

Educational and methodological complex on the subject of Otorhinolaryngology, pediatric otorhinolaryngology in the direction of education 510200-Pediatrics was compiled in accordance with MT-2018, the Ministry of Health of the Republic of Uzbekistan No. 544 dated 30.08.2018

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Calendar-thematic plan of practical classes and lectures
5 courses of 5510100- Medicine, 5111000-Vocational education (5510100-Medicine)
faculty for 2023-2024 academic year

No.	Subject	Name of the lecture
1	Introduction. Acute diseases of the nose.	2
2	Diseases of the paranasal sinuses	2
3	Acute and chronic diseases of the pharynx	2
4	Acute and chronic diseases of the outer and middle ear	2
5	Nonpurulent diseases of the ear	2
6	Acute and chronic diseases of the larynx	2
	Outcome	12

The content of practical classes

No.	Topic name	Acad. watch
1	Introduction. Clinical, anatomical and physiological features of the nose, modern methods of examination	4
2	Acute diseases of the nose, modern research, principles of treatment, emergency care in emergency situations, prevention, rehabilitation and medical examination	4
3	Chronic diseases of the nose, modern research, principles of treatment, emergency care in emergency situations, prevention, rehabilitation and medical examination	4
4	Sinusitis, tumors of the nose and sinuses, modern research, principles of treatment, emergency care in emergency situations, prevention, rehabilitation and medical examination	4
5	Introduction. Clinical, anatomical and physiological features of the pharynx, modern methods of examination	4
6	Acute diseases of the pharynx, modern research, principles of treatment, emergency care in emergency situations, prevention, rehabilitation and medical examination	4
7	Chronic diseases of the pharynx, modern research, principles of treatment, emergency care in emergency situations, prevention, rehabilitation and medical examination	4
8	Acute and chronic tonsillitis, modern research, principles of treatment, emergency care in emergency situations, prevention, rehabilitation and clinical examination	4
9	Introduction. Clinical, anatomical and physiological features of the ear, modern methods of examination	4
10	Diseases of the external ear, modern research, principles of treatment, emergency care in emergency situations, prevention, rehabilitation and medical examination	4
12	Diseases of the middle ear, modern research, principles of treatment, emergency care in emergency situations, prevention, rehabilitation and medical examination	4
12	Labyrinthitis and tumors of the ear, modern research, principles of treatment, emergency care in emergency situations, prevention, rehabilitation and medical examination	4
13	Non-purulent diseases of the ear, modern research, principles of treatment, emergency care in emergency situations, prevention, rehabilitation and medical	4

	examination	
14	Hearing loss, modern research, principles of treatment, emergency care in emergency situations, prevention, rehabilitation and medical examination	4
15	Deafness, modern research, principles of treatment, emergency care in emergency situations, prevention, rehabilitation and medical examination	6
16	Clinical, anatomical and physiological features of the larynx, modern methods of examination	6
17	Acute diseases of the larynx, modern research, principles of treatment, emergency care in emergency situations, prevention, rehabilitation and medical examination	6
18	Chronic diseases of the larynx, modern research, principles of treatment, emergency care in emergency situations, prevention, rehabilitation and medical examination	6
	Outcome	80

Timeline of the practical lesson

8.30-8.35 5 minutes	Roll call. Evaluation of the appearance of students
8.35-9.15 40min	Determine the topic and purpose of the lesson, justify the relevance of the ENT disease, emphasize early diagnosis and treatment. Mini survey on clinical anatomy, physiology and research methods of ENT organs
9.15-9.25 10 min	Turn
9.25-10.10 45min	Checking the past topic with the help of situational tasks, clinical studies, X-ray and CT diagnostics, dummies and tables. Conducting interactive teaching methods (solving situational problems, conducting role-playing games)
10.10-10.20 10 min	Turn
10.20-11.05 45min	The student is receiving patients under the supervision of a doctor or assistant. Finds out the reasons for the appeal, conducts a clinical examination, establishes a diagnosis, determines the tactics of treatment and the venue
11.05-11.15 10 min	Turn
11.15-12.00 45min	Lecture
12.00-12.40 40min	Big break (lunch).

12.40-13.25 45min	In the training room, the results of the examination of the patient are served, the educational elements of this task are worked out. Mastering practical skills. Assessing the assimilation of a practical lesson and paperwork
13.25-13.35 10 min	Turn
13.35-14.20 45min	Each student is given an overall assessment for the lesson, and discusses the errors and difficulties that arose during self-administration of patients. The material is explained and the task for the next lesson is given.

List of practical skills

Pharyngoscopy (epi, meso, hypo)
 Rhinoscopy
 Otoscopy
 Direct and indirect laryngoscopy
 Acumetry (tuning fork study)
 Taking a swab from the nose and throat
 Ear washing.
 Transtympanic drug injection
 Throat treatment
 Washing lacunae
 Removal of foreign bodies from the nose and ear
 Lymphotropic injections

Lesson number 1. Introduction. Clinical, anatomical and physiological features of the nose, modern methods of examination.

Goals and objectives of the lesson

Teaching students the knowledge of clinical anatomy and physiology of the nose of the paranasal sinuses, especially in children, modern research methods.

At the end of the lesson, each student should know:

Clinical anatomy, physiology.

Age features of the external nose and nasal cavity.

Diagnostic methods and general principles of conservative treatment of acute rhinitis.

Each student should be able to:

Collect anamnesis, complaints and interpret them.

Examine a child with acute nasal diseases, determine indications for R-logical and instrumental studies.

Conduct self-questioning of the patient and his relatives and anterior rhinoscopy.

Interpret data from clinical, laboratory and instrumental studies.

Take measures to prevent complications of acute rhinitis, nasal furuncle and deviated septum.

Time	Subject, method	Content	materials
8.30-9.00	Roll call. Repetition of the material covered.	Method "Hot potato"	File "Repetition"
9.00-9.30	Group discussion of a clinical case or solution of a situational problem	The parents of a 3-day-old boy complained of severe nasal breathing difficulties. Issues for discussion: questioning of complaints, collection of anamnesis, objective examination data, diagnostics.	File - "Clinical case"
9.30-10.00	Presentation Clinical anatomical anatomy in children.	Clinical anatomical anatomy in children.	PP presentation (CD disk, section Otorhinolaryngology, Palchun p. 28.
10.00-11.00	Examination of patients in the clinic under the guidance of a teacher or doctor	Examination of patients in the clinic and in the clinic at the ENT The teacher with students conducts curation of patients on the subject.	
11.00-11.50	Practical skill. 1. Peakflowmetry. 2. Teaching the patient how to use the inhaler	The teacher conducts a demonstration of a practical skill. Then he gives time for students to work out a practical skill. Make sure EVERY student is CONFIDENTLY doing the skill. Perform anterior and posterior rhinoscopy and discuss the clinical anatomy of the nose and paranasal sinuses. Research of the paranasal sinuses. The goal of learning a skill is to automatically perform the skill.	
11.50-12.50	Break		
12.50-13.30	continuation of the analysis of the clinical case.	What diagnostic method will the students choose? Student Talabalarning "Burun tugma nuksonlarini bor bemorlarga (khaona atreziyasi, buri tanglay, kuyoncha labvah.k.) berayotganti bityavsiyalariniboskichma-boskichbaholashmezonlari.	Discuss tactics at the board.

Time	Subject, method	Content	materials
13.30-14.00	Practice	Interpretation of peak flow data	See file Practice
14.00 – 14.50	Group work	Filling in the categorical table - differential diagnostic signs of diseases accompanied by difficulty in nasal breathing, choanal atresia, rhinitis, sinusitis and etc	See file diff diagnosis of nasal breathing difficulties
14.50-15.20	Summing up the lesson	Consolidation of the material covered. Each student talks about “What I learned today”	

Criteria for evaluating the current practical session

Grade	Criteria for evaluating the practical session
5 Great	Clearly oriented in questions of anatomy, physiology and methods of examination of the nose and sinuses. Knows the features of anatomy and physiology in children and adults. On the basis of clinical anatomy and physiology can formulate a diagnosis. Knows and can interpret clinical and laboratory diagnostic criteria for diseases. May prescribe pathogenetically justified treatment. Can help with emergencies. Correctly solves situational problems and tests on the subject. Has notes.
4 Fine	Can navigate the issues of anatomy, physiology and methods of examination of the nose and sinuses. Knows some features of anatomy and physiology in children and adults. Knows and can interpret clinical and laboratory diagnostic criteria for diseases, but cannot fully interpret the data. Knows the groups of drugs used for treatment. Knows the principles of first aid. Correctly solves situational problems and test questions. Has an outline.
3 Udov.	Has a superficial understanding of the anatomy, physiology and methods of examination of the nose and sinuses. Can retell clinical manifestations, results of physical, laboratory and instrumental research methods. Can list drugs used to treat nasal conditions, but makes mistakes in choosing standards of care. Makes mistakes when solving test questions. Cannot solve situational problem. Has an outline.
2 Failed	Has no idea or has a vague idea about the anatomy, physiology and methods of examining the nose and sinuses. The student misinterprets clinical, laboratory data. Does not know the standards of treatment for a particular patient. Cannot solve the situational problem and test questions. Doesn't have an outline

Lesson number 2. Acute nasal diseases, features in children, modern research, principles of treatment, emergency care in emergency situations, prevention, rehabilitation and medical examination

Goals and objectives of the lesson

teaching students the knowledge, skills and abilities of diagnosis, providing first aid and determining the tactics of treating sick children with acute nasal diseases

At the end of the lesson, each student should know:

Clinical anatomy, physiology and age features of the external nose and nasal cavity.

Etiology and pathogenesis, classification of acute rhinitis.

Clinical signs of acute rhinitis

Diagnostic methods and general principles of conservative treatment of acute rhinitis.

Etiology, clinical signs, diagnosis, dif. diagnostics, complications of the furuncle of the nose and curvature of the nasal septum

Every student should be able to

Collect anamnesis, complaints and interpret them.

Examine a child with acute nasal diseases, determine indications for R-logical and instrumental studies.

Conduct self-questioning of the patient and his relatives and anterior rhinoscopy.

Interpret data from clinical, laboratory and instrumental studies.

Take measures to prevent complications of acute rhinitis, nasal furuncle and deviated septum.

Time	Subject, method	Content	materials
8.30-9.00	Roll call. Repetition of the material covered.	Method "Weak link". Topic: "Clinical anatomy, physiology and research methods of the nose and paranasal sinuses."	File "Repetition"
9.00-9.30	Group discussion of a clinical case or solution of a situational problem	A 15-year-old patient complains of nasal congestion, copious nasal discharge, sneezing, lacrimation, fever up to 37.30C. Breathing is difficult, the sense of smell is disturbed. The skin of the external nose in the region of the wings is slightly hyperemic. Pulse 82 beats / min, voice with a nasal tint. On examination, the mucous membrane of the nasal cavity is hyperemic, infiltrated, the amount of mucous secretions in the nasal passages is small. Soreness in the area of the paranasal sinuses is not determined by palpation. Issues for discussion: questioning of complaints, collection of anamnesis, objective examination data, diagnostics.	Flipchart File - "Clinical case"
9.30-10.00	Presentation Deviated septum of the nose	Negative aspects of the curvature of the nasal septum on the child's body As soon as all possible options are named, students, together with the teacher, analyze and summarize each of the listed examples.	PP presentation (CD disk, section Otolaryngology folder For seminars, file "Lesson 1"
10.00-11.00	Examination of patients in the clinic under the	Examination of patients in the clinic at the reception of an ENT doctor, a general pediatrician and other specialists.	

Time	Subject, method	Content	materials
	guidance of a teacher or doctor	Conduct an objective examination and instrumental examination, while describing the picture that you see, taking into account complaints, anamnesis, as well as physical examination data	
11.00-11.30	Practical skill. 1. Anterior and posterior rhinoscopy. Teaching the patient how to use a rhinoscope or nasal speculum	The teacher conducts a demonstration of a practical skill. Then he gives time for students to work out a practical skill. Make sure EVERY student is CONFIDENTLY doing the skill. Step-by-step implementation of practical skills	
11.30-11.50	Practice group work	interpretation after anterior and posterior rhinoscopy	view the step-by-step rhinoscopy file.
11.50-12.30	Break		
12.30-13.30	Lecture	lecturer gives a lecture to students	
13.30-14.00	continuation of the analysis of the clinical case.	Nasal congestion. Differential diagnosis of the causes of nasal congestion. Someone writes down all the reasons. Then discuss each separately. There can be many reasons for nasal congestion and the teacher should have a list of all causes in advance: sinusitis, rhinitis, SARS, adenoids, polyps, deviated nasal septum, injury Tumors Also pay attention to nasal congestion. one-sided: two-sided: anatomical causes: infection deviated nasal septum, hypertrophy of the nasal passages, polyps, tumor	Discuss tactics at the board. see table Otorhinolaryngological place. (Forehead reflector. Sterile. Instruments for ENT examination: ear funnels, nasal mirrors. Spatula.) Medical sheets; the developmental history of the patient. F No. 112, forms of a general analysis of blood and urine

Time	Subject, method	Content	materials
		foreign body Writing score sheets and debriefing	
14.00-14.20	Summing up the lesson	Consolidation of the material covered. Each student talks about “What I learned today”	

Criteria for evaluating the current practical session

Grade	Criteria for evaluating the practical session
5 Great	Clearly oriented in the diagnosis of acute diseases of the nose. Based on the modern classification, he can formulate a diagnosis. Knows and can interpret clinical and laboratory diagnostic criteria for diseases. May prescribe pathogenetically justified treatment. Can help with emergencies. Correctly solves situational problems and tests on the subject. Has notes.
4 Fine	Can navigate in the diagnosis of acute diseases of the nose. Has an idea about the symptoms, clinical forms and complications of acute nasal diseases. Knows with what diseases it is necessary to differentiate acute diseases of the nose, but cannot fully interpret the data. Knows the groups of drugs used for treatment. Knows the principles of first aid. Correctly solves situational problems and test questions. Has an outline.
3 Udov.	Has a superficial understanding of the essence of the disease. Can retell clinical manifestations, results of physical, laboratory and instrumental research methods. Can list drugs used to treat acute nasal conditions, but makes mistakes in choosing standards of care. Makes mistakes when solving test questions. Cannot solve situational problem. Has an outline.
2 Failed	Has no idea or has a vague idea of acute nasal conditions. The student misinterprets clinical, laboratory data. Does not know the standards of treatment for a particular patient. Cannot solve the situational problem and test questions. Doesn't have an outline

Lesson 3: Chronic nasal diseases, features in children, modern research, principles of treatment, emergency care in emergency situations, prevention, rehabilitation and medical examination

Goals and objectives of the lesson

teaching students the knowledge, skills and abilities of diagnosis, providing medical care and determining the tactics of treating sick children with chronic nasal diseases.

