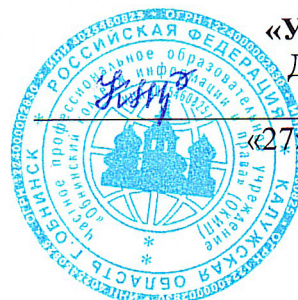


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**ЧАСТНОЕ ПРОФЕССИОНАЛЬНОЕ ОБРАЗОВАТЕЛЬНОЕ УЧРЕЖДЕНИЕ
«ОБНИНСКИЙ КОЛЛЕДЖ ИНФОРМАЦИИ И ПРАВА»**



«УТВЕРЖДАЮ»

Директор ОКИП

Н.Б. Косинская

«27» июня 2025 год

ФОНД ОЦЕНОЧНЫХ СРЕДСТВ УЧЕБНОЙ ДИСЦИПЛИНЫ

**СГ.02 ИНОСТРАННЫЙ ЯЗЫК В ПРОФЕССИОНАЛЬНОЙ
ДЕЯТЕЛЬНОСТИ**

по профессии среднего профессионального образования

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1. Результаты освоения учебной дисциплины, подлежащие проверке

В результате аттестации по учебной дисциплине осуществляется комплексная проверка следующих умений и знаний, а также динамика формирования компетенций:

Код и наименование профессиональных и общих компетенций формируемых в рамках дисциплины¹	Результаты обучения	Критерии оценки	Методы оценки
ОК 02, ОК 04, ОК 05, ОК 09 ЛР 5, ЛР 8, ЛР 9, ЛР 11, ЛР 13, ЛР-18	знания: - основные приемы и методы работы с иноязычными текстами; - правила построения простых и сложных предложений на профессиональные темы; - лексический минимум, относящийся к описанию предметов, средств и процессов профессиональной деятельности -грамматический минимум, необходимый для чтения и перевода со словарем иностранных текстов профессиональной направленности ; - особенности переводов текстов профессиональной направленности	- демонстрация знаний лексического минимума, позволяющего общаться с пациентами и другими участниками лечебного процесса; - воспроизведение лексических единиц с правильной артикуляцией и произношением близким к нормативному; - написание лексической единицы по правилам орфографии;	Оценка в рамках текущего контроля: - результатов выполнения индивидуальных лексических и грамматических контрольных заданий по темам программы; - тестирование; - устный опрос; - оценка понимания основного содержания текста по знакомым опорным словам, интернациональной и профессиональной лексике; - дифференцированный зачет
ОК 02, ОК 04, ОК 05, ОК 09 ЛР 5, ЛР 8, ЛР 9, ЛР 11, ЛР 13, ЛР-18	умения - читать и переводить профессионально ориентированную литературу, в том числе профессиональную медицинскую документацию; - общаться (устно и письменно) на иностранном языке на профессиональные темы; -заполнять необходимую документацию, используя извлеченную и общепринятую профессиональную информацию	- нахождение необходимой профессиональной информации в англоязычных текстах; - грамотное использование двуязычного словаря; - соответствие перевода оригиналу; - успешное ведение диалога с использованием речевых формул в стандартных ситуациях общения с	- экспертная оценка умения общаться устно и письменно на английском языке на профессиональные темы на практических занятиях; - оценка результатов выполнения лексико-грамматических упражнений. - оценка правильности употребления языкового материала при составлении рассказов, представлении диалогов, ролевых игр.

¹ В ходе оценивания могут быть учтены личностные результаты.

		соблюдением правил речевого этикета; - демонстрация понимания на слух фраз с использованием изученной лексики; - составление устного и письменного высказывания для постановки профессиональных задач и решения проблемных вопросов; - грамотное использование лексики с учетом норм иностранного языка; - соблюдение основных правил оформления письменного текста; - отсутствие ошибок, нарушающих коммуникацию	
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2. Оценка освоения умений и знаний учебной дисциплины

Предметом оценки служат умения и знания, предусмотренные ФГОС по дисциплине «Иностранный язык в профессиональной деятельности», направленные на формирование компетенций. Оценка осуществляется поэтапно: текущий тестовый контроль по темам, защита рефератов (докладов, презентаций) и дифференцированный зачет.

Результаты выполнения практических и внеаудиторных самостоятельных работ, включающие решение задач, семинары, выполнение практических заданий так же оцениваются в процессе текущего контроля.

Разработан и используется комплект тестовых заданий с применением программы тестирования, который позволяет оперативно оценить уровень усвоения материала.

Текущий контроль успеваемости представляет собой проверку усвоения учебного материала, регулярно осуществляемую на протяжении курса обучения. Во время проведения учебных занятий дополнительно используются следующие формы текущего контроля – устный опрос, проверка конспектов, проверка самостоятельной работы.

Промежуточная аттестация по дисциплине «Иностранный язык в профессиональной деятельности» проводится в форме устного опроса или

тестирования и решения практических задач.

