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**ОСНОВНАЯ ОБРАЗОВАТЕЛЬНАЯ ПРОГРАММА ВЫСШЕГО  
ПРОФЕССИОНАЛЬНОГО ОБРАЗОВАНИЯ**  
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## Section 1. GENERAL PROVISIONS

### 1.1. Definition of the Basic Higher Professional Education Program

The Basic Higher Professional Education Program (BHPEP) in the specialty 560001 “General Medicine (MBBS)”, implemented at the Medical Faculty of Jalal-Abad International University, is developed on the basis of the State Educational Standard of Higher Professional Education of the Kyrgyz Republic (SES HPE, 2021) and aligned with international frameworks for medical education (WFME, WHO) as well as contemporary requirements of the global health workforce market. The program is oriented towards training a clinically competent, socially responsible, and professionally mobile physician capable of working effectively in multicultural settings and within a rapidly evolving healthcare system.

The BHPEP defines the aims of professional training, expected learning outcomes, structure of the educational trajectory, conditions for the implementation of the curriculum, assessment methods, and the quality assurance system. The program includes the curriculum, syllabi of academic disciplines, a competency framework, materials for practical and clinical training, the academic calendar, the student research program, requirements for final state attestation, the graduate profile, and documents regulating the adaptation of international students.

The structure of the program is implemented within a credit-based modular system, utilizing competency-based medical education (CBME), simulation technologies, early clinical exposure, OSCE/OSPE examinations, Mini-CEX, DOPS, the eBilim digital platform, and mechanisms of internal and external quality monitoring. Special attention is given to supporting international students through linguistic, sociocultural, and academic adaptation, development of communication skills, professional ethics, clinical reasoning, and practical readiness for future medical practice.

The structure of the BHPEP includes:

1. Curriculum developed in accordance with SES HPE and international requirements.
2. Semester-based working curriculum and distribution of academic workload.
3. Competency map with indicators of achievement.
4. Annotated syllabi of basic disciplines and modules.
5. Annotated syllabi of university-based and elective disciplines.
6. Annotated programs of academic and clinical internships.
7. Requirements and procedures for the Final State Attestation, including OSCE.
8. Graduate model — professional, personal, and competency profile.
9. Roadmap for the adaptation of international students.

Within the BHPEP, the following pedagogical and organizational categories are considered:

- **Profile of training** — the professional orientation of the program determining the content, educational methods, and the nature of future medical practice.
- **Disciplinary cycles** — structured blocks of academic courses united by common goals, learning logic, and expected outcomes (general education cycle, natural sciences, professional cycle, clinical disciplines, simulation-based practice, student research).
- **Professional trajectories and training profiles** — options for individual specialization based on fundamental medical education and integration of disciplines, clinical modules, and practical training.

## 1.2. Key Terms and Definitions

The educational program uses terms and definitions in accordance with:

- the Law of the Kyrgyz Republic “On Education”;
- international documents in the field of higher education officially adopted by the Kyrgyz Republic.

Key concepts include:

- **Basic Educational Program (BEP)** — a set of educational and methodological documents regulating the goals, expected learning outcomes, content, and organization of the educational process in a specific specialty of higher professional education.
- **Field of study / specialty** — a set of educational programs ensuring the training of specialists within a corresponding area of knowledge.
- **Module** — a logically complete part of an academic discipline corresponding to defined educational goals and learning outcomes.
- **Competency** — a dynamic combination of personal qualities, knowledge, skills, and abilities required for professional activity in the specialty **560001 “General Medicine”**.
- **Credit (ECTS credit unit)** — a conventional measure of the workload within the educational program, used for quantitative assessment of learning activities.
- **Learning outcomes** — competencies acquired by the student during the mastering of the educational program or its individual module.

## Abbreviations and Definitions

The following abbreviations are used in this Basic Educational Program:

- SES — State Educational Standard
- HPE — Higher Professional Education
- BEP — Basic Educational Program
- UMC — Academic and Methodological Council
- BEP Cycle — Cycle of disciplines within the Basic Educational Program
- GC — General Scientific Competencies
- IC — Instrumental Competencies
- PC — Professional Competencies
- SEC — Student Elective Courses
- PwD — Persons with Disabilities
- SLC — Social, Personal and Cultural Competencies
- PMEC — Profile Academic and Methodological Committee
- JAIU — Jalal-Abad International University
- MF — Medical Faculty
- PHC — Primary Health Care
- ECTS — European Credit Transfer and Accumulation System
- FMGE — Foreign Medical Graduate Examination
- NRE — National Registration Examination
- PMDC — Pakistan Medical and Dental Council
- eBilim — Digital information system for academic and administrative processes

## 1.3. Regulatory Documents for the Development of the BEP

The regulatory framework for the development of the Basic Educational Program in Higher Professional Education includes:

- Law of the Kyrgyz Republic No. 179 of August 11, 2023 “On Education”
- Government Program of the Kyrgyz Republic on Public Health Protection and Healthcare System Development for 2019–2030 “A Healthy Person — A Prosperous Country”
- Regulation on Higher Professional Educational Institutions of the Kyrgyz Republic, Government Resolution No. 53 of February 3, 2004
- State Educational Standard of Higher Professional Education for specialty 560001 “General Medicine (Medical Doctor)”

- Normative legal acts of the Kyrgyz Republic in the field of education
- Charter of Jalal-Abad International University (JAIU)
- JAIU Regulation on the Organization of the Educational Process Based on Credit Technology (ECTS)
- JAIU Regulation on the Syllabus
- JAIU Regulation on Industrial and Clinical Practice
- JAIU Regulation on State Final Attestation of Graduates
- JAIU Regulation on Quality Monitoring of Education
- JAIU Regulation on Ongoing and Intermediate Assessment of Students
- JAIU Regulation on the Development and Use of Assessment Tools
- JAIU Regulation on Monitoring of Educational Programs
- JAIU Regulation on the Organization of the Summer Semester
- Internal Regulations of JAIU

#### **1.4. General Characteristics of the BEP in Higher Professional Education**

In the Kyrgyz Republic, specialty 560001 “General Medicine” for foreign citizens with 12-year secondary education is regulated by the State Educational Standard of Higher Professional Education. The Basic Educational Program is implemented in accordance with this standard and is aimed at preparing a general practice physician capable of continuing postgraduate medical education.

Upon successful completion of the program and the State Final Attestation, graduates are awarded a Diploma of Higher Professional Education with the qualification “Medical Doctor,” confirming readiness for professional activity, clinical specialization, and further development in medicine.

Graduates of the specialty 560001 “General Medicine” are entitled to:

- hold medical positions in countries where qualification must be confirmed through FMGE, NExT, NRE, PMDC examinations
- undergo licensing in countries requiring USMLE or PLAB
- perform independent clinical work within professional competence
- engage in scientific research in biomedical sciences
- carry out teaching activities in basic and theoretical medical disciplines

##### **1.4.1. Standard Duration of the Program**

For applicants entering on the basis of secondary, vocational, or higher education, the standard duration of full-time study is 5 years (10 semesters). This duration ensures the development of fundamental clinical and professional competencies of a general practice physician.

##### **1.4.2. Total Workload of the Program**

The total workload of the Basic Educational Program is 320 ECTS credits.

Distribution of academic load:

- 64 credits per academic year
- 30–32 credits per semester
- the university may vary the semester load within 31–33 credits while maintaining the annual limit

One credit corresponds to 30 hours of student work, including classroom activities, independent study, and assessment.

Organization of the academic process:

- one academic class lasting two academic hours equals 80 minutes
- the academic year ends according to the academic calendar
- vacation period totals 7–10 weeks, with at least two weeks in winter

Maximum permissible student workload:

- 45 hours per week for a five-day study week
- 54 hours per week for a six-day study week

Implementation of the program includes all types of academic classes, ongoing and intermediate assessment, organization and completion of academic and clinical practice, and state final attestation.

### 1.4.3. Admission Requirements

Applicants must hold a state-recognized certificate of full secondary general education or secondary vocational education. Admission of foreign citizens to specialty 560001 “General Medicine” is carried out in accordance with the regulatory documents of the Kyrgyz Republic and the internal regulations of the university. Each year, the admission rules are formed in accordance with the procedure for admission to higher educational institutions approved by the Government of the Kyrgyz Republic (Resolution No. 256 of May 27, 2011), the admission regulations of JAIU, and the regulation on the admission of foreign citizens.

### 2. Characteristics of the Professional Activity of the Graduate

The specialty 560001 “General Medicine” is designed for learners who are foreign citizens with a 12-year secondary education background. The professional activity of the graduate is aimed at strengthening public health, preventing diseases, conducting diagnostics, providing treatment and rehabilitation. The future physician acquires a comprehensive set of knowledge and skills ensuring readiness to work within a modern healthcare system.

The professional activity of the graduate includes studying mechanisms of disease development and progression, mastering methods of clinical examination, interpreting laboratory and instrumental data, applying therapeutic and preventive measures, and participating in scientific and educational activities. The graduate is able to work in outpatient and inpatient facilities, emergency medical services, ambulatory care units, medical centers, and research institutions.

#### 2.1. Educational Goals and Objectives of the Basic Educational Program (BEP)

Section	Content
Program Mission	<i>The training of qualified personnel to improve public healthcare and the quality of life of the population through high-quality, continuous, and innovative medical education that meets global standards. The educational process includes scientific research and clinical practice aimed at responding to global health challenges.</i>
Goals of the BEP	<i>1. Professional Readiness: To train a physician who possesses universal and professional competencies, ready for postgraduate education, professional activity, and sustainable competition in the international labor market.</i>
	<i>2. Personality Development: To form the personal qualities of students—purposefulness, organization, responsibility, citizenship, communication skills, tolerance, empathy, and general culture.</i>
	<i>3. Research Activity Development: To develop motivation for conducting scientific work aimed at solving current healthcare problems, including infectious diseases, pandemic challenges, chronic diseases, and mental health issues.</i>
	<i>4. Regional and Global Adaptation: To train specialists capable of working effectively in the healthcare systems of South and Southeast Asian countries, considering regional specificities, and meeting the requirements of global medical practice.</i>
	<i>5. Quality for International Students: To ensure high quality medical education for international students, focused on training competitive</i>



Section	Content
	<i>specialists ready for work in international medicine through practice-oriented training and internships.</i>
<b>Objectives of the BEP</b>	
No.	Description of Objective
1	<i>To meet the needs of the individual for intellectual, cultural, professional, and moral development through obtaining higher medical education.</i>
2	<i>To satisfy the needs of society, the healthcare system, and the state for training highly qualified medical specialists.</i>
3	<i>To form stable professional competencies in students based on modern educational technologies, simulation training, clinical practice, and digital platforms.</i>
4	<i>To develop skills in clinical thinking, decision-making, and responsibility for the outcomes of medical activities.</i>
5	<i>To create conditions for the development of research activity, including students' involvement in scientific projects and the execution of research work.</i>
6	<i>To form readiness to work in a multicultural and international medical environment, developing intercultural communication and professional ethics.</i>
7	<i>To ensure conditions for the professional socialization of international students, including their academic and socio-cultural adaptation.</i>
8	<i>To develop abilities for self-education, self-development, and professional growth throughout life.</i>
9	<i>To promote the formation of health-preserving behavior and the readiness of students to participate in preventive, health education, and socially significant projects.</i>
10	<i>To preserve, develop, and augment the moral, cultural, and scientific values of society through educational and enlightenment activities.</i>
11	<i>To ensure the continuity of medical training stages and the readiness of graduates for postgraduate education.</i>
12	<i>To form competence in the use of digital resources, telemedicine, clinical information systems, and innovative healthcare technologies.</i>

## **2.2. Scope of Professional Activity of the Specialist**

The professional activity of a physician in the specialty 560001 “General Medicine” includes a complex of methods, technologies, and forms of medical care aimed at disease prevention, maintenance, promotion, and restoration of population health. The physician provides therapeutic, preventive, and medico-social services, conducts dispensary follow-up, and participates in the prevention and control of infectious and non-communicable diseases, as well as conditions affecting the quality of life across all age groups.

## **2.3. Objects of Professional Activity**

The objects of professional activity of the specialist are:

- children and adolescents aged 15–18 years, and the adult population over 18 years old
- means, methods, and technologies ensuring disease prevention, diagnosis, and treatment
- conditions and factors influencing the preservation and promotion of population health

## **2.4. Types of Professional Activity of the Graduate**

The graduate performs the following types of professional activity:

- preventive
- diagnostic
- therapeutic
- rehabilitative
- educational
- organizational and managerial
- scientific and research

## **2.5. Professional Tasks of the Graduate**

A physician in the specialty 560001 “General Medicine” performs professional tasks according to the major areas of medical practice.

Preventive activity:

- implementation of health-promotion measures for children, adolescents, and adults
- prevention of communicable and non-communicable diseases
- formation of motivation for a healthy lifestyle among the population
- execution of anti-epidemic measures
- dispensary follow-up of various age groups
- health education and promotion of healthy behaviors

Diagnostic activity:

- diagnosis of diseases using clinical, laboratory, and instrumental methods
- identification of emergency conditions in children, adolescents, and adults
- diagnosis of pregnancy and assessment of physiological changes

Therapeutic activity:

- treatment of children, adolescents, and adults using therapeutic and surgical methods
- management of physiological and pathological pregnancy
- provision of medical care in emergency situations
- participation in medical evacuation measures during emergencies and epidemics
- compliance with regulations on the use, storage, and accounting of medicinal products

Rehabilitative activity:

- medical rehabilitation after diseases, injuries, and surgical interventions
- application of physical therapy, physiotherapy, and natural therapeutic factors
- restorative and preventive follow-up for patients of different age groups

Educational activity:

- educating the population on healthy lifestyle principles
- developing skills of positive health-related behaviors
- conducting health education activities

Organizational and managerial activity:

- knowledge of healthcare system structure and patient routing
- maintaining medical documentation at the level of PHC and hospital care

- participation in ensuring the quality of diagnostic, therapeutic, and rehabilitative work
- preparation of official and administrative documentation

Scientific and research activity:

- analysis of scientific literature, statistical data, and clinical sources
- participation in scientific research and processing of obtained data
- preparation of reports, presentations, and academic materials in the professional field

### 3. General Requirements (Competencies) for the Educational Program

The competencies of the graduate represent an integrated expected outcome of mastering the Basic Educational Program of Higher Professional Education. The learning outcomes are determined by the competencies acquired by the graduate — the ability to apply knowledge, skills, and personal qualities in accordance with the tasks of professional activity. A graduate of specialty 560001 “General Medicine” with the qualification Medical Doctor (MD) must possess the following competencies.

#### 3.1. Universal Competencies

Code	Competency Description
<b>3.1.1. General Scientific Competencies (GSC)</b>	
<b>GSC-1</b>	Capable and ready to analyze socially significant problems and processes, using methods from natural sciences, mathematics, and humanities.
<b>GSC-2</b>	Capable and ready to analyze political events, understand the global historical process, and show respect for historical heritage and traditions.
<b>GSC-3</b>	Capable and ready to collect, process, and interpret data using <b>modern information technologies</b> .
<b>GSC-4</b>	Capable and ready to <b>work in a team</b> and demonstrate tolerance for social, ethnic, confessional, and cultural differences.
<b>3.1.2. Instrumental Competencies (IC)</b>	
<b>IC-1</b>	Capable and ready to work with <b>computer hardware and software</b> .
<b>IC-2</b>	Capable and ready to use information and bibliographic resources, adhering to information security requirements.
<b>IC-3</b>	Capable and ready for written and oral communication in the state, official, and foreign languages.
<b>IC-4</b>	Capable and ready to apply management methods, organize the work of performers, and make responsible decisions.
<b>3.1.3. Socio-Personal and General Cultural Competencies (SPCC)</b>	
<b>SPCC-1</b>	Capable and ready to implement <b>ethical, deontological, and bioethical principles</b> .
<b>SPCC-2</b>	Capable and ready for <b>professional communication, teamwork</b> , and constructive conflict resolution.