At the end of the lesson, each student should know:

Etiology and pathogenesis of chronic nasal diseases (catarrhal, hypertrophic, atrophic and vasomotor rhinitis).

Clinical signs of chronic diseases of the nose.

Classification of chronic rhinitis.

Methods for diagnosing chronic rhinitis.

General principles of conservative treatment for common chronic diseases of the nose.
Diagnostics, diff. diagnosis, complications, and referral to a specialist

The student must be able to:

Collect anamnesis, complaints and interpret them.

Examine a child with chronic nasal diseases, determine indications for R-logical and instrumental studies.

Interpret data from clinical and biochemical laboratory instrumental studies.

To carry out measures to prevent complications in chronic diseases of the nose.

To conduct medical examination and rehabilitation of children with chronic diseases of the nose.

Time	Subject, method	Content	materials
8.30-9.00	Roll call. Repetition of the material covered.	Method "Brainstorm". Nasal congestion. Differential diagnosis of the causes of nasal congestion. Someone writes down all the reasons. Then discuss each separately. The causes of nasal congestion can be many and the teacher should have a list of all causes in advance	File "Repetition"
9.00-9.30	Group discussion of a clinical case or solution of a situational problem	:A 32-year-old patient complains of difficult nasal breathing, abundant clear discharge from the nose, impaired sense of smell, attacks of sneezing and lacrimation. These symptoms have been a frequent concern for the past two years, since I started working in the chemical industry. On examination, the mucous membrane of the nasal cavity is edematous, unevenly colored, sometimes gray and white spots on its surface. Nasal conchas are edematous. The lumen of the nasal passages is narrowed. After lubrication with a solution of adrenaline, the shells noticeably decrease in size, the lumen of the nasal passages increases. Issues for discussion: questioning of complaints, collection of anamnesis, objective examination data, diagnostics.	Flipchart File - "Clinical case"
9.30-10.00	Presentation Chronic rhinitis	You can prepare a flipchart in advance or write out on the board the differential differences between allergic and other causes of rhinitis. See table. For example, allergic (seasonal, year-round, professional), infectious (acute or chronic), rare forms (due to the use of drugs: beta-blockers, aspirin, COCs, NSAIDs, local vasoconstrictor drugs, atrophic, autoimmune, neoplastic). Sometimes rhinitis can be a manifestation of a systemic disease (cystic fibrosis, SLE, RA, AIDS, hormonal diseases - hypothyroidism, pregnancy, runny nose in older men, etc.).	PP presentation (CD disk, section Otolaryngology folder For seminars, file "Lesson 2"

Time	Subject, method	Content	materials
		After analyzing the causes of rhinitis, analyze the characteristic symptoms (for example, with allergic seasonal rhinitis - more often sneezing, itching and rhinorrhea with mucous secretions, watery, with year-round - nasal congestion and postnasal catarrh).	
10.00-11.00	Examination of patients in the clinic under the guidance of a teacher or doctor	<p>Examination of patients in the clinic at the reception of an ENT doctor, a general pediatrician and other specialists.</p> <p>Conduct an objective examination and instrumental examination, while describing the picture that you see, taking into account complaints, anamnesis, as well as physical examination data.</p> <p>Questioning patients with rhinitis onset, duration, and progression of symptoms correlation of symptoms with the season. Location, time of day and activity exposure to allergens, and other factors that exacerbate symptoms: cold air, eating spicy foods, odors, changes in temperature and air pressure)</p> <p>Ask about symptoms of congestion and obstruction: a feeling of pressure above and below the eyes, itching in the eyes, nose, and throat, sneezing, the color, texture, and amount of nasal and post-nasal discharge, and the feeling of having to constantly clear the throat.</p> <p>ask if the patient breathes through the mouth, if hearing has changed, if the sense of smell has changed, if there is snoring during sleep, fatigue whether self-treatment was carried out, especially the duration of use of vasoconstrictors family history of allergies and asthma.</p> <p>Examination of patients with rhinitis.</p> <p>Check pulse and blood pressure for</p>	<p>Otorhinolaryngological place. (Forehead reflector. Sterile. Instruments for ENT examination: ear funnels, nasal mirrors. Spatula.)</p> <p>Medical sheets; the developmental history of the patient. F No. 112, forms of a general analysis of blood and urine</p>
11.00-11.30	Practical skill. Removal of a foreign body from the nose	<p>The teacher conducts a demonstration of a practical skill. Then he gives time for students to work out a practical skill.</p> <p>Make sure EVERY student is CONFIDENTLY doing the skill. Step-by-step implementation of practical skills</p>	

Time	Subject, method	Content	materials
11.30-11.50	Practice group work	interpretation after removal of a foreign body from the nose	view the file of step-by-step removal of a foreign body from the nose.
11.50-12.30	Break		
12.30-13.30	Lecture	lecturer gives a lecture to students	
13.30-14.00	continuation of the analysis of the clinical case.	<p>Chronic rhinitis.</p> <p>Chronic inflammation of the nasal mucosa leads to the appearance of clinical manifestations of sneezing, nasal congestion, rhinorrhea. In most people, this is due to inhalation of allergens. Another common cause of rhinitis is non-allergic rhinitis, also called vasomotor rhinitis.</p> <p>allergic rhinitis</p> <p>Sneezing, nasal congestion, clear nasal discharge, and/or itchy eyes</p> <p>Seasonal (spring and/or autumn) or year-round</p> <p>The effect of antihistamines</p> <p>Usually no x-ray or lab tests required</p> <p>Vasomotor rhinitis</p> <p>Sneezing, nasal congestion, and/or clear nasal discharge</p> <p>Symptoms are provoked by changes in temperature and humidity</p> <p>No effect from antihistamines</p> <p>Usually no x-ray or lab tests required</p> <p>Vasomotor rhinitis is not immune, but rather autonomous with hypersensitivity to physical stimuli such as changes in temperature, humidity, environmental pollution, smoke, soot, fumes, tobacco smoke.</p> <p>The third form of rhinitis is drug-induced rhinitis, caused by the constant use of vasoconstrictor drops and sprays.</p> <p>When collecting an anamnesis, pay attention to the above symptoms for the differential diagnosis of rhinitis, pay attention to the nature of nasal discharge: Profuse watery - of an allergic nature, purulent, with a bad smell - an infectious cause,</p> <p>The position at which the selection occurs: whether it was spontaneous rhinorrhea or there was a discharge</p>	<p>Discuss tactics at the board.</p> <p>see table</p> <p>Otorhinolaryngological place. (Forehead reflector. Sterile.</p> <p>Instruments for ENT examination: ear funnels, nasal mirrors. Spatula.)</p> <p>Medical sheets; the developmental history of the patient. F No. 112, forms of a general analysis of blood and urine</p>

Time	Subject, method	Content	materials
		<p>when blowing the nose or the discharge went down the throat. If profuse watery discharge appeared when changing position and exercising, this may be the outflow of cerebrospinal fluid!</p> <p>Congestion equally worse in allergic and inflammatory rhinitis in the supine position, especially at night. The mucous glands normally produce about 1 liter of mucus per day. This mucus is constantly secreted through the cilia from the sinuses through the nasal cavity into the pharynx and is swallowed.</p> <p>Writing score sheets and debriefing</p>	
14.00-14.20	Summing up the lesson	Consolidation of the material covered. Each student talks about "What I learned today"	

Criteria for evaluating the current practical session

Grade	Criteria for evaluating the practical session
5 Great	Clearly oriented in the diagnosis of chronic diseases of the nose. Based on the modern classification, he can formulate a diagnosis. Knows and can interpret clinical and laboratory diagnostic criteria for diseases. May prescribe pathogenetically justified treatment. Can help with emergencies. Correctly solves situational problems and tests on the subject. Has notes.
4 Fine	Can navigate in the diagnosis of chronic diseases of the nose. Has an idea about the symptoms, clinical forms and complications of chronic nasal diseases. Knows with what diseases it is necessary to differentiate chronic diseases of the nose, but cannot fully interpret the data. Knows the groups of drugs used for treatment. Knows the principles of first aid. Correctly solves situational problems and test questions. Has an outline.
3 Udov.	Has a superficial understanding of the essence of the disease. Can retell clinical manifestations, results of physical, laboratory and instrumental research methods. Can list drugs used to treat chronic nasal conditions, but makes mistakes in choosing standards of care. Makes mistakes when solving test questions. Cannot solve situational problem. Has an outline.
2 Failed	Has no idea or has a vague idea of chronic nasal disease. The student misinterprets clinical, laboratory data. Does not know the standards of treatment for a particular patient. Cannot solve the situational problem and test questions. Doesn't have an outline

Lesson number 4. Sinusitis, tumors of the nose and sinuses, features in children, modern research, principles of treatment, emergency care in emergency situations, prevention, rehabilitation and medical examination

Goals and objectives of the lesson

teaching students the knowledge, skills and abilities of diagnosis, providing medical care and determining the tactics of treating sick children with diseases of the paranasal sinuses

At the end of the lesson, each student should know:

Etiology, pathogenesis, clinical signs, classification of sinusitis

Methods for diagnosing sinusitis.

General principles of conservative treatment for common sinusitis.

Diagnostics, diff. diagnosis, complications, first aid and referral

Etiology, pathogenesis, clinical signs, diagnosis, dif. diagnosis, complications of tumors of the nose and paranasal sinuses

The student must be able to:

Collect anamnesis, complaints and interpret them.

Examine a child with sinusitis and tumors of the nose and paranasal sinuses, determine indications for R-logical and instrumental studies.

Interpret data from clinical and biochemical laboratory instrumental studies.

Take measures to prevent complications in sinusitis and tumors of the nose and paranasal sinuses

Conduct health screening and rehabilitation.

Time	Subject, method	Content	materials
9.00-9.30	Group discussion of a clinical case or solution of a situational problem	<p>Curation of patients with sinusitis. Analysis of pictures. Students are allocated patients for curation. Use 2-3 pictures of patients with sinusitis - darkening of the sinuses.</p> <p>The symptoms of sinusitis often overlap with the symptoms of rhinitis and therefore it is advisable to take them together. Headache, facial pain, decreased sense of smell and taste, weakness, purulent discharge from the nose can be superimposed here. When teaching students, emphasis should be placed on the symptoms of rhinitis and when we suspect sinusitis. Differences between the treatment of acute and chronic sinusitis (the duration of antibiotic therapy - in acute - 2 weeks, in chronic - up to 6 weeks amoxicillin, amoxiclav, azithromycin, biseptol. Analyze possible complications of sinusitis (eye infections, brain abscesses, meningitis, cavernous sinus thrombosis). Invited 2-3 patients with sinusitis and this topic is analyzed on their example. Examination should include palpation of the projections of the sinuses (it is desirable to bring x-rays here - the localization of the sinuses, Criteria for acute sinusitis.</p> <p>TIME Acute less than 4 weeks Subacute -4-12 weeks</p>	<p>Flipchart File - "Clinical case"</p>

Time	Subject, method	Content	materials
		<p>Recurrent episodes of exacerbation 4 or more episodes per year, each lasting 7 or more days.</p> <p>CLINICAL FACTORS</p> <p>Large: facial pain/pressure Congestion/fullness in the face Nasal congestion Nasal discharge / decreased sense of smell Small: headache Bad breath Fatigue Toothache Cough Ear pressure</p> <p>If 2 or more major criteria or 1 major and 2 minor criteria are present, the diagnosis is obviously sinusitis</p> <p>Suspicion of sinusitis. In the presence of 1 major or 2 minor criteria</p>	
9.30-10.00	Presentation of RR ("Sinusitis")	Features in children.	Presentation of RR ("Sinusitis")
10.00-11.00	Examination of patients in the clinic under the guidance of a teacher or doctor	<p>Examination of patients in the clinic at the reception of an ENT doctor, a general pediatrician and other specialists.</p> <p>Conduct an objective examination and instrumental examination, while describing the picture that you see, taking into account complaints, anamnesis, as well as physical examination data.</p> <p>Curation of patients with sinusitis. Analysis of pictures. Students are allocated patients for curation. Use 2-3 pictures of patients with sinusitis - darkening of the sinuses.</p>	<p>Otorhinolaryngological place. (Forehead reflector. Sterile. Instruments for ENT examination: ear funnels, nasal mirrors. Spatula.)</p> <p>Medical sheets; the developmental history of the patient. F No. 112, forms of a general analysis of blood and urine</p>
11.00-11.30	Practical skill. Step-by-step development of the skill of washing the nose by the method of "moving"	<p>The teacher conducts a demonstration of a practical skill. Then he gives time for students to work out a practical skill.</p> <p>Make sure EVERY student is CONFIDENTLY doing the skill. Step-by-step implementation of practical skills</p>	