Студенты допускаются к сдаче дифференциального зачета при выполнении всех видов самостоятельной работы, практических работ, предусмотренных рабочей программой учебной дисциплины «Иностранный язык в профессиональной деятельности».

Результаты дифференциального зачета промежуточной аттестации по учебной дисциплине отражаются в Экзаменационной (зачетной) ведомости.

2.1. Типовые задания в тестовой форме для оценки знаний

1. Millions of microscopic individual units are called ...

- a) molecules
- b) bricks
- c) cells**
- d) tissues

2. The respiratory system consists of ...

- a) stomach & intestines
- b) blood
- c) air passages & lungs**
- d) brain

3. What is nucleus responsible for?

- a) breathing
- b) growth**
- c) oxygen
- d) reproduction

4. What system of the body has a transporting function?

- a) circulatory**
- b) muscular
- c) urinary
- d) nervous

5 ... are red blood cells of which 4,5-5 million in each cubic mm.

- a) Agranulocytes
- b) Platelets
- c) Erythrocytes**
- d) Plasma

6 Thrombocytes are formed in the

- a) bone marrow**
- b) spleen
- c) heart
- d) ulcer

7 Is there any communication between left and right sides of the heart?

- a) **no**
- b) yes
- c) sometimes
- d) artificial

8 What two chambers of the heart are separated by?

- a) membrane
- b) **wall**
- c) diaphragm
- d) ventricle

9 The round trip of blood is called

- a) transfusion
- b) coagulation
- c) expiration
- d) **circulation**

10 What carries only oxygenated blood?

- a) **arteries**
- b) veins
- c) platelets
- d) erythrocytes

11 What enters the blood during respiration?

- a) **oxygen**
- b) NaCl
- c) carbon dioxide
- d) water

12 The spaces between the ribs are filled by the

- a) diaphragm
- b) capillaries
- c) **rib muscles**
- d) tissues

13 In what two branches does the trachea divide?

- a) aortas
- b) **bronchi**
- c) larynx
- d) lungs

14 The sheet of muscle, separating the chest from the abdomen, is called

- a) rib muscle
- b) **diaphragm**
- c) stomach

d) bellow

15 Certain substances, made by the body and mixed with the food during its passage through the alimentary canal, are called

a) enzymes

b) vitamins

c) mucus

d) glucose

16 What is not a constituent of food?

a) protein

b) fat

c) water

d) carbon dioxide

17 ... are necessary for cell growth and repair.

a) Fats

b) Proteins

c) Milk

d) Carbohydrates

18 For the production of blood, urine, sweat and digestive juice the body requires...

a) NaCl

b) air

c) water

d) sun

19 What is not the sign of inflammation?

a) pain

b) swelling

c) bruise

d) redness

20 Pathology is the study of

a) blood groups

b) disease

c) drugs

d) circulation

21 Any shallow breach of the skin or mucous membrane is called

a) ulcer

b) abnormal sac

c) cyst

d) scratch

22 A violent reaction to certain types of pollen, food, drugs, latex products is called

- a) anaemia
- b) allergy**
- c) obstruction
- d) collapse

23 What organ realizes secretion?

- a) liver
- b) gland**
- c) pancreas
- d) blood

24 What is taken out of the cell in the first instance of secretion?

- a) H₂O
- b) FeSO₄
- c) NaCl**
- d) Oxygen

25 Immunity is proved by certain ... blood cells.

- a) red
- b) white**
- c) dead
- d) resistant

26 How is a life-long protection called?

- a) congenital immunity
- b) acquired immunity**
- c) natural immunity
- d) resistance

2.2. Задания для выполнения практических работ

Тексты для чтения/перевода

Текст № 1 (1500 печ. знаков) Human Skeleton

The human skeleton is made of individual or joined bones (such as the skull), supported and supplemented by a structure of ligaments, tendons, muscles, cartilage and other organs.

The skeleton is not unchanging; it changes composition over a lifespan. Early in gestation, a fetus has no hard skeleton; bones form gradually during nine months in the womb. At birth, all bones will have formed, but a newborn baby has more bones than an adult. On average, an adult human has 206 bones, but a baby is born with approximately 270 bones. The difference comes from a number of small bones that fuse together during growth, such as the sacrum and coccyx of the vertebral column. An infant is born with pockets of cartilage between particular bones to allow further growth. The sacrum consists of five bones which are separated at birth but fuse together into a solid structure in later

years. Growing is usually completed between ages 12 and 14, at which point the bones have no pockets of cartilage left to allow more growth.

Not all bones are interconnected directly. There are 6 bones, the auditory ossicles in the middle ear that articulate only with each other. Another bone, the hyoid bone in the neck, does not touch any other bones in the body, and is supported by muscles and ligaments; it serves as the point of attachment for the tongue. The longest and heaviest bone in the body is the femur and the smallest is the stapes bone in the middle ear. In an adult, the skeleton comprises around 20% of the total body weight.

