йFEDERAL STATE BUDGETARY EDUCATIONAL INSTITUTION OF HIGHER EDUCATION "AMUR STATE MEDICAL ACADEMY" MINISTRY OF HEALTH OF THE RUSSIAN FEDERATION

AGREED Vice-Rector for Academic Affairs,

N.V. Loskutova

__N.v. Loskutova

APPROVED by decision of the Academic Council of the FSBEI HE Amur SMA of the Ministry of Health of the Russian Federation April 22, 2025

April 17, 2025

Decision of the Central Commutee Moscow Council

Protocol No. 7

Protocol No. 15

April 22, 2025

Acting Rector of the FSBEI HE Amur SMA of the Whistry of Health of the Russian Federation

I.V. Zhukovets

EDUCATIONAL PROGRAM

discipline "Ophthalmology"

Specialty: 31.05.01 General Medicine Course: 5 Semester: 9 Total hours: 108 hrs. Total credits: 3 credit units Control form: credit-test, 9 semester

Blagoveshchensk, 2025

The educational program of the discipline is designed in accordance with the requirements of the Federal State Educational Standard of Higher Education - Specialist in specialty 31.05.01 General Medicine, approved by the order of the Ministry of Education and Science of Russia dated 12.08.2020 No. 988 (registered in the Ministry of Justice of Russia on 08.26.2020 No. 59493), BPEP HE (2021).

Author:

Professor of the Department of Otolaryngology and Ophthalmology, Holder of the Advanced Doctorate (Doctor of Sciences) in Medical Sciences, Associate Professor A.S. Vydrov

Reviewers: Head of the Ophthalmology Department, Far Eastern State Medical University, Professor, Holder of the Advanced Doctorate (Doctor of Sciences) in Medical Sciences E.L. Sorokin

Head of the Department of Traumatology with a Course in Disaster Medicine FSBEI HE Amur SMA, Holder of the Advanced Doctorate (Doctor of Sciences) in Medical Sciences, Professor I.V. Borozda

APPROVED at the meeting of the Department of Otolaryngology and Ophthalmology,

Protocol No. 13 dated April 10, 2025

Head of the Department, Holder of the Advanced Doctorate (Doctor of Sciences) in Medical Sciences, Professor A.A.Blotsky

Conclusion of the Expert Commission for review of the Work Programs: Protocol No. 2 dated April 10, 2025

Expert of the expert commission Holder of the Advanced Doctorate (Doctor of Sciences) in Medical Sciences, Professor A.A. Blotsky

APPROVED at the meeting of the Central Monitoring Committee No. 4: Protocol No. 4 dated April 5, 2025

Chairman of the CMC No. 4 Holder of the Advanced Doctorate (Doctor of Sciences) in Medical Sciences, Professor _______ I.V. Borozda

AGREED: Dean of the Faculty of Medicine, N.G. Brash

April 17, 2025

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1. EXPLANATORY NOTE

1.1. Characteristics of the discipline

Ophthalmology is a field of clinical medicine that studies the etiology, pathogenesis, and clinical course of diseases of the visual organ, as well as developing methods for diagnosing, treating, and preventing these diseases.

1.2. Purpose and objectives of the discipline.

The purpose of the course is to ensure that students acquire theoretical knowledge and practical skills in the field of ophthalmology, taking into account further education and professional activities in the specialty of general medicine in outpatient settings.

The objectives of the discipline are:

- 1. To familiarize students with the specific weight of the specialty in general pathology, with the importance of timely detection and elimination of diseases of the organ of vision, in the prevention of general morbidity and in the health improvement of the population, with the principles and methods of outpatient and dispensary work of an ophthalmologist.
- 2. To familiarize students with the features of the examination of the visual organ in newborns, young children, children of different age groups; the indicator of the significance of the results of this examination in the general clinical examination, in identifying pathology of the central nervous system.
- 3. To familiarize students with the etiology, pathogenesis, clinical picture, diagnosis, prevention and treatment of diseases of the organ of vision that are common, have social significance, require emergency care, cause concomitant diseases in the body or complications.
- 4. To teach students practically necessary functional methods of examining the organ of vision, providing emergency care for injuries, burns, foreign bodies and other acute diseases of the organ of vision of different age groups.

1.3. The place of the discipline in the structure of the main professional educational program of higher education.

In accordance with the Federal State Educational Standard of Higher Education - a specialist in the specialty 31.05.01 General Medicine (2020), the discipline "Ophthalmology" refers to the disciplines of the basic part, Block 1. The total workload is 3 credits (108 hours), taught in the 9th semester in the 5th year. The form of control is a credit with a grade.

Main sections of the discipline studied

- 1. Anatomy, physiology, methods of studying the organ of vision
- 2. Inflammatory diseases and traumatic injuries of the visual organ.
- 3. Infectious granulomas and neoplasms of the visual organ.

1.4 Requirements for students

Initial level of the student - when starting to study the discipline "Ophthalmology", the student must have a basic level of knowledge, skills and abilities in the following disciplines:

Anatomy :

Knowledge : normal anatomy of the visual organ. Age-related features (II - III level).

Skills: be able to analyze age-related features of the anatomy of the visual organ.

Skills: differentiation of various parts and structures of the eyeball.

Normal Physiology:

Knowledge: normal physiology of the visual organ. Age-related features (II - III level).

Skills : be able to analyze age-related features of the physiology of the visual organ.

Skills: understanding the close interaction of the various structures of the eyeball.

Biology

Knowledge: embryogenesis of tissues of the organ of vision, structure, function and structural features (II - III level).

Skills : be able to determine age-related patterns of development of the visual organ, analyze the results of histophysiological research, work with a light and electron microscope, taking into account safety regulations.

Skills: working with a slit lamp.

Histology, embryology, cytology:

Knowledge: embryogenesis of tissues of the organ of vision, structure, function and structural features (II - III level).

Skills : be able to determine age-related patterns of development of the visual organ, analyze the results of histophysiological research, work with a light and electron microscope, taking into account safety regulations.

Skills: transmitted light examination, reverse ophthalmoscopy

Pathological anatomy, clinical pathological anatomy:

Knowledge: anatomy of the visual organ in various pathological processes. Age-related features (II - III level).

Skills : be able to analyze age-related features of the physiology of the visual organ in various pathological processes.

Skills: mastering the light test Belostotsky -Fridman, tonometry.

Topographic anatomy and operative surgery:

Knowledge: topographic-anatomical interaction of the visual organ with the paranasal sinuses, as well as with other organs and systems. Age-related features (II - III level).

Skills : be able to analyze the topographic-anatomical interaction of the visual organ with the paranasal sinuses, as well as with other organs and systems in different age groups.

Skills: application of various types of sutures (on skin, conjunctiva, sclera, cornea).

1. 5 Interdisciplinary links with subsequent disciplines

Knowledge, skills and abilities necessary for studying subsequent disciplines:

No.	Name of subsequent disciplines	Section numbers of this disciplines required for the study of subsequent			
			disciplines	osequent	
		1	2	3	
1	Epidemiology	+	+	+	
2	Medical rehabilitation	+	+	+	
3	Neurology, medical genetics, neurosurgery	+	+	+	
4	Otorhinolaryngology	+	+	+	
5	Dermatovenereology	+	+	+	
6	Forensic medicine	+	+		
7	Obstetrics and gynecology	+	+		
8	Occupational diseases	+	+	+	
9	Phthisiology	+	+	+	
10	Hospital surgery	+	+	+	
11	Dentistry	+	+	+	
12	Hospital therapy	+	+	+	
13	Outpatient and emergency pediatrics	+	+		
14	Anesthesiology, resuscitation, intensive care	+	+		
15	Oncology, radiation therapy	+	+	+	
16	Traumatology, orthopedics	+	+		
17	Hospital therapy	+	+	+	
18	Infectious diseases	+	+	+	
19	Pediatric surgery	+	+	+	

1. 6 Requirements for the results of mastering the discipline

The process of studying the discipline is aimed at developing the following competencies:

No. Code and name of compa		Code	As a result of studying the academic discipline, the stu		e, the student must:	
p/p	tence	and the name of the indicator of achievement of competence	Know	Be able to	To own	
	Universal competencies					
	UK-1	ID UK-1.1.	Concepts, principles	Use the principles and	Methods of self-devel-	
	Capable	Analyzes a problem situation as a system,	and methods of self-de-	methods of self-devel-	opment, self-realization,	
	realize	identifying its components and the con-	velopment, self-realiza-	opment, self-realization,	self-education, use of	
	critical analysis of prob-	nections between them.	tion, self-education, use	self-education, and use	creative potential	
	lematic	ID UK-1.2.	of creative potential	of creative potential		
1	situations based on a sys-	Identifies gaps in information needed to				
1	tems approach, to de-	solve problem situations and designs pro-				
	velop	cesses to eliminate them .				
	strategy of action	ID UK-1.3.				
		Applies systems analysis				
		to resolve problematic situations in the				
		professional sphere.				
	UK-6	ID UK-6.1.	Principles of using in-	Use information, biblio-	Methods for solving	
	Capable	Assesses his personal,	formation, bibliographic	graphic resources, infor-	standard tasks of pro-	
	to define and implement	situational and temporary resources and	resources, information	mation and communica-	fessional activity using	
	priorities for one's own	uses them optimally to complete the as-	and communication	tion technologies taking	information, biblio-	
	activities and ways to im-	signed task.	technologies, taking	into account the basic	graphic resources, med-	
2	prove them based on	ID UK-6.3.	into account the basic	requirements of infor-	ical and biological ter-	
2	self-assessment and life-	Carries out	requirements of infor-	mation security	minology, information	
	long learning	critical self-analysis of the results of one's	mation security, medical		and communication	
		own activities.	and biological terminol-		technologies and taking	
			ogy.		into account the basic	
					requirements of infor-	
					mation security	
		General profession	onal competencies			

3	OPK-4. Capable of using medical devices provided for by the procedure for provid- ing medical care, as well as conducting patient ex- aminations to establish a diagnosis	ID OPK-4.1. Uses modern medical technologies, spe- cialized equipment and medical products, disinfectants, drugs, including immunobi- ological and other substances and their combinations when solving professional problems from the standpoint of evi- dence-based medicine. ID OPK-4.3. Interprets the results of the most common methods of instrumental, laboratory and functional diagnostics, thermometry to identify pathological processes. ID OPK-4.4. Has a command of general methods clinical examination of patients of differ- ent ages. ID OPK-4.5. Formulates a preliminary diagnosis and clinical diagnosis according to ICD.	Types and methods of application of medical devices provided for by the procedures for providing medical care in ophthalmology	Use medical products provided for by the pro- cedures for providing medical care	Methods of using medi- cal products provided for by the procedures for providing medical care
4	OPK-5. Capable of assessing morphofunctional, physi- ological states and patho- logical processes in the human body to solve pro- fessional problems	ID OPK-5.1. Knows the functional systems of the hu- man body, their regulation and self-regu- lation when interacting with the external environment in normal conditions and during pathological processes. ID OPK-5.2. Knows the etiology, pathogenesis, mor- phogenesis, pathomorphosis of disease de- velopment, and the basic concepts of no- sology. ID OPK-5.3.	Methods of analyzing the results of one's own activities. Concept and types professional mistakes.	Analyze the results of your own activities to prevent professional mistakes	Methods of analyzing the results of one's own activities to prevent pro- fessional mistakes

		Knows the indicators			
		morphofunctional, physiological state of a			
		healthy person and is able to measure/de-			
		termine them.			
		ID OPK-5.4.			
		Applies indicators			
		morphofunctional,			
		physiological state			
		and pathological process for examination			
		of the human body for the purpose of			
		establishing a diagnosis, appointment			
		treatment and monitoring its effectiveness			
		and security.			
		ID OPK-5.5.			
		Analyzes and interprets			
		macroscopic and microscopic changes in			
		normal and pathologically altered tissues			
		and organs.			
		ID OPK-5.6.			
		Interprets the results of biopsy and surgical			
		material studies to solve professional prob-			
		lems and formulate a diagnosis in accord-			
		ance with the ICD.			
		ID OPK-7.1.	Nomenclature of medic-	Use medicinal prepara-	Methods of using me-
		Selects a drug based on the totality of its	inal products, pharma-	tions and other sub-	dicinal preparations and
		pharmacokinetic and pharmacodynamic	codynamics, pharmaco-	stances and their combi-	other substances and
	OPK-7	characteristics for the treatment of pa-	kinetics, indications and	nations when solving	their combinations in
	Able to prescribe treat-	tients with various nosological forms in	contraindications for	professional problems	solving professional
5	ment and monitor its ef-	outpatient and inpatient settings.	use, main mechanisms		problems
	factiveness and safety	ID OPK-7.2.	of action, clinical ef-		
	rectiveness and safety	Selects the optimal minimum of the most	fects. Treatment regi-		
		effective means, using convenient meth-	mens.		
		ods of their			
		applications.			

		ID OPK-7.4.			
		Prescribes medications for the treatment			
		of diseases and correction of pathological			
		conditions, based on the characteristics of			
		the pharmacokinetics and pharmacody-			
		namics of drugs.			
		ID OPK-7.5.			
		Takes into account morphofunctional fea-			
		tures, physiological states and pathologi-			
		cal processes in the human body when			
		choosing over-the-counter drugs and			
		other pharmacy products			
		assortment.			
		ID OPK-7.6.			
		Analyzes the results of possible drug in-			
		teractions when using various drugs in			
		combination.			
		ID OPK-7.7.			
		Assesses the effectiveness and safety of			
		drug therapy using a combination of clin-			
		ical, laboratory, instrumental and other			
		diagnostic methods.			
		ID OPK-10.2.	Principles and methods	To implement a set of	A set of measures aimed
		Performs effective search	of preserving and	measures aimed at pre-	at maintaining and
	OPK-10	information necessary for solving prob-	strengthening children's	serving and strengthen-	strengthening the health
	Able to understand the	lems of professional activity, using legal	health, including the	ing the health of chil-	of children and includ-
	principles of operation of	reference systems and professional phar-	formation of a healthy	dren and including the	ing the formation of a
6	modern information tech-	maceutical databases.	lifestyle, prevention of	formation of a healthy	healthy lifestyle, pre-
0	nologies and use them to	ID OPK-10.3.	the occurrence and (or)	lifestyle, prevention of	vention of the occur-
	solve problems of profes-	Uses specialized software for mathemati-	spread of diseases, their	the occurrence and (or)	rence and (or) spread of
	sional activity	cal processing of observational and ex-	early diagnosis, identifi-	spread of diseases, their	diseases, their early di-
	sional activity	perimental data when solving problems in	cation of the causes and	early diagnosis, identifi-	agnosis, identification
		professional activities.	conditions of their oc-	cation of the causes and	of the causes and condi-
					tions of their occurrence