Code	Competency Description
SPCC-3	Capable and ready for <b>professional development, self-development</b> , and planning professional growth.
SPCC-4	Capable and ready to comply with moral and legal norms and maintain confidentiality.
SPCC-5	Capable and ready for <b>logical analysis, public speaking</b> , leading discussions, and collaboration.
<b>3.2. Professional Competencies (PC)</b>	
PC-1	Capable and ready to comply with the rules of <b>medical ethics and maintain confidentiality</b> .
PC-2	Capable and ready to analyze the results of their activity and <b>prevent medical errors</b> .
PC-3	Capable and ready to analyze social problems and use <b>economic mechanisms in healthcare</b> .
PC-4	Capable and ready to conduct <b>pathophysiological analysis</b> of clinical syndromes.
PC-5	Capable and ready to conduct <b>patient interviews, physical examinations, clinical examinations</b> , and maintain medical documentation.
PC-6	Capable and ready to apply methods of <b>asepsis and antisepsis</b> and use medical instruments.
PC-7	Capable and ready to work with <b>medical technical equipment</b> .
PC-8	Capable and ready to apply information regarding <b>public health indicators</b> .
PC-9	Capable and ready to conduct <b>temporary incapacity examination</b> and disability prevention.
<b>Preventive Activity</b>	
PC-10	Prevention of infectious, parasitic, and non-communicable diseases.
PC-11	Health education of the population and recommendations for healthy nutrition.
PC-12	Selection of individuals for observation based on tuberculin diagnostics and fluorography results.
PC-13	Conducting anti-epidemic measures and protecting the population in emergency zones.

Code	Competency Description
<b>Diagnostic Activity</b>	
<b>PC-14</b>	Diagnosis establishment based on biochemical and clinical research results.
<b>PC-15</b>	Analysis of organ and system functioning, timely diagnosis of diseases.
<b>PC-16</b>	Use of the diagnostic algorithm and identification of emergency conditions.
<b>Therapeutic Activity</b>	
<b>PC-17</b>	Implementation of basic treatment measures for common diseases.
<b>PC-18</b>	Provision of aid for acute conditions without threat to life.
<b>PC-19</b>	Provision of first medical aid for emergency conditions and referral for hospitalization.
<b>PC-20</b>	Provision of aid in emergencies and medical evacuation.
<b>PC-21</b>	Management of physiological pregnancy and delivery (childbirth).
<b>Rehabilitation Activity</b>	
<b>PC-22</b>	Application of medical, social, and professional rehabilitation measures.
<b>PC-23</b>	Recommendations on therapeutic exercise (LFC), physiotherapy, non-drug therapy, and resort factors.
<b>Educational Activity</b>	
<b>PC-24</b>	Training of middle and junior medical personnel in sanitary and hygienic rules and ethics.
<b>PC-25</b>	Training the population in hygienic measures and healthy lifestyle skills.
<b>Organizational and Management Activity</b>	
<b>PC-26</b>	Application of regulatory documentation of the KR healthcare system and international standards.
<b>PC-27</b>	Use of knowledge of the healthcare structure and patient routing.
<b>PC-28</b>	Organization of labor for middle and junior medical personnel.
<b>PC-29</b>	Quality assessment of medical care based on medical and statistical indicators.

Code	Competency Description
PC-30	Organization of medical aid in emergencies and medical evacuation.
<b>Research Activity</b>	
PC-31	Analysis and public presentation of medical information based on evidence-based medicine.
PC-32	Planning and conducting scientific research.
PC-33	Implementation of new methods and technologies aimed at protecting the health of the population.

### 3.2.9. Learning Outcomes (LO)

#### Learning Outcomes for the Educational Program 560001 “General Medicine” for International Students

Competencies	Learning Outcome (LO)	Assessment of Learning Outcomes (Criteria)
GSC-1, GSC-2, GSC-3, SPCC-3, PC-3	<b>LO1. Fundamental and Interdisciplinary Knowledge.</b> Able to apply knowledge from natural sciences, social and humanitarian disciplines, and biomedical sciences to analyse and solve professional tasks using a systemic approach and logical reasoning.	<b>Knows:</b> the fundamentals of natural, humanitarian, and biomedical sciences. <b>Able to:</b> analyse medical and social processes, compare data from various scientific fields. <b>Proficient in:</b> critical and systemic thinking; statistical data processing.
IC-3, GSC-4, SPCC-1, SPCC-2, SPCC-5	<b>LO2. Professional Communication and Teamwork.</b> Ready to communicate in the state, official, and foreign languages; able to interact with diverse communities. Demonstrates tolerance, respect for cultural differences, and adherence to ethical and deontological norms.	<b>Knows:</b> professional ethics, principles of intercultural communication. <b>Able to:</b> express ideas clearly in oral and written form; interact with colleagues and patients. <b>Proficient in:</b> reasoned dialogue, active listening, constructive conflict resolution.

Competencies	Learning Outcome (LO)	Assessment of Learning Outcomes (Criteria)
GSC-4, SPCC-1, SPCC-2, SPCC-4, PC-1, PC-2	<p><b>LO3. Compliance with Ethical and Legal Norms.</b></p> <p>Performs professional duties in accordance with moral and legal norms; guided by principles of humanism, medical confidentiality, and personal responsibility. Demonstrates high social and legal literacy.</p>	<p><b>Knows:</b> legal and ethical foundations of the medical profession, patient rights.</p> <p><b>Able to:</b> make decisions within the legal framework; evaluate moral aspects of interventions.</p> <p><b>Proficient in:</b> professional conduct and ethically appropriate interaction.</p>
IC-1, GSC-3, PC-7, PC-8	<p><b>LO4. Application of Information Technologies and Medical Equipment.</b></p> <p>Uses modern information technologies, electronic databases, digital systems, and medical equipment for diagnostics, monitoring, and treatment. Able to adapt to new technologies.</p>	<p><b>Knows:</b> types and capabilities of medical information systems, digital platforms, and diagnostic equipment.</p> <p><b>Able to:</b> use software, electronic medical records, databases, and telemedicine services.</p> <p><b>Proficient in:</b> operating medical equipment and tools for data analysis and visualization.</p>
IC-4, GSC-5, PC-26, PC-27, PC-28, PC-29, PC-30	<p><b>LO5. Organization and Management in Healthcare.</b></p> <p>Possesses principles of management; able to plan, coordinate, and evaluate the work of healthcare units. Participates in resource allocation and quality control of medical care.</p>	<p><b>Knows:</b> fundamentals of healthcare organization, management, economics, and quality control.</p> <p><b>Able to:</b> plan and coordinate team activities, allocate resources, analyse efficiency.</p> <p><b>Proficient in:</b> managerial analysis, documentation management, quality assessment tools.</p>
PC-4, PC-5, PC-14, PC-15, PC-16	<p><b>LO6. Diagnostics and Treatment Tactics.</b></p> <p>Able to conduct diagnostics and substantiate treatment strategies based on clinical, laboratory, and</p>	<p><b>Knows:</b> etiology, pathogenesis, clinical manifestations of major diseases; diagnostic algorithms.</p>

Competencies	Learning Outcome (LO)	Assessment of Learning Outcomes (Criteria)
	instrumental data. Applies clinical algorithms and principles of evidence-based medicine.	<b>Able to:</b> collect medical history, perform examinations, interpret diagnostic results. <b>Proficient in:</b> clinical reasoning, diagnosis, and selecting rational treatment tactics.
<b>PC-17, PC-18, PC-19, PC-20, PC-21</b>	<b>LO7. Provision of Therapeutic and Emergency Care.</b> Provides care to patients of various groups; possesses methods of diagnostics and therapy. Able to act in life-threatening conditions, perform resuscitation, and manage physiological pregnancy.	<b>Knows:</b> standards of primary and emergency care; algorithms for life-threatening conditions. <b>Able to:</b> perform diagnostic and therapeutic procedures; provide emergency care. <b>Proficient in:</b> resuscitation techniques and management of physiological pregnancy.
<b>PC-9, PC-10, PC-11, PC-12, PC-13, PC-22, PC-23, PC-25</b>	<b>LO8. Preventive and Rehabilitative Activities.</b> Carries out activities aimed at disease prevention, health restoration, and strengthening. Applies health education methods; implements rehabilitation and disability-assessment programs.	<b>Knows:</b> principles of prevention, hygiene, epidemiology, and rehabilitation. <b>Able to:</b> conduct health-promotion activities; implement preventive programs. <b>Proficient in:</b> physical, psychosocial, and medical rehabilitation; disability assessment.
<b>PC-6, PC-24, SPCC -2</b>	<b>LO9. Infection Control and Safety.</b> Ensures sanitary and infection-control compliance; possesses methods of asepsis, antisepsis, and prevention of healthcare-associated infections; ensures safety of patients and staff.	<b>Knows:</b> principles of asepsis, antisepsis, sterilization, infection control. <b>Able to:</b> organize and maintain sanitary and hygienic regimes; provide patient care. <b>Proficient in:</b> safe performance of medical procedures.



Competencies	Learning Outcome (LO)	Assessment of Learning Outcomes (Criteria)
IC-2, SPCC -3, PC-31, PC-32, PC-33	<b>LO10. Research Activities.</b> Prepared for analytical work based on evidence-based medicine. Possesses methods of searching, analysing, and systematizing scientific information; able to plan and conduct research and implement innovations.	<b>Knows:</b> principles of evidence-based medicine; stages and methods of scientific research. <b>Able to:</b> formulate research problems, goals, and objectives; analyse and interpret results. <b>Proficient in:</b> searching, systematizing, and presenting scientific information; academic writing.

### 3.3. Structural Matrix of Competency Formation

(Appendix No. 2 — Competency Matrix)

The competency matrix reflects the interrelation between academic cycles, disciplines, types of practice, and the competencies being formed. It ensures transparency and controllability of the learning-outcome formation process and serves as a tool for planning and monitoring the quality of education.

## 4. General Requirements for the Implementation of the Educational Program

### 4.1. Requirements for the Structure of the Educational Program

The structure of the educational program for the specialty 560001 “General Medicine” for international students admitted on the basis of 12-year secondary education includes the following components:

- **Block 1 — Academic disciplines**
- **Block 2 — Practice**
- **Block 3 — Final State Attestation**

This structure reflects the logic of medical education: first, theoretical and fundamental preparation; next, practice-oriented training; and finally, the completion of studies through state attestation.

The program includes the following academic cycles:

- **C.1 — Humanities, social and economic cycle** (minimum 16 credits)
- **C.2 — Mathematical and natural sciences cycle** (6 credits)
- **C.3 — Professional cycle and its components** (267 credits)
- **C.4 — Practice** (25 credits)
- **C.5 — State attestation** (6 credits)

These cycles are designed to first form general cultural knowledge, then natural-scientific competencies, and subsequently ensure deep professional preparation and clinical skills.

Each cycle consists of two parts:

- **Basic (mandatory)** — forms universal and professional competencies required by the State Educational Standard;
- **Elective (variable)** — determined by the university based on program specifics, labour-market requirements, clinical-training needs, and the specifics of international students.

*Brief note:* the elective component allows the program to be aligned with international standards and ensures the inclusion of additional modules (clinical English, evidence-based medicine, elective clinical modules).

## 4.2. Curriculum and Academic Calendar

*(Appendix No. 1)*

The curriculum is the key regulatory document defining the structure and content of the educational program. It sets the list of disciplines and modules, their workload in credits, sequence of study, forms of assessment, and specifics of practical training.

Types of curricula:

- **Basic curriculum** — developed for the entire standard period of study and reflects the long-term structure of the program;
- **Annual working curriculum** — specifies the distribution of disciplines for a given academic year;
- **Individual student curriculum** — formed taking into account personal learning trajectories, elective disciplines, and academic mobility.

*Brief note:* individual learning plans allow the university to support the linguistic and academic needs of international students.

Curricula determine:

- the logical sequence of cycles, disciplines, modules, and practices;
- the formation of competencies according to the competency map;
- the volume and distribution of academic workload in credits;
- forms of ongoing, mid-term, and final assessment.

The academic calendar establishes:

- periods of theoretical training;
- examination sessions;
- periods of academic and clinical practice;
- timing of final state attestation;
- duration of vacations.

The calendar is developed in accordance with the State Educational Standard, the capacity of clinical bases, the adaptation needs of international students, and the overall workload of the program.

The list of disciplines and their workload are formed by the Medical Faculty of JAIU within national regulations, ensuring flexibility, modernisation, and alignment with current demands of medical practice.

## 4.7. Material and Technical Support

The material and technical base of the Medical Faculty ensures the implementation of all educational activities defined by the program. Students have access to classrooms, lecture halls, laboratories, simulation centres, and clinical bases equipped in accordance with sanitary norms and state requirements.

Support includes:

- specialised laboratories for anatomy, biochemistry, physiology, microbiology, histology, and other basic sciences;
- clinical departments operating in healthcare facilities that meet requirements for patient volume and case structure;
- simulation and practical-skills centres for mastering competencies of the professional cycle;
- libraries with access to educational, scientific, and electronic resources, including subscription databases;
- access to electronic learning platforms supporting distance-education components.

This infrastructure ensures the formation of theoretical knowledge, practical abilities, and clinical skills required for the profession.

#### **4.8. Teaching and Learning Support**

Teaching and learning support of the program includes:

- approved working programs of disciplines and practices;
- textbooks, teaching materials, methodological guidelines for practical and independent work;
- assessment tools for all types of evaluation;
- access to electronic learning resources, multimedia materials, video lectures, and interactive platforms;
- teaching materials in the state, official, and English languages when required.

All materials are regularly updated in line with the State Educational Standard, modern scientific advances, and recommendations of academic departments.

#### **4.9. Information Support**

Information support includes student access to:

- library collections;
- electronic educational resources;
- the university internal portal;
- electronic attendance and academic progress journal;
- the e-learning platform for hosting materials, submitting assignments, and conducting assessments.

The information environment ensures transparency, timely communication, and support for individual learning trajectories.

#### **4.10. Requirements for Practical Training**

Practical training is a mandatory component of the program and is carried out at clinical bases fully meeting regulatory standards. Organization of practice ensures:

- performance of professional tasks in real clinical settings;
- participation in diagnostic and treatment processes under supervision;
- formation of professional skills established by program competencies;
- completion of all types of practice in the designated timeframe.

Practice supervisors are responsible for compliance with the practice program, supervision of individual tasks, and assessment of skills and competencies.

#### **4.11. Requirements for the Internal Quality Assurance System**

The internal quality assurance system of the Medical Faculty ensures compliance of the educational process with the State Educational Standard. It includes:

- regular review of curricula and syllabi;
- analysis of results of ongoing and mid-term assessments;
- monitoring the satisfaction of students, faculty, and clinical partners;
- systematic review of assessment tools;
- annual quality-assurance reporting to the Academic Council.

#### **4.5. Requirements for the Structure of the Educational Program**

The program for the specialty 560001 “General Medicine” for international students includes the following cycles and components:

- humanities, social and economic cycle;
- mathematical and natural sciences cycle;
- professional cycle;
- physical education;
- practice (care of somatic and therapeutic patients; assistant to ward and procedural nurses; assistant to paramedic in emergency care; assistant to hospital physician; assistant to family

doctor);

- final state attestation.

Each academic cycle includes two parts:

- **basic (mandatory)**;
- **elective (profile-oriented)** — formed by JAIU.

Ниже представлен **полный, точный и профессиональный перевод всего текста на английский язык**, без русских слов, в едином академическом стиле, полностью соответствующий структуре ООП.

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## 4.5. Requirements for the Structure of the Educational Program

In preparing specialists in the specialty 560001 “General Medicine” for international students, the educational program includes the following cycles and components:

- humanities, social and economic cycle
- mathematical and natural sciences cycle
- professional cycle
- physical education
- practical training (care of somatic and therapeutic patients; assistant to ward and procedural nurses; assistant to emergency and pre-hospital care paramedic; assistant to hospital physician; assistant to family doctor)
- final state attestation

The structure of the program corresponds to the requirements of the State Educational Standard and provides gradual formation of general cultural, natural-scientific, professional, and clinical competencies.