The most obvious function of bone is to support the body. It also the site of haematopoiesis, the manufacture of blood cells, that takes place in bone marrow. It is also necessary for protection of vital organs. Movement in vertebrates is dependent on the skeletal muscles, which are attached to the skeleton by tendons.

Текст № 2 (1500 печ. знаков) Smooth muscle

Smooth muscle is a type of non-striated muscle, found within the "walls" of hollow organs; such as the bladder, the uterus, and the gastrointestinal tract, and also lines the lumen of the body, such as blood vessels. Smooth muscle is fundamentally different from skeletal muscle and cardiac muscle in terms of structure and function.

Smooth muscle is spindle shaped, and like any muscle, can contract and relax. In order to do this it contains intracellular contractile proteins called actin and myosin. While the fibers are essentially the same in smooth muscle as they are in skeletal and cardiac muscle, the way they are arranged is different. As non-striated muscle, the actin and myosin is not arranged into distinct sarcomeres that form orderly bands throughout the muscle cell. The cells themselves are generally arranged in sheets or bundles and connected by gap junctions. In relaxed state, each cell is spindle-shaped, 25-50 μm long and 5 μm wide.

The cells that compose smooth muscle have single nuclei.

The contractile function of this muscle, to a large extent, determines function of the organ. For example, contractile function of vascular smooth muscle contributes to setting the level of blood pressure. Smooth muscle tissue serves to guide medium transport, such as blood, urine, sperm, bile by means of controlled contractions inducing peristaltic movements.

Smooth muscle contraction is caused by the sliding of myosin and actin fibres over each other. It happens when heads on the myosin fibres form crossbridges with the actin fibre. Smooth muscle cells can be stimulated to contract or relax in many different ways. They may be directly stimulated by the autonomic nervous system, but can also react on stimuli from neighbouring cells and on hormones within the medium that it carries.

Текст № 3 (1500 печ. знаков) The Cardiovascular System

The cardiovascular system is sometimes called the circulatory system. It consists of the heart, which is a muscular pumping device, and a closed system of vessels called arteries, veins, and capillaries. As the name implies, blood contained in the circulatory system is pumped by the heart around a closed circuit of vessels as it passes again and again through the various "circulations" of the body. The heart is enclosed by a sac known as the pericardium. There are three layers of tissues that form the heart wall. The outer layer of the heart wall is the epicardium, the middle layer is the myocardium, and the inner layer is the

endocardium. The internal cavity of the heart is divided into four chambers: right atrium, right ventricle, left atrium, left ventricle.

The two atria are thin-walled chambers that receive blood from the veins. The two ventricles are thick-walled chambers that forcefully pump blood out of the heart. Differences in thickness of the heart chamber walls are due to variations in the amount of myocardium present, which reflects the amount of force each chamber is required to generate. The right atrium receives deoxygenated blood from systemic veins; the left atrium receives oxygenated blood from the pulmonary veins. Pumps need a set of valves to keep the fluid flowing in one direction and the heart is no exception. The heart has two types of valves that keep the blood flowing in the correct direction. The valves between the atria and ventricles are called atrioventricular valves (also called cuspid valves), while those at the bases of the large vessels leaving the ventricles are called semilunar valves. The right atrioventricular valve is the tricuspid valve. The left atrioventricular valve is the bicuspid, or mitral, valve.

Текст № 4 (1500 печ. знаков) The Respiratory System

The primary function of the respiratory system is to supply the blood with oxygen in order for the blood to deliver oxygen to all parts of the body. The respiratory system does this through breathing. When we breathe, we inhale oxygen and exhale carbon dioxide. This exchange of gases is the respiratory system's means of getting oxygen to the blood.

Respiration is achieved through the mouth, nose, trachea, lungs, and diaphragm. Oxygen enters the respiratory system through the mouth and the nose. In the nose the air is filtered, heated and moistened. The oxygen then passes through the larynx (where speech sounds are produced) and the trachea which is a tube that enters the chest cavity. In the chest cavity, the trachea splits into two smaller tubes called the bronchi. Each bronchus then divides again forming the bronchial tubes. The bronchial tubes lead directly into the lungs where they divide into many smaller tubes which connect to tiny sacs called alveoli. The average adult's lungs contain about 600 million of these spongy, air-filled sacs that are surrounded by capillaries. The inhaled oxygen passes into the alveoli and then diffuses through the capillaries into the arterial blood. Meanwhile, the waste-rich blood from the veins releases its carbon dioxide into the alveoli. The carbon dioxide follows the same path out of the lungs when you exhale.

The diaphragm is a sheet of muscles that lies across the bottom of the chest cavity. As the diaphragm contracts and relaxes, breathing takes place. When the diaphragm contracts, oxygen is pulled into the lungs. When the diaphragm relaxes, carbon dioxide is pumped out of the lungs.