			currence and develop-	conditions of their oc-	and development as
			ment as well as aimed	currence and develop-	well as aimed at elimi-
			at eliminating the harm-	ment as well as aimed	nating the harmful ef-
			ful effects of environ-	at eliminating the harm-	fects of environmental
			mental factors on chil-	ful effects of environ-	factors on the health of
			dren's health	mental factors on chil-	children
			dien 5 neurin	dren's health	
	OPK-11	ID OPK 11.1.	Types and methods of	Maintain medical rec-	Methods of maintaining
	Capable	Apply modern methods of collecting and	maintaining medical	ords independently	basic medical records
	prepare and apply scien-	processing information, conduct statisti-	records	1 5	
	tific, scientific-produc-	cal analysis of the obtained data in a pro-			
	tion, design, organiza-	fessional manner			
	tional-managerial and	areas and interprets			
	regulatory documenta-	results for solving professional problems.			
	tion in the healthcare sys-	ID OPK-11.2.			
	tem	Identifies and analyzes problem situa-			
		tions, carries out search and selection of			
7		scientific, regulatory and legal			
/		organizational and administrative docu-			
		mentation in accordance			
		with given goals.			
		ID OPK-11.4.			
		Conducts			
		scientific and practical			
		research,			
		analyzes information using the historical			
		method and prepares publications based			
		on the results			
		research.			
		Professiona	ll competencies		
	PC-2.	ID PC-2.1 .	Methods of collecting	Collect and analyze	Methods of collecting
8	Capable of collecting and	Establishes rapport with the patient.	and analyzing patient	patient complaints,	and analyzing patient
0	analyzing	ID PC- 2.2.	complaints, anamnesis	medical history data,	complaints, data from
				examination results,	his anamnesis, results

	complaints, anamnesis of	Collects complaints, specifies them, high-	data, examination re-	laboratory, instrumen-	of examination, labor-
	life and anamnesis	lighting the main and secondary ones.	sults, laboratory, instru-	tal, pathological and	atory, instrumental,
	diseases	ID PC-2 .3.	mental, pathological -	other studies in order	pathological -anatom-
	patient for the purpose	Collects and analyzes information about	anatomical and other	to recognize the con-	ical and other studies
	establishments	the onset of the disease, the presence of	studies for the purpose	dition or establish the	in order to recognize
	diagnosis	risk factors, the dynamics of the develop-	of recognizing a condi-	presence or absence of	the condition, or es-
		ment of symptoms and the course of the	tion or establishing the	a disease	tablish the fact of the
		disease.	presence or absence of a		presence or absence of
		ID PC-2 .4.	disease		a disease
		Analyzes the timing of the first and re-			
		peated requests for medical care, the vol-			
		ume of therapy provided, and its effec-			
		tiveness.			
		PC ID -2.5 .			
		Collects and evaluates information about			
		the patient's medical history, including			
		data on past illnesses, injuries and surger-			
		ies, hereditary, professional and epidemi-			
		ological history.			
	PC-3.	ID PC-3.1.	The main pathological	To diagnose the main	Methods of diagnos-
	Capable of conducting	Performs a complete physical	conditions, symptoms,	pathological condi-	ing the main patholog-
	physical	examines the patient (inspection, palpa-	syndromes of eye dis-	tions, symptoms, syn-	ical conditions, symp-
	examination of the pa-	tion, percussion, auscultation) and inter-	eases, nosological forms	dromes of eye dis-	toms, disease syn-
	tient, analyze the results	prets the results	in accordance with the	eases, nosological	dromes, nosological
	of additional examination	ID PC-3.2 .	International Statistical	forms in accordance	forms in accordance
	methods in order to es-	Justifies the necessity, volume,	Classification of Dis-	with the International	with the International
9	tablish	diagnostic sequence	eases and Related	Statistical Classifica-	Statistical Classifica-
	diagnosis	measures (laboratory, instrumental) and	Health Problems – X re-	tion of Diseases and	tion of Diseases and
		referral of the patient to specialist doctors	vision, adopted by the	Related Health Prob-	Related Health Prob-
		ID PC-3.3.	43rd World Health As-	lems – 10th revision,	lems – 10th revision,
		Analyzes the results of the patient's ex-	sembly, Geneva, 1989.	adopted by the 43rd	adopted by the 43rd
		amination, and, if necessary, justifies and		World Health Assem-	World Health Assem-
		plans the scope of additional research.		bly, Geneva, 1989.	bly, Geneva, 1989.
		ID PC-3.4.			

		Interprets and analyzes			
		the results of collecting information about			
		the patient's illness data obtained during			
		laboratory and instrumental examinations			
		and during consultations with specialist			
		doctors and if pacesary justifies and			
		doctors, and, if necessary, justifies and			
		plans the scope of additional research.			
		ID PC-3.5.			
		Performs early diagnostics of internal or-			
		gan diseases. Establishes a diagnosis tak-			
		ing into account the current international			
		statistical classification of diseases and			
		related health problems (ICD)			
		ID PC-3.6.			
		Conducts differential			
		diagnostics of internal organ diseases			
		from other diseases			
	PC-4.	ID PC-4.1.	The procedure and	Provide primary health	Methods of provid-
	Capable	Determines medical indications for emer-	principles of provid-	care to children with	ing primary health
	determine indications for	gency care, including	ing primary health	sudden, acute eye dis-	care to children with
			8 F 5	· ·	
	hospitalization, indica-	emergency specialized medical care	care to children with	eases, conditions, ex-	sudden, acute eye
	hospitalization, indica- tions for providing emer-	emergency specialized medical care ID PC-4.2.	care to children with sudden, acute eye dis-	eases, conditions, ex- acerbation of chronic	sudden, acute eye diseases, conditions,
	hospitalization, indica- tions for providing emer- gency, including emer-	emergency specialized medical care ID PC-4.2. Refer the patient for specialized medical	care to children with sudden, acute eye dis- eases, conditions, ex-	eases, conditions, ex- acerbation of chronic eye diseases that are	sudden, acute eye diseases, conditions, exacerbation of
	hospitalization, indica- tions for providing emer- gency, including emer- gency specialized, medi-	emergency specialized medical care ID PC-4.2. Refer the patient for specialized medical care in an inpatient setting or in a day	care to children with sudden, acute eye dis- eases, conditions, ex- acerbation of chronic	eases, conditions, ex- acerbation of chronic eye diseases that are not accompanied by a	sudden, acute eye diseases, conditions, exacerbation of chronic eye diseases
	hospitalization, indica- tions for providing emer- gency, including emer- gency specialized, medi- cal care	emergency specialized medical care ID PC-4.2. Refer the patient for specialized medical care in an inpatient setting or in a day hospital setting if there are medical indi-	care to children with sudden, acute eye dis- eases, conditions, ex- acerbation of chronic eye diseases that are	eases, conditions, ex- acerbation of chronic eye diseases that are not accompanied by a threat to the patient's	sudden, acute eye diseases, conditions, exacerbation of chronic eye diseases that are not accom-
10	hospitalization, indica- tions for providing emer- gency, including emer- gency specialized, medi- cal care	emergency specialized medical care ID PC-4.2. Refer the patient for specialized medical care in an inpatient setting or in a day hospital setting if there are medical indi- cations in accordance with the current	care to children with sudden, acute eye dis- eases, conditions, ex- acerbation of chronic eye diseases that are not accompanied by a	eases, conditions, ex- acerbation of chronic eye diseases that are not accompanied by a threat to the patient's life and do not require	sudden, acute eye diseases, conditions, exacerbation of chronic eye diseases that are not accom- panied by a threat to
10	hospitalization, indica- tions for providing emer- gency, including emer- gency specialized, medi- cal care	emergency specialized medical care ID PC-4.2. Refer the patient for specialized medical care in an inpatient setting or in a day hospital setting if there are medical indi- cations in accordance with the current procedures for providing medical care,	care to children with sudden, acute eye dis- eases, conditions, ex- acerbation of chronic eye diseases that are not accompanied by a threat to the patient's	eases, conditions, ex- acerbation of chronic eye diseases that are not accompanied by a threat to the patient's life and do not require emergency medical	sudden, acute eye diseases, conditions, exacerbation of chronic eye diseases that are not accom- panied by a threat to the patient's life and
10	hospitalization, indica- tions for providing emer- gency, including emer- gency specialized, medi- cal care	emergency specialized medical care ID PC-4.2. Refer the patient for specialized medical care in an inpatient setting or in a day hospital setting if there are medical indi- cations in accordance with the current procedures for providing medical care, clinical guidelines (treatment protocols)	care to children with sudden, acute eye dis- eases, conditions, ex- acerbation of chronic eye diseases that are not accompanied by a threat to the patient's life and do not require	eases, conditions, ex- acerbation of chronic eye diseases that are not accompanied by a threat to the patient's life and do not require emergency medical care	sudden, acute eye diseases, conditions, exacerbation of chronic eye diseases that are not accom- panied by a threat to the patient's life and do not require emer-
10	hospitalization, indica- tions for providing emer- gency, including emer- gency specialized, medi- cal care	emergency specialized medical care ID PC-4.2. Refer the patient for specialized medical care in an inpatient setting or in a day hospital setting if there are medical indi- cations in accordance with the current procedures for providing medical care, clinical guidelines (treatment protocols) on issues of providing medical care, tak-	care to children with sudden, acute eye dis- eases, conditions, ex- acerbation of chronic eye diseases that are not accompanied by a threat to the patient's life and do not require emergency medical	eases, conditions, ex- acerbation of chronic eye diseases that are not accompanied by a threat to the patient's life and do not require emergency medical care	sudden, acute eye diseases, conditions, exacerbation of chronic eye diseases that are not accom- panied by a threat to the patient's life and do not require emer- gency medical care
10	hospitalization, indica- tions for providing emer- gency, including emer- gency specialized, medi- cal care	emergency specialized medical care ID PC-4.2. Refer the patient for specialized medical care in an inpatient setting or in a day hospital setting if there are medical indi- cations in accordance with the current procedures for providing medical care, clinical guidelines (treatment protocols) on issues of providing medical care, tak- ing into account the standards of medical	care to children with sudden, acute eye dis- eases, conditions, ex- acerbation of chronic eye diseases that are not accompanied by a threat to the patient's life and do not require emergency medical care	eases, conditions, ex- acerbation of chronic eye diseases that are not accompanied by a threat to the patient's life and do not require emergency medical care	sudden, acute eye diseases, conditions, exacerbation of chronic eye diseases that are not accom- panied by a threat to the patient's life and do not require emer- gency medical care
10	hospitalization, indica- tions for providing emer- gency, including emer- gency specialized, medi- cal care	emergency specialized medical care ID PC-4.2. Refer the patient for specialized medical care in an inpatient setting or in a day hospital setting if there are medical indi- cations in accordance with the current procedures for providing medical care, clinical guidelines (treatment protocols) on issues of providing medical care, tak- ing into account the standards of medical care	care to children with sudden, acute eye dis- eases, conditions, ex- acerbation of chronic eye diseases that are not accompanied by a threat to the patient's life and do not require emergency medical care	eases, conditions, ex- acerbation of chronic eye diseases that are not accompanied by a threat to the patient's life and do not require emergency medical care	sudden, acute eye diseases, conditions, exacerbation of chronic eye diseases that are not accom- panied by a threat to the patient's life and do not require emer- gency medical care
10	hospitalization, indica- tions for providing emer- gency, including emer- gency specialized, medi- cal care	emergency specialized medical care ID PC-4.2. Refer the patient for specialized medical care in an inpatient setting or in a day hospital setting if there are medical indi- cations in accordance with the current procedures for providing medical care, clinical guidelines (treatment protocols) on issues of providing medical care, tak- ing into account the standards of medical care ID PC-4.3.	care to children with sudden, acute eye dis- eases, conditions, ex- acerbation of chronic eye diseases that are not accompanied by a threat to the patient's life and do not require emergency medical care	eases, conditions, ex- acerbation of chronic eye diseases that are not accompanied by a threat to the patient's life and do not require emergency medical care	sudden, acute eye diseases, conditions, exacerbation of chronic eye diseases that are not accom- panied by a threat to the patient's life and do not require emer- gency medical care
10	hospitalization, indica- tions for providing emer- gency, including emer- gency specialized, medi- cal care	emergency specialized medical care ID PC-4.2. Refer the patient for specialized medical care in an inpatient setting or in a day hospital setting if there are medical indi- cations in accordance with the current procedures for providing medical care, clinical guidelines (treatment protocols) on issues of providing medical care, tak- ing into account the standards of medical care ID PC-4.3. Uses medical products in accordance	care to children with sudden, acute eye dis- eases, conditions, ex- acerbation of chronic eye diseases that are not accompanied by a threat to the patient's life and do not require emergency medical care	eases, conditions, ex- acerbation of chronic eye diseases that are not accompanied by a threat to the patient's life and do not require emergency medical care	sudden, acute eye diseases, conditions, exacerbation of chronic eye diseases that are not accom- panied by a threat to the patient's life and do not require emer- gency medical care

		of medical care, clinical guidelines (treat-			
		ment protocols) on issues of providing			
		medical care, care taking into account the			
		standards of medical care			
	PC-5.	ID PC-5. 1.	Principles of manage-	Treat patients with	Methods of manage-
	Able to prescribe treat-	Draws up a treatment plan for the patient	ment and treatment of	various nosological	ment and treatment of
	ment to patients	taking into account the diagnosis, age of	patients with various	forms in outpatient	patients with various
		the patient, clinical picture of the disease,	nosological forms in	and day hospital set-	nosological forms in
		presence of complications, concomitant	outpatient and day hos-	tings	outpatient and day
		pathology, in accordance with the current	pital settings		hospital settings
		procedures for the provision of medical			
		care, clinical recommendations (treat-			
		ment protocols) on issues of providing			
		medical care, taking into account the			
		standards of medical care			
		ID PC-5. 2.			
		Prescribes medications, medical products			
		and therapeutic nutrition taking into ac-			
11		count the diagnosis,			
11		age and clinical picture of the disease in			
		accordance with the current procedures			
		for the provision of medical care, clinical			
		recommendations, taking into account the			
		standards			
		medical care			
		ID PC-5. 3.			
		Prescribes non-drug treatment			
		treatment taking into account the diagno-			
		sis, age and clinical picture of the disease			
		in accordance with the current procedures			
		for the provision of medical care, clinical			
		recommendations,			
		taking into account the standards of med-			
		ical care			

		ID PC-5. 4.			
		Provides palliative care in collaboration			
		with specialist doctors and other health			
		care workers			
		ID PC-5. 5.			
		Organizes personalized treatment for pa-			
		tients, including pregnant women, elderly			
		and senile patients			
	PC-6.	ID PC-6.1.	Principles of managing	Determine the tactics	Methods for determin-
	Capable of monitoring	Assesses the effectiveness and safety of	patients with various	of managing patients	ing the tactics of man-
	the effectiveness and	the use of drugs, medical devices and	nosological forms. Prin-	with various nosologi-	aging patients with
	safety of the therapy be-	therapeutic nutrition and other treatment	ciples of analysis and	cal forms. Analyze	various nosological
	ing administered	methods	public presentation of	and publicly present	forms. Methods for
12		ID PC-6.2.	medical information.	medical information	analyzing and publicly
		Takes into account	Fundamentals of evi-	based on evidence-	presenting medical in-
		pharmacodynamics and pharmacokinetics	dence-based medicine	based medicine	formation. Fundamen-
		of the main groups of drugs, prevents the			tals of evidence-based
		development of adverse drug reactions,			medicine
		and corrects them if they occur.			

Item No.	Section name	Code of the competence being formed
	Anatomy, physiology, methods of studying	UK-1; UK-6; OPK-4; OPK-5; OPK-
1	the organ of vision.	7; OPK-10; OPK-11; PC-2; PC-3;
		PC-4; PC-5; PC-6
	Inflammatory diseases and traumatic injuries	UK-1; UK-6; OPK-4; OPK-5; OPK-
2	of the visual organ.	7; OPK-10; OPK-11; PC-2; PC-4;
		PC-3; PC-5; PC-6
	Infectious granulomas and neoplasms of the	UK-1; UK-6; OPK-4; OPK-5; OPK-
3	visual organ.	7; OPK-10; OPK-11; PC-2; PC-3;
	_	PC-4; PC-5; PC-6

Modules of the discipline and the code of the competence being formed

1.7 Stages of competencies development and description of assessment scales



1.8 Forms of training organization and types of control

Form of organization of	Brief		
students' training	characteristic		
Lacturas	Lecture material contains key And most problematic questions disciplines		
Lectures	, most significant V preparation specialist .		
	Intended For analysis (consolidation) of theoretical provisions And con-		
Practical classes	trol over their assimilation With subsequent application received		
	knowledge V in the course study of the topic.		

