagogical types;

- quality of answers to additional questions;

- consistency, good reason behind, clarity of the answer;

The results of taking the state examination are graded by a four point grading scale and announced on the same day, after drawing up the protocols of examination board meetings in the prescribed manner.

"Excellent" - if the graduate has deeply and thoroughly mastered all the material, comprehensively, consistently, correctly and logically presents it, without significant errors, does not require additional questions; his speech is good, he has good command of professional terminology; he does not experience difficulties with response in modification of the task, correctly justifies the decisions, is able to summarize and present the material.

**"Good"** – if the graduate knows consistently the material, properly and substantially presents it, does not make significant errors or inaccuracy in the answer to the question, but the presentation is not systematic and consistent, justification and the scheme of solving the problem is generally correct, with minor errors.

"**Satisfactory**" – if the graduate has mastered only the main material, but does not know individual details, admits inaccuracies, violates the sequence in presenting the program material, the material is not systematized, is not properly formulated, the speech is poor, justification for solving the situational problem is poor, the position is not reasoned.

"Unsatisfactory" – if the graduate does not know a significant part of the program material, makes significant mistakes. The main content of the material is not expanded; there is no necessary theoretical knowledge, practical skills and skills to solve a situational problem.

Recommended literature, software, professional databases, information and reference systems and information resources for preparing for the state exam.

#### In the discipline "Therapeutic dentistry»

	basic literature:				
N⁰	Title				
1.	Yanushevich, O. O. Therapeutic Dentistry: textbook / O. O. Yanushevich, Yu. M. Maksimovsky,				
	L. N. Maksimovskaya, L. Yu. Orekhova 3rd ed., reprint. and add Moscow: GEOTAR-Media				
	Publ., 2019 768 p 768 p ISBN 978-5-9704-5151-9 Text: electronic / / ELS "Student Con-				
	sultant": [website] URL : https://www.studentlibrary.ru/book/ISBN9785970451519.html				

2. Yanushevich, O. O. Parodontology / ed. Yanushevich O. O., Dmitrieva L. A.-Moscow: GEOTAR-Media Publ., 2018. - 752 p. (Series "National guidelines") - ISBN 978-5-9704-4365-1. - Text: electronic // ELS "Student Consultant": [website]. - URL : https://www.studentlibrary.ru/book/ISBN9785970443651.html

Supplementary literature:

N⁰	Title
par-	
agra	
ph	
1.	Bazikyan, E. A. Operational Dentistry : Preparation of Carious Cavities / E. A. Bazikyan [ et al. ]-
	Moscow: GEOTAR-Media Publ., 2017 112 p ISBN 978-5-9704-4104-6 Text: electronic / /
	ELS "Student Consultant": [website] URL :
	https://www.studentlibrary.ru/book/ISBN9785970441046.html
2.	Therapeutic Dentistry Diseases of the teeth. In 3 parts Part 1. [Electronic resource] : textbook / ed.
	E.A. Volkov, O. O. Yanushevich-M.: GEOTAR-Media Publ., 2016 Access mode:
	http://www.studmedlib.ru/book/ISBN9785970436196.html.
3.	Volkov, E. A. Therapeutic Dentistry Diseases of the teeth. In 3 parts P. 1.: textbook / ed. E. A.
	Volkov O. O. Yanushevich ]- Moscow: GEOTAR-Media Publ., 2016 168 p ISBN 978-5-
	9704-3619-6 Text: electronic / / ELS "Student Consultant": [website] URL :
	https://www.studentlibrary.ru/book/ISBN9785970436196.html

# In the discipline "Orthopedic dentistry»

N⁰	Title			
1.	Lebedenko, I. Yu. Orthopaedic Dentistry / ed. Yu. Lebedenko, S. D. Arutyunov, A. N. Ryakhov-			
	sky -Moscow: GEOTAR-Media Publ., 2019 824 p. (Series "National guidelines") - ISBN 978-5-			
	9704-4948-6 Text: electronic / / ELS "Student Consultant": [website] URL			
	:https://www.studentlibrary.ru/book/ISBN9785970449486.html			
2.	Kalivradzhiyan, E. S. OrthopedIc Dentistry: textbook / ed. Kalivradzhiyan E. S., Lebedenko I. Yu.			
	, Bragin E. A., Ryzhova I. P Moscow: GEOTAR-Media Publ., 2020 800 p ISBN 978-5-			
	9704-5272-1 Text: electronic / / ELS "Student Consultant": [website] URL :			
	https://www.studentlibrary.ru/book/ISBN9785970452721.html			

supplementary literature:

N⁰		Title			
	1.	Lebedenko, I. Yu. Orthopaedic Dentistry / ed. I. Yu. Lebedenko, E. S. Kalivradzhiyan - Moscow:			
		GEOTAR-Media Publ., 2016 640p ISBN 9978-5-9704-3722-3 Text: electronic / / ELS			
		"Student Consultant": [website] URL :			
		https://www.studentlibrary.ru/book/ISBN9785970437223.html			
	2.	Trezubov, V. N. OrtDopedic Dentistry : textbook / Trezubov V. N., Shcherbakov A. S., Mishnev			
		L. M Moscow: GEOTAR-Media Publ., 2019 688p ISBN 978-5-9704-4591-4 Text: elec-			
		tronic / / ELS "Student Consultant": [website] URL :			
		https://www.studentlibrary.ru/book/ISBN9785970445914.html			
	3.	Abdurakhmanov, A. I. Orthopedic Dentistry. Materials and Technologies: textbook / A. I. Abdu-			
		rakhmanov, O. R. Kurbanov 3rd ed., reprint. and add Moscow: GEOTAR-Media Publ., 2016.			
		- 352 p ISBN 978-5-9704-3863-3 Text: electronic / / URL :			
		http://www.studmedlib.ru/book/ISBN9785970438633.html			