Текст № 5 (1500 печ. знаков) Human abdomen

The human abdomen extends from the thorax to the pelvis. It comprises all the internal organs between the thoracic diaphragm to the pelvic brim.

The anatomy of the human abdomen comprises most of the alimentary tract. This is the region where the food is digested and the nutrients are absorbed. The tract includes the esophagus, stomach, duodenum, jejunum, ileum, cecum, appendix, colon and rectum. The vital organs, other than those that are directly associated with digestion, include the liver, kidneys, spleen and pancreas. The wall of the abdominal cavity (the region above the pelvic

inlet and below the thoracic diaphragm) is segmented by the posterior, lateral and anterior walls.

The abdominal organs are all tubular in nature. The digestive tract comprises several organs that are connected and interdependent. They include the stomach, small intestine, colon and appendix. The liver, gallbladder and pancreas also aid digestion and are connected to the main digestive organs via ducts. The kidneys, spleen and adrenal glands are the other organs that are connected via blood vessels like the aorta and inferior vena cava. The anatomy of the human abdomen includes the urinary bladder, uterus, ovaries and fallopian tubes. These pelvic organs are covered by the same elastic peritoneum membrane that covers most of the abdominal organs.

The abdominal cavity is a major body division of the vertebrate. The wall of the abdomen is a muscular structure. It is lined with or protected by fascia, skin and fat. The organs, muscles and systems that function within the cavity are studied as part of either the 'abdomen proper' or the upper region and the 'pelvis' or the lower region. The peritoneal cavity is distinctly separated from the pleural and pericardial cavities.

Текст № 5 (1500 печ. знаков) What is Pneumonia?

Pneumonia is an infection of one or both lungs which is usually caused by bacteria, viruses, or fungi.

How do people "catch pneumonia"?

Some cases of pneumonia are contracted by breathing in small droplets that contain the organisms that can cause pneumonia. These droplets get into the air when a person infected with these germs coughs or sneezes. In other cases, pneumonia is caused when bacteria or viruses that are normally present in the mouth, throat, or nose inadvertently enter the lung. During sleep, it is quite common for people to aspirate secretions from the mouth, throat, or nose. Normally, the body's reflex response (coughing back up the secretions) and immune system will prevent the aspirated organisms from causing pneumonia. However, if a person is in a weakened condition from another illness, a severe pneumonia can develop. People with recent viral infections, lung disease, heart disease, and swallowing problems, as well as alcoholics, drug users, and those who have suffered a stroke or seizure are at higher risk for developing pneumonia than the general population.

Once organisms enter the lungs, they usually settle in the air sacs of the lung where they rapidly grow in number. This area of the lung then becomes filled with fluid and pus as the body attempts to fight off the infection.

What are pneumonia symptoms and signs?

Most people who develop pneumonia initially have symptoms of a cold which are then followed by a high fever (sometimes as high as 104 degrees Fahrenheit), shaking chills, and a cough with sputum production. The sputum is usually discolored and sometimes bloody. People with pneumonia may become short of breath. The only pain fibers in the lung are on the surface of the lung, in the area known as the pleura.

Текст №6 (1500 печ. знаков) Systemic Hypertension

Hypertension is defined arbitrarily at levels above generally accepted "normals", for example 140/90 at the age of 20, 160/95 at the age of 50. According to these criteria, about 15% of the population can be regarded as hypertensive. However, the morbidity and

mortality risks rise continuously across the range of pressures, although more steeply at higher pressures.

The risks associated with a particular blood pressure are dependent upon the combination of risk factors in the specific individual. These include the risks associated with age (risk increases with age), gender (males more than females), ethnic origin (blacks more than whites), diet (high salt), smoking and concomitant disease (e. g. coronary artery disease).

Exercise, anxiety, discomfort and unfamiliar surroundings can all lead to a transient rise in blood pressure, and measurements should be repeated when the patient is resting and relaxed until consistent readings are obtained (ideally on 3 separate occasions). Patients who have an isolated recording of high blood pressure, which subsequently settles, may nevertheless be at increased risk and should be kept under review.

In more than 95% of cases a specific underlying cause of hypertension is not found. Such patients are said to have essential hypertension. In 70% of those with essential hypertension another member of the family is affected and inheritance is thought to be multifactorial. Essential hypertension is especially frequent in some ethnic groups, particularly American Blacks and Japanese, and is commoner in countries where there is a high salt intake.

The pathogenesis of essential hypertension is not clearly understood. However, it is known that the underlying defect is an increase in peripheral vascular resistance.

Текст №7 (1500 печ. знаков) Myocardial infarction

Myocardial infarction (MI) or acute myocardial infarction (AMI), commonly known as a heart attack, is the interruption of blood supply to a part of the heart, causing heart cells to die. This is most commonly due to occlusion of a coronary artery following the rupture of a vulnerable atherosclerotic plaque, which is an unstable collection of lipids and white blood cells in the wall of an artery. The resulting ischemia and oxygen shortage, if left untreated for a sufficient period of time, can cause damage or death of heart muscle tissue (myocardium).