Time	Subject, method	Content	materials
	along the Project		
11.30-11.50	Practice group work	<p>Skill step by step nasal lavage by the method of "moving" according to the Project</p> <p>After careful specialization of the middle nasal passage, the patient is placed on the table with the head thrown back as far as possible, turned 45 * to the affected side, the nasal cavity on the affected side is filled with a syringe with an antibiotic solution (3-5 ml), after which the nostril is clamped and an olive is inserted into the second half, connected to an electric suction when the child utters a sound (ku-ku) (the palatine curtain closes the entrance to the nasopharynx) and the balloon is filled with air in the nasal cavity and the paranasal sinuses create a negative pressure.</p> <p>Instant withdrawal of the olive and unclenching of the second nostril leads to equalization of pressure in the sinuses and the penetration of the antibiotic solution into them. Of course, in order to successfully wash the "movement" technique, it is necessary to establish "working" contact with the child, to find a common language with him..</p>	view the file of step-by-step removal of a foreign body from the nose.
11.50-12.30	Break		
12.30-13.30	Lecture	lecturer gives a lecture to students	
13.30-14.00	continuation of the analysis of the clinical case.	<p>A 40-year-old patient complained of frequent bleeding from the left half of her nose, the bleeding is small and stops spontaneously. No complaints from other organs and systems. About 3 months ago I had a preventive inspection at the factory.</p> <p>On examination on the nasal septum in its cartilaginous part on the left there is a rounded purple-blue formation on a narrow stalk. The formation bleeds easily when touched, the bleeding is stopped by pressing the left wing of the nose against the nasal septum.</p>	<p>Discuss tactics at the board.</p> <p>see table</p> <p>Otorhinolaryngological place. (Forehead reflector. Sterile. Instruments for ENT examination: ear funnels, nasal mirrors. Spatula.)</p> <p>Medical sheets; the developmental history</p>

Time	Subject, method	Content	materials
		Task for the student: 1. Make a diagnosis and describe the picture you see, taking into account complaints, anamnesis, as well as physical examination data 2. What instrumental examination is necessary for this patient? 3. Counsel this patient.	of the patient. F No. 112, forms of a general analysis of blood and urine
14.00-14.20	Summing up the lesson	Consolidation of the material covered. Each student talks about "What I learned today"	
15.00-18.00	student self-training	in the thematic rooms of the department, in the library or in the simulation center	

Criteria for evaluating the current practical session

Grade	Criteria for evaluating the practical session
5 Great	Clearly oriented in the diagnosis of sinusitis and nasal tumors. Based on the modern classification, he can formulate a diagnosis. Knows and can interpret clinical and laboratory diagnostic criteria for diseases. May prescribe pathogenetically justified treatment. Can help with emergencies. Correctly solves situational problems and tests on the subject. Has notes
4 Fine	Can navigate in the diagnosis of sinusitis and nasal tumors. He has an idea about the symptoms, clinical forms and complications of sinusitis and nasal tumors. Knows what diseases it is necessary to differentiate between sinusitis and nasal tumors, but cannot fully interpret the data. Knows the groups of drugs used for treatment. Knows the principles of first aid. Correctly solves situational problems and test questions. Has an outline.
3 Udov.	Has a superficial understanding of the essence of the disease. Can retell clinical manifestations, results of physical, laboratory and instrumental research methods. Can list drugs used to treat sinusitis and nasal tumors, but makes mistakes in choosing treatment standards. Makes mistakes when solving test questions. Cannot solve situational problem. Has an outline.
2 Failed	Has no idea or has a vague idea of sinusitis and nasal tumors. The student misinterprets clinical, laboratory data. Does not know the standards of treatment for a particular patient. Cannot solve the situational problem and test questions. Doesn't have an outline

Lesson number 5. Clinical, anatomical and physiological features of the pharynx, modern methods of examination

Goals and objectives of the lesson

Teaching students knowledge of clinical anatomy and physiology of the nose of the pharynx, especially in children, modern research methods.

At the end of the lesson, each student should know:

Clinical anatomy, physiology of the pharynx.

Age features of the pharynx.

Diagnostic methods and general principles of interpretation.

Each student should be able to:

Collect anamnesis, complaints and interpret them.

Examine a child with acute diseases of the pharynx, determine indications for R-logical and instrumental studies.

Conduct self-questioning of the patient and his relatives and anterior rhinoscopy.

Interpret data from clinical, laboratory and instrumental studies.

Take measures to prevent complications of acute rhinitis, nasal furuncle and deviated septum.

Time	Subject, method	Content	materials
8.30-9.00	Roll call. Repetition of the material covered.	Method "Hot potato"	File "Repetition"
9.00-9.30	Group discussion of a clinical case or solution of a situational problem	The parents of a 3-day-old boy complained of severe swallowing difficulties. Issues for discussion: questioning of complaints, collection of anamnesis, objective examination data, diagnostics.	File - "Clinical case"
9.30-10.00	Presentation Clinical anatomical anatomy in children.	Acute BA. chronic BA. Risk factors (heredity, viral infections, allergies, seasonality, exercise and drugs). Symptoms by type of attack are poorly controlled (asthma during an exacerbation in chronic asthmatics or a mild attack in newcomers), severe acute asthma, and life-threatening asthma - status asthmaticus. Diagnostics and differential diagnostics (heart rate, respiratory rate, peak flow data). step therapy.	PP presentation (CD disk, section Otorhinolaryngology, Palchun p. 28.
10.00-11.00	Examination of patients in the clinic under the guidance of a teacher or doctor	Examination of patients in the clinic and in the clinic reception at the ENT The teacher with students conducts curation of patients on the subject.	
11.00-11.50	Practical skill. 1. Peakflowmetry. 2. Teaching the	The teacher conducts a demonstration of a practical skill. Then he gives time for students to work out a practical skill.	

Time	Subject, method	Content	materials
	patient how to use the inhaler	Make sure EVERY student is CONFIDENTLY doing the skill. Perform a pharyngoscopy and discuss the clinical anatomy of the pharynx. Throat research. The goal of learning a skill is to automatically perform the skill.	
11.50-12.50	Break		
12.50-13.30	continuation of the analysis of the clinical case.	What diagnostic method will the students choose? Student Talabalarning “Burun tugma nuksonlarini bor bemorlarga (khaona atreziyasi, buri tanglay, kuyoncha labvah.k.) berayotgantibbiyatsiyalariniboskichma-boskichbaholashmezonlari.(peak flow measurement). In this patient, PSV was 55% of normal. Diagnosis and tactics? Answer: an attack of bronchial asthma. Tactics - oxygen, beta 2 agonists on demand, intravenous hydrocortisone 200 mg or prednisolone 30-60 mg orally. After 15 - 30 minutes, repeat the peak flow measurement. If the results are less than 50% of the norm - referral to a hospital, if the condition has improved - monitor the condition within 24 hours, give adequate treatment.	Discuss tactics at the board.
13.30-14.00	Practice	Interpretation of peak flow data	See file Practice
14.00 – 14.50	Group work	Filling in the categorical table - differential diagnostic signs of diseases accompanied by difficulty in swallowing, pharyngitis, tonsillitis and etc	See file diff diagnosis of nasal breathing difficulties
14.50-15.20	Summing up the lesson	Consolidation of the material covered. Each student talks about “What I learned today”	

Criteria for evaluating the current practical session

Grade	Criteria for evaluating the practical session
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5 Great	Clearly oriented in questions of anatomy, physiology and methods of examination of the pharynx. Knows the features of the anatomy and physiology of the pharynx in children and adults. On the basis of clinical anatomy and physiology can formulate a diagnosis. Knows and can interpret clinical and laboratory diagnostic criteria for diseases. May prescribe pathogenetically justified treatment. Can help with emergencies. Correctly solves situational problems and tests on the subject. Has notes.
4 Fine	Can navigate in questions of anatomy, physiology and methods of examination of the pharynx. Knows some features of the anatomy and physiology of the pharynx in children and adults. Knows and can interpret clinical and laboratory diagnostic criteria for diseases, but cannot fully interpret the data. Knows the groups of drugs used for treatment. Knows the principles of first aid. Correctly solves situational problems and test questions. Has an outline.
3 Udov.	Has a superficial understanding of the anatomy, physiology and methods of examination of the pharynx. Can retell clinical manifestations, results of physical, laboratory and instrumental research methods. Can list drugs used to treat nasal conditions, but makes mistakes in choosing standards of care. Makes mistakes when solving test questions. Cannot solve situational problem. Has an outline.
2 Failed	Has no idea or has a vague idea about the anatomy, physiology and methods of examination of the pharynx. The student misinterprets clinical, laboratory data. Does not know the standards of treatment for a particular patient. Cannot solve the situational problem and test questions. Doesn't have an outline

Lesson number 6. Acute diseases of the pharynx, modern research, principles of treatment, emergency care in emergency situations, prevention, rehabilitation and medical examination

Purpose of the lesson: teaching students the knowledge, skills and abilities of diagnosis, providing first aid and determining the tactics of treating sick children with acute diseases of the pharynx.

Students should know:

Clinical anatomy, physiology and age features of the pharynx

Etiology and pathogenesis of acute diseases of the pharynx

Clinical signs of acute diseases of the pharynx

Classification of pharyngitis and tonsillitis.

Methods for diagnosing pharyngitis and tonsillitis

General principles of conservative treatment for common acute diseases of the pharynx (acute pharyngitis and tonsillitis).

Diagnostics, diff. diagnosis, complications, first aid and referral

Diagnostics, diff. diagnosis, complications of angina

The student must be able to:

Collect anamnesis, complaints and interpret them.

Examine a child with acute diseases of the pharynx (acute pharyngitis and tonsillitis), determine indications for R-logical and instrumental studies.

Do your own pharyngoscopy.

Interpret data from clinical and biochemical laboratory instrumental studies.

Take measures to prevent complications in acute diseases of the pharynx.

Conduct clinical examination and rehabilitation of children with acute diseases of the pharynx

Waqt	Subject of the method	Content	materials
8.30-9.00	Roll call.Repetition of the material covered.	Interactive method "Weak link" Topic: "Acute disease of the pharynx and research methods."	File "Repetition"
9.00-9.30	Analysis of the clinical solution of the case or the solution of a situational problem	Task:A 36-year-old patient complains of sore throat when swallowing, fever up to 38.8 C, general malaise. Sick for 3 days. She was treated with home remedies - gargling, taking aspirin, the treatment did not help. On examination:Pharyngoscopy is difficult - painfully reacts to the introduction of a spatula. The mucous membrane of the pharynx is hyperemic, infiltrated. Submandibular lymph nodes are enlarged, painful on palpation. With hypopharyngoscopy, hyperemia, infiltration of the tissue of the lingual tonsil is determined, raids in the form of white islands are determined on its surface. Task for the student: 1. Make a diagnosis and describe the picture that you see, taking into account complaints, anamnesis, as well as physical examination data 2. What instrumental examination is necessary for this patient? 3. Counsel this patient.	Flipchart File - "Clinical case"
9.30-10.00	Presentation acute tonsillitis in children.	What diseases of the pharynx occur in children, features of the course of the disease. Students analyze the disease together with the teacher and find the correct answer.	PP presentation (CD disk, Otolaryngology section, Throat folder, file "Otorhinolaryngology, Tashkent, Medicine. P. 35.
10.00-11.00	Clinical examination	With a teacher curation of thematic patients in the clinic or in outpatient settings.	

Wagt	Subject of the method	Content	materials
	of patients together with the teacher	The student must collect an anamnesis of the disease, properly examine the patient, make a diagnosis, prescribe treatment and, together with the group, evaluate the tactics of the work performed.	
11.00-11.30	Mastering practical skills. Pharyngoscopy and features of anatomy and physiology (material analysis).	The teacher shows practical skills and gives them time to do them. Pay attention to the correctness of the practical skills done. The student must step by step correctly perform the learned skills.	Look at the file of step-by-step pharyngoscopy and analyze acute diseases of the pharynx.
11.30-12.30	Break		
12.30-13.30	Lecture	The lecturer gives a lecture.	
13.30-14.00	Continuation of the analysis of clinical thinking in the group.	acute pharyngitis, diagnosis, dif. diagnostics, emergency care paratonsillar abscess, diagnosis, dif. diagnostics, emergency care. diphtheria of the pharynx, diagnosis, differential. diagnostics, emergency care	Discuss the tactics of treatment at the blackboard.
14.00-14.20	Summing up the lesson	Consolidation of the material covered. Each student talks about "What I learned today".	
15.00-18.00	Self-preparation of a student	Independent work in thematic classrooms, a library or a simulation center.	

Criteria for evaluating the current practical session

Grade	Criteria for evaluating the practical session
5 Great	Clearly oriented in the diagnosis of acute diseases of the pharynx. Based on the modern classification, he can formulate a diagnosis. Knows and can interpret clinical and laboratory diagnostic criteria for diseases. May prescribe pathogenetically justified treatment. Can help with emergencies. Correctly solves situational problems and tests on the subject. Has notes

4 Fine	Can navigate in the diagnosis of acute diseases of the pharynx. Has an idea about the symptoms, clinical forms and complications of acute diseases of the pharynx. Knows with what diseases it is necessary to differentiate acute diseases of the pharynx, but cannot make a complete interpretation of the data. Knows the groups of drugs used for treatment. Knows the principles of first aid. Correctly solves situational problems and test questions. Has an outline.
3 Udov.	Has a superficial understanding of the essence of the disease. Can retell clinical manifestations, results of physical, laboratory and instrumental research methods. Can list drugs used to treat acute pharyngeal conditions, but makes mistakes in choosing standards of care. Makes mistakes when solving test questions. Cannot solve situational problem. Has an outline.
2 Failed	Has no idea or has a vague idea of acute diseases of the pharynx. The student misinterprets clinical, laboratory data. Does not know the standards of treatment for a particular patient. Cannot solve the situational problem and test questions. Doesn't have an outline

Lesson number 7. Chronic diseases of the pharynx, modern research, principles of treatment, emergency care in emergency situations, prevention, rehabilitation and medical examination

Purpose of the lesson:teaching students the knowledge, skills and abilities of diagnosis, providing first aid and determining the tactics of treating sick children with acute diseases of the pharynx.

Students should know:

Clinical signs of chronic diseases of the pharynx

Classification of pharyngitis.