	- solution situational tasks and exercises followed by discussion,
	- interactive survey;
.	- execution creative tasks,
Interactive forms of advantion	- small group method,
Torms of education	- discussions,
	- online course of the discipline in the Moodle system,
	- testing in the Moodle system .
	- Preparation or al messages and poster presentations for speeches at a
Participation in the depart-	student club or scientific conference;
ment's research work, stu-	- writing theses and abstracts on the chosen scientific field;
dent circle and conferences	- preparation of a literature review using educational, scientific, refer-
	ence literature and Internet sources .
Types of control	Brief description
	Testing theoretical knowledge and practical skills developed by the phys-
	ics program in secondary (complete) general education institutions.
	The entrance knowledge control includes:
Incoming inspection	- testing in the Moodle system (test of incoming knowledge control),
	- solving situational problems and exercises.
	I he results of the incoming inspection are systematized, analyzed and used by the teaching staff of the department to develop measures to improve
	and undate the teaching methods of the discipline
	Current knowledge control includes:
	- checking the solution of situational problems and exercises com-
	pleted independently (extracurricular independent work);
	- assessment of the assimilation of theoretical material (oral survey and
	computer testing);
Current control	- control over the technique of performing the experiment during prac-
	tical classes and drawing up the protocol;
	- testing in the Moodle system on all topics of the discipline (tests in-
	clude questions of a theoretical and practical nature);
	- individual assignments (practical and theoretical) for each topic of
	the discipline being studied.
	The midterm assessment is presented as a test with a grade, which students
	The test includes the following stages:
	- assessment of knowledge of theoretical material (oral survey and in
Intermediate	terview):
certification	- testing in the Moodle system (interim assessment test):
	- check of assimilation practical skills And skills :
	- solving situational problems and everyises on each tonic of the disci
	pline studied.

2. STRUCTURE AND CONTENT OF THE DISCIPLINE

No. p/p	Types of educational work	Total hours	Semester 9
1	Lectures	20	20
2	Practical classes	52	52
3	Independent work of students	36	36
	Total labor intensity in hours	108	108
	Total workload in credit units	3	3

2.1 Scope of the discipline and types of educational activities

Item No.	Topics and content of lectures	Codes being formed competencies	Labor intensity (hours)
1	Introduction to ophthalmology. History of ophthalmology. Anatomy of the visual organs. Definition of ophthalmology as a science, its goals and objectives. Allocation of ophthalmology as an independent science. Paths of its development. History of development of domestic ophthalmology. Russian school of ophthalmologists (T.I. Eroshevsky , V.P. Filatov, E.S. Avetisov, E.I. Kovalevsky, Yu.Z. Rosenblum , M.M. Krasnov, S.N. Fedorov). Achievements of ophthalmological science in recent years. The eye and its role in the vital activity of the body. The eye as a link in the photoenergetic or optical-vegetative system of the body (eye-hypothalamus-pituitary gland). Blindness and its social significance (occupational blindness, reversible and irreversible blindness). The relationship of diseases of the organ of vision with other diseases of the body. The role of ophthalmology in the early diagnostics of general diseases (rheumatism, tuberculosis, blood diseases, etc.) Anatomy of the visual organ. The structure of the visual analyzer, the structure of the peripheral section - the eyeball, its membranes - the detailed structure and physiological function of each of them. Give several examples from practical ophthalmology to emphasize the importance of the function of some sections of the eye membranes. The contents of the visual function (formed central vision, peripheral vision, light perception , color perception). Anatomical and physiological foundations and practical significance of central vision. Visual acuity. Angle of view. Principles of constructing tables for determining visual acuity. The Snellen-Donders formula for determining visual acuity. Control methods for determining visual acuity in cases of dissimulation, aggravation.	UK - 1, 6 OPK - 5, 7, 11 PC - 2, 3, 4, 5, 6	2
2	 Physiological optics. Refractogenesis, age-related features. Refraction. Accommodation. Astigmatism . Brief information on optics: optical system, focus, diopter as a unit of refraction measurement. Optical system of the eye. Concept of physical and clinical refraction. Types of clinical refraction. Clinic of emmetropia, hypermetropia, myopia. Anisometropia . High progressive myopia, its clinic. Pathogenesis of myopia. Methods of myopia prevention, treatment of progressive myopia. Concept of astigmatism. Principles of ametropia correction. Accommodation, mechanism of accommodation. Causes and clinical manifestations of accommodative asthenopia. 	UK - 6 OPK - 4, 5, 10, 11 PC - 2, 3, 4, 5, 6	2

	Muscular asthenopia. Age-related changes in accommodation. Accommodation spasm and ac- commodation paralysis. Corrective glasses. Concept of contact and intraocular lenses, indica- tions for their prescription. Correction of presbyopia. Surgical methods of correction of refrac- tive errors, indications for them.		
3	Diseases of the eyelids. Diseases of the lacrimal organs. Classification. Diagnostics. Treat- ment. Conjunctivitis. Three sections of the conjunctiva, their distinctive features. Inflammatory diseases of the con- junctiva: bacterial - acute and chronic, allergic (medicinal, spring catarrh, electrophthalmia). Acute bacterial conjunctivitis of exogenous origin (acute epidemic conjunctivitis Koch- Weeks , pneumococcal, gonococcal). Acute bacterial conjunctivitis of endogenous origin (measles, diphtheria, tuberculosis-allergic, adenovirus). Chronic conjunctivitis (professional conjunctivitis; conjunctivitis associated with ametropia, Morax-Axenfeld conjunctivitis , causes, clinical picture, treatment principles). Complications of conjunctivitis: keratitis, keratouveitis . Degenerative diseases of the conjunctiva - pinguecula , pterygium . Etiology of trachoma. Epidemiology and spread of trachoma. History of the fight against tra- choma. Clinical picture of trachoma, its stage. Pannus (thin, vascular and fleshy). Diagnostics. Complications of trachoma (acute conjunctivitis, corneal ulcer, dacryocystitis). Consequences of trachoma (trichiasis, eversion of the eyelids, symblepharon , xerosis of the conjunctiva and cornea). Differential diagnosis of trachoma with folliculosis , follicular and adenoviral con- junctivitis. Prevention of trachoma, organizational forms of its control. Treatment of trachoma (medicinal, follicle extraction, surgical). Treatment of trachoma complications and conse- quences. Pathology of the tear-producing apparatus. Congenital anomalies of the lacrimal gland in children (absence, underdevelopment, ptosis). Diseases in children that may cause inflammation of the lacrimal gland. The main signs of dacryoadenitis. Diagnosis and treatment of dacryoadenitis. Neoplasm of the lacrimal gland (adenocarcinoma). Clinical picture, treat- ment, diagnostic methods, prognosis. Pathology of the lacrimal apparatus. Congenital and ac- quired changes in the lacrimal ducts. Absence or dislocation of lacrimal pun	UK - 1 OPK - 4, 5, 7, 10, 11 PC - 2, 3, 4, 5, 6	2
4	Pathology of the cornea and sclera. Anatomy of the cornea and sclera. Clinical properties of the normal cornea and sclera. General symptomatology of keratitis. Definition of keratitis and leukoma, differential diagnosis. Classification of keratitis - anatomical classification (prevalence, depth of location, vascularization)		2

	of the infiltrate, infiltrate with or without a defect). Etiology. Clinical forms of keratitis. Ulcer- ative keratitis. Creeping corneal ulcer, stages of development. Herpetic keratitis (simple vesic- ular, dendritic, disciform). Tuberculous-allergic phlyctenular keratitis. Deep tuberculous kera- titis. Parenchymatous syphilitic keratitis. Principles of treatment of superficial keratitis. Prin- ciples of treatment of deep keratitis. Mydriatics and miotics in keratitis. Consequences of ker- atitis. Conservative treatment of persistent corneal opacities (corneal transplant). Prevention of keratitis. Social significance of corneal diseases as a cause of blindness and decreased ability to work. Scleritis and episcleritis . Etiology, clinical picture, treatment.	UK - 1.6 OPK - 4, 5, 7, 10, 11 PC - 2, 3, 4, 5, 6	
5	Diseases of the vascular tract. Anatomy of the iris, ciliary body, choroid . Features of the blood supply to the choroid and their clinical significance. Features of the development of the vascular tract in newborns. The concept of uveitis, iritis, iridocyclitis, choroiditis . Etiology of iritis and iridocyclitis. General symptomatology of iritis and iridocyclitis. Features of the course of uveitis in children. Endophthalmitis , panophthalmitis. Prevention of iritis and iridocyclitis. Differential diagnosis of iridocyclitis from iritis and an acute attack of glaucoma. Consequences of iridocyclitis. Treatment of iridocyclitis (general treatment, principles of local treatment). Mydriatics , their mechanism of action. Treatment of the consequences of iridocyclitis. General symptomatology of choroiditis , etiology, prevention. Residual effects after choroiditis , treatment. Principles of treatment of choroiditis .	UK - 6 OPK - 4, 5, 7, 10, 11 PC - 2, 3, 4, 5, 6	2
6	Pathology of the lens. Cataract. Congenital cataracts. Anomalies in the development of the iris and choroid . Malignant neoplasms of the iris, ciliary body and choroid . Diagnostics of neoplasms of the vascular tract. Enucleation, evisceration of the eyeball, exenteration of the orbit. Types and frequency of lens pathology. Diagnostic meth- ods, modern principles of treatment. Anomalies in development. Changes in Marfan's disease , Marchesani's disease and other syndromes. Congenital cataracts. Frequency and causes of their occurrence. Classification of cataracts in children. The most common congenital cata- racts. Indications for surgical treatment depending on the size of the cataract, its location, visual acuity, age of the child. Treatment of obscuration amblyopia, correction of aphakia. Features of the correction of unilateral aphakia. Contact lenses. Intraocular lenses. Secondary (postoperative) cataracts. Causes, clinical picture, treatment. Complicated cataracts. Cataracts developing due to general diseases (diabetes), eye processes (myopia, glaucoma, uveitis, retinal detachment, eyeball trauma), as a result of mercury poisoning, nitrites, protein starvation, ionizing radiation, exposure to infrared rays, injuries, etc. Clinical picture of these types of cataracts. Cataract treatment depending on the etiology of the process and the degree	UK - 6 OPK - 4, 5, 7, 10, 11 PC - 2, 3, 4, 5, 6	2

	of lens opacity. Age-related cataracts. Clinic. Stages of cataract development. Treatment de- pending on the stage of cataract. Indications for surgery. Methods of cataract extraction; phacoemulsification. Aphakia, its signs, principles of aphakia correction for distance and near vision. Features of unilateral aphakia correction. Intraocular correction, contact lenses.		
7	Pathology of intraocular pressure. Glaucoma. Circulation of aqueous humor. Drainage system of the eye. Normal intraocular pressure. Reg- ulation of intraocular pressure. Daily variations in intraocular pressure. Symptom complex of glaucoma. Classification of glaucoma: congenital, childhood, juvenile, primary and secondary glaucoma. Types of congenital glaucomas and methods of their treatment. Differential diagno- sis of congenital glaucoma and megalocornea . Classification of primary glaucoma. Open-an- gle glaucoma, pathogenesis, clinical features. Differential diagnosis of open-angle glaucoma from age-related cataract. Closed -angle glaucoma, pathogenesis, clinical features. Differential diagnosis of closed-angle glaucoma from open-angle glaucoma. Acute attack of glaucoma, pathogenesis, clinical features. Principles of treatment of acute attack of glaucoma. Differential diagnosis of acute attack of glaucoma with iridocyclitis. Secondary glaucoma. Role of damage, inflammation, tumor processes of the eye in occurrence. Features of the course of the process and modern methods of treatment. Early diagnostics of glaucoma (daily fluctuations of intra- ocular pressure, tonography). Glaucoma treatment methods. Drug treatment of glaucoma. Miotics , their mechanism of ac- tion, principles of application. Use of carbonic anhydrase inhibitors in glaucoma. Osmotherapy . Methods of general treatment of primary glaucoma (vitamin therapy, tissue therapy, vasodi- lators, antisclerotic agents). Work and life regimen of patients with glaucoma. Surgical treat- ment of primary glaucoma, principles of surgical treatment, indications for antiglaucoma op- erations.	UK - 6 OPK - 4, 5, 7, 10, 11 PC - 2, 3, 4, 5, 6	2
8	Injuries to the organ of vision. Place of eye trauma in general traumatism. Prevalence, seasonality, geography and predominant causes and types of eye injuries in people of different ages. Frequency of household, school and industrial injuries. Classification of eye injuries by etiology, localization, severity, presence and properties of foreign bodies, etc. Diagnostic methods. Main types of first aid for eye injuries. Treatment of complications. Prevention of eye trauma. Place in the structure and level of low vision and blindness. Non-penetrating eye wounds (cornea and conjunctiva) and first aid for them. Penetrating eye wounds, diagnostics, clinical picture. First aid and treatment for penetrating eye wounds. Complications of penetrating eye wounds: traumatic aseptic iridocyclitis, purulent iridocyclitis, endophthalmitis , panophthalmitis, phacogenic iridocyclitis,		2

	sympathetic ophthalmia. Pathogenesis, clinical picture of sympathetic ophthalmia (iridocy- clitis, neuroretinitis) and treatment. Foreign bodies of the conjunctiva, cornea. Penetrating wounds with intraocular foreign bodies. Diagnostics of foreign bodies in the eye and their lo- calization. Complications of penetrating eye wounds with intraocular foreign bodies: chalcosis , siderosis (clinical picture, treatment). First aid and treatment for penetrating wounds with intraocular foreign bodies. Consequences of penetrating eye wounds. Injury prevention. Burns of the eye and its adnexa, classification. Chemical and thermal burns, first aid and treatment. Burn prevention. Eye damage caused by ultraviolet rays (ophthalmia during electric welding, snow ophthalmia), clinical picture, treatment, prevention. Peculiarities of childhood injuries. Causes of childhood trauma, features (domestic nature of trauma, seasonality, age, gender, nature of damaging agents, severity, etc.). Frequency of penetrating injuries, severe complica- tions and outcomes. Measures for prevention and control of reduction of childhood eye trauma.	UK - 1, 6 OPK - 4, 5, 7, 10, 11 PC - 2, 3, 4, 5, 6	
9	Pathology of binocular vision. Strabismus: classification, clinical picture, treatment. Brief information on optics: optical system, focus, diopter as a unit of refraction measurement. Optical system of the eye. Concept of physical and clinical refraction. Types of clinical refrac- tion. Clinic of emmetropia, hypermetropia, myopia. Anisometropia . High progressive myopia, its clinic. Pathogenesis of myopia. Methods of myopia prevention, treatment of progressive myopia. Concept of astigmatism. Principles of ametropia correction. Accommodation, mech- anism of accommodation. Causes and clinical manifestations of accommodative asthenopia. Muscular asthenopia. Age-related changes in accommodation. Accommodation spasm and ac- commodation paralysis. Corrective glasses. Concept of contact and intraocular lenses, indica- tions for their prescription. Correction of presbyopia. Surgical methods of refractive error cor- rection, indications for them. Concept of binocular vision and fusion. Eye muscles, function, innervation. Mechanism of binocular vision. Corresponding and disparate points of the retina. Disturbances in binocular vision. Concomitant and paralytic strabismus. Signs of concomitant strabismus, causes of development. Role of accommodation and convergence discrepancy in strabismus development. Functional scotoma. Modern methods of functional and surgical treatment of concomitant strabismus. Methods of conservative treatment of strabismus (cor- rection of ametropia, direct and reverse occlusion, pleoptic and orthoptic treatment). Reasons for surgical treatment of strabismus. Prevention of concomitant strabismus. Paralytic strabis- mus, causes, principles of treatment. Differential diagnosis of paralytic and concomitant stra- bismus.	UK - 1 OPK - 4, 5, 7, 10, 11 PC - 2, 3, 4, 5, 6	2
10	Diseases of the retina and optic nerve. Tumors of the eyeball. Ophthalmological symp- toms in general diseases.		2