Classical symptoms of acute myocardial infarction include sudden chest pain (typically radiating to the left arm or left side of the neck), shortness of breath, nausea, vomiting, palpitations, sweating, and anxiety. Women may experience fewer typical symptoms than men, most commonly shortness of breath, weakness, a feeling of indigestion, and fatigue. Approximately one quarter of all myocardial infarctions are "silent", without chest pain or other symptoms.

Among the diagnostic tests available to detect heart muscle damage are an electrocardiogram (ECG), echocardiography, and various blood tests. The most often used markers are the creatine kinase-MB (CK-MB) fraction and the troponin levels. Immediate treatment for suspected acute myocardial infarction includes oxygen, aspirin, and sublingual nitroglycerin.

Most cases of STEMI (ST elevation MI) are treated with thrombolysis or percutaneous coronary intervention (PCI). NSTEMI (non-ST elevation MI) should be managed with medication, although PCI is often performed during hospital admission. In people who have multiple blockages and who are relatively stable, or in a few emergency cases, bypass surgery may be an option.

Текст № 8 (1500 печ. знаков) Peptic ulcer

A peptic ulcer, is the most common ulcer of an area of the gastrointestinal tract that is usually acidic and thus extremely painful. It is defined as mucosal erosions equal to or greater than 0.5 cm. As many as 70–90% of such ulcers are associated with *Helicobacter pylori*, a spiral-shaped bacterium that lives in the acidic environment of the stomach; however, only 40% of those cases go to a doctor. Ulcers can also be caused or worsened by drugs such as aspirin, ibuprofen, and other NSAIDs.

Four times as many peptic ulcers arise in the duodenum—the first part of the small intestine, just after the stomach—as in the stomach itself. About 4% of gastric ulcers are caused by a malignant tumor, so multiple biopsies are needed to exclude cancer. Duodenal ulcers are generally benign.

A history of heartburn, gastroesophageal reflux disease and use of certain forms of medication can raise the suspicion for peptic ulcer. Medicines associated with peptic ulcer include NSAID (non-steroid anti-inflammatory drugs) that inhibit cyclooxygenase, and most glucocorticoids.

The symptoms of peptic ulcers may vary with the location of the ulcer and the patient's age. Furthermore, typical ulcers tend to heal and recur and as a result the pain may occur for few days and weeks and then wane or disappear. Usually, children and the elderly do not develop any symptoms unless complications have arisen.

Burning or gnawing feeling in the stomach area lasting between 30 minutes and 3 hours commonly accompanies ulcers. This pain can be misinterpreted as hunger, indigestion or heartburn. Pain is usually caused by the ulcer but it may be aggravated by the stomach acid when it comes into contact with the ulcerated area. However, peptic ulcer disease symptoms may be different for every sufferer.

Текст № 9 (1500 печ. знаков) Jaundice

Jaundice is a yellowish pigmentation of the skin, the conjunctival membranes over the sclerae, and other mucous membranes caused by hyperbilirubinemia (increased levels of bilirubin in the blood). This hyperbilirubinemia subsequently causes increased levels of bilirubin in the extracellular fluid. Concentration of bilirubin in blood plasma does not normally exceed 1 mg/dL ($>17\mu\text{mol/L}$). A concentration higher than 1.8 mg/dL ($>30\mu\text{mol/L}$) leads to jaundice. The term jaundice comes from the French word *jaune*, meaning yellow.

Jaundice is often seen in liver disease such as hepatitis or liver cancer. It may also indicate leptospirosis or obstruction of the biliary tract, for example by gallstones or pancreatic cancer, or less commonly be congenital in origin.

Yellow discoloration of the skin, especially on the palms and the soles, but not of the sclera and mucous membranes is due to carotenemia—a harmless condition important to differentiate from jaundice.

The conjunctiva of the eye are one of the first tissues to change color as bilirubin levels rise in jaundice. However, the sclera themselves are not "icteric" (stained with bile pigment) but rather the conjunctival membranes that overlie them. The yellowing of the "white of the eye" is thus more properly termed conjunctival icterus. The term "icterus" itself is sometimes incorrectly used to refer to jaundice that is noted in the sclera of the eyes,

however its more common and more correct meaning is entirely synonymous with jaundice.

When a pathological process interferes with the normal functioning of the metabolism and excretion of bilirubin just described, jaundice may be the result. Jaundice is classified into three categories, depending on which part of the physiological mechanism the pathology affects.

Текст № 10 (1500 печ. знаков) Tetanus

Tetanus is a medical condition characterized by a prolonged contraction of skeletal muscle fibers. The primary symptoms are caused by tetanospasmin. Infection generally occurs through wound contamination and often involves a cut or deep puncture wound. As the infection progresses, muscle spasms develop in the jaw and elsewhere in the body.