#### In the discipline "Surgical Dentistry»

	basic literature:			
№		Title		
		Afanasyev, V. V. Surgical Dentistry: textbook / V. V. Afanasyev [et al.]; under the general ed. V. Afanasyev 3rd ed., reprint. and add Moscow: GEOTAR-Media Publ., 2019 400 p. : pict 400 p ISBN 978-5-9704-4873-1 Text: electronic / / ELS "Student Consultant": [website] URL : https://www.studentlibrary.ru/book/ISBN9785970448731.html		
4	2.	Drobyshev, A. Yu. Maxillofacial Surgery / ed. Yu. Drobyshev, O. O. Yanushevich ] - Moscow:		

GEOTAR-Media Publ., 2018. - 880 p. - ISBN 978-5-9704-4081-0. - Text: electronic / / ELS "Student Consultant": [website]. - URL : https://www.studentlibrary.ru/book/ISBN9785970440810.html

supplementary literature:

№		Title
		Bazikyan, E. A. Odontogenic Cysts of the Jaws / E. A. Bazikyan [ et al. ]- Moscow: GEOTAR-
	1.	Media Publ., 2018 80 p ISBN 978-5-9704-4333-0 Text: electronic / / ELS "Student Con-
		sultant": [website] URL : https://www.studentlibrary.ru/book/ISBN9785970443330.html
		Rabinovich, S. A. Safe Analgesia in Dentistry / S. A. Rabinovich[ et al. ]- Moscow: GEOTAR-
	2.	Media Publ., 2018 160 p ISBN 978-5-9704-4478-8 Text: electronic / / ELS "Student Con-
		sultant": [website] URL : <u>https://www.studentlibrary.ru/book/ISBN9785970444788.html</u>
		Tarasenko, S. V. Surgical Dentistry: textbook / ed. Tarasenko S. VMoscow: GEOTAR-Media
		Publ., 2020 672 p ISBN 978-5-9704-5434-3 Text: electronic / / ELS "Student Consultant":
		[website] URL : <u>https://www.studentlibrary.ru/book/ISBN9785970454343.html</u>

# In the discipline " Internal Diseases»

basic literature:

N₂		Title		
	1.	Moiseev, V. S. Internal Diseases: Volume 1: textbook: in 2 vols. / ed. Moiseev V. S., Martynov A.		
		I., Mukhin N. A Moscow: GEOTAR-Media Publ., 2019 960 p ISBN 978-5-9704-5314-8		
		Text: electronic / / ELS "Student Consultant": [website] URL :		
		https://www.studentlibrary.ru/book/ISBN9785970453148.html		
	2	Moiseev, V. S. Internal Diseases: Volume 1: textbook: in 2 vols. / ed. Moiseev V. S., Martynov A.		
	2.	I., Mukhin N. A Moscow: GEOTAR-Media Publ., 2019 896 p ISBN 978-5-9704-5315-5		
		Text: electronic / / ELS "Student Consultant": [website] URL :		
		https://www.studentlibrary.ru/book/ISBN9785970453155.html		

supplementary literature:

N⁰	Title			
1.	Makolkin, V. I. Internal diseases: textbook / Makolkin V. I., Ovcharenko S. I., Sulimov V. A6th			
	ed., reprint. and add. M Moscow: GEOTAR-Media Publ., 2017 768 p ISBN 978-5-9704-			
	4157-2 Text: electronic / / ELS "Student Consultant": [website] URL :			
	https://www.studentlibrary.ru/book/ISBN9785970441572.html			
2.	Fundamentals of Internal Diseases: Textbook [for 3-4 courses]: in 2 v. Vol. 1: Fundamentals of			
	cardiology, pulmonology with general physiotherapy. M. Karzakova [et al.]; [ed. M. Korzakova]			
	; Chuvash State University named after I. N. Ulianov Cheboksary: Chuvash University Pub-			
	lishing, 2016 307 p.: pict Bibliogr.: p. 303 ISBN 978-5-7677-2306-5 ISBN 978-5-7677-			
	2306-5 ISBN 978-5-7677-2313-3 (т.1) : 198-35			
3.	Fundamentals of Internal Diseases: Textbook [for 3-4 courses]: in 2 v. Vol. 2: Fundamentals of			
	gastroenterology, nephrology, endocrinology, hematology. Emergency conditions / L. M. Karza-			
	kova [et al.]; [ed. M. Korzakova] ; Chuvash State University named after I. N. Ulianov Chebo-			
	ksary: Chuvash University Publishing, 2017 267s.: pict ISBN 978-5-7677-2306-5 ISBN			
	978-5-7677-2423-9 (vol. 2): 158-64.			

	Software and Internet resources for all disciplines:			
N⁰	List of software and professional databases,			
1.	OpenOffice Office Suite			
2.	OpenOffice Office Suite			
3.	Windows operating system			
4.	Legal reference system "Consultant Plus»			
	The list of ELS			
1.	ChuvSU scientific library [Electronic resource]. – Mode of access: http://library.chuvsu.ru			
2.	Electronic library system IPRbooks [Electronic resource]. – Mode of access:			
	http://www.iprbookshop.ru			
3.	Electronic library system "Yurayt": electronic library for universities and colleges [Electronic			
	resource]. – Mode of access: https://www.biblio-online.ru			

4.	ELS "Publishing House" Lan " [Electronic resource]. – Mode of access: https://e.lanbook.com/			
5.	Consultant of a Student. Electronic library of a medical university [Electronic resource]. – Ac-			
	cess mode: http://www.studmedlib.ru/			
	Internet resources			
1.	Single window to educational resources [Electronic resource]. – Mode of access:			
	http://window.edu.ru			
2.	Russian State Library [Electronic resource]. – Mode of access: http://www.rsl.ru			
3.	Russian National Library [Electronic resource]. – Mode of access: http://www.nlr.ru			
4.	Scientific electronic library "Cyberleninka" [Electronic resource]. – Mode of access:			
	http://cyberleninka.ru			

#### 7. REGISTRATION OF THE RESULTS OF THE FINAL STATE ATTESTATION

The results of the final state attestation are drawn up by the protocols of the State Examination Board meetings for each graduate separately on the day of holding the level of the FSA (state examination) in accordance with the form approved by the Regulations on the final state attestation of the University, and are announced to all graduates who passed the final state attestation stage on that day at the same time.