Each academic cycle consists of two parts:

- **basic (mandatory)** — aimed at forming fundamental knowledge and required competencies
- **elective (profile-oriented)** — developed by JAIU (Jalal-Abad International University) considering the profile of the student cohort, current demands of modern medicine, and international educational practices

## 4.6. Staffing Support for the Educational Process

The implementation of the educational program is ensured by faculty members with relevant qualifications, academic degrees, or significant clinical experience. The staffing policy meets the requirements of the State Educational Standard and is aimed at maintaining a high level of teaching quality.

Faculty members participate in scientific and methodological work and complete professional development training at least once every three years.

To ensure high-quality training, the following indicators are maintained:

- proportion of faculty holding academic degrees — over 40%
- proportion of doctors of science and full professors — at least 10%
- participation of practicing physicians and heads of medical institutions — at least 10%

## 4.7. Teaching, Methodological and Information Support of the Program

Syllabi include the complete scope of educational content, types and volume of independent work, and forms of quality control. The development of teaching materials follows a competency-based and practice-oriented approach.

Practical classes, including laboratory work, constitute **40–50%** of the total classroom workload, ensuring the development of clinical and professional skills.

Students are provided with:

- access to the university library and electronic library
- modern educational databases and professional reference systems
- printed and electronic textbooks for each discipline

The library collection includes:

- approximately **5,000** printed publications
- more than **126,000** electronic publications
- up-to-date literature (last 5–10 years) across all core disciplines
- national and international scientific journals (at least 5 and 3 titles respectively)

The amount of supplementary literature is at least one copy per every 10 students.

Students also have opportunities for academic mobility through information exchange with national and international universities, research organizations, and medical institutions.

#### **4.8. Material and Technical Support**

*(Appendix No. 1)*

The material and technical base of the Medical Faculty supports all types of educational activities: lectures, laboratory work, simulation training, clinical practice, and research.

The infrastructure meets sanitary, fire-safety, and operational standards.

Material and technical resources include:

- laboratories of chemistry, biochemistry, biology, physiology, microbiology, pathological anatomy
- anatomy halls and practical rooms
- classrooms for humanities, social sciences, economics, hygiene, and public health
- training rooms at clinical bases and at the university clinic
- physician offices equipped with diagnostic and therapeutic equipment
- practical-skills training center with phantoms, mannequins, and simulators
- computer labs with Internet access
- sports hall and fitness rooms

The resources ensure conditions for the formation of professional skills and for conducting research work.

The material base of JAIU includes:

- 100 stationary computers
- 100 student computer workstations
- 38 projectors
- 13 interactive boards
- 16 laptops for faculty
- LED screens for lectures and presentations

##### **Specialized Rooms**

###### **Histology Room:**

- modern microscopes
- sets of micro-preparations
- projector
- visual teaching aids

###### **Anatomy Room:**

- anatomical tables with the “AnatoVista 3D VR” program (over 6,000 anatomical structures)
- anatomical mannequins, models, phantoms

- collections of “12 human body systems”
- modern models for studying topographic anatomy

All computer labs are connected to a local network and Wi-Fi.

Internet access is provided via a fiber-optic line through the university’s own server.

All computers are protected by licensed antivirus software.

Lecture rooms are equipped with anatomical models, simulators, robotic and mannequin complexes.

All academic areas and public spaces are covered by high-speed Wi-Fi.

### **Library and Information Resources**

JAIU subscribes to the following publications:

- “Healthcare of Kyrgyzstan”
- “Bulletin of Medicine”
- “The Doctor”
- “Human Physiology”
- newspapers: “Erkin Too”, “Kut Bilim”, “Slovo Kyrgyzstana”, “Akyikat”, “Kyrgyz Tili”

Electronic library — over **126,000** resources.

Printed collection — about **5,000** books.

Students have access to international and national professional databases and information systems.

### **4.9. Quality Assessment of Graduate Preparation**

The Medical Faculty of JAIU ensures the quality of graduate preparation through an internal quality assurance system that includes:

- strategic planning and regular monitoring of program implementation
- involvement of employers and external experts in program evaluation
- objective and transparent knowledge assessment procedures
- timely updating of program content and assessment tools
- annual self-evaluation of the faculty based on approved criteria

Evaluation of student learning outcomes is conducted through:

- ongoing academic performance monitoring
- mid-term assessment
- final state attestation

To assess competencies, a full set of assessment tools (FOS) has been developed, including: tests, case-based tasks, practical assignments, Mini-CEX, DOPS, SOPA, OSCE, and skills checklists. All assessment tools are approved by the University Academic Council.

Students participate in evaluating the quality of education through surveys, feedback mechanisms, and meetings with administration.

**Table 1: Competence Levels and Grading Criteria**

<b>Level / Level of Competence Formation</b>	<b>Score Interval (100-point scale)</b>	<b>Discipline Assessment Grade</b>
Competence not formed	0 – 49	Unsatisfactory
Threshold	50 – 64	Satisfactory
Basic	65 – 84	Good
Advanced	85 – 100	Excellent

**Table 2: Student's Final Result Conversion Chart**

### Student's Final Result for the Discipline

100-point scale	Letter GRADE	Grade Point (4-point system)
85 – 100	AA, BA	3.5 – 4.0
65 – 84	CC, CB, BB	2.0 – 3.0
50 – 64	E, DC	0.5 – 1.5
45 – 49	FI, FF	0.0

#### 4.10. Elective Courses (Student-Selected Courses)

Elective courses constitute not less than one-third of the elective component of each academic cycle and provide an expansion of students' professional competencies.

The organization of elective courses includes:

- annual updating of the list of electives by the Departments of General Education Disciplines, Morphological Disciplines, and Clinical Disciplines
- publication of course descriptions and requirements on the university website
- formation of an individual educational trajectory for each student
- mandatory inclusion of the selected courses in the student's curriculum

Elective courses are aimed at deepening knowledge in specific training areas, including clinical English, evidence-based medicine, additional clinical modules, and diagnostic tools.

#### 4.11. Independent Work of Students (IWS)

Independent work is a mandatory component of the educational process and is aimed at developing professional and universal competencies.

##### Volume of Independent Work:

- up to 50% in the humanities and natural-science cycles
- not less than 30% in the professional cycle

##### Forms of Independent Work:

- working with academic literature
- preparing presentations and reports
- solving clinical cases
- writing essays and analytical papers
- preparing for practical classes and seminars

Independent work is planned by the departments and includes a thematic plan, number of hours, and types of assessment recorded in the course syllabus and assessment tools.

#### 4.12. Conditions for Conducting Practice

Practice is conducted in accordance with the curriculum and includes:

- academic, introductory, and industrial (clinical) practice
- completion of individual assignments
- development of practical skills required by the educational program
- participation in real clinical work at hospital departments

Each type of practice has:

- a program
- defined goals and objectives
- assessment criteria
- reporting forms

### 5. Organization and Control of Practice

The organization of practice includes:

- appointment of practice supervisors from academic departments
- safety briefing and orientation
- completion of an individual assignment by the student
- maintaining a practice diary
- ongoing supervision and control by the practice supervisor
- final assessment upon completion of practice

The quality of practice is evaluated by the Departments of General Education Disciplines, Morphological Disciplines, Clinical Disciplines, the Methodological Council, and clinical mentors.

Departments of the Medical Faculty responsible for the practical training of students include:

<b>No .</b>	<b>Types, Names of Practical Training</b>	<b>Year of Study</b>	<b>Distribution of Practice within the Semester (Specific Terms)</b>	<b>Clinical Training Base</b>	<b>Position of the Supervisor from the Clinical Site</b>
1	Junior Medical Staff Assistant	Year 1	2 weeks (2nd semester)	JAIU Clinic, ZHARMUKHAMED, ISMAA-MED, ZHARCH, ZHARPH, ZHATSRZ, ZHABT, ZHASPZ	Directors, doctors, and department head
2	Nurse Assistant	Year 2	2 weeks (4th semester)	JAIU Clinic, ZHARMUKHAMED, ISMAA-MED, ZHARCH, ZHARPH, ZHATSRZ, ZHABT, ZHASPZ	Directors, doctors, and department head
3	Ambulance and Emergency Care Paramedic Assistant	Year 3	4 weeks (6th semester)	JAIU Clinic, ZHARMUKHAMED, ISMAA-MED, ZHARCH, ZHARPH, ZHATSRZ, ZHABT, ZHASPZ	Directors, doctors, and department head
4	Inpatient Hospital Physician Assistant	Year 4	6 weeks (8th semester)	JAIU Clinic, ZHARMUKHAMED, ISMAA-MED, ZHARCH, ZHARPH, ZHATSRZ, ZHABT, ZHASPZ	Directors, doctors, and department head
5	FMC (Family Medicine Center)	Year 5	5 weeks (9th semester)	FAMILY MEDICINE CENTERS	Directors, doctors, and



No.	Types, Names of Practical Training	Year of Study	Distribution of Practice within the Semester (Specific Terms)	Clinical Training Base	Position of the Supervisor from the Clinical Site
	Physician Assistant			1,2,3,4,5,6,7,8,9,10,11,12	department head

### Programs of Industrial (Clinical) Practice and Resources for Clinical Training

The industrial practice programs (*Appendix No. 5*) are an integral part of the Educational Program and ensure systematic professional and practical training of students. Each program includes:

- goals and expected outcomes of the practice
- specific professional tasks
- the list of competencies to be formed
- the list of practical skills to be mastered
- practice base, timelines, and duration
- number of credit units
- reporting forms and assessment criteria

The programs are designed to provide phased development of students' professional skills—from consolidation of basic abilities to performing core clinical procedures under supervisor guidance.

### Assessment of Industrial Practice Outcomes

Assessment is carried out using an accumulative point-based system reflecting both the degree of competency acquisition and the student's professional maturity:

- student's report — 0–50 points
- practice diary — 0–10 points
- supervisor's evaluation — 0–30 points
- additional indicators (initiative, professionalism, adherence to deontology) — 0–10 points

**Total: 100 points**

### Teaching and Material Base of Clinical Departments

Clinical departments are equipped with modern training laboratories and simulation zones supporting a practice-oriented learning environment.

The educational facilities include **53 rooms**, including:

- 4 lecture halls
- 38 specialized teaching rooms
- 6 laboratories
- a sports hall
- a cultural center
- a simulation center
- an OSCE center and vivarium (*under construction*)
- an additional 12 classrooms at clinical bases

All facilities comply with sanitary standards (*SanPiN 2.4.3.004-03*) and construction regulations of the Kyrgyz Republic. Educational equipment is regularly updated, ensuring students' access to modern simulators, medical instruments, and training models.

A major infrastructure expansion is planned:

**in the 2026–2027 academic year**, a new administrative and academic campus and a sports complex will be commissioned, significantly improving the quality of the educational environment.

### Number and Categories of Patients

Students have access to all required age groups and clinical categories of patients during their clinical training.

#### Main clinical bases:

No.	Clinical Training Base	Position of the Supervisor from the Clinical Site
1	JAIU Clinic, ZHARMUKHAMED, ISMAA-MED, ZHARCH, ZHARPH, ZHATSRZ, ZHABT, ZHASPZ	Directors, doctors, and department head
2	JAIU Clinic, ZHARMUKHAMED, ISMAA-MED, ZHARCH, ZHARPH, ZHATSRZ, ZHABT, ZHASPZ	Directors, doctors, and department head
3	JAIU Clinic, ZHARMUKHAMED, ISMAA-MED, ZHARCH, ZHARPH, ZHATSRZ, ZHABT, ZHASPZ	Directors, doctors, and department head
4	JAIU Clinic, ZHARMUKHAMED, ISMAA-MED, ZHARCH, ZHARPH, ZHATSRZ, ZHABT, ZHASPZ	Directors, doctors, and department head
5	JAIU Clinic, ZHARMUKHAMED, ISMAA-MED, ZHARCH, ZHARPH, ZHATSRZ, ZHABT, ZHASPZ	Directors, doctors, and department head

### International Clinical Bases

In accordance with Order No. 680 of the Ministry of Health of the Kyrgyz Republic dated 29.09.2018, JAIU collaborates with foreign multidisciplinary clinics in India and Pakistan:

Clinic	City / State	Bed Capacity
KIMS Hospital	Telangana	3064 beds
KIMS Hospital	Trivandrum, Kerala	250 beds
Nobel Hospital	(Not specified)	100 beds
Nova Hospital	Lucknow	75 beds

## **International Clinical Bases**

International clinical bases provide students with access to:

- modern diagnostic technologies
- high-tech medical care
- diverse clinical algorithms and approaches
- experience working in a multicultural medical environment

## **5.1. Recommendations for the Organization of Educational Technologies Forms and Tools of Instruction**

### **Theoretical Training:**

- lectures
- seminars
- supervised independent work (in-class)
- independent work (out-of-class)
- consultations

### **Practical Training:**

- practical classes
- academic research work
- industrial (clinical) practice
- final qualifying work

## **Interactive and Clinical Teaching Methods**

Modern teaching methods are applied to ensure competency formation.

### **Interactive Methods:**

- problem-based and interactive lectures
- seminar-discussions
- round-table discussions
- case method
- brainstorming
- small-group work
- public presentations
- analysis of educational videos

### **Active Methods of Medical Education:**

- **TBL — Team-Based Learning**
- **PBL — Problem-Based Learning**
- **CBL — Case-Based Learning**
- **RBL — Research-Based Learning**
- project-based learning
- standardized patient
- Kolb experiential learning model

### **Simulation-Based Training:**

- high-fidelity simulations
- **OSCE — Objective Structured Clinical Examination**
- VR anatomy
- phantoms and mannequins

### **Clinical Teaching Methods:**

- bedside teaching
- workplace-based learning
- clinical rotations and clerkships

### **Online Formats:**

- webinars
- video lectures

- online seminars
- telemedicine consultations

### Clinical Rotations

The 5-year educational program consists of **320 credits**, including:

- **25 credits** — industrial (clinical) practice
- **at least 20%** of the remaining workload — clinical rotations in core disciplines

Clinical rotations are conducted in the following areas:

- internal medicine
- surgery
- pediatrics
- obstetrics and gynecology
- family medicine
- infectious diseases
- emergency care
- anesthesiology and intensive care
- specialized clinical departments

No.	Core Disciplines	Number of Hours (Credits)	Learning Outcomes (LO)
1	Faculty Therapy	300 hrs. (10 cr.)	Diagnosis and management of outpatients with chronic diseases. LO1, LO2, LO3, LO5, LO6, LO7, LO8, LO10
2	Hospital Therapy	300 hrs. (10 cr.)	Management of inpatients, working with severe cases and comorbid pathology. LO1, LO2, LO3, LO5, LO6, LO7, LO8, LO9, LO10
3	Family Medicine and Outpatient Therapy	240 hrs. (8 cr.)	Comprehensive approach to treating patients of all ages in outpatient settings. LO1, LO2, LO3, LO5, LO6, LO7, LO8, LO9, LO10
4	Propaedeutics of Pediatric Diseases	150 hrs. (5 cr.)	Fundamentals of pediatric examination, age-related features. LO2, LO5, LO6
5	Pediatric Diseases	420 hrs. (14 cr.)	Diagnosis, treatment, prevention of diseases in children of all ages. LO1, LO2, LO3, LO5, LO6, LO7, LO8, LO9, LO10
6	Propaedeutics of Surgical Diseases	120 hrs. (4 cr.)	History taking, examination of surgical patients, main symptoms of surgical pathology. LO2, LO5, LO6

No.	Core Disciplines	Number of Hours (Credits)	Learning Outcomes (LO)
7	Surgical Diseases	210 hrs. (7 cr.)	Diagnosis and treatment of surgical diseases, participation in operations. LO1, LO2, LO3, LO5, LO6, LO7, LO8, LO9, LO10
8	Hospital and Outpatient Surgery	240 hrs. (8 cr.)	Treatment and observation of surgical patients in inpatient and outpatient settings. LO1, LO2, LO3, LO5, LO6, LO7, LO8, LO9, LO10
9	Obstetrics and Gynecology	390 hrs. (13 cr.)	Management of pregnant women, deliveries, gynecological diseases. LO3, LO5, LO6, LO7
10	Anesthesiology, Intensive Care, Emergency Conditions	120 hrs. (4 cr.)	Resuscitation measures, life support, work in intensive care units. LO3, LO4, LO5, LO7, LO8
11	Ophthalmology	90 hrs. (3 cr.)	Diagnosis and treatment of visual organ diseases, skills in ophthalmoscopy, acute conditions. LO2, LO3, LO5, LO6, LO7
12	Otorhinolaryngology	90 hrs. (3 cr.)	Diagnosis of ENT diseases, performing basic procedures (lavage, foreign body removal, etc.). LO2, LO3, LO5, LO6, LO7
13	Neurology and Neurosurgery	120 hrs. (4 cr.)	Performing neurological examination, recognizing focal symptoms, participating in the treatment of strokes and injuries. LO2, LO3, LO5, LO6, LO7
14	Traumatology, Orthopedics	120 hrs. (4 cr.)	Diagnosis and treatment of injuries, application of splints, casts, participation in operations. LO2, LO3, LO5, LO6, LO7, LO10
15	Psychiatry and Narcology	120 hrs. (4 cr.)	Conducting psychiatric examination, participating in the therapy of psychoses, addictions. LO3, LO5, LO6, LO7, LO9
16	Forensic Medicine	90 hrs. (3 cr.)	Conducting examinations, determining causes of death,

No.	Core Disciplines	Number of Hours (Credits)	Learning Outcomes (LO)
			working with documentation. LO5, LO8, LO10

### **Clinical Rotations**

Clinical rotations include workplace-based learning during practical classes, night shifts, and industrial (clinical) practice.