Tetanus often begins with mild spasms in the jaw muscles. The spasms can also affect the chest, neck, back, and abdominal muscles. Sometimes the spasms affect muscles that help with breathing, which can lead to breathing problems. Prolonged muscular action causes sudden, powerful, and painful contractions of muscle groups. This is called tetany. These episodes can cause fractures and muscle tears. Other symptoms include drooling, excessive sweating, fever, hand or foot spasms, irritability, swallowing difficulty, uncontrolled urination or defecation.

Tetanus affects skeletal muscle, a type of striated muscle used in voluntary movement. The other type of striated muscle, cardiac or heart muscle, cannot be tetanized because of its intrinsic electrical properties. Mortality rates reported vary from 48% to 73%. In recent years, approximately 11% of reported tetanus cases have been fatal. The highest mortality rates are in unvaccinated people and people over 60 years of age.

The incubation period of tetanus may be up to several months but is usually about eight days. In general, the further the injury site is from the central nervous system, the longer the incubation period. The shorter the incubation period, the more severe the symptoms. In neonatal tetanus, symptoms usually appear from 4 to 14 days after birth, averaging about 7 days. On the basis of clinical findings, four different forms of tetanus have been described.

2.3. Типовые вопросы для дифференцированного зачета

1. Роль англ. языка в современной медицине

Why do we study English?

Where can you use English?

What language do many people study?

2. Анатомия

What is Anatomy?

What can Anatomy be divided into?

What is Human Anatomy?

What is Microscopic Anatomy?

3. Фармакология

What is Pharmacology?

What do pharmacology involve?

What do pharmacologists study?

4. Основные лекарственные формы

What is dosage form?

What dosage forms do you know?

What is ROA?

5. Жидкие, твердые, мягкие лекарственные формы

How can you use these dosage forms?

What is the dosage form for the drug to be administered under the skin?

What do you mean by optic dosage form?

6. Структура рецепта

What is a prescription (℞)?

What does a prescription have?

What Abbreviations do you know?

7. Сокращения в рецепте

What names do drugs have?

What do prescriptions have?

What Abbreviations do you know?

8. Роль овощей и фруктов в питании

Why do we need vegetables and fruits?

What components do they have?

What are packed?

What variety of types and colors of vegetables and fruits are there?

9. Витамины растительного происхождения

What is vitamin?

What compounds of vitamins do you know?

How many vitamins are there in our body?

What role do vitamins play?

What is folic acid?

What is Vitamin C?

10. Вода, ее роль в жизнедеятельности организма

What is the water?

What formula of water do you know?

Why do we need the water?

How can you take the water?

11. Потребность организма в микроэлементах

Why do we need minerals?

What two kinds of minerals are there?

What macrominerals are there?

12. Роль микроэлементов в здоровом питании

What microminerals are there?

What do you know about Sodium?

What common deficiency disorders do you know?

13. Скелет и кости

What do you know about the immune system?

How many bones are in our human body?

What does the bone contain of?
 What joints do you know?

14. Внутренние органы
 What is the human body made up of?
 What systems does our body have?
 What do you know about the brain?
 What do you know about the lungs?

15. Внутренние органы и их функции
 What systems does our body have?
 What do you know about the brain?
 What do you know about the lungs?

15. Кровь и её элементы
 What is a blood?
 What functions of blood do you know?
 What does a blood regulate?
 What components does a blood have?
 What kind of tissue is a blood?

16. Дыхательная система
 Why do we have to breathe?
 What is the structure of respiratory system?
 What are alveoli?

17. Сердечно-сосудистая система
 What does a blood carry to?
 What does the circulatory system consist of?
 What is the heart?
 What message does the heart get?
 What is the structure of the heart?

18. Сердце
 What delivers a blood?
 What does a blood carry to?
 What does the circulatory system consist of?
 What is the heart?

19. Нервная система
 What is a nerve?
 What are covered by fatty substance?
 What is the CNS?
 What is the PNS?

20. Головной мозг
 What is the brain?
 What parts does the brain have?
 What diseases do you know?

21. Нарушение нервной системы
 What Disease of nerve system do you know?
 What is the PNS?
 Explain the role of the somatic system?

22. Поликлиника

What does the state establish?

Where does a person go, when he feels poor?

Who works at the local polyclinic?

What helps to make a correct diagnosis to a physician?

23. Больница

What is a hospital?

What is the best-known type of hospital?

What departments does hospital have?

What is a teaching hospital?

24. Скорая помощь

Why do we need an ambulance?

What does the term include?

What ambulance transport do you know?

25. Аптека

What is pharmacy?

Who works at a chemist's?

What types of pharmacy do you know?

Where can we buy medicines by prescription?

26. Лекарства

Why do we use medication?

What is a drug?

Who keeps a list of essential medicines?

What are the major categories of drug administration?

What dosage forms do you know?

27. Розничная аптека

Where are community pharmacies situated?