Reports on the final state attestation are discussed at the meeting of the graduating department and approved at the meeting of the Academic Council of the Faculty.

The protocols of the state final attestation are kept in the Faculty Dean's office during a period determined by the File Register of the University.

# Sample list of test tasks

#### **Controlled competence – GPC-5**

1. Chronic periodontitis (moderate severity) is radiologically characterized by a decrease in the height of inter-dental septa by

- 1) 1/2 of the root length
- 2) 1/3 of the root length
- 3) 2/3 of the root length
- 4) to the root apex

5) there is no reduction in the height

#### **Controlled competence – GPC-2**

2. Lymph nodes in patients with HIV infection

- 1) are enlarged to 3 cm
- 2) are matted together to the skin
- 3) with hyperemia of the skin above them
- 4) painless, have a tight-elastic consistency

5) painful, fluctuate on palpation

## **Controlled competence – GPC-9**

3. The growth of the tumor in relation to the lumen of the hollow organ can be

- 1) endophytic and expansive
- 2) exophytic and infiltrating
- 3) endogenous and exogenous
- 4) exophytic and endophytic
- 5) expansive and infiltrating

## **Controlled competence - PC-1**

- 4. Melanoma is
- 1) a benign tumor of the nervous system
- 2) any benign skin tumor
- 3) a malignant tumor of the skin of any histogenesis
- 4) a malignant tumor from melanin-producing tissue
- 5) a benign tumor from melanin-producing tissue

## **Controlled competence - PC-1**

5. Grinding of the chewing dental surface is compensated by the activity of

- 1) odontoblasts
- 2) enameloblasts
- 3) cementoblasts

## **Controlled competence – GPC-6**

6. When the incision is made at the base of the lower jaw, which nerve is injured

- 1) nervus buccalis
- 2) nervus lingualis
- 3) nervus mylohyoideus
- 4) ramus marginalis mandibulae

- 7. The main distinguishing feature of a doctor's professional ethics is:
- 1) the right to deviant behavior;
- 2) conscious choice of moral principles and rules of conduct;
- 3) criminal liability for non-compliance with professional ethical standards;
- 4) the absolute need to subordinate personal interests to corporate interests;
- 5) the priority of the medical science interests over the interests of a particular patient.

## **Controlled competence – AC-5**

8. For the first time, sorting of the wounded in the military field was offered by

- 1) Mukhin E. O.
- 2) Bush I. V.
- 3) Buyalsky I. V.
- 4) Pirogov N. I.

5) Inozemtsev F. I.

## **Controlled competence – GPC-11**

9. In the practical work the doctor uses the following statistical methods.

- 1) graphic;
- 2) sociological;
- 3) calculation of intensive values;
- 4) analysis of average values;
- 5) all of the above.

# **Controlled competence - PC-2**

- 10. CPI is the index of
- 1) the intensity of dental caries
- 2) the effectiveness of oral hygiene
- 3) commune periodontal index of the WHO
- 4) the need in treatment of periodontal diseases

## **Controlled competence – GPC-4**

11. The document for the registering the epidemiological dental examination data according to the WHO methodology is

- 1) medical card of a dental patient
- 2) dental status assessment card (WHO)
- 3) the patient's medical history
- 4) a record sheet of preventive measures implementation

## **Controlled competence - PC-4**

12. When conducting professional oral hygiene, it is advisable to clean the chewing dental surface from plaque with the help of

- 1) ultrasonic scanners
- 2) toothbrush and toothpaste
- 3) floss
- 4) rubber caps and polishing pastes
- 5) brushes and polishing pastes

## **Controlled competence - PC-4**

- 13. The circular method of brushing teeth is recommended to use
- 1) children of preschool age
- 2) schoolchildren
- 3) adults
- 4) elderly persons
- 5) patients with braces

## **Controlled competence – GPC-4**

14. The cause of systemic hypoplasia of permanent teeth is

- 1) high fluoride content
- 2) heredity
- 3) mother's disease during pregnancy
- 4) diseases of the child in the first year of life

# **Controlled competence – GPC-2**

15. Anomalies in the position of the teeth may be due to

- 1) caries
- 2) impaired chewing function
- 3) wrong position of the immature tooth
- 4) fluorosis
- 5) enamel hypoplasia

# **Controlled competence – GPC-6**

16. When curing a chemical composite, polymerization shrinkage occurs in the direction of

- 1) light source
- 2) the periphery
- 3) the center
- 4) etched enamel

# **Controlled competence – GPC-9**

17. In the root pulp, odontoblasts form

- 1) 2 layers
- 2) 3 layers
- 3) 4 layers
- 4) 5 layers
- 5) 6 layers

# **Controlled competence – GPC-4**

18. Classification of caries by ICD-10
1) caries of enamel
2) medium caries
3) deep caries
caries in the stain stage
5) superficial caries

# **Controlled competence - PC-1**

- 19. Signs of malignancy of a traumatic ulcer
- 1) blood eosinophilia
- 2) change in the size of the ulcer
- 3) thickening of the ulcer's edges and the bottom
- 4) saucer-shaped ulcer
- 5) changing the color of the surrounding tissues

- 20. Differential diagnosis of the vertucous form of leukoplakia is carried out with
- 1) desquamative glossitis
- 2) multiform exudative erythema
- 3) glossalgia
- 4) catarrhal gingivitis

5) lichen planus of a hyperkeratotic form

## **Controlled competence – GPC-6**

21. The thickness of the sleeve for the production of a swaged crown made of stainless steel is equal to

- 1) 0,14
- 2) 0,22
- 3) 0,30
- 4) 0,35
- 5) 0,45

## **Controlled competence – GPC-6**

22. During fitting cast dental bridgework, the accuracy of the crowns' fit to the stumps of the supporting teeth is evaluated using

- 1) elastic impression material
- 2) base wax
- 3) gypsum
- 4) copy paper
- 5) water dentin