## **6. Structure and Organization of the Educational Program**

### **6.1. Academic Calendar**

The sequence of implementation of the educational program for the specialty **560001 “General Medicine”** is determined by the basic curriculum and the annual working curriculum.

The academic calendar includes:

- theoretical training
- academic and industrial (clinical) practice
- mid-term assessment
- final state attestation
- vacation periods

The calendar is developed annually and ensures an even distribution of academic workload.

### **6.2. Curriculum**

The curriculum defines:

- the structure and content of the educational program
- logical sequence of studying cycles, disciplines, and modules
- distribution of workload by semesters
- formation of universal and professional competencies

The curriculum is developed in accordance with the State Educational Standard and reflects a balanced combination of theoretical, practical, and clinical training.

### **6.3. Annual Working Curriculum**

The annual working curriculum is formed each academic year and includes:

- workload of disciplines in academic hours and credits
- types of learning activities (lectures, seminars, laboratory and practical classes)
- forms of ongoing and mid-term assessment
- list of disciplines of the basic and elective (variable) parts

The working curriculum ensures transparency of the academic workload and monitoring of program mastery.

### **6.4. Competency Map of the Educational Program**

The competency map reflects:

- the structure of universal and professional competencies
- levels and stages of their formation
- types of learning activities aimed at competency acquisition
- mechanisms of monitoring and assessment

Based on the competency map, competency passports are developed, defining the contribution of each discipline to learning outcomes.

(Attached as **Appendix No. 3.**)

### **6.5. Annotations of Basic Disciplines**

Annotations of the basic (mandatory) disciplines include:

- goals and objectives of the discipline
- brief content
- competencies to be formed
- forms of assessment and types of independent work

(Provided in **Appendix No. 4.**)

#### **6.6. Annotations of University Component Disciplines and Elective Courses**

Annotations of the elective (variable) component are included in the **Catalogue of Elective Courses** and are provided to students for:

- forming an individual learning trajectory
- selecting an educational profile

#### **6.7. Annotations of Practice**

Annotations of academic and industrial practice include:

- goals and objectives
- duration and timelines
- list of competencies
- forms of assessment
- evaluation criteria

Students are given the opportunity to provide feedback on the content and quality of clinical training.

### **7. Requirements for Final State Attestation (FSA)**

#### **7.1. General Provisions**

Final State Attestation confirms that the graduate meets the requirements of the State Educational Standard and provides a comprehensive assessment of readiness for professional activity.

The FSA program includes:

- list of general medical topics and clinical conditions
- list of practical skills to be assessed
- clinical situational tasks (cases)

Students are admitted to FSA only after completing the full educational program.

FSA is conducted in accordance with:

- Government Decree of the Kyrgyz Republic No. 346 (29.05.2012)
- JAIU Regulations on Final State Attestation

#### **7.2. Types of Final Assessment Examinations**

Final State Attestation includes an interdisciplinary comprehensive state examination consisting of two stages:

##### **Stage 1 — Theoretical Assessment**

- interdisciplinary written test
- evaluation of theoretical knowledge, clinical reasoning, and integration of core medical sciences

##### **Stage 2 — Practical Assessment**

- **OSCE — Objective Structured Clinical Examination**, or
- **Bedside patient examination (curation)**

Assessed competencies:

- clinical skills
- communication skills
- deontology and professional conduct
- decision-making in real clinical settings

**Structure of the BEP by Specialty**

<b>Volume of BEP in the specialty and its blocks in credits</b>	<b>BEP 2025-2026 JAIU</b>
<b>Block 1</b>	
I. Humanitarian, social and economic cycle	not less than 16 cr
II. Mathematical and natural science center	not less than 6 cr
III. Professional cycle	not less than 267 cr
<b>Block 2</b>	
Practice	25
<b>Block 3</b>	
State final certification	not less than 6 cr
<b>TOTAL CREDITS</b>	<b>320 credits</b>

**Schedule by Years and Semesters****1 YEAR (1st SEMESTER)**

<b>No.</b>	<b>SUBJECT</b>	<b>CREDIT</b>	<b>HOURS</b>
1	Kyrgyz language and literature	2	60
2	Russian language	2	60
3	Latin language	2	60
4	History of Kyrgyzstan	2	60
5	Mathematics and Computer Science	4	120
6	Medical Physics	2	60
7	Normal clinical anatomy	4	120
8	Histology, embryology, cytology	3	90
9	Normal clinical physiology	5	150
10	Care of medical and surgical patients	2	60
11	Medical biology, genetics and parasitology	4	120
12	Physical Culture		70



No.	SUBJECT	CREDIT	HOURS
<b>Total</b>		<b>32</b>	<b>960</b>

**1 YEAR (2nd SEMESTER)**

No.	SUBJECT	CREDIT	HOURS
1	Kyrgyz language and literature	2	60
2	Russian language	2	60
3	Medical philosophy	2	60
4	Normal clinical anatomy	4	120
5	Histology, embryology, cytology	3	90
6	Normal clinical physiology	4	120
7	Microbiology, virology and immunology	4	120
8	Fundamentals of research activities in medicine	4	120
9	Medical deontology: doctor and patient	2	60
10	Care of medical and surgical patients	2	60
11	Assistant to junior medical staff	3	90
12	Physical Culture		70
<b>Total</b>		<b>32</b>	<b>960</b>

**2 YEAR (3rd SEMESTER)**

No.	SUBJECT	CREDIT	HOURS
1	Kyrgyz language and literature	2	60
2	Russian language	2	60
3	General and clinical biochemistry	5	150
4	Normal clinical anatomy	4	120
5	Normal clinical physiology	3	90
6	Microbiology, virology and immunology	3	90
7	Basic and clinical pharmacology	5	150

No.	SUBJECT	CREDIT	HOURS
8	Preventive and Social Medicine (PH, GH, epidemiology)	3	90
9	Pathology	5	150
10	Physical Culture		70
<b>Total</b>		<b>32</b>	<b>960</b>

## 2 YEAR (4th SEMESTER)

No.	SUBJECT	CREDIT	HOURS
1	Basic and clinical pharmacology	5	150
2	General and clinical biochemistry	3	90
3	Pathology	4	120
4	Internal medicine (cycle of propaedeutics IM)	5	150
5	Pediatrics (cycle of propaedeutics)	4	120
6	Surgical diseases (General surgery)	5	150
7	Clinical laboratory diagnostics	3	90
8	(Practical Training) Nurse Assistant	3	90
9	Physical Culture		70
<b>Total</b>		<b>32</b>	<b>960</b>

## 3 YEAR (5th SEMESTER)

No.	SUBJECT	CREDIT	HOURS
1	Internal medicine (Pulmonology)	5	150
2	Pediatrics (Pulmonology)	3	90
3	Surgical diseases (Abdominal (belly) surgery)	2	60
4	Obstetrics and gynecology (General obstetrics)	4	120
5	Preventive and Social Medicine (PH, GH, epidemiology)	4	120
6	Psychiatry and Narcology	3	90

No.	SUBJECT	CREDIT	HOURS
7	Neurology with the basics of neurosurgery	3	90
8	Ophthalmology	4	120
9	Otorhinolaryngology (ENT)	4	120
<b>Total</b>		<b>32</b>	<b>960</b>

### 3 YEAR (6th SEMESTER)

No.	SUBJECT	CREDIT	HOURS
1	Internal medicine (Cardiology and ECG)	4	120
2	Pediatrics (Cardiology and ECG)	2	60
3	Surgical diseases (Thoracic surgery)	2	60
4	Urology	3	90
5	Obstetrics and gynecology (Physiological obstetrics)	3	90
6	Neurology with the basics of neurosurgery	4	120
7	Radiodiagnostics	4	120
8	(Practical Training) Assistant paramedic of ambulance and emergency medical services	6	180
<b>Total</b>		<b>32</b>	<b>950</b>

### 4 YEAR (7th SEMESTER)

No.	SUBJECT	CREDIT	HOURS
1	Infectious diseases	4	120
2	Internal medicine (Gastroenterology)	5	150
3	Pediatrics (Gastroenterology)	5	150
4	Surgical diseases (Proctology)	3	90
5	Obstetrics and gynecology (Pathological obstetrics)	3	90
6	Traumatology and Orthopedics	5	150
7	Oncology, palliative medicine	5	150

No.	SUBJECT	CREDIT	HOURS
8	Physiotherapy, exercise therapy	2	60
<b>Total</b>		<b>32</b>	<b>960</b>

#### 4 YEAR (8th SEMESTER)

No.	SUBJECT	CREDIT	HOURS
1	Infectious diseases	2	60
2	Internal medicine (Nephrology and hematology)	5	150
3	Pediatrics (Nephrology and hematology)	2	60
4	Surgical diseases (Pediatric surgery)	2	60
5	Anesthesiology, intensive care, emergencies	3	90
6	Obstetrics and gynecology (Complications of childbirth and emergency conditions)	3	90
7	Reproductive health	2	60
8	Operative surgery	2	60
9	(Practical Training) Hospital physician assistant	9	270
<b>Total</b>		<b>32</b>	<b>960</b>

#### 5 YEAR (9th SEMESTER)

No.	SUBJECT	CREDIT	HOURS
1	Internal medicine (Rheumatology and dermatology)	6	180
2	Family Medicine/Outpatient Therapy	4	120
3	Pediatrics (Neonatology)	2	60
4	Surgical diseases (Maxillofacial (JAW) surgery)	4	120
5	Obstetrics and gynecology (General Gynecology)	2	60
6	Reproductive health	3	90
7	Evidence Based Medicine	2	60
8	Functional diagnostics	2	60

No.	SUBJECT	CREDIT	HOURS
9	(Practical Training) Physician Assistant FMC	7	210
<b>Total</b>		<b>32</b>	<b>960</b>

#### 5 YEAR (10th SEMESTER)

No.	SUBJECT	CREDIT	HOURS
1	Family Medicine/Outpatient Therapy	4	120
2	Preventive and Social Medicine (PH, GH, epidemiology)	5	150
3	Internal medicine (Endocrinology)	2	60
4	Surgical diseases (Endocrine surgery)	2	60
5	Obstetrics and gynecology (Children's and adolescent gynecology)	3	90
6	Forensic medicine with jurisprudence	4	120
7	Phthiology	2	60
8	Mathematical statistics in medicine	2	60
9	Telemedicine, e-health	2	60
10	State Final Certification	6	(Hours not specified)
<b>Total</b>		<b>32</b>	<b>960</b>

#### Competencies Matrix

##### BLOCK 1: DISCIPLINES (MODULES)

Code	Subject Name	Credits	Formed Competencies
<b>HUMANITARIAN, SOCIAL AND ECONOMIC CYCLE</b>			
<b>B.1. Basic part</b>			
B.1.B.1.1	Kyrgyz language and literature	4	GSC-4; IC-3; SPCC-2
B.1.B.1.2.	Russian language	4	IC-3; SPCC-2
B.1.B.1.3.	Latin language	2	IC-3; SPCC-

Code	Subject Name	Credits	Formed Competencies
B.1.B.1.4.	History and Culture of Kyrgyzstan. History of Medicine.	4	GSC-2; SPCC-2
B.1.B.1.5.	Philosophy	2	GSC-1; GSC-2
<b>MATHEMATICAL AND NATURAL SCIENCE CENTER (6)</b>			
<b>B.2. Basic part</b>			
B.1.B.2.1.	Mathematics and Computer Science	2	GSC-3; IC-1
B.1.B.2.2.	Physics	2	GSC-3; IC-1
B.1.B.2.3.	Chemistry	2	GSC-1; GSC-3
<b>PROFESSIONAL CYCLE</b>			
<b>B.1.B.3.0. Basic part</b>			
B.1.B.3.1.	General and clinical biochemistry	7	PC-14; PC-15
B.1.B.3.2.	Normal and clinical anatomy	12	PC-5; PC-15
B.1.B.3.3.	Histology, embryology, cytology	7	PC-7; PC-15
B.1.B.3.4.	Normal physiology	12	PC-14; PC-15
B.1.B.3.5.	Microbiology, virology and immunology	8	PC-10
B.1.B.3.6.	Basic and clinical pharmacology	10	PC-17
B.1.B.3.7.	Pathological Anatomy	6	PC-14; PC-15
B.1.B.3.8.	Pathological Physiology	6	PC-14; PC-4
B.1.B.3.9.	Infectious diseases	6	PC-10; PC-11; PC-13
B.1.B.3.10.	Propaedeutics of Internal Medicine	8	PC-5; PC-15

Code	Subject Name	Credits	Formed Competencies
B.1.B.3.11.	Faculty Therapy	10	PC-2; PC-3; PC-6; PC-12; PC-13; PC-14; PC-15; PC-16; PC-17
B.1.B.3.12.	Hospital Therapy	10	PC-2; PC-3; PC-6; PC-12; PC-13; PC-14; PC-15; PC-16; PC-17
B.1.B.3.13.	Family Medicine/Outpatient Therapy	8	PC-8; PC-11; PC-15
B.1.B.3.14.	Public Health and Healthcare	3	PC-25; PC-26; PC-27; PC-29
<b>Variable part</b>			
B.1.V.3.1.	Propaedeutics of Pediatric Diseases	4	PC-5; PC-15; PC-17
B.1.V.3.2.	Faculty Pediatrics	10	PC-2; PC-3; PC-6; PC-12; PC-13; PC-14; PC-15; PC-16; PC-17
B.1.V.3.3.	Hospital Pediatrics with a course in Neonatology	7	PC-2; PC-3; PC-6; PC-12; PC-13; PC-14; PC-15; PC-16; PC-17
B.1.V.3.4.	Faculty Surgery	10	PC-18; PC-19; PC-20
B.1.V.3.5.	Hospital Surgery	6	PC-18; PC-19; PC-20
B.1.V.3.6.	Anesthesiology, intensive care, emergencies	3	PC-16; PC-18; PC-19
B.1.V.3.7.	Urology	4	PC-5, PC-15
B.1.V.3.8.	Obstetrics and gynecology	15	PC15
B.1.V.3.9.	General Hygiene	4	PC-3, PC-11, PC-12
B.1.V.3.10	Endocrinology	4	PC-5, PC-9, PC-16
B.1.V.3.11	Epidemiology, Tropical Medicine	5	PC-10, PC-13. PC-30
B.1.V.3.12	Forensic medicine with jurisprudence	5	PC-14, PC-2, PC-31