Who is community pharmacist?

What do they supply?

28. Здравоохранение в РФ

What should people have when they come to RF?

What do expats have in RF?

Whom is free basic medical care provided?

29. Страховая медицина в РФ

What does Health System of Russia provide?

What must all foreigners have, when they come to our country?

What should holders apply?

Should Russians and foreign nationals pay extra?

30. Инфекция

What can cause human infections?

How do bacteria and viruses enter the body?

What does the immune system produce?

What attack and destroy the bacteria?

31. Давление крови

What is blood pressure?

What is normal blood pressure?
 What is high blood pressure?
 Is low blood pressure dangerous?
 32. Насморк
 What is the mucus?
 Where does it keep?
 What reasons do you know?
 33. Бронхит
 What is acute bronchitis?
 What symptoms do you know?
 What treatment is there?
 What are the possible complications of acute bronchitis?
 34. Пневмония
 What Is Pneumonia?
 What is the treatment of Pneumonia?
 What symptoms of flu do you know?
 35. Грипп
 What is influenza?
 What symptoms of flu do you know?
 What is the treatment of flu?
 What is fever?
 What is the treatment?
 36. Жар
 What is fever?
 What is the treatment?
 37. Аллергия
 What is allergy?
 What allergy do you know?
 What symptom does allergy have?
 38. В хирургическом отделении
 What is Surgery?
 Who works in surgical department?
 What surgical unit do you know?
 39. У дантиста
 What is a Dentist?
 What their responsibilities do you know?
 What should dentist know?
 40. СПИД
 What is HIV?
 What can cause AIDS?
 How can this disease spread? What Are the Symptoms of HIV/AIDS?
 41. Оказание первой помощи
 What is First Aid?
 What are Guiding principles?
 Who can provide First Aid?

How can you prevent Bleeding?

42. Ушиб

What are the signs and symptoms of a contusion?

What is a bruise?

43. Кровотечение

What is bleeding?

What types of bleeding do you know?

How can you prevent bleeding?

44. Перелом

What is fracture?

What different types of fracture do you know?

How can you diagnose the fracture?

45. Отравление

What is poisoning?

What symptoms of poisoning do you know?

46. Отравление

What causes do you know?

What treatment do you know?

47. Строение кожи. Функции кожи и уход за кожей

What is the skin?

What functions of skin do you know?

What structure the skin have?

48. Старение кожи.

What is the structure of our skin?

What decreases in the skin?

What is elastosis?

What can cause sunlight?

49. Болезнь акне

What is Acne?

What causes of Acne do you know?

What is the first sign of achne?

50. Перевод аннотации

What are medication instructions?

What can they easily to understand?

What summary medication instructions are there?

51. Перевод аннотаций твердых лекарственных средств

What is Malarone?

When should not you use this medication?

When do you take Malarone?

52. Перевод аннотаций жидких лекарственных средств

What is Diocto liquid?

How is it possible to use Diocto liquid?

How often should it be taken?

53. Перевод аннотаций мягких лекарственных средств

What are prodrugs?

What are soft drugs?

What are hard drugs?

What was in 1976?

54. Инструкции по использованию слуховых аппаратов

What is hearing aid?

Why people need this device?

What types of these devices do you know?

55. Инструкции по использованию аппаратов по измерению кровяного давления

What is blood pressure?

What kinds of BP do you know?

What must you know when you check a patient's BP?

56. Инструкция по применению эфирных масел

What is essential oils?

What types do you know?

Who manufactures essential oils?

3. Критерии оценки результатов обучения

Критерии оценки компьютерного тестирования:

При проведении текущего контроля успеваемости в виде тестирования количество вопросов для студента - 30. Вопросы для студентов выдаются случайным образом, поэтому одновременно студенты отвечают на разнообразные по уровню сложности тестовые задания следующего типа: выбор одного правильного ответа; выбор нескольких правильных ответов. На выполнение заданий отводится 40 минут.

Знания студентов оцениваются по пятибалльной системе.

Количество правильных ответов:

85-100% - отлично,

70-84% - хорошо,

50-69% - удовлетворительно,

0-49% - неудовлетворительно.

Критерии оценивания практических работ:

При подготовке к практической работе рекомендуется использовать конспекты лекций, учебно-методическое и информационное обеспечение дисциплины. Каждое задание практической работы оценивается по пяти бальной шкале:

Оценка «отлично» выставляется при соблюдении следующих условий: студент выполняет практические задачи в полном объеме, отвечает на все поставленные в практической задаче вопросы, выполняет все задания практической задачи.

Оценка «хорошо» выставляется по следующим критериям: студент допускает в решении практической задачи незначительные неточности; правильно применены теоретические знания.

Оценка «удовлетворительно» выставляется по следующим критериям: допускает в решении практической задачи значительные неточности, в том числе неточно применены теоретические знания.