Classification of retinal diseases: vascular diseases, dystrophic processes, congenital anomalies		
of retinal development. General characteristics of pathological changes in the vessels and tissue		
of the retina. The place of diseases of the retina in the general structure of diseases of the organ		
of vision.		
Acute obstruction of the central retinal artery and its branches (spasm, thromboembolism).		
Etiological significance of rheumatic heart disease, atherosclerosis, obliterating endarteritis,	UK - 1, 6	
sepsis, air and fat embolism in diagnostic studies, pneumothorax, bone fractures. Ophthalmo-	OPK - 4, 5, 7, 10, 11	
logical picture, dynamics of visual functions. Emergency care, timing of its provision. Treat-	PC - 2, 3, 4, 5, 6	
ment, outcomes. Thrombosis of the central retinal vein and its branches. Etiological signifi-		
cance of hypertension, atherosclerosis, infectious and septic diseases of the body, coagulopa-		
thies, orbital neoplasms, injuries. Ophthalmological picture, dynamics of visual functions.		
Complications. Treatment methods (principles of anticoagulant therapy, laser treatment). Out-		
comes. Changes in the retina in hypertension and atherosclerosis. Pathogenesis, clinical picture		
of different stages of hypertensive retinopathy, age-related features of the ophthalmological		
picture. Complications, outcomes. The importance of fundus examination for diagnostics, eval-		
uation of treatment effectiveness, prognosis of the disease and prevention of complications,		
carried out by a general practitioner. Changes in the retina in diseases of the blood and hema-		
topoietic system (anemia, hemoblastoses, hemorrhagic diathesis, etc.) Prognostic value of eye		
symptoms in assessing the course of the underlying disease.		
Changes in the retina in diabetes. Pathogenesis, clinical picture of different stages of diabetic		
retinopathy, complications, outcomes. Principles of modern treatment (diet, new generation		
oral hypoglycemic agents, insulin preparations, angioprotectors, laser surgery of the retina,		
vitreoretinal surgery). The importance of fundus examination for diagnosis and evaluation of		
the effectiveness of diabetes treatment by an endocrinologist, prevention of complications.		
Retinopathy of prematurity: diagnosis, treatment. Retinal detachment. Etiology in children and		
adults. The role of localization and type of rupture in the clinical course of the disease. Oph-		
thalmological picture, dynamics of visual functions. Diagnostic methods. Timing and methods		
of modern surgical interventions. Prognosis. Expertise of working capacity. Pathology of the		
optic nerve. Classification of optic nerve pathology. Frequency of optic nerve diseases in chil-		
dren and adults.		
Total hours		20

Clinical practical classes in the discipline "Ophthalmology" are a mandatory section and represent a type of educational activity directly focused on the professional training of students. During practical classes, students acquire knowledge of clinical anatomy, physiology and methods of examining the organ of vision, master the principles of diagnosis and treatment of various pathological conditions and diseases of the organ of vision, master the skills of assessing the results of an ophthalmological examination, making a diagnosis, drawing up a plan for the examination and treatment of patients with pathology of the organ of vision, improve the ability to draw up an educational medical history and acquire skills in working in an examination room, dressing room and operating room.

No. p/p	Name of practical topics classes	Contents of practical classes	Codes being formed competencies and indicators their achievements	Types control	Labor intensity (hours)
1	Introduction to ophthal- mology. History of oph- thalmology. Anatomy and physiology of the organ of vision. The visual ana- lyzer and its functions.	Incoming inspection. Theoretical part: Definition and tasks of ophthalmology. Struc- ture and organization of work of ophthalmol- ogy department. Methods and techniques of examination of organ of vision. Practical part: Practicing skills in studying visual functions.	UK-1: ID 1.1., 1.2., 1.3 UK-6: ID 6.1., 6.3. OPK-4: ID 4.1, 4.3, 4.4, 4.5 OPK-5: ID 5.1, 5.2, 5.3, 5.4, 5.5, 5.6 OPK-7: ID 7.1, 7.2, 7.4, 7.5, 7.6, 7.7 OPK-10: ID 10.2., 10.3 OPK-11: ID 11.1., 11.2., 11.4. PC-2: ID 2.1, 2.2, 2.3, 2.4, 2.5 PC-3: ID 3.1, 3.2, 3.3, 3.4, 3.5, 3.6 PC-4: ID 4.1, 4.2, 4.3 PC-5: ID 5.1, 5.2, 5.3, 5.4, 5.5 PC-6: ID 6.1, 6.2	Solution tasks and exer- cises, testing in the Moodle system .	5.2
2	Physiological optics. Re- fractogenesis, age-related features. Refraction. Ac- commodation. Astigma- tism.	Theoretical part: Features of clinical, anatomy, physiology of the organ of vision. Methods of studying the organ of vision. Practical part: visometry skills .	UK-1: ID 1.1., 1.2., 1.3 UK-6: ID 6.1., 6.3. OPK-4: ID 4.1, 4.3, 4.4, 4.5 OPK-5: ID 5.1, 5.2, 5.3, 5.4, 5.5, 5.6 OPK-7: ID 7.1, 7.2, 7.4, 7.5, 7.6, 7.7 OPK-10: ID 10.2., 10.3 OPK-11: ID 11.1., 11.2., 11.4. PC-2: ID 2.1, 2.2, 2.3, 2.4, 2.5 PC-3: ID 3.1, 3.2, 3.3, 3.4, 3.5, 3.6 PC-4: ID 4.1, 4.2, 4.3	Frontal survey, solution situational tasks and exer- cises.	5.2

			PC-5. ID 51 52 53 54 55		
			PC-6: ID 6.1, 6.2		
		Theoretical part:	UK-1: ID 1.1., 1.2., 1.3		
		Features of clinical, anatomy, and physiology	UK-6: ID 6.1., 6.3.		
		of the visual organ.	OPK-4: ID 4.1, 4.3, 4.4, 4.5		5.2
		Practical part:	OPK-5: ID 5.1, 5.2, 5.3, 5.4, 5.5, 5.6		
	Diseases of the eyelids.	Practicing skills for examining the ocular ad-	OPK-7: ID 7.1. 7.2. 7.4. 7.5. 7.6. 7.7	Frontal survey.	
	Diseases of the lacrimal	nexa. External examination. Eversion of the	OPK-10: ID 10.2., 10.3	solution	
3	organs. Classification. Di-	upper evelid.	OPK-11: ID 11.1., 11.2., 11.4.	situational	
	agnostics. Treatment.		PC-2: ID 2.1, 2.2, 2.3, 2.4, 2.5	tasks.	
	Conjunctivitis.		PC-3: ID 3.1, 3.2, 3.3, 3.4, 3.5, 3.6		
			PC-4: ID 4.1, 4.2, 4.3		
			PC-5: ID 5.1, 5.2, 5.3, 5.4, 5.5		
			PC-6: ID 6.1, 6.2		
		Theoretical part:	UK-1: ID 1.1., 1.2., 1.3		
		Features of clinical, anatomy, physiology of	UK-6: ID 6.1., 6.3.		
		the cornea and sclera. Classification, etiology,	OPK-4: ID 4.1, 4.3, 4.4, 4.5		5.2
		pathogenesis, diagnostics, principles of ther-	OPK-5: ID 5.1, 5.2, 5.3, 5.4, 5.5, 5.6		
		apy.	OPK-7: ID 7.1, 7.2, 7.4, 7.5, 7.6, 7.7	Frontal survey,	
4	Corneal pathology and	Practical part:	OPK-10: ID 10.2., 10.3	solution	
4	sclera.	Patient supervision in the ophthalmology de-	OPK-11: ID 11.1., 11.2., 11.4.	situational	
		partment. Eye examination using lateral illu-	PC-2: ID 2.1, 2.2, 2.3, 2.4, 2.5	tasks.	
		mination and transmitted light.	PC-3: ID 3.1, 3.2, 3.3, 3.4, 3.5, 3.6		
			PC-4: ID 4.1, 4.2, 4.3		
			PC-5: ID 5.1, 5.2, 5.3, 5.4, 5.5		
			PC-6: ID 6.1, 6.2		
		Theoretical part:	UK-1: ID 1.1., 1.2., 1.3		
		Diseases of the vascular tract. Classification,	UK-6: ID 6.1., 6.3.		
		etiology, pathogenesis, diagnostics, principles	OPK-4: ID 4.1, 4.3, 4.4, 4.5	Frontal survey	5.2
5	Diseases of the vascular	of therapy.	OPK-5: ID 5.1, 5.2, 5.3, 5.4, 5.5, 5.6	Completing on	
	tract.	Practical part:	OPK-7: ID 7.1, 7.2, 7.4, 7.5, 7.6, 7.7	individual task	
		Supervision of patients in the ophthalmology	OPK-10: ID 10.2., 10.3	marviauai task.	
		department.	OPK-11: ID 11.1., 11.2., 11.4.		
			PC-2: ID 2.1, 2.2, 2.3, 2.4, 2.5		

			PC-3: ID 3.1, 3.2, 3.3, 3.4, 3.5, 3.6		
			PC-4: ID 4.1, 4.2, 4.3		
			PC-5: ID 5.1, 5.2, 5.3, 5.4, 5.5		
			PC-6: ID 6.1, 6.2		
		Theoretical part:	UK-1: ID 1.1., 1.2., 1.3		
		Cataract. Classification, etiology, pathogene-	UK-6: ID 6.1., 6.3.		
		sis, diagnostics, principles of therapy. Fea-	OPK-4: ID 4.1, 4.3, 4.4, 4.5		5.2
		tures of surgical treatment of cataract.	OPK-5: ID 5.1, 5.2, 5.3, 5.4, 5.5, 5.6		
		Practical part:	OPK-7: ID 7.1, 7.2, 7.4, 7.5, 7.6, 7.7	Frontal survey,	
6	Pathology of the lens.	Supervision of patients in the ophthalmology	OPK-10: ID 10.2., 10.3	solving situa-	
6	Cataract.	department.	OPK-11: ID 11.1., 11.2., 11.4.	tional prob-	
	Congenital cataracts.	Biomicroscopy .	PC-2: ID 2.1, 2.2, 2.3, 2.4, 2.5	lems.	
			PC-3: ID 3.1, 3.2, 3.3, 3.4, 3.5, 3.6		
			PC-4: ID 4.1, 4.2, 4.3		
			PC-5: ID 5.1, 5.2, 5.3, 5.4, 5.5		
			PC-6: ID 6.1, 6.2		
		Theoretical part:	UK-1: ID 1.1., 1.2., 1.3		
	Pathology of intraocular pressure. Glaucoma.	Pathology of intraocular pressure. Glaucoma.	UK-6: ID 6.1., 6.3.		
		Classification, etiology, pathogenesis, diag-	OPK-4: ID 4.1, 4.3, 4.4, 4.5		5.2
		nostics, principles.	OPK-5: ID 5.1, 5.2, 5.3, 5.4, 5.5, 5.6		
		Practical part:	OPK-7: ID 7.1, 7.2, 7.4, 7.5, 7.6, 7.7	Frontal survey	
7		Practical part:	OPK-10: ID 10.2., 10.3	solution of sit-	
/		Practicing skills in studying intraocular pres-	OPK-11: ID 11.1., 11.2., 11.4.	uational prob-	
		sure using the method of A.N. Maklakov. Su-	PC-2: ID 2.1, 2.2, 2.3, 2.4, 2.5	lems.	
		pervision of patients in the ophthalmology de-	PC-3: ID 3.1, 3.2, 3.3, 3.4, 3.5, 3.6		
		partment.	PC-4: ID 4.1, 4.2, 4.3		
			PC-5: ID 5.1, 5.2, 5.3, 5.4, 5.5		
			PC-6: ID 6.1, 6.2		
		Theoretical part:	UK-1: ID 1.1., 1.2., 1.3		
		Damage to the organ of vision Classification,	UK-6: ID 6.1., 6.3.	Frontal survey,	
Q	Injuries to the organ of vi-	etiology, pathogenesis, diagnostics, principles	OPK-4: ID 4.1, 4.3, 4.4, 4.5	solving situa-	5.2
0	sion.	of therapy.	OPK-5: ID 5.1, 5.2, 5.3, 5.4, 5.5, 5.6	tional prob-	
		Practical part:	OPK-7: ID 7.1, 7.2, 7.4, 7.5, 7.6, 7.7	lems.	
			OPK-10: ID 10.2., 10.3		

		Supervision of patients in the ophthalmology	OPK-11: ID 11.1., 11.2., 11.4.		
		department.	PC-2: ID 2.1, 2.2, 2.3, 2.4, 2.5		
			PC-3: ID 3.1, 3.2, 3.3, 3.4, 3.5, 3.6		
			PC-4: ID 4.1, 4.2, 4.3		
			PC-5: ID 5.1, 5.2, 5.3, 5.4, 5.5		
			PC-6: ID 6.1, 6.2		
		Theoretical part:	UK-1: ID 1.1., 1.2., 1.3		
		Binocular vision. Strabismus: Classification,	UK-6: ID 6.1., 6.3.		5.2
		etiology, pathogenesis, diagnostics, principles	OPK-4: ID 4.1, 4.3, 4.4, 4.5		
		of therapy.	OPK-5: ID 5.1, 5.2, 5.3, 5.4, 5.5, 5.6		
	Dincoular vision Strahig	Practical part:	OPK-7: ID 7.1, 7.2, 7.4, 7.5, 7.6, 7.7	Frontal survey,	
0	Binocular vision. Stradis-	Supervision of patients in the ophthalmology	OPK-10: ID 10.2., 10.3	solving situa-	
9	al picture treatment	department.	OPK-11: ID 11.1., 11.2., 11.4.	tional prob-	
	cai picture, treatment.		PC-2: ID 2.1, 2.2, 2.3, 2.4, 2.5	lems.	
			PC-3: ID 3.1, 3.2, 3.3, 3.4, 3.5, 3.6		
			PC-4: ID 4.1, 4.2, 4.3		
			PC-5: ID 5.1, 5.2, 5.3, 5.4, 5.5		
			PC-6: ID 6.1, 6.2		
		Theoretical part:	UK-1: ID 1.1., 1.2., 1.3		
		Indications and technique of the most fre-	UK-6: ID 6.1., 6.3.		
		quently performed surgical interventions in	OPK-4: ID 4.1, 4.3, 4.4, 4.5	Interview (as-	5.2
	Diseases of the retina and	ophthalmological practice.	OPK-5: ID 5.1, 5.2, 5.3, 5.4, 5.5, 5.6	sessment of	
		Practical part:	OPK-7: ID 7.1, 7.2, 7.4, 7.5, 7.6, 7.7	knowledge of	
10	eveball Ophthalmological	Verification of the acquisition of competencies	OPK-10: ID 10.2., 10.3	theoretical ma-	
10	symptoms in general dis-	(testing, interview on theoretical issues of the	OPK-11: ID 11.1., 11.2., 11.4.	terial) testing	
	eases	discipline, situational tasks, defense of the ed-	PC-2: ID 2.1, 2.2, 2.3, 2.4, 2.5	in the Moodle	
	cases.	ucational medical history, acceptance of prac-	PC-3: ID 3.1, 3.2, 3.3, 3.4, 3.5, 3.6	system	
		tical skills and abilities).	PC-4: ID 4.1, 4.2, 4.3	59500111.	
			PC-5: ID 5.1, 5.2, 5.3, 5.4, 5.5		
			PC-6: ID 6.1, 6.2		
Total hours					52

2.4 Interactive forms of learning

interactive methods are widely used in practical classes. training (interactive survey, work in small groups, computer testing, etc.), participation in educational and research and scientific research work.