## **Controlled competence - PC-1**

23. Topography of the mucosa in the peripheral fibrous compressibility zone (according to Lund)

- 1) the area of the palatine folds
- 2) transition fold
- 3) alveolar process
- 4) the middle part of the hard palate
- 5) distal third of the hard palate

## **Controlled competence – GPC-6**

24. Plastic packing in a cuvette is carried out at which stage

- 1) dough-like
- 2) sandy
- 3) trailing threads
- 4) rubber-like
- 5) solid

# **Controlled competence - PC-2**

- 25. Functional changes of the temporomandibular joint after complete loss of teeth
- 1) posterior and upward displacement of the articular head of the lower jaw
- 2) atrophy of the articular tubercle
- 3) flattening of the articular fossa
- 4) dissociation of the intra-articular disc
- 5) thinning of the intra-articular disc

- 26. Functional changes of the temporomandibular joint after complete loss of teeth
- 3) flattening of the articular fossa
- 2) atrophy of the articular tubercle
- 5) thinning of the intra-articular disc
- 4) dissociation of the intra-articular disc

1) posterior and upward displacement of the articular head of the lower jaw

## **Controlled competence – GPC-6**

- 27. The reason for the thickening of the removable prosthesis base is
- 1) inaccurate connection of cuvette parts when packing the plastic
- 2) inaccuracy of obtaining the impression
- 3) deformation of the prosthesis at the time of its removal from the cuvette after polymerization
- 4) violation of the proportions of polymer and monomer in the preparation of the plastic
- 5) wrong choice of the type of dental plaster

# **Controlled competence - PC-2**

- 28. The positive aspects of dentures include
- 1) disturbance of thermoregulation
- 2) insufficient space for the tongue
- 3) restoring the chewing function
- 4) change in taste sensitivity
- 5) reducing the resonator space

# **Controlled competence - PC-2**

29. In periostitis of the upper jaw, which edema develops in the incisor area

- 1) edema of the upper lip
- 2) edema of the lower lip
- 3) edema of the tip of the nose
- 4) edema of the lower eyelid
- 5) edema of the parotid-chewing area

# **Controlled competence - PC-2**

- 30. Pericoronitis is an inflammatory process of
- 1) periodontium of the third molar
- 2) periosteum in the area of the third molar
- 3) tissues of the pterygoid-maxillary fold
- 4) fiber of the near-pharyngeal space
- 5) soft tissues around the crown of the incompletely erupted tooth

# **Controlled competence - PC-2**

- 31. Patients with abscesses of deep cellular spaces are treated in
- 1) trauma department
- 2) department of nervous diseases
- 3) maxillofacial hospital
- 4) dental polyclinic
- 5) department of abdominal surgery

- 32. Complaints of a patient with acute pericoronitis
- 1) swelling of the cheek
- 2) numbing of the lower lip
- 3) swelling in the under-eye area
- 4) pain in the temporomandibular joint
- 5) pain when swallowing, limited opening of the mouth

## **Controlled competence - PC-2**

33. In the chronic stage of osteomyelitis, the face configuration is changed due to

- 1) tumor
- 2) hematoma
- 3) soft tissue edema
- 4) periosteal thickening
- 5) infiltrate in the subcutaneous fat

## **Controlled competence - PC-2**

34. What radiation is used to obtain a bactericidal effect in alveolitis

- 1) ultraviolet
- 2) infrared
- 3) red
- 4) violet emission

# **Controlled competence - PC-2**

35. Labial pelotte in Persin apparatus for the treatment of mesial occlusion

- 1) stimulates the growth of the apical base of the upper jaw
- 2) stimulates the growth of the apical base of the lower jaw
- 3) inhibits the growth of the apical base of the lower jaw
- 4) normalizes the function of the tongue
- 5) expands the lower dentition

# **Controlled competence - PC-2**

36. Location of the distal surfaces of the second milk molars of a 3-year-old child in the same vertical plane is characteristic of what occlusion

- 1) distal
- 2) mesial
- 3) cross-cutting
- 4) physiological
- 5) disocclusion

# **Controlled competence - PC-1**

37. The most common form of periodontitis in children of any age

- 1) chronic apical (fibrous) periodontitis.
- 2) apical granuloma (chronic granulomatous periodontitis)
- 3) chronic (granulating) periodontitis.
- 4) chronic periodontitis in exacerbation stage.
- 5) acute (apical) periodontitis

## **Controlled competence - PC-1**

38. Clinical presentation in case of complete dislocation (exarticulation) of a temporary or permanent tooth:

- 1) the tooth socket is empty
- 2) shortening of the visible part of the crown
- 3) increase the visible part of the crown
- 4) crown's dislocation to the side
- 5) there are no visible changes

39. In children, the inflammatory process may involve tooth-surrounding tissues (periodontium, bone, periosteum), regional lymph nodes and soft tissues of the face in what type of pulpitis

- 1) acute focal
- 2) chronic fibrotic
- 3) acute purulent (diffuse)
- 4) chronic gangrenous beyond the stage of exacerbation
- 5) chronic hypertrophic

#### **Controlled competence – GPC-6**

40. As an abrasive component, which substance is introduced into the composition of toothpastes

- 1) silicon dioxide
- 2) dicalcium phosphate
- 3) sodium monofluorophosphate
- 4) pyrophosphates
- 5) sodium lauryl sulfate

## **Controlled competence – GPC-6**

41. Patients with braces for the most effective cleaning of the space between the arch and the teeth it is recommended to use

- 1) super-flosses
- 2) dental brushes
- 3) manual toothbrush
- 4) an electric toothbrush
- 5) mouthwashes

## **Controlled competence - PC-2**

42. What is performed In the absence of positive dynamics in conservative treatment of chronic apical periodontitis of a single-root tooth

- 1) hemisection
- 2) amputation of the root
- 3) root apical resection
- 4) repeated endodontic treatment
- 5) corona-radicular separation

## **Controlled competence - PC-2**

43. Carrying out a biological method is possible in

- 1) accidental opening of the tooth cavity in the treatment of caries in a 27-year-old patient
- 2) hyperemia of the pulp of a multi-root tooth in a 28-year-old patient
- 3) acute pulpitis in a 16-year-old patient with chronic pyelonephritis
- 4) accidental opening of the tooth cavity in a 23-year-old patient with diabetes
- 5) in a 42-year-old patient with chronic pulpitis

## **Controlled competence – AC-3, AC-4**

- 54. Psychology of communication studies such phenomena as:
- 1) people's perception and understanding of each other;
- 2) imitation, suggestion and persuasion;
- 3) cohesion and conflict;
- 4) joint activity and interpersonal relations;
- 5) all answers are correct
- 6) all the answers are not correct.