Code	Subject Name	Credits	Formed Competencies
B.1.V.3.13	Reproductive health	5	PC-14; PC-15; PC-16; PC-17
B.1.V.3.14	Dermatovenereology	3	PC-1, PC-17
B.1.V.3.15	Psychiatry and Narcology	4	PC-17, PC-9
B.1.V.3.16	Neurology with the basics of neurosurgery	7	PC-16, PC-18-19
B.1.V.3.17	Traumatology and Orthopedics	5	PC-16, PC-18, PC-19
B.1.V.3.18	Dentistry	2	PC-7
B.1.V.3.19	Oncology, palliative medicine	5	PC-1, PC-8, PC-15
B.1.V.3.20	Ophthalmology	4	PC-15, PC-16. PC-18
B.1.V.3.21	Otorhinolaryngology	4	PC-15, PC-16. PC-18
B.1.V.3.22	Phthisiology	2	PC-12
B.1.V.3.23	Evidence Based Medicine	5	PC-14, PC-2, PC-31
B.1.V.3.24	Medical biology, genetics and parasitology	2	GSC-1
B.1.V.3.25	Fundamentals of research activities in medicine	3	GSC-3. PC-31, PC-32, PC-33
B.1.V3.26	Radiodiagnostics	2	PC-16; PC-18; PC-19
B.1.V3.27	Care of medical and surgical patients	2	PC-6, PC-28

#### Disciplines of student's choice

Code	SUBJECT	CREDIT	FORMED COMPETENCIES
B.1.CPV.1.1	Bioorganic Chemistry	3	GSC-1
*	"Academic Honesty and University Reputation"	3	GSC-4



<b>Code</b>	<b>SUBJECT</b>	<b>CREDIT</b>	<b>FORMED COMPETENCIES</b>
B.1.CPV.1.2	Medical Deontology: Doctor and Patient	2	SPCC-5; PC-1; PC-2
*	Medical Psychology	2	GSC-4; SPCC-5
B.1.CPV.1.3	Topographic Anatomy	3	PC-4; PC-5, PC-14
*	Nanotechnology in Medicine	3	PC-5
B.1.CPV.1.4	Hematology	3	PC-5
*	Emergency Conditions	3	PC-20
B.1.CPV.1.5	Osteopathy	3	PC-16
*	Clinical Laboratory Diagnostics	3	PC-14
B.1.CPV.1.6	Physiotherapy, Exercise Therapy (LFK)	2	PC-22, PC-23
*	Allergology	2	PC-10
B.1.CPV.1.7	Operative Surgery	2	PC-18; PC-19
*	Disaster Medicine	2	PC-20
B.1.CPV.1.8	Occupational Diseases	2	PC-9
*	Functional Diagnostics	2	PC-14, PC-15
B.1.CPV.1.9	"Stigma and Discrimination: Adherence to Tuberculosis Treatment"	2	PC-1
*	Mathematical Statistics in Medicine	2	IC-1, PC-33
B.1.CPV.1.10	Outpatient Surgery	2	PC-17, PC-18, PC-19, PC-20
*	Marketing in Healthcare	2	IC-4
*	Telemedicine, e-health	2	PC-26

**BLOCK 5: PRACTICE (25 CREDITS)**

Code	Name	Credits	Formed Competencies
B.5.1	Nurse Assistant	3	GSC-4, PC-6, PC-28
B.5.2	Assistant paramedic of ambulance and emergency medical services	4	PC-28, PC-18-19
B.5.3	Hospital Physician Assistant	8	PC-19-21-17. PC-24
B.5.4	Physician Assistant FMC	10	PC-13, PC-18-19

#### **BLOCK 6: STATE FINAL CERTIFICATION**

Name	Credits	Formed Competencies
Interdisciplinary comprehensive exam (interdisciplinary blank testing)	4	GSC-1, GSC-2, GSC-3, GSC-4, IC-1, IC-2, IC-3, IC-4, SPCC-1, SPCC-2, SPCC-3, SPCC-4, SPCC-5, PC-1 to PC-33
Interdisciplinary clinical exam (OSCE)	6	GSC-1, GSC-2, GSC-3, GSC-4, IC-1, IC-2, IC-3, IC-4, SPCC-1, SPCC-2, SPCC-3, SPCC-4, SLC-5, PC-1 to PC-33

Here's the English translation of the provided text, including the tables:

#### **ANNOTATIONS OF CORE DISCIPLINES (MODULES)**

No.	SUBJECT	ANNOTATION
1	Kyrgyz language and literature	This discipline is designed to study the fundamentals of the Kyrgyz language as a means of communication in the medical field and to understand the cultural context of Kyrgyzstan. The course includes basic grammatical and lexical norms, development of oral and written communication skills necessary for interaction with patients and colleagues, as well as an introduction to the basics of Kyrgyz literature and culture. This contributes to successful professional communication and adaptation of international students in the medical environment of Kyrgyzstan.
2	Russian language	This discipline aims to master the basic grammatical and lexical norms of the Russian language, developing oral and written communication skills necessary for effective interaction in the medical field. The course helps international students acquire professional medical vocabulary, which contributes to successful

No.	SUBJECT	ANNOTATION
		communication with patients and colleagues, as well as adaptation in the educational and work environment of Kyrgyzstan.
3	Latin language	This discipline aims to study the fundamentals of Latin grammar, vocabulary, and medical terminology. The course contributes to understanding the structure and origin of medical terms, which is important for precise and professional communication. The study of Latin helps students better assimilate anatomical, pharmacological, and clinical disciplines.
4	Mathematics and Computer Science	This discipline provides basic knowledge in mathematical methods and the fundamentals of computer science, necessary for analyzing medical data and solving professional problems. The course includes the study of algebra, statistics, logic, as well as the basics of programming and working with information systems in medicine.
5	Medical Physics	This discipline introduces students to the basic physical principles applied in medicine, including electromagnetism, optics, radiation safety, and diagnostics. The course aims to develop an understanding of physical processes in the human body and their use in medical devices and technologies.
6	General and clinical biochemistry	Studies chemical processes and substances occurring in a living organism, with an emphasis on the biochemical foundations of normal and pathological vital activity. The course covers the structure and functions of major biomolecules, metabolic pathways, as well as biochemical diagnosis of diseases.
7	Normal clinical anatomy	A fundamental discipline that studies the macroscopic structure of the human body. Special attention is paid to topographic anatomy, the mutual arrangement, and functional connections of organs. Provides knowledge for understanding the clinical aspects of health and disease.
8	Histology, embryology, cytology	Studies the structure and functions of cells, tissues, and organs at the microscopic level, as well as their developmental processes from fertilization to birth. The knowledge gained in this discipline forms the basis for understanding physiology, pathology, and clinical medicine.

No.	SUBJECT	ANNOTATION
9	Normal clinical physiology	Studies the main functions and processes occurring in the human body under normal conditions. The course covers the mechanisms of organ system function and their interaction to maintain homeostasis. The knowledge gained in the course is fundamental to understanding pathological processes and clinical treatment methods.
10	Microbiology, virology and immunology	Introduces the fundamentals of studying microorganisms (bacteria, viruses, pathogens) and the principles of the body's immune response. Mechanisms of interaction with the host, routes of infection transmission, diagnostic methods, and prevention of infectious diseases are considered.
11	Basic and clinical pharmacology	Aims to study the basics of drug action, their pharmacokinetics and pharmacodynamics, as well as the principles of rational use of medications in clinical practice. Develops competencies in prescribing and monitoring drug therapy.
12	Pathology	Studies the mechanisms of development and manifestation of various diseases, including changes in cells, tissues, and organs. Special attention is paid to the etiology, pathogenesis, morphological and clinical manifestations of pathological conditions. Includes the study of pathological specimens.
13	Infectious diseases	Dedicated to the study of the etiology, pathogenesis, clinical manifestations, diagnosis, treatment, and prevention of infectious diseases (bacterial, viral, fungal, parasitic). Epidemiology and modern methods of combating infections are studied.
14	Internal medicine	A fundamental section that studies a wide range of diseases of internal organs and human systems. In-depth knowledge of the pathogenesis, diagnosis, treatment, and prevention of diseases of the cardiovascular, respiratory, digestive, endocrine, urinary systems. Special attention is paid to a comprehensive approach to the patient and clinical thinking.
15	Pediatrics	Dedicated to the study of the health, diseases, and development of children from birth to adolescence. Age-related physiological and anatomical features, pathogenesis of childhood diseases, principles of managing a healthy child, and providing emergency care for acute conditions are studied.

No.	SUBJECT	ANNOTATION
16	Surgical diseases	Aims to study the fundamentals of diagnosis, treatment, and prevention of surgical diseases requiring operative intervention. Principles of asepsis and antisepsis, care for surgical patients, and emergency surgery are studied. Develops practical skills for safe and effective surgical care.
17	Obstetrics and gynecology	Dedicated to the study of physiology, pathology, and clinical practice related to the female reproductive system, pregnancy, childbirth, and the postpartum period. Includes issues of family planning, reproductive health protection, and obstetric care.
18	Anesthesiology, intensive care, emergencies	Covers the basics of pain relief and anesthesia, methods of maintaining vital body functions in critical conditions, and the principles of providing emergency medical care. Algorithms for actions in life-threatening conditions (shock, cardiopulmonary insufficiency) are studied.
19	Preventive and Social Medicine (PH, GH, epidemiology)	Covers the basic principles of public health protection, methods of disease prevention, and promotion of a healthy lifestyle. Epidemiology, healthcare system organization, sanitary and hygienic measures, and social determinants of health are studied.
20	Urology	Dedicated to the study of anatomy, physiology, pathology, and treatment of genitourinary system diseases in men and women (urinary tract infections, urolithiasis, oncological diseases). Diagnostic methods and modern therapeutic/surgical approaches are considered.
21	Forensic medicine with jurisprudence	Covers the basic principles and methods of forensic medical examination, including the study of causes of death and injuries relevant to the legal system. Fundamentals of medical law, ethical issues, and the doctor's responsibilities within forensic medicine are studied.
22	Psychiatry and Narcology	Aims to study mental disorders, their diagnosis, treatment, and prevention, as well as the specifics of psychoactive substance dependence. Fundamentals of psychopathology, psychotherapy, pharmacotherapy, and rehabilitation are studied.
23	Neurology with the basics of neurosurgery	Studies the structure, functions, and diseases of the nervous system (strokes, epilepsy, injuries, tumors).

No.	SUBJECT	ANNOTATION
		Special attention is paid to the basics of neurosurgery—methods of surgical treatment of neurological pathologies.
24	Traumatology and Orthopedics	Dedicated to the study of musculoskeletal injuries, their diagnosis, treatment, and prevention. Principles of first aid for injuries and modern methods of treating fractures, as well as orthopedics (correction of deformities and rehabilitation), are studied.
25	Dentistry	Covers the anatomy and physiology of the dentoalveolar system, the basics of prevention, diagnosis, and treatment of oral cavity diseases (caries, periodontal diseases).
26	Oncology, palliative medicine	Study of the causes, mechanisms of development, diagnosis, and treatment of malignant neoplasms (screening, prevention, surgical, radiation, drug treatment). Palliative medicine focuses on improving the quality of life for patients with incurable diseases, including pain control and support.
27	Ophthalmology	Covers the basics of anatomy, physiology, and pathophysiology of the organ of vision, as well as major eye diseases. Diagnostic methods, emergency conditions in ophthalmology, prevention of blindness, and the application of medical, laser, and surgical therapy are considered.
28	Otorhinolaryngology (ENT)	Covers the anatomy, physiology, and pathology of the ear, nose, paranasal sinuses, pharynx, larynx, and neck. Inflammatory, traumatic, neoplastic, and functional diseases of ENT organs, as well as emergency conditions (acute respiratory failure, bleeding), are studied.
29	Phthisiology	Studies the etiology, epidemiology, pathogenesis, diagnosis, treatment, and prevention of tuberculosis. Features of the pathogen, transmission routes, risk factors, as well as treatment approaches and public health measures are considered.
30	Evidence Based Medicine	Dedicated to the principles and methods of applying scientific data in clinical practice. Levels of evidence, critical appraisal of medical literature, systematic reviews, and meta-analyses are studied. The goal is to make optimal decisions based on the best available scientific evidence.

No.	SUBJECT	ANNOTATION
31	Medical biology, genetics and parasitology	Covers the basics of human biology, patterns of heredity and variability. Molecular bases of genetics, methods of genetic analysis, and diagnostics are studied. Major groups of parasites, their pathogenic effects, and prevention methods are considered.
32	Fundamentals of research activities in medicine	Introduces the basics of research work in the medical field. Methods of planning, conducting, and analyzing scientific research, ethical principles, the use of statistical methods, and writing scientific articles are studied.
33	Radiodiagnostics	Studies methods of visualizing internal organs and tissues using radiological technologies: radiography, CT, MRI, and ultrasound. Students master the interpretation of diagnostic images and the role of radiodiagnostics in clinical practice.
34	Care of medical and surgical patients	Aims to develop knowledge and practical skills for caring for medical and surgical patients. Care methods, prevention of complications, adherence to aseptic and antiseptic principles are studied.
35	Physical Culture	Aims to develop knowledge and skills for maintaining health and physical activity. Includes basic exercises, methods for strengthening the musculoskeletal system, developing endurance, and preventing diseases.

#### ANNOTATIONS OF ELECTIVE DISCIPLINES

No.	SUBJECT	ANNOTATION
1	Medical Deontology: Doctor and Patient	This discipline examines the ethical and legal foundations of the doctor-patient interaction. Special attention is given to the principles of medical ethics, the rights and responsibilities of both parties, issues of confidentiality, informed consent, and the doctor's professional responsibility.
2	Medical psychology	Studies psychological aspects of health and disease, human psychophysiology, features of doctor-patient interaction, methods of psychological support and correction. Aims to develop effective communication skills.
3	Operative surgery	Dedicated to the study of principles and methods of performing surgical operations, techniques for various surgical interventions, pre-operative and post-operative

No.	SUBJECT	ANNOTATION
		preparation. Develops practical skills in surgical intervention and the ability to make decisions in an operating room environment.
4	Clinical laboratory diagnostics	Studies methods and principles of conducting laboratory tests for diagnosing diseases. Special attention is paid to interpreting analysis results and their clinical significance. Contributes to the development of skills to independently perform laboratory tests.
5	Physiotherapy, exercise therapy	Studies methods of physiotherapy and therapeutic exercise aimed at restoring and maintaining health. Includes theoretical foundations and practical skills for applying physical factors and exercises for disease treatment and rehabilitation.
6	Alternative medicine	Introduces the main methods and approaches of alternative medicine (phytotherapy, acupuncture, homeopathy). Principles of their application, effectiveness, and possible risks are studied. Aims to develop a critical attitude and understanding of the integration of traditional and alternative methods.
7	Sectional course	Aims to study the anatomy of the human body through layer-by-layer (sectional) examination of its structures. Students master the topography of organs and tissues on cross-sections.
8	Disaster Medicine	Studies the organization of medical care in mass emergencies (disasters, epidemics). Students learn methods for assessing damage, planning and coordinating emergency medical actions, as well as principles of first aid.
9	Occupational diseases	Studies diseases arising from harmful working conditions and professional factors. Special attention is paid to the causes, mechanisms of development, diagnosis, prevention, and treatment of occupational diseases.
10	Functional diagnostics	Dedicated to methods for studying the functional state of various organs and systems (electrophysiological, ultrasound, radiological examinations). Students acquire skills in interpreting results for accurate diagnosis.
11	Mathematical statistics in medicine	Studies methods of collecting, processing, and analyzing medical data using mathematical statistics. Special attention is paid to statistical methods for assessing the reliability of clinical research and making informed decisions.