Methods for diagnosing chronic diseases of the pharynx

General principles of conservative treatment for common chronic diseases of the pharynx

Diagnostics, diff. diagnosis, complications, first aid and referral

Diagnostics, diff. diagnosis, complications of chronic pharyngitis

The student must be able to:

Collect anamnesis, complaints and interpret them.

Examine a child with chronic diseases of the pharynx, determine indications for R-logical and instrumental studies.

Do your own pharyngoscopy.

Interpret data from clinical and biochemical laboratory instrumental studies.

Take measures to prevent complications in chronic diseases of the pharynx.

Conduct clinical examination and rehabilitation of children with chronic diseases of the pharynx

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Waqt	Subject of the method	Content	materials
8.30-9.00	Roll call.Repetition of the material	Interactive method "Pen in the middle of the table" Topic: "Chronic diseases of the pharynx and	File "Repetition"

Waqt	Subject of the method	Content	materials
	covered.	research methods."	
9.00-9.30	Analysis of the clinical solution of the case or the solution of a situational problem	Task:On the radiograph of the cervical spine in a child of 9 months, a foreign body (fish bone) is determined at the border of C5 - C6. Question 1.In what anatomical formation (in the lower part of the pharynx or in the upper part of the esophagus) Question 2.Where is the foreign body in this patient?	Flipchart File - "Clinical case"
9.30-10.00	Presentation of chronic tonsillitis in children.	What chronic diseases of the pharynx occur in children, features of the course of the disease. Students analyze the disease together with the teacher and find the correct answer.	PP presentation (CD disk, Otolaryngology section, Throat folder, file "Otorhinolaryngology, Tashkent, Medicine. P. 40.
10.00 - 11.00	Clinical examination of patients together with the teacher	With a teacher curation of thematic patients in the clinic or in outpatient settings. The student must collect an anamnesis of the disease, properly examine the patient, make a diagnosis, prescribe treatment and, together with the group, evaluate the tactics of the work performed.	
11.00 - 11.30	Mastering practical skills. Pharyngoscopy and features of anatomy and physiology (material analysis).	The teacher shows practical skills and gives them time to do them. Pay attention to the correctness of the practical skills done. The student must step by step correctly perform the learned skills.	Look at the step-by-step pharyngoscopy file and analyze chronic diseases of the pharynx.
11.30 - 12.30	Break		
12.30 - 13.30	Lecture	The lecturer gives a lecture.	
13.30 - 14.00	Continuation of the analysis of clinical thinking	Chronic tonsillitis, diagnosis, dif. diagnostics, treatment tactics Adenoids, diagnosis, dif. diagnostics, Treatment	Discuss the tactics of treatment at the blackboard.

Waqt	Subject of the method	Content	materials
	in the group.	tactics. Hypertrophy of the palatine tonsils, diagnosis, diff. diagnostics, Treatment tactics	
14.00 - 14.20	Summing up the lesson	Consolidation of the material covered. Each student talks about "What I learned today".	Handouts / x-ray, sono-, CT, MRI - tomograms / flipchart / visual materials - videos, etc.
15.00 - 18.00	Self-preparation of a student	Independent work in thematic classrooms, a library or a simulation center.	

Criteria for evaluating the current practical session

Grade	Criteria for evaluating the practical session
5 Great	Clearly oriented in the diagnosis of chronic diseases of the pharynx. Based on the modern classification, he can formulate a diagnosis. Knows and can interpret clinical and laboratory diagnostic criteria for diseases. May prescribe pathogenetically justified treatment. Can help with emergencies. Correctly solves situational problems and tests on the subject. Has notes
4 Fine	Can navigate in the diagnosis of chronic diseases of the pharynx. Has an idea about the symptoms, clinical forms and complications of chronic diseases of the pharynx. Knows with what diseases it is necessary to differentiate chronic diseases of the pharynx, but cannot make a complete interpretation of the data. Knows the groups of drugs used for treatment. Knows the principles of first aid. Correctly solves situational problems and test questions. Has an outline.
3 Udov.	Has a superficial understanding of the essence of the disease. Can retell clinical manifestations, results of physical, laboratory and instrumental research methods. Can list drugs used to treat chronic diseases of the pharynx, but makes mistakes in choosing standards of treatment. Makes mistakes when solving test questions. Cannot solve situational problem. Has an outline.
2 Failed	Has no idea or has a vague idea of chronic diseases of the pharynx. The student misinterprets clinical, laboratory data. Does not know the standards of treatment for a particular patient. Cannot solve the situational problem and test questions. Doesn't have an outline

Lesson number 8. Acute and chronic tonsillitis, modern research, principles of treatment, emergency care in emergency situations, prevention, rehabilitation and clinical examination

Goals and objectives of the lesson:

Teaching students the knowledge, skills and abilities of diagnosis, providing first aid and determining the tactics of treating sick children with acute and chronic tonsillitis.

Students should know:

Classification of pharyngitis and tonsillitis.

Methods for diagnosing pharyngitis and tonsillitis

General principles of conservative treatment for common acute diseases of the pharynx (acute pharyngitis and tonsillitis).

Diagnostics, diff. diagnosis, complications, first aid and referral

Clinical signs of chronic diseases of the pharynx

Classification of pharyngitis and chronic tonsillitis according to Palchun-Preobrazhensky

Methods for diagnosing chronic diseases of the pharynx

General principles of conservative treatment for common chronic diseases of the pharynx

Diagnostics, diff. diagnosis, complications, first aid and referral

The student must be able to:

Collect anamnesis, complaints and interpret them.

Examine a child with acute diseases of the pharynx (acute pharyngitis and tonsillitis), determine indications for R-logical and instrumental studies.

Do your own pharyngoscopy.

Interpret data from clinical and biochemical laboratory instrumental studies.

Take measures to prevent complications in acute diseases of the pharynx.

Conduct clinical examination and rehabilitation of children with acute diseases of the pharynx

Examine a child with chronic diseases of the pharynx, determine indications for R-logical and instrumental studies.

Do your own pharyngoscopy.

Interpret data from clinical and biochemical laboratory instrumental studies.

Take measures to prevent complications in chronic diseases of the pharynx.

Conduct clinical examination and rehabilitation of children with chronic diseases of the pharynx

	Subject, method	Content	materials
8.30-9.00	Roll call. Repetition of the material covered.	Weak link method Topic: Clinical anatomy and physiology and research methods of the pharynx.	File "Repetition"
9.00-9.30	Group discussion of a clinical case or solution of a situational problem	An 8-year-old child has difficulty in nasal breathing, mucopurulent discharge from the nose, dryness in the pharynx, subfebrile condition. Sick for about 2 weeks. The mucous membrane of the nose is pink, edematous in the region of the inferior turbinates, mucous discharge in the region of the bottom of the nose on both sides. The pharyngeal tonsil II degree of enlargement, edematous, hyperemic, on its surface there are white plaques in the form of islets.	Flipchart File - "Clinical case"

	Subject, method	Content	materials
		The mucous membrane of the posterior wall of the pharynx is hyperemic, covered with a thick secret. Submandibular lymph nodes are enlarged. Issues for discussion: questioning of complaints, collection of anamnesis, objective examination data, diagnostics.	
9.30-10.00	Presentation Acute congestion of the larynx.	Chronic pharyngitis etiology, clinic, diagnosis, differential diagnosis, treatment Adenoids, diagnostics, dif. diagnostics, emergency care, referral to a specialist Chronic tonsillitis etiology, pathogenesis, clinic, diagnostics, dif. diagnostics, treatment Peritonsillar abscess diagnosis, dif. diagnostics, emergency care, referral to a specialist Benign and malignant neoplasms of the pharynx, diagnosis, dif. diagnostics, emergency care, referral to a specialist	PP presentation (CD disk, section otorhinolaryngology, folder "Acute diseases of the larynx", file "Acute laryngo-tracheitis"), sources of information - National Guide "Otorhinolaryngology" V.P. Palchun. A.N. Luchikhin.
10.00-11.00	Examination of patients in the clinic under the guidance of a teacher or doctor	Examination of patients in the clinic at the reception of the GP and in the clinic of the ENT department.	
11.00-11.30	Practical skill. 1. Washing of lacunae. 2. Pharyngoscopy	The teacher conducts a demonstration of a practical skill. Then he gives time for students to work out a practical skill. Make sure EVERY student is CONFIDENTLY doing the skill. .	
11.30-11.50	Practice	Data interpretation pharyngoscopy, endoscopy.	See file Practice
11.50-12.00	Break		
12.30-13.30	Lecture	The students go to the lecture.	
13.30-14.00	Continuation of the analysis of the clinical	To study with students the symptom of "chronic tonsillitis", to analyze the classification of chronic tonsillitis.	Discuss tactics at the board.

	Subject, method	Content	materials
	case.		
14.00 – 14.20	Summing up the lesson	Consolidation of the material covered. Each student talks about “What I learned today”	
15.00-18.00	Self-preparation of a student	In the thematic rooms of the departments, the library or in the simulation center.	

Criteria for evaluating the current practical session

Grade	Criteria for evaluating the practical session
5 Great	Clearly oriented in the diagnosis of acute and chronic tonsillitis. Based on the modern classification, he can formulate a diagnosis. Knows and can interpret clinical and laboratory diagnostic criteria for diseases. May prescribe pathogenetically justified treatment. Can help with emergencies. Correctly solves situational problems and tests on the subject. Has notes
4 Fine	Can navigate in the diagnosis of acute and chronic tonsillitis. Has an idea about the symptoms, clinical forms and complications of acute and chronic tonsillitis. Knows with what diseases it is necessary to differentiate acute and chronic tonsillitis, but cannot fully interpret the data. Knows the groups of drugs used for treatment. Knows the principles of first aid. Correctly solves situational problems and test questions. Has an outline.
3 Udov.	Has a superficial understanding of the essence of the disease. Can retell clinical manifestations, results of physical, laboratory and instrumental research methods. Can list drugs used to treat acute and chronic tonsillitis, but makes mistakes in choosing treatment standards. Makes mistakes when solving test questions. Cannot solve situational problem. Has an outline.
2 Failed	Has no idea or has a vague idea of acute and chronic tonsillitis. The student misinterprets clinical, laboratory data. Does not know the standards of treatment for a particular patient. Cannot solve the situational problem and test questions. Doesn't have an outline

Lesson number 9. Clinical, anatomical and physiological features of the ear, modern methods of examination

Purpose of the lesson: teaching students anatomy and physiology, diagnostic skills, research methods and their features.

Students should know:

Clinical anatomy, age features.

Clinical physiology of the ear.

Ear research methods.

Anatomical and physiological features of the ear in children.

The student must be able to:

Understand the anatomy of the middle ear.

Good understanding of the physiology of the middle ear.

Interpret otoscopy data, CT images.

Understand the anatomy of the middle ear

Time	Subject of the method	Content	materials
8.30-9.00	Roll call.Repetition of the material covered.	Interactive method "Brainstorming". Topic: "Anatomy and physiology of the ear, research methods and their features."	File "Repetition"
9.00-9.30	Analysis of the clinical anatomy and physiology of the ear in children	Question: What are the structural features of the ear in children?	Flipchart File - "Clinical Anatomy"
9.30-10.00	Presentation: Anatomy and physiology of the ear.	What are the features of the ear in children, the relationship in the features of the course of the disease. Students interpret anatomy and physiology together with the teacher and find the correct answer.	PP presentation (CD disk, section Otolaryngology, folder "Anatomy and Physiology", file "Middle Ear"), sources of information - Human Anatomy, Medicine. Page 27.
10.00 - 11.00	Clinical analysis on the model, pictures and video slides together with the teacher	With a teacher, the study of the anatomical and physiological characteristics of the ear in children. The student must be guided in the anatomy of the ear, correctly interpret the physiological characteristics of children and, together with the group, evaluate the tactics of the work performed.	
11.00 - 11.30	Mastering practical skills: on the model, show the anatomical parts of the ear and tell the features of anatomy and physiology (analysis of the	The teacher shows practical skills on the model and gives them time to do them. Pay attention to the correct interpretation of the anatomical sections of the ear. The student must step by step correctly perform the research methods (otoscopy, endoscopy). The student must read the CT images correctly.	View the file "Anatomy, physiology and methods of examination of the ear"

Time	Subject of the method	Content	materials
	material).		
11.30 - 12.30	Break		
12.30 - 13.30	Lecture	The lecturer gives a lecture.	
13.30 - 14.00	Continuation of the analysis of clinical thinking in the group in the form of the game "Weak Link"	Related questions: Outer and middle ear	Discuss with students at the blackboard.
14.00 - 14.20	Summing up the lesson	Consolidation of the material covered. Each student talks about "What I learned today".	
15.00 - 18.00	Self-preparation of a student	Independent work in thematic classrooms, a library or a simulation center.	

Criteria for evaluating the current practical session

Grade	Criteria for evaluating the practical session
5 Great	Clearly oriented in questions of anatomy, physiology and methods of examination of the ear. Knowledge of the anatomy and physiology of the ear. in children and adults. On the basis of clinical anatomy and physiology can formulate a diagnosis. Knows and can interpret clinical and laboratory diagnostic criteria for diseases. May prescribe pathogenetically justified treatment. Can help with emergencies. Correctly solves situational problems and tests on the subject. Has notes.
4 Fine	Can navigate in questions of anatomy, physiology and methods of examination of the pharynx. Knows some features of the anatomy and physiology of the ear. in children and adults. Knows and can interpret clinical and laboratory diagnostic criteria for diseases, but cannot fully interpret the data. Knows the groups of drugs used for treatment. Knows the principles of first aid. Correctly solves situational problems and test questions. Has an outline.