## **Controlled competence – AC-6**

55. The doctrine of ultimate, transcendental principles and principles of being, which seeks to create an unambiguous, static picture of the world:

1) dialectics

- 2) metaphysics
- 3) statics
- 4) monism

## **Controlled competence – AC-9**

56. What signs of exercise-induced angina pectoris give reason to suspect the development of myocardial infarction?

- 1) the duration of pain of more than 15 minutes;
- 2) the appearance of the fear of death;
- 3) BP decrease;
- 4) the pain is stronger than that during previous attacks;

# $Controlled \ competence-AC\text{-}10$

- 57.Command economy allows to:
- 1) take into account and distribute production resources;
- 2) distribute resources efficiently;
- 3) get rid of the deficit.

# **Controlled competence – AC-11**

- 58.Signs of a crime do not include:
- 1) illegality;
- 2) public danger;
- 3) jurisdiction;
- 4) punishability

# **Controlled competence – GPC-1**

59. The main goal of a doctor's professional activity is:1) saving and preserving human life2) respect from colleagues3) material benefit

# **Controlled competence – GPC-7**

60. Clinical signs of apnea:
1) loss of consciousness, lack of chest excursion;
2) pallor, shallow breathing;
3) pathological types of breathing.

- 61. The carrier of genetic information is
- 1) ribosomal RNA
- 2) transport RNA
- 3) heterogenous nuclear RNA
- 4) DNA

## **Controlled competence – GPC-12**

62. Basic principles of the rehabilitation measures system:

- 1) regularity, duration;
- 2) duration, integrated approach;

3) integrated approach, regularity;

4) integrated approach, continuity at all stages of the rehabilitation process, an individual nature of developing the rehabilitation program.

## **Controlled competence - PC-3**

63. Choose body tissues that do not have electrical conductivity:

- 1) the stratum corneum of the skin
- 2) hair
- 3) bones
- 4) epidermis
- 5) connective tissue

## **Controlled competence - PC-5**

- 64. In VMI, the insured are:
- 1) individuals in whose favor an insurance contract has been concluded
- 2) all citizens of the Russian Federation
- 3) pensioners
- 4) the working part of the population
- 5) non-working part of the population

# Controlled competence – AC-1, AC-2

65. The social status of a doctor is determined by

- 1) income
- 2) prestige of the profession
- 3) education
- 4) social mobility

# **Controlled competence – GPC-3**

66. Assessment of a person's physical condition is:

- 1) assessment of morphological and physical indicators;
- 2) assessment of blood supply functions;
- 3) assessment of physical fitness;
- 1) assessment of morphological and physical indicators;

# **Controlled competence – GPC-10, GPC-13**

- 67. What is the purpose of a pleural puncture?
- 1) To make sure there is liquid.
- 2) For better roentgenoscopy.
- 3) To make the roentgenography images more contrasting.
- 4) For better aortography.
- 5) For diagnostic and therapeutic purposes.

#### Structure of the examination card for the state examination

Federal State Budgetary	Examination card № 1	«APPROVE»
Educational Institution of	On taking the state examination	Head of the Thera-
Higher Education "I. N.	Discipline	peutic Dentistry De-
Ulianov Chuvash State	Therapeutic dentistry	partment
University"		
	Medical Faculty	A. V. Karpunina
	Training direction 31.05.03 Dentistry	
		" " 2022 <b>.</b>

Patient L., 19 years old, complained of bleeding and gum growth in the area of the front teeth of the lower jaw, unsatisfactory appearance when smiling and talking. She first noticed bleeding gums 6 years ago, the last 3 years the shape of the gums changed, there was a feeling of discomfort. In the polyclinic in the home area the doctor recommended using a soft toothbrush, rinsing the mouth with herbal infusions. The condition worsened: bleeding in the gum increased. As a child, she suffered from chickenpox and other childhood infections, and now considers herself practically healthy. On external examination, the facial parts are symmetrical, submandibular lymph nodes are palpable, painless. Examination of the oral cavity: the dentition is intact, the teeth are crowded in the anterior part of the lower jaw. There is an excessive soft plaque on the teeth. There is tartar on the lingual surface of the incisors and canines of the lower jaw. Cyanosis of the gingival papillae and the gum margin in the front teeth of the lower jaw. The gingival papillae overlap the crowns of the teeth by 1/3, when probing, bleeding of the gums is noted; the clinical pocket is 4-5 mm; the dentogingival junction is not broken. In the other parts of the jaw, the gum is unchanged.

- 1. Make the diagnosis.
- 2. Perform a differential diagnosis.
- 3. Make a plan for an additional examination.
- 4. Outline a treatment plan.

Federal State Budgetary	Examination card № 1	«APPROVE»
Educational Institution of	On taking the state examination	Head of Orthopedic
Higher Education "I. N.	Discipline	<b>Dentistry and Ortho-</b>
Ulianov Chuvash State	Orthopedic Dentistry	dontics Department
University"		

Medical Faculty Training direction 31.05.03 Dentistry	Yu. N. Urukov
	"2022.

Patient, 35 years old, a teacher. She complained of absence of teeth on the lower jaw and poor food mastication.