N 0.	Clinical Topic practical classes	Labor intensity in hours	Interactive form of learning	Labor intensity in hours in % from the lesson
1	Introduction to ophthalmology. His- tory of ophthalmology. Anatomy and physiology of the organ of vi- sion. The visual analyzer and its functions.	3.8	Interactive survey	30 min (0.5 hours) 13.2%
2	Physiological optics. Refractogene- sis, age-related features. Refraction. Accommodation. Astigmatism.	3.8	Computer simulation "3 D sys- tem refractions"	30 min (0.5 hours) 13.2%
3	Diseases of the eyelids. Diseases of the lacrimal organs. Classification. Diagnostics. Treatment. Conjuncti- vitis.	3.8	Interactive survey	30 min (0.5 hours) 13.2%
4	Pathology of the cornea and sclera.	3.8	Computer simulation "3D Anatomy of the eye"	30 min (0.5 hours) 13.2%
5	Diseases of the vascular tract.	3.8	Role play	30 min (0.5 hours) 13.2%
6	Pathology of the lens. Cataract. Congenital cataracts.	3.8	Role play	30 min (0.5 hours) 13.2%
7	Pathology of intraocular pressure. Glaucoma.	3.8	Role play	30 min (0.5 hours) 13.2%
8	Injuries to the organ of vision.	3.8	Role play	30 min (0.5 hours) 13.2%
9	Binocular vision. Strabismus: clas- sification, clinical picture, treat- ment.	3.8	Role play	30 min (0.5 hours) 13.2%
10	Diseases of the retina and optic nerve. Tumors of the eyeball. Oph- thalmological symptoms in common diseases	3.8	Computer simulation "Radical operation on the eye "apple"	30 min (0.5 hours) 13.2%

2.5 Criteria for assessing students' knowledge

The assessment of learning outcomes is carried out in accordance with the "Regulations on the system for assessing the learning outcomes of students of the Federal State Budgetary Educational Institution of Higher Education Amur State Medical Academy of the Ministry of Health of Russia.

The basis for determining the level of knowledge, skills, and abilities are the assessment criteria - completeness and correctness:

- correct, precise answer;
- correct but incomplete or imprecise answer;
- incorrect answer; no answer.

When assigning marks, the classification of errors and their quality are taken into account:

- gross errors;
- similar errors;
- minor errors; shortcomings.

The success of students in mastering the topics of the discipline "Ophthalmology" is determined by the quality of mastering knowledge, skills and practical abilities, the assessment is given on a five-point scale: "5" - excellent, "4" - good, "3" - satisfactory, "2" - unsatisfactory.

Quality of development	Mark on a 5-point scale		
90 - 100%	"5"		
80 - 89%	"4"		
70 - 79%	"3"		
less than 70%	"2"		

Evaluation criteria

Incoming inspection

Conducted during the first lesson, includes: solving problems and exercises; testing in the Moodle system <u>https://educ-amursma.ru/mod/quiz/view.php?id=6067</u>. The test control includes questions on the ophthalmology course.

Current control

Current control includes initial and final control of knowledge.

Initial control **is** carried out by the teacher at the beginning of each lesson in the form of a frontal survey, solving problems and exercises.

Final control – includes control over the technique of performing the experiment and drawing up the protocol , written work on options, testing in the system <u>https://educ-amursma.ru/mod/quiz/view.php?id=18177</u>.

The final grade during the current knowledge assessment is given on the day of the lesson, as the arithmetic mean result for all types of activities provided for in the given lesson of the discipline's work program.

Criteria for assessing the oral response

- "5" (excellent) the student demonstrates deep and complete knowledge of the educational material, does not allow inaccuracies or distortions of facts when presenting, presents the material in a logical sequence, is well oriented in the presented material, and can provide justification for the judgments expressed.
- **"4" (good)** the student has mastered the educational material in full, is well oriented in the educational material, presents the material in a logical sequence, but makes inaccuracies when answering.
- **"3" (satisfactory)** the student has mastered the basic principles of the topic of the practical lesson, but when presenting the educational material, he/she makes inaccuracies, presents it incompletely

and inconsistently, requires leading questions from the teacher to present it, and has difficulty substantiating the judgments expressed.

- **"2" (unsatisfactory)** – the student has fragmented and unsystematic knowledge of the educational material, is unable to distinguish between the main and the secondary, makes mistakes in defining basic concepts, distorts their meaning, and cannot independently present the material.

Assessment criteria for the practical part

- **"5" (excellent)** the student has fully mastered the practical skills and abilities provided for by the course work program.
- **"4" (good)** the student has fully mastered the practical skills and abilities provided for in the course program, but makes some inaccuracies.
- **"3"** (satisfactory) the student has only some practical skills and abilities.
- **"2" (unsatisfactory)** the student demonstrates the performance of practical skills and abilities with gross errors.

Criteria for assessing independent extracurricular work:

- the level of student mastery of the educational material;
- the completeness and depth of general educational concepts, knowledge and skills on the topic being studied, to which this independent work relates;
- development of universal, general professional and professional competencies (ability to apply theoretical knowledge in practice).
- the problems were solved correctly, the exercises were completed, and the test assignments were answered accurately – "passed".
- not solved correctly, exercises were not completed correctly, test assignments were not answered accurately "failed".

Criteria for evaluation of educational medical history:

- "5" preparation of the educational medical history in accordance with the requirements.
- "4" in the educational medical history, the student makes inaccuracies in the description of the ophthalmological status, the formulation of the clinical diagnosis, the conduct of a differential diagnosis, the appointment of examination and treatment.
- "3" the medical history is filled with errors, written in illegible handwriting, is uninformative, there are inaccuracies in the formulation of the clinical diagnosis, its justification and differential diagnosis, and in the preparation of the examination and treatment plan.
- "2" the medical history is filled with gross errors, written in illegible handwriting, is uninformative, and gross errors have been made in all main sections.

Essay evaluation criteria:

- **"5" (excellent)** awarded to a student if he has prepared a complete, detailed, and formatted according to requirements, abstract on the chosen topic, presented his work in the form of a report with a computer presentation, and answered questions on the topic of the report;
- **"4" (good)** awarded to a student for a complete, detailed essay that is formatted according to requirements, but poorly presented;
- **"3"** (satisfactory) the abstract does not contain information on the issue being studied in full, is formatted with errors, and is poorly presented;
- **"2" (unsatisfactory)** given to a student if the abstract is not written, or is written with gross errors, the report and computer presentation are not prepared, or their content does not correspond to the topic of the abstract.

Working off disciplinary debts.

- 1. If a student misses a class for a valid reason, he/she has the right to make it up and receive the maximum grade provided for by the course work program for that class. A valid reason must be documented.
- 2. If a student misses a class for an unjustified reason or receives a "2" mark for all activities in the class, he/she is required to make it up. In this case, the mark received for all activities is multiplied by 0.8.
- 3. If a student is excused from a class at the request of the dean's office (participation in sports, cultural and other events), then he is given a grade of "5" for this class, provided that he submits a report on the completion of mandatory extracurricular independent work on the topic of the missed class.

Criteria for assessing midterm assessment.

Midterm assessment (credit) is designed to assess the degree of achievement of planned learning outcomes upon completion of the study of a discipline and allows for an assessment of the level and quality of its mastery by students.

The students' success in mastering the discipline is assessed on a 5-point scale: "5" – excellent, "4" – good, "3" – satisfactory, "2" – unsatisfactory.

"Excellent" - for the depth and completeness of mastery of the content of the educational material, in which the student easily navigates, for the ability to connect theoretical questions with practical ones, express and justify their judgments, correctly and logically present the answer; when testing, allows up to 10% of erroneous answers. Practical skills and abilities provided for by the working program of the discipline are fully mastered.

"Good" - the student has fully mastered the educational material, is oriented in it, correctly states the answer, but the content and form have some inaccuracies; during testing allows up to 20% of erroneous answers. Completely practical skills and abilities provided by the working program of the discipline, but allows some inaccuracies.

"**Satisfactory**" - the student has mastered the knowledge and understanding of the main provisions of the educational material, but presents it incompletely, inconsistently, does not know how to express and justify his/her judgments; during testing, allows up to 30% of erroneous answers. Has only some practical skills and abilities.

"Unsatisfactory" - the student has fragmented and unsystematic knowledge of the educational material, is unable to distinguish between the main and secondary, makes mistakes in defining concepts, distorts their meaning, presents the material in a disorderly and uncertain manner, and makes more than 30% of erroneous answers during testing. Performs practical skills and abilities with gross errors.

A student can claim to receive an "excellent" grade automatically if he/she has won a prize in disciplinary or interdisciplinary Olympiads (university, regional) and has an average grade for the current academic performance of at least 4.8 points . A student can refuse the "automatic" grade and take the test together with the group on a general basis.

Interim assessment is carried out through a system of passing a test in 3 stages:

- 1. Testing in the Moodle system <u>https://educ-amursma.ru/mod/quiz/view.php?id=18177</u>.
- 2. Completion of the practical part of the discipline in full: involves attending all practical classes, performing experiments with the execution of a protocol. Based on the assessments of the current control of knowledge, skills, and abilities in practical classes, the average score of current academic performance is calculated, which is recorded in the educational (electronic) journal. The average score of the current knowledge control is taken into account during the midterm assessment.
- 3. Delivery of practical skills (control of the level of development of competencies). Includes 10 options, containing 10 practical questions each.

Stages	Mark out of 5	Binary scale
U	point scale	

Assessment criteria for midterm assessment

Test control in the system " Moodle "	3-5	
Complete completion of the practical part	3-5	5 – "excellent"
of the course		4 - ''good''
Delivery of practical skills (control of the	3-5	3 – "satisfactory"
formation of competencies)		
Test control in the system " Moodle "	2	
Complete completion of the practical part	2	
of the course		2 – "unsatisfactory"
Delivery of practical skills (control of the	2	
formation of competencies)		

2.6 Independent work of students: in-class and out-of-class.

The organization of independent classroom work of students is carried out with the help of methodological instructions for students, which contain educational goals, a list of the main theoretical questions for study, a list of practical work and the methodology for conducting it, instructions for the presentation of the results obtained, their discussion and conclusions, assignments for self-control with standard answers, a list of recommended literature.

From 1/4 to 1/2 of the practical lesson time is allocated for independent work of students: conducting research, recording results, discussing them, formulating conclusions, completing individual assignments. The preparatory stage, or the formation of an approximate basis for actions, begins for students outside of class time when preparing for the practical lesson, and ends in class.

All subsequent stages are carried out in class. The stage of materialized actions (solving situational and clinical problems using an algorithm or without an algorithm, with an unknown answer in advance) is carried out independently. The teacher, if necessary, provides consultation, provides assistance and simultaneously monitors the quality of students' knowledge and their ability to apply existing knowledge to solve assigned problems.

Na	Taria	Time on	Forms of extracurricular activities independent work		
р/р	practical lesson	student for a lesson	Mandatory and identical for all students	At the student's choice (abstract on topics)	
1	Introduction to oph- thalmology. History of ophthalmology. Anat- omy and physiology of the organ of vision. The visual analyzer and its functions.	3.6 hours	Practicing inspection skills.	Abstract on the topic, stand design, making a model on the topic.	
2	Physiological optics. Refractogenesis, age- related features. Re- fraction. Accommoda- tion. Astigmatism.	3.6 hours	Preparation for practi- cal classes (reading lectures, basic and ad- ditional literature); drawing up a plan for answering questions.	Abstract on the topic, creation of a computer presentation, design of a stand, production of a dummy on the topic.	
3	Diseases of the eyelids. Diseases of the lacri- mal organs. Classifica- tion. Diagnostics.	3.6 hours	Preparation for practi- cal classes (reading lectures, basic and ad- ditional literature);	Abstract on the topic, creation of a computer presentation, design of a stand, production of a dummy on the topic.	

	Treatment. Conjuncti-		drawing up a plan for	
	Vitis.		answering questions.	
	Pathology of the cor-	0.61	Review of periodicals	Abstract on the topic, stand
4	nea and sclera.	3.6 hours	or Internet sources on	design, making a model on
			this issue.	the topic.
	Diseases of the vascu-		Preparation of educa-	An abstract on the topic, cre-
	lar tract.		tional medical history.	ating a computer presenta-
				tion, designing a stand, an ab-
				stract on a narrower problem,
5		3.6 hours		dent Scientific Society ro
				viewing periodicals or Inter
				net sources on this problem
				making a dummy on the
				topic
	Pathology of the lens		Preparation of educa-	An abstract on the topic cre-
	Cataract. Congenital		tional medical history.	ating a computer presenta-
	cataracts.		······································	tion, designing a stand, an ab-
				stract on a narrower problem,
6		2.6.1		preparing a report for the Stu-
0		3.6 nours		dent Scientific Society, re-
				viewing periodicals or Inter-
				net sources on this problem,
				making a dummy on the
				topic.
	Pathology of intraocu-		Preparation of educa-	An abstract on the topic, cre-
	lar pressure. Glau-		tional medical history.	ating a computer presenta-
	coma.			tion, designing a stand, an ab-
				preparing a report for the Stu
7		3.6 hours		dent Scientific Society re-
				viewing periodicals or Inter-
				net sources on this problem.
				making a dummy on the
				topic.
	Injuries to the organ of		Preparation of educa-	An abstract on the topic, cre-
	vision.		tional medical history.	ating a computer presenta-
				tion, designing a stand, an ab-
				stract on a narrower problem,
8		3.6 hours		preparing a report for the Stu-
-				dent Scientific Society, re-
				viewing periodicals or Inter-
				net sources on this problem,
				topic
	Binocular vision Stra-		Preparation of educa-	An abstract on the topic cre-
	bismus: classification		tional medical history	ating a computer presenta-
	clinical picture. treat-			tion, designing a stand, an ab-
	ment.	2.51		stract on a narrower problem.
9		3.6 hours		preparing a report for the Stu-
				dent Scientific Society, re-
				viewing periodicals or Inter-
				net sources on this problem,

				making a dummy on the topic.
10	Diseases of the retina and optic nerve. Tu- mors of the eyeball. Ophthalmological symptoms in general diseases.	3.6 hours	-	An abstract on the topic, cre- ating a computer presenta- tion, designing a stand, an ab- stract on a narrower problem, preparing a report for the Stu- dent Scientific Society, re- viewing periodicals or Inter- net sources on this problem, making a dummy on the topic.
Labo	or intensity in hours		24 hours	12 hours
Total labor intensity in hours			36 hours	

2.7 Research (project) work

Research (project) work of students is a mandatory section of the discipline and is aimed at the comprehensive formation of universal, general professional and professional competencies of students. Research (project) work involves the study of specialized literature and other scientific and technical information on the achievements of domestic and foreign science and technology in the relevant field of knowledge, participation in scientific research, etc. The topics are determined by students independently or in consultation with the teacher.