3 Udov.	Has a superficial understanding of the anatomy, physiology and methods of examination of the ear. . Can retell clinical manifestations, results of physical, laboratory and instrumental research methods. Can list drugs used to treat nasal conditions, but makes mistakes in choosing standards of care. Makes mistakes when solving test questions. Cannot solve situational problem. Has an outline.
2 Failed	Has no idea or has a vague idea about the anatomy, physiology and methods of examining the ear. The student misinterprets clinical, laboratory data. Does not know the standards of treatment for a particular patient. Cannot solve the situational problem and test questions. Doesn't have an outline

LESSON №10. Diseases of the external ear clinic, diagnosis, treatment, prevention, dispensary observation.

Goals and objectives of the lesson

Training in the diagnosis, treatment, dispensary observation of diseases accompanied by ear pain at the level of primary health care

At the end of the lesson, each student should know:

1. Clinical anatomy, physiology and age characteristics and methods of ear examination.

Etiology and pathogenesis of otitis externa.

Clinical signs, diagnosis, dif. diagnosis, complications, general principles of conservative treatment of otitis externa

Sulfur plug etiology, pathogenesis, clinic, diagnostics, differential diagnostics, treatment

Each student should be able to:

1. Collect anamnesis, complaints and interpret them.

2. Examine a child with diseases of the external ear, determine the indications for R-logical and instrumental studies.

3. Interpret the data of clinical and biochemical laboratory instrumental studies.

4. Take measures to prevent complications of diseases of the external ear

Time	Subject, method	Content	materials
8.30-9.00	Roll call. Repetition of the material covered.	Method "Brainstorming", Clinical anatomy, physiology and methods of examination of the external ear	File "Repetition"
9.00- 9.30	Group discussion of a clinical case or solution of a situational problem	Child D., 4 years old, put a plastic ball into his ear while playing. Previously, the ear never bothered, hearing was good. Palpation of the auricle and tragus is painless, there is no discharge from the ear. In the depth of the right auditory canal at a distance of 1.0 cm from the entrance, a white foreign body is determined. Issues for discussion: questioning of complaints, collection of anamnesis, objective examination data, diagnostics.	Flipchart File - "Clinical case"
9.30-10.00	Presentation External otitis.	Otitis externa, otohematoma, chondroperihndritis, ear furuncle, otomycosis, ear foreign body, Diagnosis and differential	PP presentation (CD disk, section otorhinolaryngolo

Time	Subject, method	Content	materials
		diagnosis Step therapy.	gy
10.00-11.00	Examination of patients in the clinic under the guidance of a teacher or doctor	Examination of patients in the clinic at the reception of the ENT doctor and in the department.	
11.00-11.30	Practical skill. 1. otoscopy 2. Palpation of the outer ear	The teacher conducts a demonstration of a practical skill. Then he gives time for students to work out a practical skill. Make sure EVERY student is CONFIDENTLY doing the skill. Provide a normal picture during otoscopy, palpation of the outer ear. Under what conditions does the oscopic picture change? How to interpret the results? The goal of learning a skill is to automatically perform the skill.	
11.30-12.00	continuation of the analysis of the clinical case.	With students to analyze the syndrome "Pain in the ear" with such diagnoses as chondroperichondritis, otitis externa, otomycosis, mastoiditis, mumps, etc. Schedule the introduction of such patients in stages of treatment.	Discuss tactics at the board.
12.00-12.40	Break		
12.40-13.00	Practice	Interpretation of otoscopy data	See file Practice
13.00-13.50	Group work	Filling in the categorical table - differential diagnostic signs of diseases accompanied by pain in the ear: chondroperichondritis, otitis externa, otomycosis, mastoiditis, etc.	See file diff diagnosis of dyspnea
13.50-14.30	Summing up the lesson	Consolidation of the material covered. Each student talks about "What I learned today"	

Criteria for evaluating the current practical session

Grade	Criteria for evaluating the practical session
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5 Great	Clearly guided in the diagnosis of otitis externa. Based on the modern classification, he can formulate a diagnosis. Knows and can interpret clinical and laboratory diagnostic criteria for diseases. May prescribe pathogenetically justified treatment. Can help with emergencies. Correctly solves situational problems and tests on the subject. Has notes
4 Fine	Can navigate in the diagnosis of otitis externa. Has an idea about the symptoms, clinical forms and complications of otitis externa. Knows what diseases it is necessary to differentiate otitis externa, but cannot fully interpret the data. Knows the groups of drugs used for treatment. Knows the principles of first aid. Correctly solves situational problems and test questions. Has an outline.
3 Udov.	Has a superficial understanding of the essence of the disease. Can retell clinical manifestations, results of physical, laboratory and instrumental research methods. Can list drugs used to treat otitis externa, but makes mistakes in choosing standards of care. Makes mistakes when solving test questions. Cannot solve situational problem. Has an outline.
2 Failed	Has no idea or has a vague idea of otitis externa otitis externa. The student misinterprets clinical, laboratory data. Does not know the standards of treatment for a particular patient. Cannot solve the situational problem and test questions. Doesn't have an outline

Lesson number 11. Diseases of the middle ear, modern research, principles of treatment, emergency care in emergency situations, prevention, rehabilitation and medical examination

Goals and objectives of the lesson

Teaching students the knowledge, skills and abilities of diagnosis, providing first aid and determining the tactics of treating sick children with acute and chronic otitis media,

At the end of the lesson, each student should know: 1. Etiology and pathogenesis, clinical signs of acute and chronic otitis media, labyrinthitis and ear tumors.

2. Classification of acute and chronic otitis.

3. Diagnostics, dif. diagnostics, complications of acute and chronic otitis media, labyrinthitis and ear tumors.

4. General principles of conservative treatment of acute and chronic otitis

Each student should be able to:

1. Collect anamnesis, complaints and interpret them.

2. Examine a child with diseases of the middle and inner ear, determine the indications for R-logical and instrumental studies.

3. Do your own acumetry and vestibulometry.

4. Interpret the data of clinical and biochemical laboratory instrumental studies.

5. Take measures to prevent complications with diseases of the middle ear

6. Carry out medical examination and rehabilitation of children with diseases of the middle ear

Time	Subject, method	Content	materials
8.30-9.00	Roll call. Repetition of the material covered.	Method " brainstorm"	File "Repetition"
9.00- 9.30	Group discussion of a clinical case or solution of a situational problem	Child D., 4 years old, has been suffering from suppuration from the left ear for several years. 1.5 years ago he suffered from acute suppurative otitis media. Liquid pus often appears after a cold. At otoscopy: there is a lot of liquid pus in the external auditory canal, there is a perforation in the center of the tympanic membrane, the membrane is hyperemic. The mother notes a decrease in hearing in this ear. Issues for discussion: questioning of complaints, collection of anamnesis, objective examination data, diagnostics.	Flipchart File - "Clinical case"
9.30-10.00	Presentation Chronic otitis in children.	Chronic otitis. (Epitympanitis, mesotympanitis, mastoiditis, epimesotampanitis) Clinical course, emerging intracranial complications, rehabilitation, clinical examination.	PP presentation (CD disk, section
10.00-11.00	Examination of patients in the clinic under the guidance of a teacher or doctor	Examination of patients in the clinic at the reception of an ENT doctor in the emergency department or by a clinic intern in the ENT diseases department.	
11.00-11.30	Practical skill. 1. Taking an ear swab 2. ear blowing according to Politzer	The teacher conducts a demonstration of a practical skill. Then he gives time for students to work out a practical skill. Make sure EVERY student is CONFIDENTLY doing the skill. The student must correctly hold the cotton swab, during otoscopy must take a swab from the external auditory canal and send it to the laboratory in a nutrient medium. The student must independently blow the Eustachian tube. The goal of learning a skill is to automatically perform the skill.	

Time	Subject, method	Content	materials
11.30-12.00	continuation of the analysis of the clinical case.	Students analyze the syndrome of suppuration from the ear, which often occurs with (epitympanitis, mesotympanitis, mastoiditis, epimesotampanitis). Students gradually treat such patients.	Discuss tactics at the board.
12.00-12.40	break		
12.40-13.00	Practice	Interpretation of tympanometry data	See file Practice
13.00-13.50	Group work	Filling in the assessment sheets - differential diagnostic signs of epitympanitis and mesotympanitis in children	See file differential diagnosis of otitis media
13.50-14.30	Summing up the lesson	Consolidation of the material covered. Each student talks about "What I learned today"	

Criteria for evaluating the current practical session

Grade	Criteria for evaluating the practical session
5 Great	Clearly guided in the diagnosis of diseases of the middle ear. Based on the modern classification, he can formulate a diagnosis. Knows and can interpret clinical and laboratory diagnostic criteria for diseases. May prescribe pathogenetically justified treatment. Can help with emergencies. Correctly solves situational problems and tests on the subject. Has notes
4 Fine	Can navigate the issues of diagnosing middle ear disease Has an understanding of the symptoms, clinical forms and complications of middle ear disease. Knows with which diseases it is necessary to differentiate diseases of the middle ear, but cannot fully interpret the data. Knows the groups of drugs used for treatment. Knows the principles of first aid. Correctly solves situational problems and test questions. Has an outline.
3 Udov.	Has a superficial understanding of the essence of the disease. Can retell clinical manifestations, results of physical, laboratory and instrumental research methods. Can list drugs used to treat middle ear disease, but makes mistakes in choosing standards of care. Makes mistakes when solving test questions. Cannot solve situational problem. Has an outline.
2 Failed	Has no idea or has a vague idea of middle ear disease. The student misinterprets clinical, laboratory data. Does not know the standards of treatment for a particular patient. Cannot solve the situational problem and test questions. Doesn't have an outline

Practical lesson number 12. Labyrinthitis and tumors of the ear, clinic, diagnosis, treatment, prevention, dispensary observation.

Goals and objectives of the lesson

Teaching students the knowledge, skills and abilities of diagnosis, providing first aid and determining the tactics of treating sick children with labyrinthitis and ear tumors.

At the end of the lesson, each student should know:

Etiology and pathogenesis, clinical signs of labyrinthitis and ear tumors.

2. Classification of labyrinthitis and ear tumors.

3. Diagnostics, dif. diagnosis, complications, labyrinthitis and ear tumors.

4. General principles of conservative treatment of labyrinthitis and ear tumors.

Each student should be able to:

1. Collect anamnesis, complaints and interpret them.

2. Examine a child with diseases

inner ear, determine the indications for R-logical and instrumental studies.

3. Do your own acumetry and vestibulometry.

4. Interpret the data of clinical and biochemical laboratory instrumental studies.

5. Take measures to prevent complications with diseases of labyrinthitis and ear tumors.

6. Carry out clinical examination and rehabilitation of labyrinthitis and ear tumors.

Waqt	Mavzu, y'kitish uslubi	Content	materials
8.30-9.00	8.30-9.00	Roll call. Repetition of the material covered. (clinical anatomy of the inner ear, hearing and vestibulometry)	Method "brainstorm"
9.00- 9.30	Group discussion of a clinical case or solution of a situational problem	The patient is ill with acute purulent otitis media. The patient suddenly developed dizziness, nausea, vomited 1 time. Hearing disappeared in the right ear. Objectively:in the right auditory canal there is purulent discharge, the tympanic membrane is hyperemic, there is a perforation in the center. On palpation, the mastoid process is painless. Spontaneous nystagmus to the right. The finger-finger, finger-nose test is performed with bending to the left. Falls to the left in the rhomberg position. Issues for discussion: questioning of complaints, collection of anamnesis, objective examination data, diagnostics.	Flipchart File - "Clinic Vaziyat"
9.30-10.00	Presentation Labyrinthitis	Labyrinthitis (acute, chronic, limited, diffuse, serous, purulent, necrotic) Clinical course, emerging intracranial complications, rehabilitation, clinical examination.	PP presentation (CD disk, section Otolaryngology
10.00-11.00	Examination of patients in	Examination of patients in the clinic at the reception of an ENT doctor in the emergency	

Waqt	Mavzu, y'kitish uslubi	Content	materials
	the clinic under the guidance of a teacher or doctor	department or by a clinic intern in the ENT diseases department.	
11.00-11.30	Practical skill. 1. study of the vestibular analyzer. 2. Caloric test.	The teacher conducts a demonstration of a practical skill. Then he gives time for students to work out a practical skill. Make sure EVERY student is CONFIDENTLY doing the skill. The student must correctly conduct vestibulometry. Correctly record each sample in the patient's passport. A caloric test is carried out by students among themselves. The goal of learning a skill is to automatically perform the skill.	
11.30-12.00	continuation of the analysis of the clinical case.	Students analyze the syndrome of suppuration from the ear, which often occurs with (acute, chronic, limited, diffuse, serous, purulent, necrotic). Students gradually treat such patients.	Discuss tactics at the board.
12.00-12.40	break		
12.40-13.00	Practice	Interpretation of vestibulometry data	See file Practice
13.00-13.50	Group work	Filling in the assessment sheets - differential diagnostic signs of limited and diffuse labyrinthitis	See file differential diagnosis of otitis media
13.50-14.30	Summing up the lesson	Consolidation of the material covered. Each student talks about "What I learned today"	

Criteria for evaluating the current practical session

Grade	Criteria for evaluating the practical session
5 Great	Clearly oriented in the diagnosis of diseases of the inner ear. Based on the modern classification, he can formulate a diagnosis. Knows and can interpret clinical and laboratory diagnostic criteria for diseases. May prescribe pathogenetically justified treatment. Can help with emergencies. Correctly solves situational problems and tests on the subject. Has notes

4 Fine	Can navigate the issues of diagnosing the disease of the inner ear Has an idea about the symptoms, clinical forms and complications of the disease of the inner ear. Knows with which diseases it is necessary to differentiate diseases of the middle ear, but cannot fully interpret the data. Knows the groups of drugs used for treatment. Knows the principles of first aid. Correctly solves situational problems and test questions. Has an outline.
3 Udov.	Has a superficial understanding of the essence of the disease. Can retell clinical manifestations, results of physical, laboratory and instrumental research methods. Can list drugs used to treat inner ear disease, but makes mistakes in choosing standards of care. Makes mistakes when solving test questions. Cannot solve situational problem. Has an outline.
2 Failed	Has no idea or has a vague idea of inner ear disease. The student misinterprets clinical, laboratory data. Does not know the standards of treatment for a particular patient. Cannot solve the situational problem and test questions. Doesn't have an outline

Lesson number 13. Non-purulent diseases of the ear, modern research methods, principles of treatment, emergency care, prevention, rehabilitation and medical examination.