Оценка «неудовлетворительно» выставляется по следующим критериям:

студент не выполняет задания практической задачи, ответы содержат существенные ошибки.

Критерии оценки промежуточной аттестации:

При проведении промежуточной аттестации вопросы к дифференцированному зачету распределяются по уровню сложности. Обязательная часть включает вопросы, составляющие необходимый и достаточный минимум усвоения знаний и умений в соответствии с требованиями ФГОС СПО. На подготовку к устному ответу студенту отводится не более 40 минут. Время устного ответа студента составляет 10 минут.

Знания студентов оцениваются по пятибалльной системе.

5 «отлично» - глубоко и прочно усвоен весь программный материал; последовательно и точно построена речь; отсутствуют затруднения с ответами на дополнительные или уточняющие вопросы;

4 «хорошо» - усвоен весь программный материал; в речи имеются незначительные неточности; правильно применены теоретические знания; на большинство дополнительных или уточняющих вопросов дан ответ;

3 «удовлетворительно» - усвоена основная часть программного материала; речь не содержит «деталей»; недостаточно-правильные формулировки; на большинство дополнительных или уточняющих вопросов испытываются затруднения в ответе;

2 «неудовлетворительно» - не усвоена значительная часть программного материала; ответ содержит существенные ошибки.

В ходе оценивания могут быть учтены личностные результаты.

4. Учебно-методическое и информационное обеспечение дисциплины

Основная литература:

1. Английский язык в сестринском деле (B2) : учебник для среднего профессионального образования / В. Р. Вебер [и др.] ; под редакцией В. Р. Вебера, Г. И. Чувакова. — Москва : Издательство Юрайт, 2023. — 388 с. — (Профессиональное образование). — ISBN 978-5-534-15900-4. — Текст : электронный // Образовательная платформа Юрайт [сайт]. — URL: <https://urait.ru/bcode/510235>

2. Английский язык для медиков (B1–B2). English for Medical Students : учебник и практикум для среднего профессионального образования / под редакцией Н. П. Глинской. — Москва : Издательство Юрайт, 2023. — 247 с. — (Профессиональное образование). — ISBN 978-5-534-12915-1. — Текст : электронный // Образовательная платформа Юрайт [сайт]. — URL: <https://urait.ru/bcode/518541>

3. Евсюкова, Е. Н. Английский язык. Reading and Discussion : учебное пособие для среднего профессионального образования / Е. Н. Евсюкова, Г. Л. Рутковская, О. И. Тараненко. — 2-е изд., испр. и доп. — Москва : Издательство Юрайт, 2022. — 147 с. — (Профессиональное образование). — ISBN 978-5-534-07997-5. — Текст : электронный // Образовательная платформа Юрайт [сайт]. — URL: <https://urait.ru/bcode/493003>

Дополнительная литература:

1. Куряева, Р. И. Английский язык. Лексико-грамматическое пособие в 2 ч. Часть 1 : учебное пособие для среднего профессионального образования / Р. И. Куряева. — 8-е изд., испр. и доп. — Москва : Издательство Юрайт, 2022. — 264 с. — (Профессиональное образование). — ISBN 978-5-534-09890-7. — Текст :

электронный // Образовательная платформа Юрайт [сайт]. — URL: <https://urait.ru/bcode/491127>

2. Куряева, Р. И. Английский язык. Лексико-грамматическое пособие в 2 ч. Часть 2 : учебное пособие для среднего профессионального образования / Р. И. Куряева. — 8-е изд., испр. и доп. — Москва : Издательство Юрайт, 2022. — 254 с. — (Профессиональное образование). — ISBN 978-5-534-09927-0. — Текст : электронный // Образовательная платформа Юрайт [сайт]. — URL: <https://urait.ru/bcode/491128>

3. Невзорова, Г. Д. Английский язык. Грамматика : учебное пособие для среднего профессионального образования / Г. Д. Невзорова, Г. И. Никитушкина. — 2-е изд., испр. и доп. — Москва : Издательство Юрайт, 2022. — 213 с. — (Профессиональное образование). — ISBN 978-5-534-09886-0. — Текст : электронный // Образовательная платформа Юрайт [сайт]. — URL: <https://urait.ru/bcode/491346>

Интернет-источники:

1. Англо-русский медицинский словарь [Электронный ресурс] / Под ред. И.Ю. Марковиной, Э.Г. Улумбекова - Москва: ГЭОТАР-Медиа, 2013. [Электронный ресурс]. URL: - <http://www.medcollegelib.ru/book/ISBN9785970424735.html>

2. Сайт для изучения английского языка [Электронный ресурс]. URL: www.studyenglish.ru

3. Сайт для людей, изучающих медицинский английский язык [Электронный ресурс]. URL: <http://azenglish.ru/meditsinskiy-angliyskiy/>

4. Диалоги на медицинские темы [Электронный ресурс]. URL: http://esl.about.com/lr/english_for_medical_purposes/290866/1/