Students' research (project) work includes:

- 1. Independent study of additional literature on the chosen topic.
- 2. Compiling reviews of literature and Internet resources on selected topics.
- 3. Reports and presentations on the history of the study of the issue.
- 4. Mastering paraclinical examination methods: ultrasound, X-ray, magnetic resonance imaging. Examination of healthy people and patients with analysis of results.
- 5. Analysis of radiological and magnetic resonance examination methods for various pathologies.
- 6. Working with archival documents, analysis of the clinic, examination results, etc.
- 7. Collection and analysis of clinical data for a specific pathology, analysis of treatment methods.
- 8. Preparation of thematic meetings of the student circle with abstract reports and results of independent work.
- 9. Preparing reports for the final student conference.

List of recommended topics for research (project) work:

- 1. Assessment of the immune status in patients with various forms of chronic uveitis.
- 2. Assessment of the immunological status in patients with recurrent keratitis.
- 3. Options for medical and surgical treatment of open-angle and closed-angle glaucoma.
- 4. Epidemiology of allergic conjunctivitis in the Amur region. Possibilities and effectiveness of conservative treatment.

To evaluate research work, a binary assessment scale is adopted: "pass", "fail".

Criteria for assessing students' research (project) work:

- the material on the results of the research in the report is presented in detail, the specialized literature is well-developed, scientific and technical information on the achievements of domestic and foreign science and technology in the relevant field of knowledge is studied -"passed".
- the material on the results of the research in the report is not presented accurately enough, the special literature is poorly studied, the scientific and technical information on the achievements of domestic and foreign science and technology in the relevant field of knowledge is not studied "failed".

3. EDUCATIONAL, METHODOLOGICAL, MATERIAL, TECHNICAL AND INFORMATION SUPPORT OF DISCIPLINE

3. Educational, methodological and informational support of the discipline

3.1 Main literature:

 Egorova, E. A. Ophthalmology: textbook / ed. E. A. Egorova. - 2nd ed., revised . and additional -Moscow: GEOTAR-Media, 2021. - 272 p.: ill. - 272 s. - ISBN 978-5-9704-5976-8. - Text: electronic (date of access: 05/05/2021).

Access mode: by subscription. <u>http://www.studmedlib.ru/book/ISBN9785970459768.html</u>

 Sidorenko, E. I. Ophthalmology: textbook / edited by Sidorenko E. I. - Moscow: GEOTAR-Media, 2018. - 656 p. - ISBN 978-5-9704-4620-1. - Text: electronic (date accessed: 05.05.2021). Access mode: by subscription. http://www.studmedlib.ru/book/ISBN9785970446201.html

3.2 Further reading

- Takhchidi , H. P. Clinical norms. Ophthalmology / Kh. P. Takhchidi , N. A. Gavrilova, N. S. Gadzhieva, etc. - Moscow: GEOTAR-Media, 2020. - 272 p. - ISBN 978-5-9704-5728-3. - Text: electronic. Access mode: <u>http://www.studmedlib.ru/book/ISBN9785970457283.html</u>
- Avetisov, S. E. Ophthalmology. National leadership / ed. Avetisova S. E. Egorova E. A, Moshetova L. K., Neroeva V. V., Takhchidi H. P. Moscow: GEOTAR-Media, 2019. 752 p. ISBN 978-5-9704-5125-0. Access mode: http://www.studmedlib.mv/back/ISBN0785070451250.html

http://www.studmedlib.ru/book/ISBN9785970451250.html

- Sidorenko, E. I. Ophthalmology. Guide to practical classes: textbook / edited by E. I. Sidorenko -Moscow: GEOTAR-Media, 2019. - 304 p. - ISBN 978-5-9704-5052-9. Access mode: by subscription. <u>http://www.studmedlib.ru/book/ISBN9785970450529.html</u>
- Takhchidi , H. P. Handbook of an ophthalmologist / H. P. Takhchidi , N. A. Gavrilova, N. S. Gadzhieva [et al.]. - Moscow: GEOTAR-Media, 2021. - 224 p. (Series "Handbook of an ophthalmologist") - ISBN 978-5-9704-6153-2 .. Access mode: http://www.studmedlib.ru/book/ISBN9785970461532.html
- Loskutov, I. A. Symptoms and syndromes in ophthalmology / Loskutov I. A., Belikova E. I., Korneeva A. V. - Moscow: GEOTAR-Media, 2021. - 256 p. - ISBN 978-5-9704-6179-2. - Text: electronic (date accessed: 05.05.2021). - Access mode : by subscription. <u>http://www.studmedlib.ru/book/ISBN9785970461792.html</u>

3.3 Educational and methodological support for the discipline prepared by the department staff:

Educational aids (Educational Methodology):

 Vydrov A.S., Naryshkina S.V., Shtilerman A.L., Tanchenko O.A. Diabetic retinopathy (study guide). Recommended by the Educational and Methodological Association for Medical and Pharmaceutical Education of Universities of Russia. Blagoveshchensk: Printing House OOO PK Odeon, 2014, 115 p.

Electronic and digital technologies:

1. **Online course on the subject** "Ophthalmology" in the EIS FGBOU VO Amur State Medical Academy <u>https://educ-amursma.ru/course/view.php?id=119</u>.

Characteristics of modules in electronic information and educational course

Educational	Controlling

Theoretical (lecture) material, video experi-	Methodological recommendations for stu-		
ments, scientific and educational films	dents on independent extracurricular work.		
Methodological recommendations for students	List of recommended topics for abstracts and		
for practical classes.	guidelines for abstract design.		
Methodological recommendations for solving			
problems and exercises on the topics of the dis-			
cipline.			
Defense motorial tables of standard values	Tests of entrance, current and final		
Reference material, tables of standard values.	knowledge control.		

- 2. **Multimedia presentations** (Microsoft Power Point 2016), to lecture-type classes in accordance with the thematic lecture plan.
 - Physiological optics. Refractogenesis, age-related features. Refraction. Accommodation. Astigmatism.
 - Diseases of the eyelids. Diseases of the lacrimal organs. Classification. Diagnostics. Treatment. Conjunctivitis.
 - Pathology of the cornea and sclera.
 - Diseases of the vascular tract.
 - Pathology of the lens. Cataract. Congenital cataracts.
 - Pathology of intraocular pressure. Glaucoma.
 - Injuries to the organ of vision.
 - Pathology of binocular vision. Strabismus: classification, clinical picture, treatment.
 - Diseases of the retina and optic nerve. Tumors of the eyeball. Ophthalmological symptoms in general diseases.

3. Video materials:

- cataract phacoemulsification ;
- intracapsular cataract extraction;
- extracapsular cataract extraction;
- enucleation;
- sinustrabeculectomy with posterior scleral trephination.

3.4 Equipment used for the educational process

Item No.	Name	Quantity
1	The office of the professor of the department	
	Personal computer	1
	A set of multimedia presentations of the course of lectures	1
	Media projector	
	Ophthalmic laser	1
		1
3	Examination room of the eye department of the State Autonomous	
	Healthcare Institution of the Arkhangelsk Region Bishkek City	1
	Clinical Hospital	1
	Slit lamp	1
	Pachymeter	1
	Autorefractometer	1
	Maklakov tonometer	1
	Pneumo-ophthalmometer	1
	Ultrasound machine	2

	Set of optical lenses	1
	Skiascopic rulers	
	Computer Perimeter	
4	Dressing room of the eye department of the State Autonomous	
	Healthcare Institution of the Arkhangelsk City Clinical Hospital	
	Set of instruments for dressing an ophthalmological patient	5
	Operating ophthalmological microscope	
5	Ophthalmological operating room of the State Autonomous	
	Healthcare Institution of the Arkhangelsk City Clinical Hospital	2
	Set of instruments for operations on the organ of vision	2
	Phacoemulsifier	2
	Operating ophthalmological microscope	
7	Study room #1-3	
	Laptop	1
	Multimedia video projector	1
	Table for determining visual acuity	2
	Roth's apparatus	2
	Trial frame	2
	Set of optical lenses	2
	Electronic learning programs, multimedia presentations, electronic and	
	paper spreadsheets	25
	Reverse ophthalmoscope	1
	Rapkin tables	2
	Desk lamp	2
	A set of radiographs, tomograms, computed tomograms, magnetic reso-	
	nance tomograms	150
	Forster's perimeter	2
	Eyeball dummies	4
8	Department Assistants' Office	
	Computer	1
	Laptop	1
	Multimedia video projector	1
9	Corridor	
	Stands	3

3.5. Professional databases, information and reference systems, electronic educational resources.

No. p/p	Resource name	Resource Description	Access	Resource ad- dress
		Electronic library systems	·	
1	"Student Consult- ant" Electronic li- brary of the medi- cal university.	For students and teachers of medical and pharmaceutical universities. Pro- vides access to electronic versions of textbooks, teaching aids and periodi- cals.	library, individual access	<u>http :// www .</u> <u>studmedlib.ru/</u>
2	"Doctor's Consult- ant" Electronic Medical Library.	The materials posted in the library have been developed by leading Rus- sian specialists based on modern sci- entific knowledge (evidence-based medicine). The information has been prepared taking into account the posi- tion of the scientific and practical	library, individual access	<u>http://www.ro</u> <u>smed-</u> lib.ru/cgi- <u>bin/mb4x</u>

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		medical society (world, European and Russian) in the relevant specialty. All materials have undergone mandatory independent review.			
3	PubMed	Free search engine in the largest medi- cal bibliographic database MedLine . Documents medical and biological ar- ticles from the specialized literature, and also provides links to full-text arti- cles.	library, free ac- cess	http:// www. ncbi.nlm.nih . gov/ pubmed /	
4	Oxford Medicine Online.	A collection of Oxford medical publi- cations, bringing together over 350 ti- tles into a single, cross-searchable re- source. Publications include The Ox- ford Handbook of Clinical Medicine and The Oxford Textbook of Medicine , the electronic versions of which are constantly updated.	library, free ac- cess	http://www.ox fordmedi- cine.com	
5	Human Biology Knowledge Base	Reference information on physiology, cell biology, genetics, biochemistry, immunology, pathology. (Resource of the Institute of Molecular Genetics of the Russian Academy of Sciences.)	library, free ac- cess	<u>http://hum-</u> <u>bio.ru/</u>	
6	Medical online li- brary	Free reference books, encyclopedias, books, monographs, abstracts, Eng- lish-language literature, tests.	library, free ac- cess	<u>http://med-</u> lib.ru/	
		Information systems			
7	Russian Medical Association	Professional Internet resource. Objec- tive: to facilitate the implementation of effective professional activities of medical personnel. Contains the char- ter, personnel, structure, rules of entry, information about the Russian Medical Union.	library, free ac- cess	<u>http://www.r</u> <u>mass.ru/</u>	
8	Web medicine.	The site presents a catalog of profes- sional medical resources, including links to the most authoritative subject sites, journals, societies, as well as useful documents and programs. The site is intended for doctors, students, employees of medical universities and scientific institutions.	library, free ac- cess	<u>http : //web-</u> <u>med.ir-</u> <u>kutsk.ru/</u>	
	Databases				
9	World Health Or- ganization	The site contains news, statistics on countries that are members of the World Health Organization, fact sheets, reports, WHO publications and much more.	library, free ac- cess	http://www.w ho.int/ru/	
10	Ministry of Science and Higher Educa- tion of the Russian Federation.The website of the Ministry of Science and Higher Education of the Russian Federation contains news, newsletter reports, publications and much more		library, free ac- cess	<u>http://www.m</u> <u>inobr-</u> <u>nauki.gov.ru</u>	

11	Ministry of Educa- tion of the Russian Federation.	The website of the Ministry of Educa- tion of the Russian Federation contains news, newsletters, reports, publica- tions and much more.	library, free ac- cess	https://edu.go v.ru/
12	Federal portal "Russian educa- tion"	A single window for access to educa- tional resources. This portal provides access to textbooks on all branches of medicine and health care.	library, free ac- cess	http://www. edu.ru/ http://win- dow.edu.ru/ca talog/?p rubr =2.2.81.1
	1	Bibliographic databases	1	1
13	Database "Russian Medicine"	It is created in the Central Scientific and Methodological Library and covers the entire collection, starting from 1988. The database contains bibliographic de- scriptions of articles from domestic journals and collections, dissertations and their abstracts, as well as domestic and foreign books, collections of insti- tute proceedings, conference materials, etc. Thematically, the database covers all areas of medicine and related areas of biology, biophysics, biochemistry, psychology, etc.	library, free ac- cess	<u>http://www.sc</u> <u>sml.rssi.ru/</u>
14	eLIBRARY.RU	Russian information portal in the field of science, technology, medicine and education, containing abstracts and full texts of more than 13 million sci- entific articles and publications. The eLIBRARY.RU platform provides electronic versions of more than 2,000 Russian scientific and technical jour- nals, including more than 1,000 open access journals.	library, free ac- cess	<u>http://eli-</u> <u>brary.ru/de-</u> <u>faultx.asp</u>
15	Portal Electronic li- brary of disserta- tions	Currently, the Electronic Library of Dissertations of the Russian State Li- brary contains more than 919,000 full texts of dissertations and abstracts.	library, free ac- cess	http://diss.rsl.r u/?menu=diss catalog/
16	Medline.ru	Medical and biological portal for spe- cialists. Biomedical journal. Last up- dated February 7, 2021.	library, free ac- cess	http://www.m edline.ru

3.	6.	List	of	software	(commercial	software	products)
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No. p/p	List of software (commercial software prod- ucts)	Details of supporting documents
1	MS Operating System Windows 7 Pro	License number 48381779
2	MS Operating System Windows 10 Pro	CONTRACT No. UT-368 from 09.21.2021
3	MS Office	License number: 43234783, 67810502, 67580703, 64399692, 62795141, 61350919
4	Kaspersky Endpoint Security for business – Stand- ard Russian Edition	Agreement 165A dated November 25, 2022
4	50-99 Node 2 year Educational Renewal License	

5	1C Accounting and 1C Salary	LICENSE AGREEMENT 612/L dated
5		02.02.2022
6	1C: PROF University	LICENSE AGREEMENT No. ЦБ-1151 dated
0		01.14.2022
7	1C: PROF Library	LICENSE AGREEMENT No. 2281 dated
/		11.11.2020
8	Consultant Plus	Agreement No. 37/C dated 02/25/2022
9	Contour.Tolk	Agreement No. K007556/22 dated 09/19/2022
10	E-learning environment 3 KL (Russian Moodle)	Agreement No. 1362.3 dated November 21,
10		2022
11	Astra Linux Common Edition	Agreement No. 142 A dated September 21,
11		2021
12	Information system "Plans"	Agreement No. 9463 dated May 25, 2022
13	1C: Document Management	Agreement No. 2191 dated 10/15/2020
14	R7-Office	Agreement No. 2 KS dated 12/18/2020

List of freely distributed software

No.	List of freely distributed soft-	Links to license agreement	
p/p	ware		
		Freely distributed	
1	Yandex Browser	License agreement for the use of Yandex Browser programs	
		https://yandex.ru/legal/browser_agreement/	
		Freely distributed	
2	Yandex.Telemost	License Agreement for the Use of Programs	
		https://yandex.ru/legal/telemost_mobile_agreement/	
		Freely distributed	
3	Dr.Web CureIt !	License Agreement: https://st.drweb.com/static/new-	
		www/files/license_CureIt_ru.pdf	
4	OpenOffice	Freely distributed	
4	OpenOffice	License: http://www.gnu.org/copyleft/lesser.html	
5	LibraOffica	Freely distributed	
5	LibreOffice	License: https://ru.libreoffice.org/about-us/license/	
6		Freely distributed	
0	v K Calls	https://vk.com/license	

3.7. Resources of the information and telecommunications network "Internet"

- Library of Amur State Medical Academy. Access mode: <u>https://amursma.ru/obuchenie/biblioteki/biblioteka-amurskoy-gma/</u>
- Electronic library system "Student consultant". Access mode: http://www.studmedlib.ru/cgi-bin/mb4x
- Electronic library of medical literature. Access mode: <u>https://www.books-up.ru/ru/entrance/97977feab00ecfbf9e15ca660ec129c0/</u>

4. ASSESSMENT TOOLS FUND

4.1. Current test control (input, initial, output), final.

4.1.1 Examples of entrance control test tasks (with standard answers)

Test assignments are located in the Moodle system . Access mode: <u>https://educ-amursma.ru/mod/quiz/view.php?id=6067</u>. Total number of tests – 100.