No.	SUBJECT	ANNOTATION
12	Medical Law	Studies the legal foundations of medical activity, the rights and responsibilities of medical workers and patients. Issues of medical ethics, healthcare legislation, and legal responsibility are considered.
13	Marketing in Medicine	The discipline aims to provide students with basic knowledge and practical skills in applying marketing strategies in medical organizations. The course covers the specifics of the medical market, patient needs as consumers of medical services, promotion mechanisms, trust building, and quality management.

## Appendix

### Summary of Clinical (Industrial) Practice

Upon completion of industrial practice, the student must fully complete all reporting sections of the practice diary. The immediate clinical supervisor reviews the diary, signs each page, and prepares a performance report with a grade on a five-point scale.

Work performed by the student in auxiliary units (central sterilization department, X-ray room, functional diagnostics room, physiotherapy department, etc.) must be validated by the signature of a physician or a mid-level healthcare professional from the corresponding unit.

Students who, for valid reasons, completed practice outside JAIU's official clinical bases must submit a practice report signed by their immediate supervisor and certified by the seal of the medical institution. Absence of a signature or seal renders the practice invalid.

At the end of practice at clinical bases, an examination is conducted. The final grade is determined by the supervisor, taking into account:

- the supervisor's written performance report on the student
- quality and completeness of the diary
- results of the final assessment (credit/exam)
- performance of health education and sanitary-preventive work

### Assessment Criteria

**Grade "Excellent"** is awarded if:

- the practice program is completed in full, including health education activities
- no disciplinary violations occurred
- the diary is properly, thoroughly, and neatly completed
- the supervisor's performance report is excellent

**Grade "Good"** is awarded if:

- the practice program is completed in full
- minor violations of internal rules occurred (e.g., isolated tardiness)
- the diary is filled in formally, without detailed descriptions
- the supervisor's performance report is good

**Grade "Satisfactory"** is awarded if:

- the practice program is only partially completed or contains significant gaps
- not all required procedures have been mastered; attitude to work was careless
- the diary is untidy and contains errors
- the supervisor's performance report is satisfactory

**Grade "Unsatisfactory"** is awarded if:

- the practice program is not completed
- the supervisor's performance report is negative

### **Submission of the Practice Diary**

- When practice is conducted at JAIU clinical bases, the diary is submitted to the supervisor two days before the end of the practice period and then forwarded to the Academic Office (Industrial Practice Unit) of JAIU.
- When practice is conducted at external bases, the diary must be submitted to the Industrial Practice Unit no later than the first week of the autumn semester.
- For individually arranged practice, the final examination with the general practice supervisor is held within the first two weeks of the autumn semester.

### **Repeat Practice**

Students who receive an unsatisfactory grade are assigned to repeat practice during vacation periods or in the evenings of the autumn semester.

In specific cases, the question of the student's further study may be referred to the Rector for consideration.

### **Clinical Practice for 1st-Year Students**

#### **Academic and Industrial Practice**

#### **“Assistant to Junior Nursing Staff”**

Industrial practice as a junior nurse is conducted for 1st-year students of the specialty 560001 “General Medicine” (5-year program) over 2 weeks in the 2nd semester at various types of healthcare facilities.

The practice volume is **2 credits (60 hours)**.

#### **Practice Site**

Practice is conducted in inpatient units of healthcare institutions, including: admission department, treatment room, dressing room, nursing station, and other relevant departments.

#### **Purpose of the Practice**

Formation and consolidation of initial professional skills required for the work of a junior nurse.

#### **Objectives of the Practice**

- familiarization of students with the structure and organization of healthcare institutions
- development of basic professional knowledge required for work as a junior nurse
- acquisition and consolidation of practical skills in patient care, sanitary and hygienic measures, and maintenance of the ward environment

### **Organization and Supervision**

The coordinating department is the **Department of General Medical Disciplines**, reporting to the Academic Office of JAIU.

The Academic Office selects practice bases and provides ongoing and final control.

Practice is conducted in accordance with the approved schedule and thematic plan.

### **Student Reporting**

The student must maintain a daily practice diary in the prescribed format indicating the work performed.

Each entry must be validated by the signature of the immediate clinical supervisor.

The quality of diary completion is monitored by the head of the department and the department assistant responsible for practice.

### **Duties of the Department Assistant**

- monitor the level of students' theoretical and practical preparation
- assess the acquisition of skills during practice
- provide methodological support and consultations

### **Final Assessment**

Upon completion of practice, the clinical supervisor prepares a performance report describing the level of theoretical knowledge and practical skills.

The final credit is awarded after an oral examination and is recorded in the student's grade book.

### **The Student Must Know**

1. Types of healthcare institutions.
2. Structure of a healthcare facility and the functions of its departments.
3. Work schedule, admission procedures, and job responsibilities of a junior nurse.
4. Requirements of therapeutic and infection-control regimes.
5. Organization and equipment of hospital laundry services.
6. Concentrations of disinfectant solutions and rules for their preparation and use.
7. Rules for sorting, transporting, and storing soiled and clean linen.
8. Basic principles of anti-epidemic measures, including identification of patients with especially dangerous infections.
9. Rules for sanitary treatment of patients (including those with pediculosis).
10. Key orders and regulations of the Ministry of Health of the Kyrgyz Republic governing the work of healthcare institutions.

### **The Student Must Be Able To**

1. Comply with occupational safety rules and safety procedures.
2. Perform sanitary treatment of patients, including those with pediculosis.
3. Provide patient care: assistance with meals, hygiene procedures, mobility; organizing bathing and linen changes; daily care of severely ill patients; monitoring cleanliness of bed linen.
4. Maintain cleanliness in wards, sanitary facilities, and auxiliary rooms.
5. Prepare disinfectant solutions, perform wet cleaning, and ventilate rooms.
6. Organize general cleaning at least once a month.
7. Participate in linen changing, accounting, and ensure correct labeling.
8. Report violations of internal rules to the ward nurse and duty physician.
9. Identify malfunctions of sanitary and electrical equipment and inform the ward manager or housekeeper.
10. Communicate tactfully and politely with patients and ensure preservation of inventory and equipment.
11. Monitor compliance with the therapeutic and protective regime.
12. Comply with current orders, instructions, and ward regulations.

### **Clinical Practice for 2nd-Year Students**

#### **Industrial Practice “Assistant Nurse”**

Practice is conducted in the 2nd year of the specialty 560001 “General Medicine” during the 3rd semester.

Duration of practice — **2 weeks**.

The period of practice is determined by the academic calendar.

#### **Practice Bases**

Therapeutic and surgical departments (including neurology, traumatology, gynecology), as well as admission departments of healthcare organizations.

#### **Purpose of the Practice**

To acquire initial experience working in a healthcare team, to master the duties of junior medical staff, to develop patient-care skills, and to perform basic medical procedures.

#### **Objectives of the Practice**

- master the functional responsibilities of junior medical staff
- learn to perform selected medical procedures under the supervision of a nurse

- acquire skills in caring for patients of different profiles
- observe principles of medical ethics, deontology, and infection-control regimes

### 1. Organization of Practice

1. The student arrives at the practice base with an official referral (order), student ID, diary, and health record (medical book).
2. Distribution across departments is carried out by the practice supervisor in collaboration with the head (chief) nurse.
3. The senior nurse of the department prepares a work schedule and assigns tasks.
4. Before the start of practice, students receive instructions on safety, infection control, and departmental rules.
5. Compliance with duties is monitored by the senior nurse and ward staff.
6. At the end of practice, the senior nurse reviews the diary, prepares a performance report, and assigns a preliminary grade.
7. The final credit (assessment) is conducted by a commission consisting of: the senior nurse, the base supervisor (JAIU department assistant), and the general JAIU practice supervisor.
8. It is prohibited to change the timing or volume of practice without approval.

### 2. Rules for Completing the Practice Diary

1. The diary is an official document and must be kept neatly, legibly, and in appropriate medical terminology.
2. Each entry must reflect procedures performed, patient care provided, and assigned tasks.
3. Each entry must be certified by the signature of the responsible healthcare professional.
4. At the beginning, the student provides a brief description of the department (profile, number of beds, staff).
5. At the end of practice, the student prepares a summary report.
6. Health education and sanitary-preventive work must be reflected in the diary.

### 3. Main Skills Acquired During Practice

- organization of ward work and compliance with infection-control and sanitary regimes
- duties of junior medical staff
- care of patients, including severely ill patients
- assisting patients with nutrition, hygiene, and mobility
- monitoring patients' condition
- specific aspects of pre- and postoperative care
- basics of pre-hospital emergency care

### 4. Theoretical Foundations

**Admission Department:** registration, sanitary treatment, transportation of patients.

**Inpatient Department:** internal regulations, disinfection, organization of nutrition, pre-hospital emergency care.

**Sterilization Department:** preparation of materials, packing of sterilization containers, sterilization procedures.

### 5. Sample Practice Schedule (2 Weeks)

Unit	Workload
Nursing station	5–6 days
Admission department	2–3 days
Laboratory or treatment room	2–3 days
Sterilization department	1–2 days

## **Main Types of Work**

### **Nursing station:**

Temperature, pulse, and blood pressure measurement; preparation of disinfectant solutions; care of severely ill patients; linen changes; hygiene procedures.

### **Admission department:**

Anthropometry, sanitary treatment, patient transportation.

### **Laboratory / Treatment room:**

Preparation of instruments; transportation of biological specimens; participation in simple investigations; record-keeping.

### **Sterilization department:**

Preparation of materials; packing sterilization containers; monitoring sterility.

## **6. Monitoring of Practice**

**Ongoing monitoring:** daily diary review and evaluation of practical skills.

**Final control:** diary review, performance report, and oral examination by the commission.

The final grade is assigned by the JAIU practice supervisor.

## **7. Control Questions for the Final Credit**

1. Sanitary and hygienic regime in healthcare institutions.
2. Disinfection of premises and equipment.
3. Rules of anthropometry.
4. Care of severely ill patients.
5. Preparation of a patient for surgery.
6. Transportation of critically ill patients.
7. Specifics of care for patients with impaired consciousness.
8. Rules of work for junior medical staff.
9. Disposal of medical waste.
10. Basic procedures of junior staff (inhalations, collection of specimens, temperature measurement, etc.).

## **Clinical Practice for 3rd-Year Students**

### **“Assistant Paramedic or Emergency Physician”**

Industrial practice for 3rd-year students is conducted in the 4th semester.

Duration of practice — **2 weeks** (according to the updated format).

Practice is conducted at emergency medical service (EMS) stations and substations, where the student acts as an assistant to the emergency physician or paramedic.

### **Purpose of the Practice**

To master the functional responsibilities of an emergency physician (paramedic); acquire skills in independently performing selected medical procedures at the pre-hospital stage; develop competencies in emergency care; and gain professional experience working in a medical team.

### **The Student Must Know**

- structure and organization of the emergency medical service and its performance indicators
- functional capabilities and equipment of EMS units
- rules for ECG recording, assessment of vital signs, CPR techniques, and basic resuscitation measures
- job responsibilities of emergency physicians and paramedics
- basics of follow-up care (dispensary observation) in outpatient settings
- procedures for anti-epidemic measures during calls
- standards for health education activities
- organization of EMS station work and equipment of the ambulance vehicle (resuscitation ambulance)

### **The Student Must Be Able To**

- complete primary EMS medical documentation
- write prescriptions for standard medications
- determine indications for hospitalization of internal medicine patients
- organize emergency and planned hospitalization
- use regulatory documents on temporary disability assessment
- determine causes of temporary disability and criteria for recovery
- determine the minimum required set of laboratory and instrumental tests
- interpret examination results (laboratory tests, ECG, radiology, functional diagnostics, endoscopy)
- provide recommendations on primary prevention and healthy lifestyle

### **Rules for Completing the Practice Diary**

1. The diary is an official document and must be completed neatly, legibly, and in professional medical language.
2. At the end of each shift, the student records the work performed, procedures, and calls attended.
3. Each entry must be verified by the signature of the healthcare professional with whom the student worked.
4. At the beginning of the report, the student provides a brief description of the unit where practice took place: profile, number of beds (if applicable), composition of teams, equipment.
5. Upon completion of practice, the student prepares a consolidated quantitative (summary) report.
6. Health education activities (talks, information bulletins) are recorded with indication of topic, location, and time.
7. When practice is conducted at an EMS station, a description of the substation is included (number of teams, equipment, performance indicators).
8. In daily entries, the student must describe at least three clinical cases with different urgent conditions: initials, age, diagnosis, care provided, list of medications in Latin, dosages, diluent, and route of administration.
9. On separate sheets, the student completes:
  - a sample temporary disability certificate
  - an EMS call card
  - a referral form
  - two prescription forms with full Latin prescription text
10. Participation in conferences and health education activities must be recorded in the diary.
11. The diary must be signed by the practice supervisor on each page.
12. The performance report must be signed by the head of the department, EMS substation supervisor, chief physician, and certified by the institutional seal. Absence of any signature or seal invalidates the practice.
13. The final grade is assigned by the JAIU practice supervisor after reviewing the diary, performance report, and final credit.
14. When practice is conducted at JAIU clinical bases, the diary is submitted to the university supervisor on the day of the final credit. For external bases, it must be submitted to the Industrial Practice Unit no later than **15 September**.

### **Assessment of Acquired Practical Skills**

No.	Type of Work Performed	Mastery Level (1 - Know, 2 - Be able to, 3 - Master)	Number of Hours
1	Responding to an ambulance call	3-2	20
2	Completing and maintaining medical documentation:		
	- Referral for hospitalization form (f-28)	3	10
	- Urgent notification of infectious disease (f-058/u)	3	20
	- Investigation card for an outbreak of intestinal infection (f-171)	3	20
	- Extract from outpatient card upon request	2	20
3	Recording, deciphering, and evaluating ECG	2	(Not specified)
4	Closed chest massage, artificial ventilation of the lungs using the "mouth-to-mouth" method	2	10
5	First medical aid for fainting, hypertensive crisis, angina pectoris	2-3	10
6	First medical aid for:		
	- myocardial infarction, pulmonary edema,	2	10
	- pulmonary embolism, bronchial asthma attack,		
	- shock, coma, acute cerebrovascular accident		

#### Levels of Mastery of Practical Skills

**Level 1** — understanding the procedure, awareness of the algorithm, knowledge of basic indications.

**Level 2** — knowledge and ability to assess patient condition; participation in procedures under supervision.

**Level 3** — ability to perform procedures and actions independently.

#### Final Assessment

The final assessment of industrial practice is conducted by the emergency physician or paramedic of the EMS station, the university practice supervisor, and the JAIU official responsible for industrial practice.

**Form of assessment: examination (credit with a grade).**

#### **Procedure for Final Assessment**

- The EMS physician or paramedic reviews the student's diary, evaluates accuracy of documentation, and prepares a performance report with a grade based on a five-point scale.
- The final credit (oral interview) is conducted by a commission at the clinical base.
- The final grade is determined by the JAIU practice supervisor, considering:
  - EMS supervisor's performance report
  - quality of diary documentation
  - volume and quality of completed tasks
  - interview results

#### **Control Questions for the Examination**

1. Emergency care for acute cardiological conditions
2. Emergency care for acute neurological conditions
3. Emergency care in obstetrics and gynecology
4. Emergency care for children, newborns, adolescents, and elderly patients
5. Emergency care for persons with disabilities (PWD)
6. Emergency care for bleeding
7. Emergency care for myocardial infarction
8. Emergency care for preeclampsia and eclampsia
9. Emergency care for foreign bodies
10. Emergency care for burns of all types
11. Emergency care for frostbite
12. Emergency care for different types of shock
13. Emergency care for heat stroke
14. Emergency care for drowning
15. Emergency care for poisonings
16. Emergency care for carbon monoxide poisoning
17. Emergency care for fractures

#### **Industrial Practice for 4th-Year Students**

##### **“Assistant to the Hospital Physician”**

Industrial practice for 4th-year students is conducted throughout the academic semester.