Purpose and objectives of the lesson:

teaching students the knowledge, skills and abilities of diagnosis, providing first aid and determining the tactics of treating sick children with cochlear neuritis, otosclerosis, Meniere's disease and deafness

At the end of the lesson, each student should know:

Clinical anatomy of the inner ear.

Methodology for the study of the vestibular analyzer.

Clinical physiology of the vestibular analyzer

Etiology and pathogenesis, clinical signs of cochlear neuritis, otosclerosis, Meniere's disease and deafness

Classification of cochlear neuritis.

Diagnostics, diff. diagnosis, cochlear neuritis, otosclerosis, Meniere's disease and deafness

General principles of conservative treatment of cochlear neuritis, otosclerosis, Meniere's disease and deafness

The student must be able to:

Collect anamnesis, complaints and interpret them.

Examine a child with cochlear neuritis, otosclerosis, Meniere's disease and deafness, determine indications for R-logical and instrumental studies.

Do your own vestibulometry.

Interpret data from clinical and biochemical laboratory instrumental studies.

Take measures to prevent complications of diseases such as cochlear neuritis, otosclerosis, Meniere's disease and deafness

Waqt	Subject, method	Content	materials

Waqt	Subject, method	Content	materials
8.30-9.00	Roll call. Introductory remarks by the teacher, checking the student's readiness for the lesson. Repetition of the material covered.	Weak link method. Topic: "Clinical anatomy, physiology and methods of examination of the inner ear."	File "Repetition"
9.00- 9.30	Group discussion of a clinical case or solution of a situational problem	A 26-year-old woman complains of constantly increasing hearing loss and tinnitus. She noted that she hears better in noisy environments. Inspection:Otoscopy without features. In audiometry, an air-bone gap is determined. Question 1.What is the differential diagnosis? Question 2.What additional information would you be interested in? Additional Information:Ears never hurt. The mother of the patient also suffers from hearing loss. What diseases are you thinking about? Have you encountered similar patients in your practice?	Flipchart File - "Clinic Vaziyat"
9.30-10.00	Presentation Meniere's disease	What are the symptoms of Meniere's disease? As the various options are named, the students and the teacher analyze and generalize each of the listed parameters.	PP presentation (CD disk, section Otolaryngology
10.00-11.00	Examination of patients in polyclinics under the guidance of a teacher or doctor.	Examination of patients in the clinic from an appointment with an ENT doctor, a general pediatrician and other specialists.	
11.00-11.30	Mastering practical skills. 1. Analysis of otoscopy and physiology of the auditory analyzer.	It is necessary to pay attention to the fact that each student freely performs the skills. Research methods of the vestibular analyzer and analysis of the physiological features of the inner ear. Caloric test.The purpose of this practical skill	

Waqt	Subject, method	Content	materials
		is to teach students to independently perform this test.	
11.30-12.00	Group discussion of clinical material	Criteria for evaluating the clinical recommendations of students for patients with (purulent labyrinthitis, serous labyrinthitis, cerebellar ataxia, etc.) "Dizziness syndrome".	Chalkboard discussion
12.00-12.40	Break		
12.40-13.00	Practice	Interpretation of acumetry and vestibulometry data	See seminar folder
13.00-13.50	Group work	Filling in the assessment sheet of the student's clinical thinking, conducts a differential diagnosis between Meniere's disease and labyrinthitis.	See file Meniere's disease
13.50-14.30	Consolidation of the material covered	Analysis of the material covered. Each student answers the question "What have I mastered today".	

Criteria for evaluating the current practical session

Grade	Criteria for evaluating the practical session
5 Great	Clearly oriented in the diagnosis of non-purulent ear diseases. Based on the modern classification, he can formulate a diagnosis. Knows and can interpret clinical and laboratory diagnostic criteria for diseases. May prescribe pathogenetically justified treatment. Can help with emergencies. Correctly solves situational problems and tests on the subject. Has notes
4 Fine	Can navigate in the diagnosis of non-purulent diseases of the ear. He has an idea about the symptoms, clinical forms and complications of non-purulent ear diseases. Knows with what diseases it is necessary to differentiate non-purulent diseases of the ear. but cannot fully interpret the data. Knows the groups of drugs used for treatment. Knows the principles of first aid. Correctly solves situational problems and test questions. Has an outline.
3 Udov.	Has a superficial understanding of the essence of the disease. Can retell clinical manifestations, results of physical, laboratory and instrumental research methods. Can list drugs used to treat non-suppurative diseases of the ear. , but makes mistakes when choosing treatment standards. Makes mistakes when solving test questions. Cannot solve situational problem. Has an outline.

2 Failed	Has no idea or has a vague idea of non-suppurative ear diseases. . The student misinterprets clinical, laboratory data. Does not know the standards of treatment for a particular patient. Cannot solve the situational problem and test questions. Doesn't have an outline
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Lesson №14

Hearing loss and deafness, modern research methods, principles of treatment, emergency care, prevention, rehabilitation and clinical examination.

Purpose and objectives of the lesson:

To teach the student to navigate correctly in the syndrome of hearing loss, deafness and deaf-muteness

At the end of the lesson, each student should know:

The student must find the cause of hearing loss, deafness and deaf-mutism;
unmistakably recognize the disease.
make the right medical decision.

Each student should be able to:

Ability to reassure parents.

Properly inspect.

Decide tactics.

The ability to highlight the social aspect of the problem.

Time	Subject, method	Content	materials
8.30-9.00	Roll call. Introductory remarks by the teacher, checking the student's readiness for the lesson. Repetition of the material covered.	Blitz survey method / actualization of the acquired knowledge in the form of a question / answer.	File "Repetition"
9.00- 9.30	Group discussion of clinical material	The second child in the family. Age 3 was born at term. The mother talks about the fact that the child is hard to hear, speaks indistinctly. In history, the child suffered purulent meningitis at the age of one. within 3 days there is hoarseness of voice, rough cough without sputum, sore throat. The opening phrase of the game: "Doctor, my child lost his voice, coughs roughly, body temperature is 380C. Complains of sore throat. At home, the rest of the family had the flu. Game provision: Otorhinolaryngologist's place	Flipchart File - "Clinical case"

Time	Subject, method	Content	materials
		<p>(frontal reflector, sterile instruments for ENT examination: ear funnels, nasal mirrors, spatula). Real medical documentation: the history of the development of the child, f. No. 112, forms of a general blood test, a general analysis of urine, feces. Analysis of the game: Evaluation is given by experts, as well as by each person from the group. Students or a teacher summarize the main diagnostic reasons and determine the treatment-tactical actions. The achievement of the goal and the solution of tasks are evaluated.</p>	
9.30-10.00	Presentation Deafness	<p>Etiology of deafness? As soon as all possible options are named, the students and the teacher analyze and summarize each of the listed parameters.</p>	PP presentation (CD disk, ENT section)
10.00-11.00	Examination of patients in polyclinics under the guidance of a teacher or doctor.	Examination of patients in the clinic from an appointment with an ENT doctor, a general pediatrician and other specialists.	
11.00-11.30	Mastering practical skills. Methods for the study of the auditory analyzer.	<p>It is necessary to pay attention to the fact that each student freely performs the skills. Research methods of the vestibular analyzer and analysis of the physiological features of the inner ear. Caloric test. The purpose of this practical skill is to teach students to independently perform this test.</p>	
11.30-12.00	Guruh bilan clinic vaziyatni muhokama qilishni davom ettirish.	Collection of measures for the prevention and solution of deafness	Parsing on the board
12.00-12.40	Tanaffus		

Time	Subject, method	Content	materials
12.40-13.00	Practice	Interpretation of audiometry	See activity folder
13.00-13.50	Group work	Completing the assessment sheet of the student's clinical thinking. Differential diagnosis of deafness and hearing loss.	See file deafness.
13.50-14.30	Consolidation of the material covered	Analysis of the material covered. Each student answers the question "What have I mastered today".	

Criteria for evaluating the current practical session

Grade	Criteria for evaluating the practical session
5 Great	Clearly oriented in the diagnosis of hearing loss and deafness. Based on the modern classification, he can formulate a diagnosis. Knows and can interpret clinical and laboratory diagnostic criteria for diseases. May prescribe pathogenetically justified treatment. Can help with emergencies. Correctly solves situational problems and tests on the subject. Has notes
4 Fine	Can navigate in the diagnosis of hearing loss and deafness. Based on the modern classification, he can formulate a diagnosis. He has an idea about the symptoms, clinical forms and complications of hearing loss and deafness. Based on the modern classification, he can formulate a diagnosis. Knows with what diseases it is necessary to differentiate hearing loss and deafness. Based on the modern classification, he can formulate a diagnosis, but cannot make a full interpretation of the data. Knows the groups of drugs used for treatment. Knows the principles of first aid. Correctly solves situational problems and test questions. Has an outline.
3 Udov.	Has a superficial understanding of the essence of the disease. Can retell clinical manifestations, results of physical, laboratory and instrumental research methods. Can list drugs used to treat hearing loss and deafness. Based on the modern classification, he can formulate a diagnosis, but makes mistakes when choosing treatment standards. Makes mistakes when solving test questions. Cannot solve situational problem. Has an outline.
2 Failed	Has no idea or has a vague idea of hearing loss and deafness. Based on the modern classification, he can formulate a diagnosis. The student misinterprets clinical, laboratory data. Does not know the standards of treatment for a particular patient. Cannot solve the situational problem and test questions. Doesn't have an outline

Lesson number 15

Deafness, modern research methods, principles of treatment, emergency care, prevention, rehabilitation and clinical examination.

Purpose and objectives of the lesson:

To teach the student to navigate correctly in the syndrome of hearing loss, deafness and deaf-muteness

At the end of the lesson, each student should know:

The student must find the cause of hearing loss, deafness and deaf-mutism;
unmistakably recognize the disease.
make the right medical decision.

Each student should be able to:

Ability to reassure parents.

Properly inspect.

Decide tactics.

The ability to highlight the social aspect of the problem.

Time	Subject, method	Content	materials
8.30-9.00	Roll call. Introductory remarks by the teacher, checking the student's readiness for the lesson. Repetition of the material covered.	Blitz survey method / actualization of the acquired knowledge in the form of a question / answer.	File "Repetition"
9.00- 9.30	Group discussion of clinical material	The second child in the family. Age 3 was born at term. The mother talks about the fact that the child is hard to hear, speaks indistinctly. In history, the child suffered purulent meningitis at the age of one. within 3 days there is hoarseness of voice, rough cough without sputum, sore throat. The opening phrase of the game: "Doctor, my child lost his voice, coughs roughly, body temperature is 380C. Complains of sore throat. At home, the rest of the family had the flu. Game provision: Otorhinolaryngologist's place (frontal reflector, sterile instruments for ENT examination: ear funnels, nasal mirrors, spatula). Real medical documentation: the history of the development of the child, f. No. 112, forms of a general blood test, a general analysis of urine, feces. Analysis of the game: Evaluation is given by experts, as well as by each person from the group. Students or a teacher summarize the	Flipchart File - "Clinical case"

Time	Subject, method	Content	materials
		main diagnostic reasons and determine the treatment-tactical actions. The achievement of the goal and the solution of tasks are evaluated.	
9.30-10.00	Presentation Deafness	Etiology of deafness? As soon as all possible options are named, the students and the teacher analyze and summarize each of the listed parameters.	PP presentation (CD disk, ENT section)
10.00-11.00	Examination of patients in polyclinics under the guidance of a teacher or doctor.	Examination of patients in the clinic from an appointment with an ENT doctor, a general pediatrician and other specialists.	
11.00-11.30	Mastering practical skills. Methods for the study of the auditory analyzer.	It is necessary to pay attention to the fact that each student freely performs the skills. Research methods of the vestibular analyzer and analysis of the physiological features of the inner ear. Caloric test. The purpose of this practical skill is to teach students to independently perform this test.	
11.30-12.00	Guruh bilan clinic vaziyatni muhokama qilishni davom ettirish.	Collection of measures for the prevention and solution of deafness	Parsing on the board
12.00-12.40	Tanaffus		
12.40-13.00	Practice	Interpretation of audiometry	See activity folder
13.00-13.50	Group work	Completing the assessment sheet of the student's clinical thinking. Differential diagnosis of deafness and hearing loss.	See file deafness.
13.50-14.30	Consolidation of the material covered	Analysis of the material covered. Each student answers the question "What have I mastered today".	

Criteria for evaluating the current practical session

Grade	Criteria for evaluating the practical session
5 Great	Clearly oriented in the diagnosis of hearing loss and deafness. Based on the modern classification, he can formulate a diagnosis. Knows and can interpret clinical and laboratory diagnostic criteria for diseases. May prescribe pathogenetically justified treatment. Can help with emergencies. Correctly solves situational problems and tests on the subject. Has notes
4 Fine	Can navigate in the diagnosis of hearing loss and deafness. Based on the modern classification, he can formulate a diagnosis. He has an idea about the symptoms, clinical forms and complications of hearing loss and deafness. Based on the modern classification, he can formulate a diagnosis. Knows with what diseases it is necessary to differentiate hearing loss and deafness. Based on the modern classification, he can formulate a diagnosis, but cannot make a full interpretation of the data. Knows the groups of drugs used for treatment. Knows the principles of first aid. Correctly solves situational problems and test questions. Has an outline.
3 Udov.	Has a superficial understanding of the essence of the disease. Can retell clinical manifestations, results of physical, laboratory and instrumental research methods. Can list drugs used to treat hearing loss and deafness. Based on the modern classification, he can formulate a diagnosis, but makes mistakes when choosing treatment standards. Makes mistakes when solving test questions. Cannot solve situational problem. Has an outline.
2 Failed	Has no idea or has a vague idea of hearing loss and deafness. Based on the modern classification, he can formulate a diagnosis. The student misinterprets clinical, laboratory data. Does not know the standards of treatment for a particular patient. Cannot solve the situational problem and test questions. Doesn't have an outline

Practice №16. Clinical, anatomical and physiological features of the larynx, features in children, modern research methods.