Objectively:

Dental Formula: <u>18 17 16 15 14 13 12 11 / 21 22 23 24 25 26 27 28</u> 0 0 0 0 44 43 42 41 / 31 32 33 34 35 0 0 0

The occlusion is orthognathic. The crown of the tooth 1.3 is destroyed by 1/3, the canal is filled, according to radiography, there are no changes in the periapical tissues. Atrophy of the alveolar process in the area of missing teeth is insignificant, uniform. Frenums are attached at the base of the alveolar process.

- 1. Make the diagnosis.
- 2. Choose the design of dental prostheses.

Federal State Budgetary	Examination card № 1	<b>«APPROVE»</b>
Educational Institution of	On taking the state examination	Head of Oral and
Higher Education "I. N.	Discipline	Maxillofacial Surgery
Ulianov Chuvash State	Dental Surgery	and Dentistry De-
University"		partment
	Medical Faculty	
	Training direction 31.05.03 Dentistry	V. V. Trubin
		'' 2022.

A patient, 34 years old, presented with complaints of sharp pain in the teeth of the upper jaw on the right, increasing when biting, swelling of the face on the right, general weakness, an increase in body temperature to 38.0 ° C. From the anamnesis - three days ago, she went to the dentist for the purpose of sanitizing the oral cavity; the channels of the two upper teeth on the right were filled. The next day, pains in these teeth appeared. She rinsed the mouth with a soda solution; nevertheless, the pain intensified, took on a spilled character. Last night, there was a swelling of the face on the right and gums in the area of these teeth, which increased significantly by this morning.

Objectively: the general condition is closer to satisfactory, the body temperature is 37.9 ° C, the pulse is 80 beats per minute, of satisfactory properties.

Locally - configuration of the face is changed due to edema of the soft tissues in the right buccal region and the OD lower eyelid, the skin of this area is not changed in color, palpation causes moderate pain. The mouth opens freely. In the oral cavity: tooth 1.3 is intact, the crown of the tooth 1.4 is partially destroyed (there are traces of a temporary filling), teeth 1.5, 1.6 are under fillings. Percussion of the tooth 1.4 causes sharp pain, percussion of the tooth 1.5 causes moderate pain, percussion of the teeth 1.3, 1.6 does not cause pain. The mucous membrane of the alveolar process of the right upper jaw from the vestibular side in the area of teeth 1.3, 1.4, 1.5 is hyperemic, edematous. In this area, a dense infiltrate is palpated without clear boundaries, the pressure on it causes sharp pain.

1. Make and justify the diagnosis. Give the classification of the group of diseases to which this process belongs.

2. Explain the etiology and pathogenesis of this disease, describe the pathological anatomy.

3. Make a plan for examination of this patient. Describe the probable results of additional examination methods. Describe the submitted X-ray image.

4. Perform a differential diagnosis.

5. Make a plan for this patient's examination. Justify the choice of anesthesia administration.

6. Describe the technique of performing the surgical intervention. Write out prescriptions for the medications administered by you in this case.

7. List possible complications of this disease and ways to prevent them.

Federal State Budgetary Educational Institution of Higher Education "I. N.	Examination card № 1 On taking the state examination Discipline	«APPROVE» Head of department of hospital therapy №2
Ulianov Chuvash State	Internal diseases	
University"	Medical Faculty	
	Training direction 31.05.03 Dentistry	L. M. Karzakova
		"2022 .

Patient K., 46 years old, presented at the dentist for passing a prophylactic examination. During the visit, the dentist paid attention to the emotional excitement of the patient and redness of his face. An active survey revealed the following complaints: heaviness in the occipital region, dizziness, "a veil before the eyes", a feeling of lacking air.

From the anamnesis it is known: he has considered himself ill for the last 4 years, when previously, for the first time, an increase in blood pressure to 160/100 mm Hg was recorded against the background of alcohol intake, because of which he called the "03" team, after providing medical assistance, he went to see a polyclinic therapist, an examination was conducted and antihypertensive therapy was prescribed. The patient can not specify the results of the examination and the names of the drugs, according to his words the therapy taken was situational, not regular. The present deterioration has been lasting for a month, he notes an increase in headache, dizziness, the appearance of flashing "flies" before the eyes.

He works as a civil servant, denies professional harm.

Family history: the patient's father suffers from coronary heart disease, hypertension, and suffered a myocardial infarction at the age of 50.

Bad habits: does not smoke, rarely uses alcohol.

On examination: the condition is satisfactory. The build is correct, hypersthenic. Height-180 cm, weight-98 kg. In the lungs, auscultation finds vesicular breathing which is carried out in all departments, there are no rales. Respiratory rate -17 per minute. The boundaries of the relative dullness of the heart: right - the right edge of the sternum, left-1 cm to outside of the left midclavicular line, upper-the upper edge of the III rib. During auscultation, the heart tones are muted, rhythmic, the accent of the second tone is on the aorta, there are no pathological noises. Pulse - 88 beats / min, blood pressure 170/100 mm Hg on both arms. The abdomen is soft, painless in all parts. The liver is at the edge of the costal arch, dimensions according to Kurlov: 10x9x8 cm.

According to the outpatient card: general clinical blood and urine tests show no pathology. ECG - sinus rhythm, deviation of the electrical axis of the heart to the left, violation of repolarization processes in the myocardium.

# Questions:

- Formulate a clinical diagnosis.
   Determine the emergency condition that has developed in the patient.
- 3. Make and justify the algorithm of emergency care and further tactics of patient management.