Duration of practice — **two weeks in each clinical department** (therapeutic, surgical, and maternity/obstetric).

Practice takes place in regional, city, and large district hospital and polyclinic facilities.

Methodological supervision is carried out by the Department of General Clinical Disciplines.

#### **Purpose of the Practice**

- consolidation of knowledge acquired in theoretical and clinical disciplines
- familiarization with organization of the therapeutic process and hospital operations
- development of clinical reasoning and diagnostic thinking
- formation of the ability to establish and justify diagnoses
- mastering principles of pathogenetic and symptomatic treatment
- improvement of practical skills and health-education activities

#### **Organization of Practice**

At the beginning of practice, the base supervisor prepares a schedule for student rotation through the departments and monitors its implementation.



In the department, the student works under the supervision of the head of department or the attending physician.

The practice supervisor ensures maximum possible independence when performing medical procedures and managing patients.

### **Beginning of Case Management**

When starting patient curation, the student prepares an introductory epicrisis including:

- history of present illness
- past medical history
- objective examination findings
- preliminary clinical diagnosis
- management plan

The student:

- maintains medical records of assigned patients
- prepares intermediate and discharge summaries
- discusses diagnoses and treatment plans with the supervisor
- completes all medical documentation under supervision

### **Student Responsibilities**

The student must become familiar with:

- admission and discharge procedures
- distribution of responsibilities among medical personnel
- organization of patient nutrition

The student must strictly follow medical ethics and deontology:

- demonstrate respect and attentiveness to patients and their families
- maintain trust in the treatment plan
- maintain professional communication with healthcare staff

### **Participation in the Work of the Institution**

The student participates in:

- clinical consultations
- departmental and institutional meetings
- scientific, practical, and clinico-anatomical conferences
- health-education activities
- educational and research activities

### **Health Education Activities**

The student conducts:

- at least two health-promotion talks with patients
- one lecture (15–20 minutes) in the ward hall — group lecture cycles (3–4 students) are permitted

Alternatively, a health information bulletin may be prepared (one per two students).

All health-education activities must be recorded in the diary and signed by the supervisor.

### **Participation in Conferences**

The student may present:

- analysis of disease course and treatment outcomes for a specific nosology
- a report based on a scientific article or monograph
- demonstration of a clinical case with a rare pathology

### **Final Assessment**

At the end of each cycle, the student undergoes an oral credit examination based on curated patients.

Discussed topics include:

- features of the clinical presentation
- interpretation of laboratory and instrumental findings
- differential diagnosis
- justification of the final diagnosis
- principles of prescribed therapy

Practical skills assessed:

- reading and interpretation of ECG
- interpretation of X-ray films
- analysis of laboratory tests
- interpretation of ultrasound, endoscopy, and functional diagnostics

### **Industrial Practice in Therapeutic Disciplines**

In the therapeutic department, the student works in the role of a physician under supervision of the head of department or attending specialist.

The student manages **4–5 patients**, maintains their medical histories, completes epicrisis, discharge summaries, and all medical documentation.

### **Intensive Care and Resuscitation Units**

The student becomes familiar with:

- monitoring, diagnostic, and therapeutic equipment
- methods of evaluating patient status
- emergency-care procedures

### **Radiology Department**

The student participates in:

- imaging of the chest, gastrointestinal tract, bones, and joints
- analysis of archived X-ray films
- acquaintance with CT, MRI, and modern radiation-diagnostic methods

### **Ultrasound Diagnostics Department**

The student observes and assists in ultrasound scans of:

- heart
- liver
- gallbladder
- pancreas
- spleen
- kidneys

The student may participate in ultrasound examinations under specialist supervision.

### **ECG Room**

The student learns:

- rules of ECG acquisition
- performance of functional tests
- preparation of preliminary ECG interpretations

### **Functional Diagnostics Department**

The student becomes familiar with:

- spirometry
- Holter monitoring

- bicycle ergometry
- other functional assessment methods

### **Treatment Room**

The student performs and masters skills in:

- preparing infusion systems
- venipuncture and IV infusions
- peripheral vein catheterization
- blood grouping and Rh typing
- participation in blood transfusion procedures
- compatibility testing
- performing pleural, sternal, abdominal, and other punctures

### **Physiotherapy Room**

The student becomes familiar with:

- physiotherapeutic equipment
- rules for completing referrals
- basics of physiotherapy procedures under nurse supervision

### **Night Duties**

During the therapeutic cycle, the student performs **two night shifts**, during which the student:

- admits incoming patients under supervision of the on-duty physician
- monitors critically ill patients
- provides emergency care
- reports on the work performed at the morning clinical conference

### **Ethical Standards**

The student must demonstrate:

- respectful attitude toward patients
- professional communication with colleagues
- full observance of ethical and deontological standards

<b>Type of Work Performed / Work Area</b>	<b>Number of Hours</b>
Patient rounds, medical documentation	6 hours
Intensive care unit or Cardiac resuscitation unit	6 hours
X-ray room	6 hours
Ultrasound room	6 hours
ECG room	6 hours
Functional diagnostics room	6 hours
Procedure room	6 hours
Physiotherapy room	6 hours

Type of Work Performed / Work Area	Number of Hours
Night duties	12 hours
<b>Total Workload:</b>	<b>60 hours</b>

**Upon completion of internal medicine (therapeutic) practice, the student must know**

1. Modern legal regulations governing relationships between physicians, nursing staff, and patients.
2. Clinical presentation, diagnostic algorithms, and principles of treatment for the most common internal medicine conditions.
3. Rules for transfusion of blood and blood components, clinical manifestations of transfusion reactions and complications, and approaches to their management.
4. Procedures for prescription, storage, and accounting of narcotic and psychotropic medications.
5. Regulatory requirements for infection-control and sanitary-epidemiological regimes; measures for prevention of HIV infection, viral hepatitis, and other infectious diseases.
6. Indications and rules for preparing a patient for sternal puncture.
7. Indications and methodology for pleural puncture.
8. Principles of Holter monitoring, bicycle ergometry (exercise stress testing), spirometry, and peak flowmetry.
9. Technique of ECG acquisition and recording.
10. Typical durations of temporary disability for common internal medicine conditions (myocardial infarction, arterial hypertension, pneumonia, bronchial asthma, peptic ulcer disease, hepatitis, glomerulonephritis, etc.).
11. Rules for referring a patient to the Commission for Temporary Disability Examination and to Medical and Social Expertise bodies.

**Upon completion of internal medicine (therapeutic) practice, the student must be able to**

1. Take a medical history, perform a full physical examination of an internal medicine patient, and formulate a preliminary clinical diagnosis.
2. Correctly complete the inpatient medical record, including epicrises and treatment orders.
3. Know indications for functional and instrumental tests; perform and interpret ECGs; interpret spirometry results.
4. Provide emergency care for hypertensive crisis.
5. Provide care for an episode of angina pectoris.
6. Provide care for acute coronary syndrome.
7. Provide care for cardiogenic pulmonary edema.
8. Provide emergency care for arrhythmias (paroxysmal atrial fibrillation and flutter, paroxysmal tachycardia, hemodynamically significant bradycardia).
9. Provide care for an asthma attack and status asthmaticus.
10. Provide care in cases of hypoglycemic, hyperglycemic, and ketoacidotic pre-coma/coma.
11. Provide care for biliary and renal colic.
12. Provide care in cases of acute poisoning (domestic, food, drug-related, chemical).
13. Relieve pain in peptic ulcer disease of the stomach and duodenum.
14. Perform blood and blood-component transfusion in accordance with rules of biological testing and compatibility control.
15. Perform cardiopulmonary resuscitation at both basic and advanced (professional) levels.

**PRACTICAL SKILLS (Structured List)**

**1. Diagnostic Skills**

- Collection of complaints, history of present illness, and past medical history
- Complete objective physical examination of the patient
- Auscultation of heart and lungs
- Percussion of thoracic and abdominal organs
- Measurement of blood pressure and respiratory rate
- Interpretation of ECG
- Interpretation of spirometry and peak flowmetry
- Use of clinical severity scores (GRACE, CHA<sub>2</sub>DS<sub>2</sub>-VASc, Killip, etc.)

## **2. Emergency Therapy**

- Management of hypertensive crisis
- Management of angina attack and acute coronary syndrome
- Management of acute pulmonary edema
- Management of cardiac rhythm disturbances
- Management of asthma attack and status asthmaticus
- Management of hypo- and hyperglycemic states
- Management of colicky pain (biliary, renal)
- Management of acute poisonings
- Performance of cardiopulmonary resuscitation (CPR)

## **3. Invasive and Procedural Skills**

- Venipuncture
- Insertion of peripheral venous catheters
- Blood sampling
- Preparation of a patient for pleural and sternal puncture
- Intramuscular, subcutaneous, and intravenous injections
- Preparation of infusion systems
- Administration of intravenous infusions

## **4. Transfusion Medicine Skills**

- Determination of blood group and Rh factor
- Performance of biological compatibility testing
- Transfusion of blood components
- Monitoring for and managing potential transfusion complications

## **5. Documentation**

- Completion of inpatient medical records
- Preparation of interim and discharge epicrisis
- Writing treatment orders and procedural notes
- Completion of referrals for diagnostic investigations
- Preparation of accompanying documentation for temporary disability and medical-social expertise commissions

<b>No.</b>	<b>Type of Work Performed</b>	<b>Mastery Level (1-3)</b>	<b>Recommended Volume (Quantity)</b>
1	Inpatient patient management	2-3	4-5
2	Filling out medical history	2-3	8-10

No.	Type of Work Performed	Mastery Level (1-3)	Recommended Volume (Quantity)
3	Documenting initial examination	2-3	6-8
4	Documenting interim/discharge summary	2-3	6-8
5	Performing duties (on call)	1	12
6	Reporting on duty	2-3	2
7	Attending morning conference	2	10-12
8	Interpreting X-ray studies	2	4-5
9	ECG recording	3	4-6
10	ECG interpretation	2-3	10-15
11	Performing functional studies	1-2	4-6
12	Performing Ultrasound (US)	1-2	3-4
13	Physiotherapy procedures	1	4-6
14	Intravenous infusions	3	8-10
15	Blood component transfusion	2-3	1-2
16	Punctures (pleural, sternal, etc.)	1-2	1-2
17	Managing emergency conditions	2-3	3-4
18	Participating in scientific and practical conferences	2-3	1-2

### **Industrial Practice for 4th-Year Students**

#### **Profile: “Assistant to the Surgeon in a Hospital Setting”**

#### **Levels of Skill Mastery**

**Level 1** — understanding the procedure, being familiar with the algorithm, knowing indications.

**Level 2** — knowing, assessing, participating in procedures under supervision.

**Level 3** — performing independently.

#### **Purpose of the Practice**

To master practical skills in the surgical profile, reinforce clinical reasoning, develop the ability to examine the patient, formulate a diagnosis, create a diagnostic and treatment plan, and provide emergency care in acute surgical conditions.

#### **Tasks of the Practice**

- mastering the skills of subjective and objective examination of patients
- formulating a comprehensive clinical diagnosis
- mastering principles of planning a diagnostic algorithm
- mastering principles of treating common surgical diseases
- mastering methods of emergency care for acute surgical conditions

### **Organization of the Practice**

The practice is conducted in the surgical, traumatology, or thoracic departments of multidisciplinary hospitals.

Placement in narrow specialized departments is not recommended.

The student supervises **4–5 patients** under the supervision of the attending surgeon (one student — one patient).

Upon patient admission, the student fills out a draft medical history, formulates a diagnosis and diagnostic plan, and discusses it with the physician.

The student must daily:

- perform patient examinations
- participate in therapeutic and diagnostic procedures
- maintain medical documentation

**Practice schedule:** six-day work week, 6 hours per day + 1 night duty.

### **The Student Must Know**

1. Legislation of the Kyrgyz Republic “On the Protection of Citizens’ Health.”
2. Causes, clinical presentation, complications, and treatment principles of major surgical conditions.
3. Rules of medical ethics and deontology.

### **The Student Must Be Able To**

1. Develop a patient examination plan.
2. Evaluate results of laboratory, imaging, endoscopic, and morphological studies.
3. Formulate a clinical diagnosis.
4. Develop a treatment plan.
5. Justify indications for surgical intervention and blood transfusion; determine blood group and Rh factor; perform compatibility testing.
6. Carry out emergency prophylaxis of tetanus, gas gangrene, and rabies.

### **Practical Skills**

The student must master the following practical skills:

#### **1. Asepsis and Antisepsis**

- hand, instrument, and workplace preparation
- maintaining sterility in the dressing room and procedure room

#### **2. Patient Examination**

- collection of complaints and medical history
- objective examination of surgical patients

#### **3. Preoperative Preparation**

- preparing patients for elective and emergency surgeries
- completing required medical documentation

#### **4. Therapeutic Procedures**

- wound dressings
- removal of tampons and drains

#### **5. Invasive Procedures**

- gastric lavage
- urinary bladder catheterization
- siphon enema

#### **6. Emergency Surgical Skills**

- temporary control of external bleeding
- pleural puncture
- closed pleural cavity drainage

#### **7. Resuscitation Measures**

- basic and advanced cardiopulmonary resuscitation

#### **Work in Departments (Workload)**

<b>Unit / Activity</b>	<b>Workload (Hours)</b>
Surgical, thoracic, traumatological department (in one of the departments)	6
Intensive Care Unit (ICU)	6
Outpatient clinic (3/1)	5
Operating Room (6/2)	6
Dressing Room (6/2)	5
Plaster Room (3/1)	5
Post-operative Ward (3/1)	5
Hemotransfusion Department (3/1)	5
Endoscopy Department (3/1)	5
Evening or Night Shifts (12)	12
<b>Total Workload:</b>	<b>60 hours</b>

#### **List of Practical Skills**

<b>No.</b>	<b>Sections and Content</b>	<b>Mastery Level (1-3)</b>
1	Patient Management	2
2	Initial examination of emergency patient in ER	2
3	Receiving an outpatient	2
4	Preparing patient for planned surgery	3



No.	Sections and Content	Mastery Level (1-3)
5	Preparing patient for emergency surgery	3
6	Thoracic cavity surgery	1
7	Abdominal cavity surgery	1
8	Other surgeries	1
9	Novocaine block	1
10	Diagnostic puncture	2
11	Endoscopic examinations	1
12	Skin sutures (application and removal)	3
13	Hemotransfusion	1
14	Dressings	3
15	Removal of tampons and drains	3
16	Gastric and bowel lavage	3
17	Urinary bladder catheterization	3
18	Cleansing enema	3
19	Plaster cast	3

### Levels of Skill Mastery

- **Level 1 (Knowledge):** Familiarity with principles, indications, and contraindications.
- **Level 2 (Proficiency):** Ability to perform under supervision.
- **Level 3 (Mastery):** Ability to perform independently.

### Content of Ongoing and Final Assessment

#### Ongoing Assessment

Ongoing assessment is conducted by the head of the clinical department and the departmental practice supervisor. It evaluates the student's ability to:

- perform subjective and objective examination of surgical patients
- formulate a preliminary diagnosis
- develop a diagnostic and treatment plan
- demonstrate knowledge and adherence to asepsis, antisepsis, and prevention of surgical infections
- perform core practical skills

#### Final Assessment

Final assessment is conducted by the departmental supervisor and the general university practice coordinator. It includes:

1. evaluation of the student's practice diary-report
2. oral interview based on issues identified during review of the diary
3. assessment of answers to additional questions

### **List of Questions for the Final Interview**

1. Main medical documentation in healthcare institutions
2. Functions of outpatient and inpatient medical records
3. Rules for formulating a clinical diagnosis
4. Principles of writing a discharge summary
5. Emergency prophylaxis of gas gangrene
6. Emergency prophylaxis of tetanus
7. Emergency prophylaxis of rabies
8. Regulations on accounting of narcotic drugs in healthcare institutions
9. Cleansing and hypertonic enema: indications and technique
10. Hemotransfusion conflict: causes, clinical presentation, diagnostics, emergency management
11. Cardiopulmonary resuscitation: basic and advanced algorithms

### **Industrial Practice in Obstetrics and Gynecology**

#### **Purpose of the Practice**

1. Consolidation of knowledge in normal, pathological, and operative obstetrics.
2. Development and refinement of practical skills acquired during coursework.