1. THE THINEST WALL OF THE ORBIT IS:

- 1. outer wall
 - 2. top wall
 - 3. inner wall
 - 4. bottom wall
 - 5. upper and inner

Answer: 3

2. THE OPTIC NERVE CANAL SERVES FOR THE PASSAGE OF:

- 1. optic nerve
- 2. abducens nerve
- 3. oculomotor nerve
- 4. central retinal vein
- 5. frontal artery

Answer:1

3.THE LACRIMAL SAC IS LOCATED:

- 1) inside the eye socket
- 2) outside the eye socket
- 3) partly inside and partly outside the orbit
- 4) in the maxillary sinus
- 5) in the middle cranial fossa

Answer: 3

4.1.2 Examples of test tasks for initial control (with standard answers)

1. THE CORNEA CONSISTS OF:

- 1) two layers
- 2) three layers
- 3) four layers
- 4) five layers
- 5) six layers

Answer: 4

2. THE FUNCTIONAL CENTER OF THE RETINA IS:

- 1) optic disc
- 2) central fossa
- 3) dentate line zone
- 4) vascular bundle
- 5) juxtapapillary zone

Answer: 2

3. THE VASCULAR TRACT PERFORMS:

1) trophic function

- 2) light refraction function
- 3) light perception function
- 4) protective function
- 5) support function

Answer: 1

4.1.3 Examples of test tasks for final control (with standard answers)

Test assignments are located in the Moodle system . Access mode: <u>https://educ-amursma.ru/mod/quiz/view.php?id=18177</u>. Total number of tests – 200.

1. THE THINEST WALL OF THE ORBIT IS:

- 1) outer wall
- 2) top wall
- 3) inner wall
- 4) bottom wall
- 5) upper and inner

Answer: 3

2. THE OPTIC NERVE CANAL SERVES FOR THE PASSAGE OF:

- 1) optic nerve
- 2) abducens nerve
- 3) oculomotor nerve
- 4) central retinal vein
- 5) frontal artery

Answer:1

3.THE LACRIMAL SAC IS LOCATED:

- 1) inside the eye socket
- 2) outside the eye socket
- 3) partly inside and partly outside the orbit
- 4) in the maxillary sinus
- 5) in the middle cranial fossa

Answer: 3

4.1.4 Examples of test tasks for assessing practical skills (with standard answers)

1. ABSOLUTE ACCOMMODATION IS ACCOMMODATION MEASURED AT:

- 1) switched off convergence (occlusion of one of the eyes)
- 2) two open eyes
- 3) current convergence
- 4) partially disabled convergence

Answer: 1

2. CHRONIC INFLAMMATION OF THE MEIBOMIAN GLANDS IS :

- 1) barley
- 2) chalazion
- 3) eyelid abscess
- 4) internal barley
- 5) papilloma

Answer: 2

3. DIFFUSE ACUTE INFLAMMATION OF ORBITAL CELLULAR TISSUES IS :

- 1) osteoperiostitis
- 2) phlegmon
- 3) abscess
- 4) furuncle
- 5) barley

Answer: 2

4.1.5 Examples of test tasks for the final assessment (with standard answers)

1. SYPHILITIS KERATITIS IS ACCOMPANIED BY:

- 1) early onset of pain and photophobia
- 2) formation of adhesions
- 3) stromal film, densest in the center
- 4) visual acuity decreases
- 5) all of the above is correct

Answer: 5

2. FOR DIAGNOSTICS OF DRY EYE SYNDROME:

- 1) examination of the exposed strip where there should be a continuous flow of tears
- 2) Schirmer's test, based on the rate of wetting of a strip of filter paper attached above the marginal border of the eyelid
- 3) a dye test consisting of dropping a known amount of dye into the solution fluorescent, followed by fluorometry, staining with Bengal rose
- 4) Rose Bengal coloring
- 5) all of the above is correct

Answer: 5

3. IN UVEITIS THE FOLLOWING IS AFFECTED:

- 1) retina, optic nerve, ciliary body
- 2) optic nerve
- 3) ciliary body
- 4) lacrimal gland
- 5) orbital bones

Answer: 1

4.2 Clinical situational tasks

Task number 1.

A 35-year-old patient came to the clinic complaining of severe pain in the right eye, which intensifies at night, and photophobia. The anamnesis showed that the patient had been undergoing outpatient treatment for flu for 5 days. Objectively: the right eye is a mixed injection, exudate deposits in the form of small gray dots are determined on the back surface of the cornea, the pupil is irregularly shaped, the edge of the iris is fused with the lens, and floating opacities are found in the vitreous body. Your diagnosis. Treatment.

Answer: Acute iridocyclitis of viral etiology. Etiotropic treatment with antiviral drugs, instillations of mydriatics, nonsteroidal anti-inflammatory drugs, antihistamines, general strengthening treatment, correction of immune status.

Task number 2.

A 60-year-old woman consulted an ophthalmologist complaining of pain in her left eye and left half of her head, nausea, vomiting, and redness of her left eye. Her medical history shows that she had no previous complaints, and these complaints appeared after a long period of washing clothes. An objective examination

revealed congestive vascular injection in the left eye, corneal epithelial edema, and a shallow anterior chamber; the pupil is unevenly dilated, visual acuity is 0.1 and cannot be corrected. Intraocular pressure = 56 mm Hg. Your diagnosis. Treatment.

Answer:

Acute attack of glaucoma. Relief of an acute attack according to the scheme:

- Analgesics (lytic mixture) are administered intravenously or intramuscularly.
- Miotics (pilocarpine 1-2%, 1 drop in the affected eye: 4 times every 5 minutes; 4 times every 15 minutes; 4 times every hour. After 6 hours, the frequency of instillations is reduced to 6 times a day). □ beta-blockers (timolol maleate 0.5% 2-3 times a day).
- Inside:
- Diacarb 1-2 tablets of 0.25 g once, then $\frac{1}{2}$ 1 tablet x 3-4 times a day.
- glycerol (at the rate of 1-1.5 g per kg of body weight) mixed with juice (cranberry, lemon) or with the addition of ascorbic acid 2 times a day. Instead of glycerol, 20% mannitol (0.5-2 g per kilogram of body weight) can be administered intravenously by drip over 45 minutes. □ distraction therapy (hot foot baths, leeches on the temple on the side of the sore eye). Conservative treatment of an acute attack of glaucoma is carried out for 24 hours, after which surgical treatment is indicated iridectomy.

Task number 3.

A 28-year-old man received a blow to the head two days ago. Today he is concerned about the loss of vision in his right eye. On external examination, the upper eyelid of the right eye is drooping. The eyeball is deviated outward and downward. The pupil is dilated and does not react to light. Visual acuity is equal to light perception , although the red reflex from the fundus is clearly visible. The optic disc is pale, the borders are clear. What is your diagnosis?

Answer: Oculomotor nerve paresis, damage to the optic nerve in the orbit.

4.3 List of practical skills that a student should have after mastering the discipline.

- 1. Methods of external examination of tissues surrounding the eye.
- 2. Immobilization (fixation) of children during examination of their eyes.
- 3. Examination of the lacrimal organs and lacrimal ducts.
- 4. Determining the position of the lacrimal points.
- 5. Examination of the lacrimal sac.
- 6. Canalicular and nasal tests.
- 7. X-ray of the lacrimal ducts.
- 8. Examination of the lacrimal gland.
- 9. Washing out the lacrimal ducts.
- 10. Examination of the conjunctiva of the upper, lower eyelids and fornices.
- 11. Single and double eversion of the eyelid.
- 12. Side lighting method.
- 13. Combined method of examination of the anterior segment of the eye
- 14. Examination of the eye in transmitted light.
- 15. Reverse and direct ophthalmoscopy.
- 16. Ophthalmoscopy in red-free light.
- 17. Ophthalmochromoscopy.
- 18. Biomicroscopy.
- 19. Gonioscopy.
- 20. Measurement of intraocular pressure using Maklakov, Goldman tonometer, and palpation .
- 21. Simplified topography according to Nesterov.
- 22. Determination of corneal sensitivity.

- 23. Study of pupillary response to light.
- 24. Study of visual acuity in children and adults at a distance and near with an approximate determination of refraction.
- 25. Perimetry, approximate, control, instrumental.
- 26. Campimetry.
- 27. Study of twilight vision.
- 28. Study of color vision using the orientation method and polychromatic tables.
- 29. Subjective method of determining refraction using corrective glasses.
- 30. Determination of refraction by skiascopy.
- 31. Refractometry.
- 32. Correction of ametropia, anisometropia, astigmatism, presbyopia.
- 33. Study of the volume of accommodation, diagnosis of accommodation disorders.
- 34. Determination of the primary and secondary angle of strabismus.
- 35. Hirschberg method .
- 36. Diagnosis of binocular vision disorders using a four-point color test and synaptophore .
- 37. Exophthalmometry.
- 38. Echobiometry.
- 39. Ultrasound of the eye and orbit.
- 40. Electrophysiological methods for studying the retina and optic nerve.
- 41. Instillation of drops into the conjunctival sac, rinsing of the conjunctival sac.
- 42. Applying ointment behind the eyelids, lubricating the edges of the eyelids with ointment.
- 43. Eyelid massage.
- 44. Technique of smear, scraping, and sowing from the conjunctival cavity.
- 45. Subconjunctival injections.
- 46. Cryotherapy of corneal infiltrates and ulcers
- 47. Removal of foreign bodies from the conjunctiva and cornea.
- 48. Radiographic technique according to Komberg-Baltin and Vogt.
- 49. Emergency and planned operations for eye diseases and injuries.
- 50. Chalazion removal.
- 51. Introduction of corticosteroids into the chalazion.
- 52. Excision of papillomas and cysts of the eyelid.
- 53. Correction of spastic inversion of the lower eyelid.
- 54. Primary surgical treatment of non-penetrating and penetrating wounds of the eyelids.

5.4 List of questions for the assessment test

- 1. Phylo- and ontogenesis of the visual organ.
- 2. The main stages of the phylogenesis of the visual organ.
- 3. Ontogenesis of the visual organ.
- 4. Light sensitivity. Peripheral field of vision.
- 5. Central vision, color perception, binocular and depth vision.
- 6. The membranes of the eyeball (fibrous capsule, choroid, retina).
- 7. The optical apparatus of the eye (cornea, lens, vitreous body).
- 8. Eye socket.
- 9. Oculomotor muscles.
- 10. Eyelids.
- 11. Connective tissue of the eye.
- 12. Lacrimal organs.
- 13. Blood circulation and innervation of the eye.
- 14. External examination.
- 15. Method of side and focal illumination.
- 16. Research technique in transmitted light.
- 17. Ophthalmoscopy in reverse.

- 18. Direct ophthalmoscopy.
- 19. Biomicroscopy.
- 20. Tonometry.
- 21. Goniopsia .
- 22. Diaphanoscopy.
- 23. Study of corneal sensitivity.
- 24. Exophthalmometry .
- 25. Electrophysiological research methods (ERG, EOG, study of the threshold of electrical sensitivity and lability of the optic nerve, visocontrastmetry, study of visual evoked potentials and study of brightness sensitivity).
- 26. Ophthalmodynamometry .
- 27. Fluorescein angiography.
- 28. Tonography.
- 29. Echobiometry . Echography .
- 30. Visual acuity test.
- 31. Visual field examination.
- 32. Study of light sensitivity.
- 33. Study of binocular vision.
- 34. Study of entoptic phenomena (mechanophosphene , autoophthalmoscopy , diascleral transillumination, cobolt test).
- 35. Static refraction of the eye, emmetropia and ametropia (hypermetropia, myopia, astigmatism), their clinical characteristics.
- 36. Refractogenesis, etiology and pathogenesis of myopia.
- 37. Clinical course of myopia, its progressive forms, malignant course.
- 38. The mechanism of accommodation and its purpose.
- 39. Methods of studying accommodation and convergence.
- 40. Age-related changes in accommodation (presbyopia).
- 41. General symptoms and clinical types of pathological process in corneal diseases.
- 42. Keratitis, exogenous and endogenous.
- 43. Etiology, pathogenesis, clinical features, diagnostics and treatment of creeping corneal ulcer. Emergency care.
- 44. Herpetic keratitis. Classification, pathogenesis, clinical features, diagnostics and treatment.
- 45. Tuberculous-allergic and hematogenous tuberculous keratitis, clinical picture, treatment.
- 46. Parenchymatous syphilitic keratitis. Pathogenesis, clinical features and treatment.
- 47. Neuroparalytic keratitis. Pathogenesis, clinical features and treatment.
- 48. Recurrent corneal erosion, rosacea keratitis, clinical picture, treatment.
- 49. Corneal dystrophies and degenerations. Primary and secondary degenerations. Epithelial-endothelial corneal dystrophy, clinical features, treatment methods. Keratomalacia.
- 50. Anomalies of the size and shape of the cornea. Keratoconus, clinical picture, diagnostics and treatment.
- 51. Outcomes of corneal diseases, principles of surgical treatment.
- 52. Cataracts congenital and acquired (simple, complicated, with associated changes). Pathogenesis, clinical picture, diagnostics.
- 53. Prevention of obscuration retinal underdevelopment.
- 54. Classification of cataracts in children and adults.
- 55. Modern cataract surgery. Intra-extracapsular extraction, laser and ultrasound methods of cataract treatment, surgical and postoperative complications.
- 56. Features of cataract removal in people of different ages.
- 57. Optical correction after cataract extraction (spectacle correction, IOL, contact correction).
- 58. Congenital anomalies of the shape and position of the lens (lenticonus , dislocation, etc.).
- 59. Congenital anomalies of the vitreous body, retrolental fibroplasia .
- 60. Acquired changes in the vitreous body: destruction, clouding, hemophthalmos, detachment, collapse.
- 61. Surgical methods of treatment of vitreous body diseases (vitreectomy, etc.).
- 62. Iritis, anterior uveitis (iridocyclitis). Clinic, diagnostics, differential diagnostics, treatment, emergency care.
- 63. Complications of iridocyclitis: sequential (complicated) cataract, secondary glaucoma, hypotonia of the eye, subatrophy and atrophy of the eyeball, vitreous abscess, endophthalmitis, retinal detachment, neuritis. Tactics of drug and surgical treatment.