Goals and objectives of the lesson

Teaching students knowledge of clinical anatomy and physiology of the nose of the pharynx, especially in children, modern research methods.

At the end of the lesson, each student should know:

Clinical anatomy, physiology of the pharynx.

Age features of the pharynx.

Diagnostic methods and general principles of interpretation.

Each student should be able to:

Collect anamnesis, complaints and interpret them.

Examine a child with acute diseases of the pharynx, determine indications for R-logical and instrumental studies.

Conduct self-questioning of the patient and his relatives and anterior rhinoscopy.
 Interpret data from clinical, laboratory and instrumental studies.
 Take measures to prevent complications of acute rhinitis, nasal furuncle and deviated septum.

Time	Subject, method	Content	materials
8.30-9.00	Roll call. Repetition of the material covered.	Method "Hot potato"	File "Repetition"
9.00- 9.30	Group discussion of a clinical case or solution of a situational problem	A 3-year-old child suddenly developed a barking cough during sleep, breathing became noisy. Auxiliary muscles were involved in the act of breathing, the lips turned blue, the child clearly did not have enough air, he tossed about in bed, covered with cold sweat. The voice is sonorous. What is your diagnosis? What kind of help should be given to the patient?	File - "Clinical case"
9.30-10.00	Presentation Clinical anatomical anatomy in children.		PP presentation (CD disk, section Otorhinolaryngology, Palchun p. 28.
10.00-11.00	Examination of patients in the clinic under the guidance of a teacher or doctor	Examination of patients in the clinic and in the clinic reception at the ENT The teacher with students conducts supervision of patients on the subject.	
11.00-11.50	Practical skill. 1.Direct laryngoscopy 2. Indirect laryngoscopy	The teacher conducts a demonstration of a practical skill. Then he gives time for students to work out a practical skill. Make sure EVERY student is CONFIDENTLY doing the skill. Perform direct and indirect laryngoscopy, and discuss the clinical anatomy of the larynx. Laryngeal research. The goal of learning a skill is to automatically perform the skill.	
11.50-12.50	Break		

Time	Subject, method	Content	materials
12.50-13.30	continuation of the analysis of the clinical case.	The patient complains of cough, hoarseness, fever, which appeared after drinking cold beer the day before. Temperature 37.5 s. The voice is hoarse. With indirect laryngoscopy, the mucous membrane of the larynx is hyperemic, the vocal folds are pink, somewhat infiltrated, the glottis is wide enough for breathing. What is your diagnosis? How to treat the patient?	Discuss tactics at the board.
13.30-14.00	Practice	Interpretation of laryngoscopy data.	See file Practice
14.00-14.50	Group work	Filling in the categorical table - differential diagnostic signs of diseases accompanied by hoarseness, suffocation and other symptoms.	See file diff diagnosis of nasal breathing difficulties
14.50-15.20	Summing up the lesson	Consolidation of the material covered. Each student talks about "What I learned today"	

Criteria for evaluating the current practical session

Grade	Criteria for evaluating the practical session
5 Great	Clearly oriented in questions of anatomy, physiology and methods of examination of the larynx. Knows the features of the anatomy and physiology of the larynx in children and adults. On the basis of clinical anatomy and physiology can formulate a diagnosis. Knows and can interpret clinical and laboratory diagnostic criteria for diseases. May prescribe pathogenetically justified treatment. Can help with emergencies. Correctly solves situational problems and tests on the subject. Has notes.
4 Fine	Can navigate in questions of anatomy, physiology and methods of examination of the larynx. Knows some features of the anatomy and physiology of the larynx in children and adults. Knows and can interpret clinical and laboratory diagnostic criteria for diseases, but cannot fully interpret the data. Knows the groups of drugs used for treatment. Knows the principles of first aid. Correctly solves situational problems and test questions. Has an outline.
3 Udov.	Has a superficial understanding of the anatomy, physiology and methods of examination of the larynx. Can retell clinical manifestations, results of physical, laboratory and instrumental research methods. Can list drugs used to treat the larynx, but makes mistakes in choosing standards of treatment. Makes mistakes when solving test questions. Cannot solve situational problem. Has an outline.
2 Failed	Has no idea or has a vague idea of the anatomy, physiology and methods of examination of the larynx. The student misinterprets clinical, laboratory data. Does not know the standards of treatment for a particular patient. Cannot solve the situational problem and test questions. Doesn't have an outline

Lesson No. 17. Acute diseases of the larynx, modern research methods, principles of treatment, emergency care in emergency situations, prevention, medical examination and rehabilitation.

Goals and objectives of the lesson

Teaching students the knowledge, skills and abilities of diagnosis, providing first aid and determining the tactics of treating sick children with diseases of the larynx

At the end of the lesson, each student should know: 1. Etiology and pathogenesis, clinical signs of acute laryngitis and epiglottitis.

Classification of acute laryngitis.

Diagnostics, diff. diagnosis, complications of acute laryngitis and epiglottitis.

General principles of conservative treatment of acute laryngitis and epiglottitis

Each student should be able to:

Collect anamnesis, complaints and interpret them.

Examine a child with diseases of the larynx, determine indications for R-logical and instrumental studies.

Do your own indirect laryngoscopy.

Interpret data from clinical and biochemical laboratory instrumental studies.

Take measures to prevent complications in acute laryngitis and epiglottitis

Conduct clinical examination and rehabilitation of children with acute laryngitis and epiglottitis

Time	Subject, method	Content	materials
8.30-9.00	Roll call. Repetition of the material covered.	Method "Hot potato"	File "Repetition"
9.00-9.30	Group discussion of a clinical case or solution of a situational problem	A 3-year-old child suddenly developed a barking cough during sleep, breathing became noisy. Auxiliary muscles were involved in the act of breathing, the lips turned blue, the child clearly did not have enough air, he tossed about in bed, covered with cold sweat. The voice is sonorous. What is your diagnosis? What kind of help should be given to the patient? Issues for discussion: questioning of complaints, collection of anamnesis, objective examination data, diagnostics.	Flipchart File - "Clinical case"
9.30-10.00	Presentation Acute congestion of the larynx.	Definition Acute laryngo-tracheitis inflammation of the mucous membranes of the larynx. Etiology acute laryngitis. (Hypothermia, voice strain, viruses, bacteria.) Clinic: hoarseness, dry cough turning into wet,	PP presentation (CD disk, section otorhinolaryngology, folder "Acute diseases of the

Time	Subject, method	Content	materials
		fever, fatigue and weakness. Diagnostics.Complaints. Anamnesis. Laryngoscopy (direct and indirect). Endoscopy of the larynx. Treatment.Voice mode. Inhalations. Antipyretic therapy. Antibiotic therapy Distraction therapy Abundant drink.	larynx", file "Acute laryngo-tracheitis"), sources of information - National Guide "Otorhinolaryngology" V.P. Palchun. A.N. Luchikhin.
10.00-11.00	Examination of patients in the clinic under the guidance of a teacher or doctor	Examination of patients in the clinic at the reception of the GP and in the clinic of the ENT department.	
11.00-11.30	Practical skill. 1. Direct laryngoscopy. 2. Indirect laryngoscopy	The teacher conducts a demonstration of a practical skill. Then he gives time for students to work out a practical skill. Make sure EVERY student is CONFIDENTLY doing the skill. .	
11.30-11.50	Practice	Interpretation of laryngoscopy data (direct and indirect)	See file Practice
11.50-12.00	Break		
12.30-13.30	Lecture		
13.30-14.00	Continuation of the analysis of the clinical case.	To study with students the symptom of "hoarseness", in which diseases this symptom occurs.	Discuss tactics at the board.
14.00 – 14.20	Summing up the lesson	Consolidation of the material covered. Each student talks about “What I learned today”	
15.00-18.00	Self-preparation of a student	In the thematic rooms of the departments, the library or in the simulation center.	

Criteria for evaluating the current practical session

Grade	Criteria for evaluating the practical session
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5 Great	Clearly oriented in the diagnosis of acute diseases of the larynx. Based on the modern classification, he can formulate a diagnosis. Knows and can interpret clinical and laboratory diagnostic criteria for diseases. May prescribe pathogenetically justified treatment. Can help with emergencies. Correctly solves situational problems and tests on the subject. Has notes
4 Fine	Can navigate in the diagnosis of acute diseases of the larynx. He has an idea about the symptoms, clinical forms and complications of acute diseases of the larynx. Knows with what diseases it is necessary to differentiate acute diseases of the larynx, but cannot fully interpret the data. Knows the groups of drugs used for treatment. Knows the principles of first aid. Correctly solves situational problems and test questions. Has an outline.
3 Udov.	Has a superficial understanding of the essence of the disease. Can retell clinical manifestations, results of physical, laboratory and instrumental research methods. Can list drugs used to treat acute laryngeal disorders, but makes mistakes in choosing standards of care. Makes mistakes when solving test questions. Cannot solve situational problem. Has an outline.
2 Failed	Has no idea or has a vague idea of acute diseases of the larynx. The student misinterprets clinical, laboratory data. Does not know the standards of treatment for a particular patient. Cannot solve the situational problem and test questions. Doesn't have an outline

Lesson number 18. Topic: "Chronic diseases of the larynx"

Purpose of the lesson: teaching students the knowledge, skills and abilities of diagnosis, providing first aid and determining the tactics of treating sick children with acute diseases of the larynx.

Students should know:

Etiology and pathogenesis, clinical signs of chronic laryngitis, chronic stenosis and tumors of the larynx.

Classification of chronic laryngitis.

Diagnostics, diff. diagnostics, complications of chronic laryngitis, chronic stenosis and tumors of the larynx.

General principles of conservative treatment of chronic laryngitis, chronic stenosis and tumors of the larynx.

The student must be able to:

Collect anamnesis, complaints and interpret them.

Examine a child with diseases of the larynx, determine indications for R-logical and instrumental studies.

Perform independently lymphotropic injection of drugs into the larynx

Interpret data from clinical and biochemical laboratory instrumental studies.

Take measures to prevent complications in chronic laryngitis, chronic stenosis and tumors of the larynx.

Carry out medical examination and rehabilitation of children with diseases of the larynx

Time	Subject of the method	Content	materials

Time	Subject of the method	Content	materials
8.30-9.00	Roll call.Repetition of the material covered.	Interactive method "Pen in the middle of the table." Topic: "Acute disease of the larynx and research methods."	File "Repetition"
9.00-9.30	Analysis of a clinical case or solution of a situational problem	Task: A young man came to see you this morning. He looks somewhat embarrassed. When you asked him what the problem was, he told you in a whisper that he woke up in the morning and found that his voice was gone. Question 1. What is the differential diagnosis? Response (URT infections, vocal cord overload, laryngitis, gastroesophageal reflux) Question 2. What information would you like to receive to make a diagnosis? Cadets must indicate the connection with the infection, smoking, profession (lecturer, teacher), lifestyle - football fan, goes to the stadium, previous history, other symptoms - belching, heartburn - GER if not indicated, do not give answers.	Flipchart File - "Clinical case"
9.30-10.00	Presentation chronic laryngitis in children.	What diseases of the larynx occur in children, features of the course of the disease. Students analyze the disease together with the teacher and find the correct answer.	PP presentation (CD disk, section Otolaryngology, folder "Laryngitis", file "Chronic laryngitis"), sources of information - Otorhinolaryngology, Tashkent, Medicine. Page 108.
10.00-11.00	Clinical examination of patients together with the teacher	With a teacher curation of thematic patients in the clinic or in outpatient settings. The student must collect an anamnesis of the disease, properly examine the patient, make a diagnosis, prescribe treatment and, together with the group, evaluate the tactics of the work performed.	
11.00-11.30	Mastering practical skills. Laryngoscopy	The teacher shows practical skills and gives them time to do them. Pay attention to the correctness of the practical	Look at the step-by-step laryngoscopy file and analyze

Time	Subject of the method	Content	materials
	and features of anatomy and physiology (analysis of the material).	skills done. The student must step by step correctly perform the learned skills.	chronic diseases of the larynx.
11.30-12.30	Break		
12.30-13.30	Lecture	The lecturer gives a lecture.	
13.30-14.00	Continuation of the analysis of clinical thinking in the group.	Chronic stenoses of the larynx, diagnosis, dif. diagnostics, emergency care Benign neoplasms of the larynx, diagnosis, dif. diagnostics, emergency care. Malignant neoplasms of the larynx, diagnosis, dif. diagnostics, emergency care	Discuss the tactics of treatment at the blackboard.
14.00-14.20	Summing up the lesson	Consolidation of the material covered. Each student talks about "What I learned today".	
15.00-18.00	Self-preparation of a student	Independent work in thematic classrooms, a library or a simulation center.	

Criteria for evaluating the current practical session

Grade	Criteria for evaluating the practical session
5 Great	Clearly oriented in the diagnosis of chronic diseases of the larynx. Based on the modern classification, he can formulate a diagnosis. Knows and can interpret clinical and laboratory diagnostic criteria for diseases. May prescribe pathogenetically justified treatment. Can help with emergencies. Correctly solves situational problems and tests on the subject. Has notes
4 Fine	Can navigate in the diagnosis of chronic diseases of the larynx. Has an idea about the symptoms, clinical forms and complications of chronic diseases of the larynx. Knows with what diseases it is necessary to differentiate chronic diseases of the larynx, but cannot fully interpret the data. Knows the groups of drugs used for treatment. Knows the principles of first aid. Correctly solves situational problems and test questions. Has an outline.
3 Udov.	Has a superficial understanding of the essence of the disease. Can retell clinical manifestations, results of physical, laboratory and instrumental research methods. Can list drugs used to treat chronic laryngeal diseases, but makes mistakes in choosing standards of care. Makes mistakes when solving test questions. Cannot solve situational problem. Has an outline.