Appendix 3

# SAMPLE LIST OF EXAMINATION QUESTIONS FOR FINAL STATE ATTESTATION Therapeutic dentistry. Orthopedic dentistry. Dental surgery. Internal diseases

Seq. N	Question	Controlled
504.11	_	competences
1.	Regulatory and legal documents for organizing dental care for the population.	GPC-2.1; GPC-2.2
2.	The prevalence and intensity of major dental diseases among the population. The trend of dental diseases in the world in the light of the WHO global goals.	GPC-2.1, GPC-2.2, GPC-2.3, GPC-5.1, GPC-5.2, GPC-5.3
3.	Planning primary prevention at the municipal level. Setting the goals and objectives of primary preven- tion.	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1; GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2; GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1; PC-2.2
4.	Criteria for assessing the quality of dental care to the population.	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1; GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2; GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1; PC-2.2
5.	Prevention of dental diseases with the use of tooth- pastes. Requirements for toothpastes.	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1; GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2; GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1; PC-2.2
6.	Nutrition and dental health. The methods of evalua- tion. The nutrition factor in municipal prevention programs.	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1; GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2; GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1; PC-2.2
7.	Dental education and the health of the population. Methods and means.	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1; GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2; GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1; PC-2.2
8.	Medical deontology and ethics of the dentist. Defini- tion, meaning in the professional activity of a doctor.	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1; GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2; GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1; PC-2.2
9.	National program for the prevention of dental caries and periodontal diseases. Objectives of the program, the staff. Features in different age groups.	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1; GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2; GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1; PC-2.2
10.	Motivation, training in oral hygiene, methods of con- ducting, role in the prevention of dental diseases.	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1; GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2; GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1; PC-2.2
11.	Methods of examining a dental patient. Basic and additional methods.	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1; GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2; GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1; PC-2.2
12.	Methodology for assessing the condition of the fre- nums and cords, the depth of the vestibule of the oral cavity.	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1; GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2; GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1; PC-2.2

## Therapeutic dentistry

	34	
13.	Non-carious lesions that develop during tooth devel- opment. Clinical presentation, diagnostics, treatment.	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1; GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2;
10.		GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1; PC-2.2
	Non-carious lesions of the hard tissues of the tooth	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1;
	that occur after eruption. Wedge-shaped defect, hy-	GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2;
14.	peresthesia, acid necrosis. Clinical presentation, diag-	GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1;
	nostics, treatment.	PC-2.2
	Classification of caries.	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1;
15.		GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2;
		GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1; PC-2.2
	Acute caries. Clinical presentation, diagnostics,	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1;
16	treatment.	GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2;
16.		GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1;
		PC-2.2
	Chronic caries. Clinical presentation, diagnostics,	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1;
	· · ·	
17.	treatment.	GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2;
		GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1;
		PC-2.2
	Superficial caries. Clinical presentation, diagnostics,	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1;
18.	treatment.	GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2;
10.		GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1;
		PC-2.2
	Initial caries. Clinical presentation, diagnostics,	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1;
	treatment.	GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2;
19.		GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1;
		PC-2.2
	Medium caries. Clinical presentation, diagnostics,	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1;
	treatment.	
20.	treatment.	GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2;
		GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1;
		PC-2.2
	Deep caries. Clinical presentation, diagnostics,	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1;
21.	treatment.	GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2;
21.		GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1;
		PC-2.2
	Acute deep caries. Clinical presentation, diagnostics,	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1;
22.	treatment.	GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2;
۲۲.		GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1;
		PC-2.2
	Chronic deep caries. Clinical presentation, diagnos-	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1;
	tics, treatment.	GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2;
23.	,	GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1;
		PC-2.2
	Etiology and nathogenesis of mulnitic Classification	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1;
	Etiology and pathogenesis of pulpitis. Classification	
24.	of pulpites.	GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2;
		GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1;
		PC-2.2
	Hyperemia of the pulp. Clinical presentation, diag-	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1;
25.	nostics, treatment.	GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2;
23.		GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1;
		PC-2.2
	Acute focal pulpitis. Clinical presentation, diagnos-	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1;
	tics, treatment.	GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2;
26.		GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1;
		PC-2.2
		Г.U-2.2