- 64. Posterior uveitis (choroiditis), peripheral uveitis. Classification, clinical features, diagnostics, treatment, outcomes.
- 65. Acute purulent uveitis. Some clinical features and course of uveitis of various etiologies.
- 66. Features of the clinical course of uveitis in children.
- 67. Clinical and morphological classification of uveitis (anterior, middle, posterior, peripheral, panuveitis).
- 68. Dysfunction of the ciliary body. Fuchs syndrome. Clinic, diagnostics, differential diagnostics, complications, treatment.
- 69. Glaucomatocyclic crisis syndrome . Clinical presentation, diagnostics, differential diagnostics, treatment.
- 70. Coloboma of the iris and choroid . Aniridia , true and false polycoria , correctopia .
- 71. Modern problems of classification of tumors of the organ of vision, morbidity, mortality.
- 72. Benign epithelial tumors of the eyelids: hemangioma, papilloma, senile wart, epidermal cysts, sebaceous gland adenoma, basalioma.
- 73. Epithelial precancerous diseases of the eyelids: xeroderma pigmentosum, Bowen's epithelioma, senile keratosis, cutaneous horn.
- 74. Epithelial malignant tumors of the eyelids: skin cancer of the eyelids, meibomian gland cancer.
- 75. Pigmented benign tumors of the eyelids; nevi (progressive nevus.
- 76. Pathological conditions of accommodation (spasm, paralysis, accommodative asthenopathy), diagnostics, treatment methods.
- 77. A set of trial spectacle lenses, determination of refraction using lenses (subjective method).
- 78. Objective methods for determining refraction: skiascopy, refractometry, computer refractometry, oph-thalmometry.
- 79. The procedure for examining a patient when prescribing glasses, general rules for prescribing glasses and writing out spectacle lenses.
- 80. Prescriptions for glasses, prescription of glasses for hypermetropia, myopia, astigmatism, anisometropia, presbyopia, aphakia.
- 81. Features of prescribing glasses to children, features of optical correction in the elderly.
- 82. Spheroprismatic glasses, indications, prescription rules, observation methods. Contact vision correction: main indications for its prescription, dispensary observation of patients using contact lenses.
- 83. Intraocular correction. Indications, principles of dispensary observation.
- 84. Antenatal prophylaxis, medical and genetic consultation. Postnatal prophylaxis: conditions for visual work, for the general development of the child, general regimen.
- 85. Principles of dispensary observation of patients with myopia.
- 86. Pseudomyopia . Etiology, pathogenesis, course, prognosis, prevention, methods of observation and medical examination, treatment.
- 87. Surgical methods for preventing progression
- 88. and optical correction of myopia (scleral strengthening and refractive surgeries).
- 89. The oculomotor system and its functions. Anatomical and physiological foundations of binocular vision.
- 90. Latent strabismus or heterophoria .
- 91. Etiology and pathogenesis of concomitant strabismus (loss or weakening of visual afferentation, difference in the size of images on the retinas of the eyes, accommodation -refractive factor, CNS damage).
- 92. Clinical and pathophysiological features of the visual and oculomotor systems in concomitant strabismus: binocular functions, sensory relationships, depth vision, eye movement, fusion ability, visual fixation.
- 93. Clinical classification of concomitant strabismus.
- 94. Methods of examination of a patient with concomitant strabismus.
- 95. General plan and sequence of treatment, optical correction of amtropia, treatment of amblyopia, orthoptic exercises, exercises for developing simultaneous vision and bifoveal fusion, diplopic exercises, stereo-scopic exercises.
- 96. Surgical stage of treatment of concomitant strabismus: operations on the muscles of horizontal and vertical action, strengthening or weakening their action.
- 97. Postoperative treatment.
- 98. Prevention of concomitant strabismus, organization of work on prevention and treatment of concomitant strabismus.
- 99. Paralytic strabismus, ophthalmoplegia. Etiology, pathogenesis, clinical manifestations.
- 100. Methods of diagnostics of paralytic strabismus and ophthalmoplegia.
- 101. Treatment principles: etiological, surgical.

- 102. Nystagmus. Etiology, diagnostics, principles of treatment.
- 103. Anomalies in the development of the eyelids: microblepharon , ankyloblepharon , coloboma, blepharochalasis , eversion, inversion, epicanthus, congenital ptosis.
- 104. Eales disease . Clinic, stages, treatment.
- 105.Central serous chorioretinitis. Clinic, diagnostics, stages, treatment methods.
- 106. Juxtapapillary chorioretinitis of Jensen . Clinic, diagnostics, treatment. Proliferating retinitis. Pathogenesis, outcomes, treatment.
- 107. Diabetic retinopathy.
- 108. Sclerotic dystrophies of the macula (spot), early and late forms. Clinic, diagnostics, treatment.
- 109. Familial hereditary dystrophies (Stargart, Doina, Best spots, angioid stripes of the retina). Tapetoretinal dystrophies, pigment degeneration. Clinic, diagnostics, treatment methods.
- 110.Coats disease, clinical course, outcomes.
- 111.angiomatosis, clinical presentation, course, complications.
- 112. Diagnosis, treatment and prevention of retinal detachment.
- 113. Acute obstruction of the central retinal artery and its branches. Clinical presentation, diagnostics, emergency care, outcomes.
- 114. Acute obstruction of the central retinal vein and its branches. Clinic, diagnostics, complications, treatment, prognosis, indications for laser coagulation.
- 115.Optic neuritis. Clinic, diagnostics of four stages. Retrobulbar neuritis. Etiology, clinical picture, diagnostics, treatment.
- 116. Treatment of neuritis, prevention of optic nerve atrophy.
- 117.Optico-chiasmatic arachnoiditis. Etiology, forms of the disease, clinical picture, differential diagnosis. Treatment, prognosis.
- 118.Congestive optic disc. Classification, etiology, clinical features, diagnostic methods, differential diagnostics, treatment, prognosis, complications.
- 119.Optic nerve damage in methyl alcohol poisoning.
- 120.Damage to the optic nerve due to poisoning with lead, arsenic, and organophosphorus compounds.
- 121. Clinic, diagnostics, treatment of optic nerve damage due to alcohol and tobacco intoxication.
- 122. Primary and secondary atrophy of the optic nerve.
- 123. Etiology, clinical features, diagnostics, treatment of optic nerve atrophy.
- 124. Glaucoma. Classification of primary glaucoma, main types of glaucoma and ocular hypertension.
- 125.Etiology and pathogenesis of primary glaucoma (hereditary, hemodynamic and hydrodynamic factors). Relationship of primary glaucoma with other diseases and the external environment.
- 126.Glaucoma clinic. Cardinal clinical signs of glaucoma. Factors determining the level of intraocular pressure. Normal pressure limits, true and tonometric IOP. Optic nerve disc in glaucoma.
- 127.Pathogenesis and nature of visual impairment in glaucoma.
- 128.Open-angle glaucoma clinic.
- 129.Clinic of closed-angle glaucoma.
- 130.Clinic of acute attack of glaucoma.
- 131.Diagnosis of primary glaucoma.
- 132. The importance of complaints and anamnesis (heredity, general diseases, working conditions, occupational hazards).
- 133.Special examination methods: tonometry, compression-tonometric tests. Topography, gonioscopy, isoptoperimetry.
- 134. Early diagnostics of open-angle and closed-angle glaucoma. Diagnostics of glaucoma attack.
- 135.Differential diagnosis of an acute attack of glaucoma with inflammatory diseases (conjunctivitis, iridocyclitis, keratitis) and with swelling cataract.
- 136.Modern concepts of ocular hypertension.
- 137. Essential and symptomatic hypertension of the eye.
- 138. Ocular hypertension and early glaucoma.
- 139. Conservative treatment of primary glaucoma.
- 140.Methods and general principles of antihypertensive therapy: sympathicotropic drugs, beta-blockers, sympatholytics .
- 141. General antihypertensive agents: carbonic anhydrase inhibitors, osmotic agents, and others.

- 142. Treatment of acute attack of glaucoma.
- 143. Treatment aimed at normalizing metabolic processes in eye tissues.
- 144. Work and life regime of patients with primary glaucoma.
- 145.Surgical treatment of primary glaucoma.
- 146.Modern principles of surgical treatment of primary glaucoma. Pathogenetically directed microsurgery of the eye in glaucoma.
- 147.Surgical treatment of open-angle glaucoma.
- 148.Methods of surgical treatment of closed-angle glaucoma.
- 149.Surgical treatment of acute attack of glaucoma.
- 150.Preparing the patient for surgery, postoperative management.
- 151.Laser treatment of glaucoma.
- 152.Organization of the fight against blindness from glaucoma.
- 153.Epidemiology of glaucoma.
- 154. Active detection and early diagnosis of glaucoma.
- 155. Outpatient observation of patients with glaucoma.
- 156.Resolving issues of professional selection, labor and military expertise, temporary disability of patients with glaucoma.
- 157. Secondary glaucoma. Etiology, treatment, prevention methods.
- 158.Congenital glaucoma.
- 159.Cardinal signs of congenital glaucoma.
- 160. Early symptoms of congenital glaucoma.
- 161. The fundamental difference between congenital and primary glaucoma.
- 162.Causes of congenital glaucoma.
- 163.Congenital changes in the anterior chamber angle, vortex veins, suprachoroidal space, choroid in congenital glaucoma.
- 164. Stages of congenital glaucoma.
- 165.Clinical signs of early glaucoma.
- 166.Clinical signs of advanced glaucoma.
- 167.Signs of advanced glaucoma.
- 168. Signs of near-absolute and absolute glaucoma.
- 169. Treatment of congenital glaucoma.
- 170. Primary care for congenital glaucoma.
- 171.Surgical treatment of congenital glaucoma.
- 172.Postoperative treatment of children with congenital glaucoma.
- 173.Signs of compensated, uncompensated, decompensated glaucoma.
- 174.Signs of simple, complicated glaucoma, glaucoma with accompanying general and local changes. Signs of congenital juvenile glaucoma.
- 175. Classification, clinical presentation, diagnostics, treatment of orbital injuries.
- 176.Surgical tactics for fresh and delayed injuries of the walls and edges of the orbit. Use of auto-, homoand alloplastic materials for restoring the structure of the orbit. Rational timing of intervention in orbital injuries.
- 177. Injuries to the eye appendages. Injuries to the eyelids, lacrimal ducts. Surgical treatment, plastic surgery.
- 178. Combination of orbital trauma with displacement and damage to the eyeball.
- 179.Non-penetrating eye injuries. Conjunctival injuries, microtraumas. First aid, treatment principles, prevention of industrial microtraumas.
- 180.Penetrating eye injuries. Classification (simple, complex, complicated). Diagnostics, emergency care.
- 181.Diagnosis of foreign bodies inside the eye.
- 182. Chalcosis, siderosis.
- 183.Complex and complicated penetrating wounds of the eye.
- 184. Traumatic cataract, purulent iridocyclitis, endophthalmitis, sympathetic inflammation. Treatment principles.
- 185.Blunt eye injuries. Clinic, diagnostics, classification. Treatment and outcomes.
- 186. Thermal burns. Classification, clinical features, diagnostics, emergency care, treatment.
- 187. Chemical burns. Classification, clinical features, diagnostics, treatment.

- 188. Treatment of the consequences of burns.
- 189.Damage to the organ of vision caused by conventional firearms.
- 190.Damage to the organ of vision caused by conventional firearms.
- 191.Combined lesions of the visual organ. First aid, medical care, sorting the wounded, determining the evacuation destination.
- 192.Classification of various eye injuries.
- 193.Clinic of various eye injuries.
- 194. First aid for various eye injuries.
- 195. Types of treatment and outcomes of various eye injuries in children.
- 196.Effects of electromagnetic spectrum radiation on the eye. Clinic of eye damage by microwave radiation, IF and CF rays, visible light of increased brightness, ionizing radiation (alpha and beta particles, soft and hard X-rays, neutrons), laser radiation.
- 197.Damage to the visual organ due to intoxication of the body with chemicals (heavy metals, organophosphorus compounds, aromatic hydrocarbons).
- 198. The effect of alcohol on the organ of vision.
- 199.Eye lesions in tuberculosis.
- 200.Eye lesions in toxoplasmosis.
- 201.Eye lesions in influenza.
- 202.Eye lesions in syphilis.
- 203. Eye lesions in brucellosis, tularemia, leprosy, childhood infections.
- 204. Cysticercosis of the eye. Localization in the tissues of the eye, diagnostics and clinical picture of intra- and extrabulbar Cysticercosis . Treatment, surgical techniques, outcomes.
- 205. Echinococcosis of the orbit. Pathogenesis, clinical picture, diagnostics, treatment, prognosis.
- 206. Changes in the retina and optic nerve in hypertension and atherosclerosis, their importance for assessing the severity of the general disease. Differential diagnosis, clinical picture, dynamics of the process.
- 207. Regional hypertension (symptomatic hypertension). Treatment of hypertensive neuroretinopathy .
- 208. Changes in the organ of vision in case of heart defects, chronic heart failure.
- 209. Changes in the retina and optic nerve in kidney diseases and toxicosis of pregnancy. Clinical course, prognosis.
- 210. Ophthalmologic symptoms in diseases of the blood and hematopoietic organs. Myeloid leukemia, lymphoid leukemia, pernicious anemia, hemorrhagic diathesis.
- 211. Ophthalmological symptoms in pathology of the pituitary gland and hypothalamic-pituitary system: pituitary tumors, Itsenko-Cushing's disease.
- 212. Diabetes mellitus. Pathogenesis of ophthalmological symptoms, types of visual organ damage (blepharitis, styes, iridocyclitis, cataract, glaucoma).
- 213. Diabetic retinopathy. Classification, clinical course, complications, prognosis, diagnostics.
- 214. Modern methods of treating diabetes (medication, laser and photocoagulation, surgical treatment).
- 215. Ophthalmological symptoms in diseases of the thyroid gland (diffuse toxic goiter, hypothyroidism) and parathyroid glands.
- 216. General ophthalmologic signs: visual disturbances, stagnation of the disc, primary and secondary optic atrophy, changes in the visual field, exophthalmos, pupillary reactions, disorders of the oculomotor muscles, nystagmus.
- 217. Ophthalmological symptoms in topical diagnostics of tumors of the supratentorial zone (frontal, temporal, parietal, occipital lobes, sellar and parasellar regions).
- 218. Ophthalmological symptoms in topical diagnostics of tumors of the cerebellum, fourth ventricle, and cerebellopontine angle.
- 219. Changes in the organ of vision in optochiasmal leptomeningitis .
- 220. Changes in the organ of vision in multiple sclerosis: pathogenesis, clinical picture, course, prognosis, treatment methods.
- 221. 118. Ophthalmological symptoms in Takayasu's disease , Grenland-Strandberg syndrome (angioid streaks of the retina).
- 222. Ophthalmological symptoms in Recklinghausen's neurofibromatosis : clinical presentation, diagnostics, surgical treatment, prognosis.

- 223. Pathological changes in the optic nerves as part of Foster-Kennedy syndrome, Vogt- Harada syndrome, and Behr disease.
- 224. Syndromes involving changes in the choroid (Behcet's disease, Bechterew- Strumpell -Marie disease , Still-Hauffard-Felty syndrome , Besnier -Beck- Schaumann disease). Clinic, treatment methods, prognosis.
- 225. Syndromes accompanied by increased intraocular pressure (Kraup -Posner- Schlossman, Maniere, Fuchs, Axenfeld, Sturge -Weber disease). Clinic. Differential diagnosis with primary glaucoma, treatment.
- 226. Eye clinics of district polyclinics and medical units, their treatment and preventive activities.