2 Failed	Has no idea or has a vague idea of chronic diseases of the larynx. The student misinterprets clinical, laboratory data. Does not know the standards of treatment for a particular patient. Cannot solve the situational problem and test questions. Doesn't have an outline
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Security questions

Clinical Physiology of the Auditory Analyzer

Clinical physiology of the larynx, features in children
angina

Abscesses of the brain and cerebellum

Evaluation sheet: lacunar angina

Clinical anatomy of the inner ear

Acute rhinitis

Scorecard: Chronic hyperplastic laryngitis

Methods for the study of the auditory analyzer in children and adults

Peritonsillar abscess

Evaluation sheet: False croup

Clinical anatomy of the ethmoid sinus

Papillomatosis of the larynx

Evaluation sheet: sulfur plug

Physiology of the larynx

Diagnosis, treatment and rehabilitation of deaf-mute

Scorecard: nosebleed

Clinical anatomy of the pharynx

Septal curvature

Evaluation sheet: left-sided epitympanitis with cholesteotoma

Clinical anatomy of the sphenoid sinus

Sulfur plug

Evaluation sheet: laryngeal stenosis, subcompensation phase

Clinical anatomy of the nasal cavity, features in children

Foreign bodies of the external auditory canal, diagnosis, first aid

Clinical anatomy and physiology of the larynx

Acute suppurative otitis media

Clinical anatomy of the outer ear, features in children

false croup

Evaluation sheet: foreign body in the left nasal cavity

Clinical anatomy and topography of the external nose

Catarrhal angina

Evaluation sheet: subglottic laryngitis

Physiology of the nose

Angina

Bilateral adhesive otitis media

Clinical physiology of the nose and paranasal sinuses

Chronic catarrh

Evaluation sheet: chronic atrophic laryngitis

Clinical anatomy, physiology of the maxillary sinus, features in children

Diphtheria of the larynx

Scorecard: otosclerosis
 Clinical anatomy of the pharynx
 Scorecard: palatine tonsil hypertrophy
 Clinical anatomy of the middle ear
 Foreign bodies of the respiratory tract
 Right-sided odontogenic sinusitis
 Methods for examining the larynx
 Purulent mesotympanitis
 Evaluation sheet: chronic tonsillitis, toxic-allergic form 2 degree
 Muscles of the larynx and physiology
 Sensorineural hearing loss
 Pharyngomycosis
 Clinical anatomy of the inner ear
 Malignant tumors of the larynx
 Evaluation sheet: hypertrophic rhinitis
 Clinical anatomy of the middle ear, features in children
 angina
 Vasomotor rhinitis
 Clinical anatomy of the frontal sinus, features in children
 Juvenile angiofibroma of the nasopharynx
 Evaluation sheet: chronic atrophic laryngitis
 Clinical anatomy of the larynx
 Foreign body of the outer ear, cerumen
 Clinical Physiology of the Auditory Analyzer
 Acute stenosis of the larynx
 Evaluation sheet: offensive coryza (ozena)
 Anatomy of the outer ear
 Chronic tonsillitis
 Evaluation sheet: trauma to the nose, fracture of the bones of the nose with displacement
 Clinical anatomy of the esophagus and trachea
 Acute catarrhal laryngitis
 Scorecard: Bilateral Sinus Ethmoiditis
 Histology and physiology of the palatine tonsils
 True croup
 Evaluation sheet: acute purulent sinusitis
 Clinical anatomy of the larynx, features in children
 labyrinthitis
 Evaluation sheet: acute sinusitis
 Clinical physiology of the pharynx
 Paresis and paralysis of the larynx
 Evaluation sheet: acute suppurative otitis media
 Clinical anatomy of the maxillary sinus, features in children
 Follicular angina
 Scorecard: Meniere's disease
 Furuncle of the nose, complications
 Evaluation sheet: acute pharyngitis
 Clinical anatomy and physiology of the inner ear

Ozena

Evaluation list: follicular angina Oc list follikulyarnaya angina

Clinical anatomy of the frontal sinus, features in children

Acute catarrhal pharyngitis

Scorecard: otosclerosis

Clinical anatomy of the middle ear

Chondroperichondritis of the larynx

allergic rhinitis

Research methods of the vestibular analyzer

Chronic pharyngitis

Scorecard: foreign bodies in the nose

Methods for examining the pharynx

hearing loss

Evaluation sheet: acute suppurative ethmoiditis

Methods for examining the nose and paranasal sinuses

Hematoma and chondroperichondritis of the auricle

Scorecard: chronic laryngeal stenosis

Methods for examining the pharynx

Otosclerosis

Scorecard: deviated septum

Clinical physiology and research methods of the nose

Acute suppurative otitis media

Cancer of the larynx

Benign positional vertigo

Perforation of the nasal septum

Choan atresia

Angiofibroma of the nasopharynx

Congenital anomalies of the ear

Sources of basic and additional literature

1. Dadamukhamedov A.N. Bolalarotorhinolaryngology. Tashkent, 1999. 2. Dadamukhamedov A.N., Omonov Sh.E. Bolalarotorhinolaryngology. Tashkent, 2005.
3. "Diseases of the ear, throat and nose", V.T. Palchun, N.A. Preobrazhensky, M., Medicine, 1980
4. "Children's otorhinolaryngology", Yu.B. Iskhaki, L.I. Kalshtein, Dushanbe, Maorif, 1977.
5. "Otorhinolaryngology", V.T. Palchun, Magomedov V.T., Luchikhin L.A. Moscow, "Medicine", 2007.

Additional literature

1. "Otorhinolaryngology", V.T. Palchun, A.I. Kryukov, Moscow, "Litera", 2001
2. "Otorhinolaryngological Atlas", V.A. Gapanovich, V.M. Aleksandrov, Minsk, 1989
3. "Diseases of the ear, throat and nose", V.A. Gapanovich, V.M. Aleksandrov, Moscow, "Medicine", 1991.

4. Yukorinafasyullarikasalliklari. Khasanov S.A., Vakhidov N.Kh. T. Vorisnasnriot. 2008.
5. Practical otorhinolaryngology. Textbook for universities, Khojaeva K.A. Tashkent 2004.
6. Amaliy otorhinolaryngology. Textbook for universities, Khojaeva K.A. Tashkent. Iqtisodmolvia 2006.
7. Head and Neck surgery Otolaryngology. Philadelphia. Lippincott/ 1998
8. Monitoring in Otolaryngology and Head and Neck Surgery. Editors Kartush JM Bouchard K. New York. Raven Press.
9. "Otorhinolaryngology". Under. ed. Soldatova I.B. St. Petersburg, 2001. 10. "Children's otorhinolaryngology", Bogomilsky M.R. , Moscow GEOTAR, 2001
11. Secrets of otorhinolaryngology. Jafek B.U. St. Petersburg, Nevsky dialect. 2001.
12. Chronic suppurative otitis media in children. Khasanov S.A., Omonov Sh.E. Tashkent. Uzbek Mil. Encycl. 2010th.
13. Amaliy otorhinolaryngologiya. Xojaeva Q. Tashkent. Iqtisodmolvia 2006.
14. Kulok, tomokva burun kasalliklari. Muminov A.I. Tashkent. Muminov A.I. 1994.

Internet sites

<http://www.emedicine.com>

<http://www.nlm.nih.gov>

<http://www.medbow.ru>

<http://www.journals.elsevierhealth.com/periodicals>

<http://www.rhinologyjournal.com>

Publications of recent years in scientific journals.

Glossary

Abscess (synonym: abscess, abscess) - a cavity filled with pus and delimited from the surrounding tissues.

Adenoids (syn.: adenoid growths, adenoid vegetations) - a hypertrophied nasopharyngeal tonsil, causing difficulty in nasal breathing, hearing loss and other disorders.

Angina (syn.: throat toad) - an acute general infectious disease characterized by inflammation of the lymphadenoid tissue of the pharynx, manifested by sore throat and general intoxication.

Anosmia - lack of smell.

Antritis (syn.: otomastoiditis) - inflammation of the mastoid cavity, accompanied by osteomyelitis of the walls of its periantral cells.

Asphyxia (syn.: suffocation) - a pathological condition caused by acute or subacute - occurring hypoxia and hypercapnia and manifested by severe disorders of the nervous system, respiration and blood circulation.

Audiology - a section of otorhinolaryngology that studies hearing and its disorders in the physical, physiological, medical, psychological and social aspects.

Autophony (syn.: tympanophony) - enhanced perception of one's own voice due to a pathological process in the auditory tube. Aphonia - the absence of sonority of the voice with the preservation of whispered speech.

Sinusitis (syn.: maxillitis, maxillary sinusitis) - inflammation of the mucous membrane of the maxillary sinus.

Hyperemia- redness.

Hyposmia- reduced sensitivity of the olfactory analyzer.

Deafness- complete absence of hearing or a sharp degree of its decrease, in which it is impossible to perceive speech.

Larynx- an organ of respiration and voice formation, located at the level of IV - VI cervical vertebrae, between the pharynx and trachea, consisting of cartilage, ligaments and muscles, which determine their movement and tension of the vocal folds and mucous membranes.

Dysphagia is the general name for swallowing disorders.

labyrinth(syn.: otitis media) - inflammation of the inner ear.

labyrinthopathy- the general name of diseases of the inner ear, characterized by dystrophic

Mastoiditis - inflammation of the mucous membrane of the cells and bone tissue of the mastoid bone.

Mesotympanitis- chronic purulent inflammation of the middle and lower sections of the tympanic cavity, manifested by hearing loss, mucopurulent discharge from the ear, central perforation of the stretched part of the tympanic membrane, sometimes proliferation of granulation tissue and the formation of polyps.

Meniere syndrome- vascular functional disorders of the inner ear and changes in the endo- and perilymph system as a result of various pathological processes, characterized by rotational dizziness, accompanied by nausea, vomiting, hearing loss, spontaneous nystagmus, imbalance, tinnitus; attacks can last from several minutes to several hours and are accompanied by pallor, profuse sweating, tachycardia, tachypnea.

Otalgia- pain in the auricle and external auditory canal in the absence of visible pathological changes in them.

Otitis- inflammation of any part of the ear.

Otolaryngologist- a doctor - a specialist who has received training in the diagnosis, treatment and prevention of diseases of the ear, nose, paranasal sinuses, pharynx and larynx.

Otomycosis- a disease caused by the development of various types of molds on the walls of the external auditory canal.

Otorhinolaryngology- a field of clinical medicine that studies the etiology, pathogenesis, clinical course of diseases of the ear, nose, paranasal sinuses, pharynx and larynx and develops methods for diagnosing, treating and preventing these diseases.

Otosclerosis- (syn.: otodystrophy, otospongiosis) - a disease of the organ of hearing, caused by a focal pathological process in the bony labyrinth, often leading to fixation of the base of the stirrup in the vestibule window, manifested by progressive, usually bilateral, hearing loss and tinnitus.

Pansinuitis- inflammation of the mucous membrane of all paranasal sinuses.

Paracentesis- an incision of the tympanic membrane in order to ensure the outflow of pus in acute purulent otitis media.

Puncture(syn.: puncture) - piercing the wall of an organ or body cavity with a hollow needle or trocar; produced for diagnostic or therapeutic purposes.

Rhinitis- combined inflammation of the mucous membrane of the nasal cavity and paranasal sinuses.

Rhinosinusopathy- an allergic disease, manifested by bouts of rhinitis, swelling of the mucous membrane and accumulation of fluid in the paranasal sinuses.

sinuit(syn.: paranasal sinusitis) - inflammation of the mucous membrane of one or more sinuses.

auditory trumpet(syn.: Eustachian tube, tympanic-pharyngeal) - the bone-cartilaginous canal connecting the tympanic cavity with the nasal part of the pharynx.

Audiology- a section of otorhinolaryngology that studies the etiology, pathogenesis and clinic of various forms of hearing loss and deafness, developing methods for their diagnosis, treatment and prevention.

Sphenoiditis- inflammation of the mucous membrane of the sphenoid sinus; acute sphenoiditis usually occurs as a consequence of acute rhinitis, chronic sphenoiditis often accompanies inflammation of the posterior cells of the ethmoid labyrinth.

Tympanoplasty- plastics of the sound-conducting apparatus of the middle ear, damaged in chronic purulent or adhesive otitis media, in order to improve hearing.

Tympanosclerosis(syn.: pseudotosclerosis, sclerotitis) - proliferation of connective tissue in any parts of the middle ear, followed by their hyalinosis, often with calcification and ossification; residual effect of transferred otitis media, leading to conductive hearing loss.

Tonsillitis- inflammation of the palatine tonsils.

Tonsolotomy- surgical operation of partial removal of palatine tonsils.

Tonsillectomy- surgical operation of complete removal of the palatine tonsils together with the connective tissue capsule.

Tracheotomy- operation of dissection of the trachea (throat dissection) for the purpose of carrying out endotracheal and endobronchial diagnostic and therapeutic manipulations, followed by closing the wound.

tubootitis(syn.: eustachitis, salpingo-otitis) - inflammation of the mucous membrane of the Eustachian (auditory) tube.

hearing loss(syn.: bradiacusia) - hearing loss, in which the perception of speech is preserved.

Pharyngitis- inflammation of the mucous membrane and lymphoid tissue of the pharynx.

Frontitis- inflammation of the mucous membrane of the frontal sinus.

Epiglottitis- inflammation of the mucous membrane (often lymphoid) of the nasal and oral parts of the pharynx.

+ Epitympanitis - chronic otitis media, characterized by damage not only to the mucous membrane, but also to the bone walls of the epitympanic space with the formation of caries of granulations and cholesteoma.

Ethmoiditis- inflammation of the mucous membrane of the cells of the ethmoid sinus.