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27.	Acute diffuse pulpitis. Clinical presentation, diagnos- tics, treatment.	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1; GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2; GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1; PC-2.2
28.	Chronic fibrous pulpitis. Clinical presentation, diag- nostics, treatment.	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1; GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2; GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1; PC-2.2
29.	Chronic gangrenous pulpitis. Clinical presentation, diagnostics, treatment.	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1; GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2; GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1; PC-2.2
30.	Chronic hypertrophic pulpitis. Clinical presentation, diagnostics, treatment.	GPC-5, GPC-9, PC-1, PC-2, PC-4, PC-5, PC- 6, PC-8, PC-11
31.	Complications and errors that occur in the treatment of pulpitis.	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1; GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2; GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1; PC-2.2
32.	Acute apical periodontitis. Clinical presentation, di- agnostics, treatment.	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1; GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2; GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1; PC-2.2
33.	Chronic fibrous periodontitis. Clinical presentation, diagnostics, treatment.	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1; GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2; GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1; PC-2.2
34.	Chronic granulating periodontitis. Clinical presenta- tion, diagnostics, treatment.	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1; GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2; GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1; PC-2.2
35.	Chronic granulomatous periodontitis. Clinical presen- tation, diagnostics, treatment.	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1; GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2; GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1; PC-2.2
36.	Exacerbations of chronic periodontitis. Clinical presentation, diagnostics, treatment.	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1; GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2; GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1; PC-2.2
37.	Complications that occur after the treatment of perio- dontitis.	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1; GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2; GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1; PC-2.2
38.	Criteria for evaluating the periodontal condition, evaluating the CPITN index.	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1; GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2; GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1; PC-2.2
39.	Examination of the state of gum vessels, sto- matoscopy, capillaroscopy, resistance of capillaries according to V. I. Kulazhenko.	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1; GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2; GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1; PC-2.2
40.	Intraoral radiography, panoramic orthopantomogra- phy. (PC-5)	GPC-2.1; GPC-2.2; GPC-2.3; GPC-5.1; GPC-5.2; GPC-5.3; GPC-6.1; GPC-6.2; GPC-6.3; PC-1.1; PC-1.2; PC-1.3; PC-2.1; PC-2.2
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5.	Acute myocardial infarction. Clinical presentation. ECG signs. The tactics of a dental practitioner in case of suspected development of a myocardial infarction in a dental chair. Treatment.	GPC-5.1; GPC-5.2; GPC-5.3; PC-1.1; PC- 1.2; PC-1.3
6.	Acute pneumonias. Classification, features of the etiology of commu- nity-acquired and nosocomial pneumonia. The significance of odonto- genic infection. Treatment of pneumonias. Diagnostics of pneumonia complications, emergency measures.	GPC-5.1; GPC-5.2; GPC-5.3; PC-1.1; PC- 1.2; PC-1.3
7.	Emergency care for an attack of bronchial asthma. The tactics of a den- tal practitioner in the event of an attack of bronchial asthma in the den- tal chair.	GPC-5.1; GPC-5.2; GPC-5.3; PC-1.1; PC- 1.2; PC-1.3
8.	Gastric ulcer and duodenum ulcer. The significance of Helicobacter pylori, odontogenic infection in the development of peptic ulcer dis- ease. Diagnostics. Treatment. Diagnostics and treatment of emergency	GPC-5.1; GPC-5.2; GPC-5.3; PC-1.1; PC- 1.2; PC-1.3
9.	conditions associated with complications of peptic ulcer.Chronic hepatitis, cirrhosis of the liver. Classification. Diagnosis, the main laboratory syndromes of liver damage. Treatment. Features of providing dental care. Diagnostics and treatment of emergency condi- tions associated with complications of liver cirrhosis.	GPC-5.1; GPC-5.2; GPC-5.3; PC-1.1; PC- 1.2; PC-1.3
10.	Mitral and aortic heart defects. Diagnosis, differential diagnostics. Di- agnostics and treatment of emergency conditions associated with com- plications of heart defects.	GPC-5.1; GPC-5.2; GPC-5.3; PC-1.1; PC- 1.2; PC-1.3
11.	Infectious endocarditis. Etiology, significance of oral diseases. Clinical manifestations (by stages). Treatment. Features of dental care in the prevention of infectious endocarditis.	GPC-5.1; GPC-5.2; GPC-5.3; PC-1.1; PC- 1.2; PC-1.3
12.	Hypertensive crises. Diagnostics. The tactics of a dental practitioner in the event of a crisis in the dental chair.	GPC-5.1; GPC-5.2; GPC-5.3; PC-1.1; PC- 1.2; PC-1.3
13.	Arrhythmias and heart blockages. ECG signs. Emergency measures in the event of paroxysmal arrhythmias in the dental chair.	GPC-5.1; GPC-5.2; GPC-5.3; PC-1.1; PC- 1.2; PC-1.3
14.	Differential diagnostics in case of shocks of different origin (such as anaphylaxis, pain, septic, etc.). Etiology. Clinical presentation. Emer- gency care. The tactics of a dental practitioner in the event of a shock in the dental chair.	GPC-5.1; GPC-5.2; GPC-5.3; PC-1.1; PC- 1.2; PC-1.3
15.	Drug allergy. Quincke's edema. Toxic-allergic reactions (Stevens- Johnson syndrome, Lyell syndrome). Clinical manifestations. Manifes- tations in the oral mucosa. The tactics of a dental practitioner in the event of acute manifestations of drug allergies. Prevention.	GPC-5.1; GPC-5.2; GPC-5.3; PC-1.1; PC- 1.2; PC-1.3
16.	Complications of acute glomerulonephritis. Emergency care.	GPC-5.1; GPC-5.2;

		GPC-5.3; PC-1.1; PC- 1.2; PC-1.3
17.	Hyperglycemic ketoacidotic and hypoglycemic comas. Differential diagnosis. The tactics of a dental practitioner in the event of coma in the dental chair. Prevention.	GPC-5.1; GPC-5.2; GPC-5.3; PC-1.1; PC- 1.2; PC-1.3
18.	Thyrotoxic crisis. Urgent measures.	GPC-5.1; GPC-5.2; GPC-5.3; PC-1.1; PC- 1.2; PC-1.3
19.	Respiratory distress syndrome and pulmonary edema. Etiology. Diag- nostics. Treatment.	GPC-5.1; GPC-5.2; GPC-5.3; PC-1.1; PC- 1.2; PC-1.3
20.	Diagnostics and emergency treatment of PATE.	GPC-5.1; GPC-5.2; GPC-5.3; PC-1.1; PC- 1.2; PC-1.3
21.	Differential diagnostics of chest pains. The tactics of a dental practi- tioner in the event of pain in the heart.	GPC-5.1; GPC-5.2; GPC-5.3; PC-1.1; PC- 1.2; PC-1.3
22.	Differential diagnostics of syncope conditions. Emergency care.	GPC-5.1; GPC-5.2; GPC-5.3; PC-1.1; PC- 1.2; PC-1.3
23.	Differential diagnostics in convulsions. Emergency care.	GPC-5.1; GPC-5.2; GPC-5.3; PC-1.1; PC- 1.2; PC-1.3
24.	Differential diagnostics of febrile syndrome. Emergency care.	GPC-5.1; GPC-5.2; GPC-5.3; PC-1.1; PC- 1.2; PC-1.3
25.	Differential diagnostics of anemias. Treatment of anemias.	GPC-5.1; GPC-5.2; GPC-5.3; PC-1.1; PC- 1.2; PC-1.3
26.	Sudden death. Diagnostics. The algorithm of resuscitation measures at the prehospital stage.	GPC-5.1; GPC-5.2; GPC-5.3; PC-1.1; PC- 1.2; PC-1.3

Discussed: at the meeting of the Department of Therapeutic Dentistry on March 10, 2022, record No 7

Head of the Therapeutic Dentistry Department, A.V. Karpunina

at the meeting of the Department of Orthopedic Dentistry and Orthodontics on March 25, 2022, record №14

Head of Orthopedic Dentistry and Orthodontics Department, Yu.N. Urukov

at the meeting of Oral and Maxillofacial Surgery and Dentistry Department on March 25, 2022, record №10

Head of Oral and Maxillofacial Surgery and Dentistry Department, V.V. Trubin

at the meeting of the Departments of Internal Diseases on March 25, 2022, record №10 Head of Internal Diseases Department, L. M. Karzakova

Approved by the decision of the Academic Council of the Medical Faculty on March 28, 2022, record  $N_{2}$  7.