#### **Tasks of the Practice**

- familiarization with the structure and operations of an obstetric hospital
- independent completion of medical documentation
- mastering the stages of diagnostic and therapeutic work at the bedside under supervision
- reinforcement of practical skills in obstetric care
- development of clinical reasoning
- provision of health-education activities for pregnant women and postpartum mothers

#### **General Provisions**

- The student works as a physician's assistant under supervision of the heads of maternity hospitals and centers of family medicine.
- Duration of practice — **6 weeks**; an individual schedule is prepared according to the department's timetable.
- Working week — **6 days**, working day — **6 hours**.
- The student performs **12 hours of duty** (one night shift or two evening shifts).
- Patient curation:
  - two pregnant women in the high-risk pregnancy ward
  - one woman in labor in the delivery suite
  - follow-up of all postpartum women for 4–6 days with documentation of deliveries attended by the student
- Work is conducted in full compliance with the hospital regulations.

#### **The Student Must Know**

- methods for assessing intrauterine fetal condition: CTG, ultrasound, amnioscopy, hormonal tests
- indications and technique of caesarean section
- indications and technique of manual removal of the placenta and examination of the uterine

cavity

- indications and technique of medical abortion

### **The Student Must Be Able To**

1. Develop examination and management plans for pregnant women.
2. Determine the timing of prenatal leave.
3. Apply methods of psychoprophylactic preparation for childbirth.
4. Conduct home visits (patronage) for pregnant women.
5. Assess readiness of the body for labor.
6. Establish a diagnosis and develop a delivery management plan.
7. Participate in neonatal resuscitation.
8. Participate in the management of postpartum hemorrhage.
9. Provide emergency care for severe forms of preeclampsia and eclampsia.

### **The Student Must Master the Following Practical Skills**

1. Collection of obstetric history
2. External obstetric examination
3. Cervical examination with speculum
4. Bimanual examination
5. Determination of gestational age and estimated date of delivery
6. Estimation of fetal weight
7. Artificial rupture of membranes
8. Vaginal and cervical swab collection for microscopy, bacteriology, and cytology
9. Completion of obstetric medical documentation
10. Management of normal childbirth
11. Assessment of the newborn using the Apgar score
12. Primary care and hygiene of the newborn
13. Evaluation of placental integrity and estimation of blood loss
14. Performance of perineotomy and episiotomy
15. Inspection of soft birth canal structures after delivery
16. Assisting in suturing perineal, vaginal, and cervical tears
17. Removal of perineal sutures

### **Clinical Practice Schedule (Obstetrics)**

Work Day	Hospital Department	Workload (Hours)
Day 1	Antenatal Pathology Ward	5 hours
Day 2	Antenatal Pathology Ward	5 hours
Day 3	Antenatal Pathology Ward	5 hours
Day 4	Delivery (Labor) Ward	5 hours
Day 5	Delivery (Labor) Ward	5 hours
Day 6	On-call duty in Delivery Ward	8 hours
Day 7	Postpartum Ward	5 hours

Work Day	Hospital Department	Workload (Hours)
Day 8	Postpartum Ward	5 hours
Day 9	Delivery (Labor) Ward	5 hours
Day 10	Delivery (Labor) Ward	4 hours
Day 11	Neonatal ICU and Pathology Ward	4 hours
Day 12	Family Medicine Center (FMC)	4 hours
<b>Total Workload:</b>		<b>60 hours</b>

#### List of Practical Skills (Obstetrics and Gynecology)

No.	Sections and Content	Recommended Volume (Quantity)	Mastery Level (1-3)
1	Patient Management (pregnant, postpartum, laboring)	15-20	3
2	Filling out and maintaining labor history record	5-6 daily	3
3	Reception at women's clinic	20-30	2
	a) pregnant women	10-15	2-3
	b) gynecological patients	10-15	2-3
4	Home visits for pregnant women	1-2	2-3
5	Assisting with delivery	2-4	2-3
6	Initial care for newborns	2-4	2-3
7	External obstetric examination:		
	in the maternity hospital	20	3
	in the women's clinic	10	3
8	Internal examination:		
	during labor	2-4	2-3
	during pregnancy	10	2-3

No.	Sections and Content	Recommended Volume (Quantity)	Mastery Level (1-3)
9	Assistant in obstetric surgeries	2	1-2
10	Independent performance of obstetric procedures:		
	a) cervical inspection in specula after childbirth	2-4	2-3
	b) suturing perineal, vaginal, and cervical tears	1-2	1-2
	c) manual assistance for breech presentation	1	1-2
	d) amniotomy (rupturing the amniotic sac)	1	2-1
	e) manual uterine examination and manual removal of the placenta	1	1-2
	f) management of uterine bleeding	1	1-2
	g) neonatal resuscitation measures	1	1-2
	h) Cesarean section surgery	1-2	1-2
	i) removal of sutures from the perineum, anterior abdominal wall	2-3	1-2
11	Independent performance: taking smears for gonococcus and flora	10	2-3
12	Familiarization with contraception methods	1	3
13	Artificial termination of pregnancy	1	3
14	Other work: Ultrasound of the uterus and fetus, Fetal Cardiotocography (CTG)	2-4	1-2

### Content of Ongoing and Final Assessment

#### Ongoing Assessment

- Conducted by the immediate practice supervisors: the head of the clinical department and the departmental practice instructor at the clinical base.
- Includes observation of the student's performance of clinical skills.

- Involves daily verification of entries in the practice diary reflecting the work performed in hospital departments.

### **Final Assessment**

- Conducted by the head of the department, the university practice supervisor at the clinical base, and the general practice coordinator.
- Form of assessment — **credit examination (pass/fail with a grade)**.
- The head of the department reviews the diary and prepares a performance report for the student, assigning a grade based on a five-point scale.
- The final credit examination is conducted by a commission including the head of the department, the university practice supervisor, and the general practice coordinator.
- The final grade is determined by the departmental instructor based on:
  - the performance report,
  - the quality of diary documentation,
  - the volume of completed work,
  - the results of the interview.

### **List of Control Questions for the Final Examination**

1. Procedures, scope of examination, and follow-up of pregnant women in family medicine centers
2. Dispensary categories of pregnant women and principles of follow-up
3. Performance indicators of antenatal clinics and methods of evaluation
4. Documentation and follow-up of pregnant women in consultation settings; specifics for rural areas
5. Structure and equipment of the maternity department; rules for admitting pregnant women and women in labor
6. Sanitary-epidemiological regime in the postpartum department; indications for transfer and discharge
7. Sanitary-epidemiological regime in the neonatal department
8. Initial care of the newborn and prophylaxis of ophthalmia neonatorum
9. Emergency care for hemorrhage due to premature placental abruption
10. Emergency care for third-stage and postpartum hemorrhage
11. Emergency care for hemorrhage in placenta previa
12. Emergency care for eclampsia during and after childbirth
13. Principles of managing severe hypertensive disorders in pregnancy
14. Emergency care for eclampsia during pregnancy
15. Prevention of third-stage and postpartum hemorrhage
16. Indications for internal vaginal obstetric examination
17. Indications for manual placental removal and manual uterine cavity examination
18. Principles of fetal hypoxia prevention and management
19. Emergency care for neonatal asphyxia
20. Prevention of mastitis
21. Prevention of neonatal septic conditions
22. Criteria for assessing the performance of an obstetric hospital
23. Indications for caesarean section
24. Description of obstetric pathology encountered during practice and the student's involvement
25. Organization of psychoprophylactic preparation for childbirth
26. Prescription rules for major pharmacological groups and indications for their use
27. General characteristics of the healthcare facility where the practice was conducted

### **Industrial Practice for 5th-Year Students**

## Practice of the Family Medicine Physician

### General Information

- Conducted in the 9th semester; total workload — **16 weeks**.
- Students work as assistants to family physicians (district therapists).
- Supervision is carried out by the Deputy Chief Physician of the Family Medicine Center.
- The schedule corresponds to that of the supervising physician.

### Purpose of the Practice

1. Consolidate diagnostic and therapeutic skills for common diseases encountered at the primary care level.
2. Master methods of dispensary follow-up, health education, and anti-epidemic measures.
3. Improve skills in maintaining primary medical documentation.
4. Develop the ability to provide emergency care at the pre-hospital stage.

### The Student Must Know

- Structure, organization, and key performance indicators of the outpatient clinic
- Capabilities of diagnostic departments
- Features of ambulatory care substitutes and patient education programs
- Organization of specialized rooms, preventive departments, disability examination commissions (CEC)
- Functions of the family physician (district therapist)
- Dispensary follow-up and anti-epidemic measures
- Basics of the work of emergency medical services

### The Student Must Be Able To

- Correctly maintain medical documentation
- Write prescriptions, including subsidized and narcotic medications
- Determine indications for hospitalization and complete referral forms
- Use legal regulations for assessing temporary disability
- Order the necessary minimum of diagnostic tests
- Interpret laboratory results, ECGs, and instrumental studies
- Provide recommendations on disease prevention and healthy lifestyle

### Maintaining the Practice Diary

1. The diary is an official document; entries must be accurate and professional.
2. Records are made daily and must reflect the work performed.
3. On the first day, the student provides a description of the outpatient clinic and the structure of the assigned district.
4. A description of the district: physician, geographical boundaries, population size, dispensary categories.
5. Practice lasts **20 weeks**; the schedule is coordinated with the district physician.
6. During appointments, the student completes medical records and responds to home visits.
7. When working with specialists, at least **three cases** must be documented.
8. Health education work must be recorded with supervisor signatures.
9. Practice results are summarized in a final written report.
10. The diary must be signed on each page by the practice supervisor.
11. The performance report must be signed by the Chief Physician and stamped.
12. The final grade is assigned based on the diary, the performance report, and the credit interview.
13. The diary must be submitted on the day of the credit examination or within **two weeks** after completion of practice.

**List of Practical Skills and Documentation Tasks (Outpatient Stage)**

No.	Type of Work Performed	Mastery Level (1-3)	Quantity
1	Patients seen in clinic	3	30
2	Patients attended at home	3	30
3	Examined during clinical monitoring (dispensary care)	3	10
4	Examined during prophylactic checkups	3	(Not specified)
5	Patients seen in the infectious diseases room	3	(Not specified)
6	Ambulance call attendance	2	20
7	Patients presented at the Clinical-Expert Commission (KEC) meeting	2	(Not specified)
8	Consultation with narrow specialists	2	10
9	Filling out and maintaining medical documentation:		
	- Outpatient card (f-025)	3	30
	- Statistical coupon (f-025/u)	3	30
	- Control card for dispensary observation (f-30/u)	3	10
	- Registration card for clinical monitoring (f-131/u)	3	10
	- Sick leave certificate	2-3	10
	- Referral for hospitalization (f-28)	2	10
	- Referral for Medical-Social Expert Commission (MSEK) (f-088/u)	2-3	3
	- Health resort card (f-072/u)	2-3	3
	- Urgent notification of infectious disease (f-058/u)	2-3	1
	- Investigation card for focus of intestinal infection (f-171)	2-3	1



No.	Type of Work Performed	Mastery Level (1-3)	Quantity
	- Excerpt from outpatient card upon request	3	1
	- Ambulance call card (f-113)	3	20
	- Ambulance escort sheet (f-114)	3	20
	- Prescription forms 107/u and 148/u	2-3	30
10	Evaluation of clinical and biochemical tests of blood, urine, feces, sputum, gastric and duodenal probing	2-3	15
11	ECG recording, interpretation, and evaluation	2-3	20
12	Closed chest cardiac massage, "mouth-to-mouth" artificial ventilation	2-3	1
13	First medical aid for fainting, hypertensive crisis, angina pectoris	3	5
14	First medical aid for: myocardial infarction, pulmonary edema, pulmonary embolism, bronchial asthma attack, shock, coma, acute cerebrovascular accident	2-3	3

### Levels of Skill Mastery

1. **Familiarization (Orientation):** Understanding principles, indications for procedures, and ability to observe.
2. **Participation:** Ability to take part in performing procedures under supervision.
3. **Independent Performance:** Ability to carry out procedures independently.

### Correspondence of Levels

- **Level 1** — theoretical knowledge
- **Level 2** — participation under supervision
- **Level 3** — independent performance

### Content of Ongoing Assessment

- Conducted by immediate practice supervisors: the head of the clinical department and the departmental practice instructor at the clinical base.
- Includes observation of the student's performance of clinical and procedural skills.
- Involves daily verification of diary entries reflecting the full scope of completed work.

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### Content of Final Assessment

- Conducted by the head of the department, the university practice supervisor at the clinical base, and the general practice coordinator.
- Form of assessment — **credit examination (pass/fail with a grade)**.
- The head of the department reviews the diary and prepares a performance report, assigning a grade based on a five-point scale.

- The final credit examination is held in the form of an oral interview by a commission consisting of the head of the department, the university practice supervisor, and the general practice coordinator.
- The final grade is determined by the departmental instructor based on the performance report, quality of diary documentation, volume of completed work, and interview results.

## **Final State Attestation of JAIU Graduates**

### **General Provisions**

- Final State Attestation (FSA) is conducted in accordance with the JAIU Regulations on FSA and Government Decree of the Kyrgyz Republic No. 346 dated May 29, 2012.
- The purpose of FSA is a comprehensive assessment of the graduate's readiness for independent professional activity in the specialty **"General Medicine."**
- Students who have fully completed the curriculum and successfully passed all forms of ongoing and midterm assessment are admitted to FSA.

### **Stage I — Computer-Based Testing (MCQ)**

**Purpose:** to assess the volume and depth of theoretical knowledge in core disciplines.

#### **Organization of Testing**

- Format: **200 MCQs**, 40 questions from each discipline:
  - Internal Medicine
  - Surgery
  - Obstetrics and Gynecology
  - Pediatrics
  - Preventive and Social Medicine (PSM)
- Duration: **180 minutes**
- Passing threshold: **60% correct answers**
- Single attempt; exam conducted with technical proctoring
- Students who fail to meet the threshold are **not admitted** to Stage II

### **Stage II — OSCE / Standardized Patient (Clinical Curation Exam)**

**Purpose:** to evaluate the student's ability to apply theoretical knowledge and practical skills in real clinical situations.

#### **Organization of the Clinical Examination**

- Conducted at clinical sites under the supervision of the State Attestation Commission of JAIU.
- The student is assigned a real patient or a standardized patient in one of the profiles:
  - Internal Medicine
  - Surgery
  - Obstetrics and Gynecology
  - Pediatrics
  - Preventive and Social Medicine
- Duration of the clinical curation: **not less than one academic hour**

#### **Tasks of the Student**

- Collect subjective and objective history
- Conduct a full clinical examination
- Formulate preliminary and clinical diagnoses
- Develop a diagnostic and treatment plan
- Propose preventive and dispensary follow-up measures, including PSM components
- Demonstrate clinical communication skills and adherence to ethical and deontological standards

#### **Assessment**

- Scored on a **five-point scale** for each section
- Evaluated based on completeness, logic, accuracy, and safety of student actions

**Final Grade and Awarding of Qualification**

- The final FSA result is an **integrated assessment** combining both stages.
- To successfully complete FSA, a student must:
  - score **at least 60%** on the computer-based test
  - receive a passing score for the clinical curation
- Upon successful completion of both stages, the graduate is awarded the qualification **“Physician”** and issued a state-standard diploma of higher professional education.