

**Evaluation tools for assessment procedure
for the course “Pediatrics”
for students admitted in 2022, 2023
in the educational program 31.05.01 General Medicine,
specialization (profile) General Medicine (Specialist Degree program),
full-time mode of study
for the 2026–2027 academic year**

1. Assessment tools for conducting ongoing monitoring in classes (TC), assessing the independent work of students (IW), conducting midterm assessment (MA), allowing to check the development of students’ knowledge (k) / skills (s) / abilities (ZUN) as provided by the discipline program:

GPC-4.1.1. Knowledge of topographic anatomy, etiology and pathogenesis , clinical presentation, and diagnostic methods for the most common diseases; medical devices specified in the procedure for providing medical care; age, gender, and ethnic characteristics of pathological processes; conditions requiring emergency medical care; methods for collecting anamnesis of life and diseases, complaints from children and adults (their legal representatives); methods of examination and physical examination; methods of laboratory and instrumental research to assess health status, medical indications for research, rules for interpreting their results; diagnostic algorithm, principles of differential diagnosis, the International Statistical Classification of Diseases and Related Health Problems (ICD)

Results of mastering the educational program (competencies)	Indicators of Competency Achievement	outcomes for the discipline
OPK-4. Capable of using medical devices stipulated by the procedure for providing medical care, as well as conducting patient examinations for the purpose of establishing a diagnosis.	OPC-4.1. Knows: GPC-4.1.1. Knowledge of topographic anatomy, etiology and pathogenesis , clinical presentation, and diagnostic methods for the most common diseases; medical devices specified in the procedure for providing medical care; age, gender, and ethnic characteristics of pathological processes; conditions requiring emergency medical care; methods for collecting anamnesis of life and diseases, complaints from children	z-1. Knowledge of the causes, basic mechanisms of development and clinical presentation of the most common childhood diseases, their age-related characteristics, conditions requiring emergency medical care; features of collecting anamnesis and complaints from children and their legal representatives; methods of examination and physical examination of children of different ages; basic methods of laboratory and instrumental research with interpretation of their results for assessing the health of children and adolescents, making a diagnosis, and differential diagnosis.

	and adults (their legal representatives); methods of examination and physical examination; methods of laboratory and instrumental research to assess health status, medical indications for research, rules for interpreting their results; diagnostic algorithm, principles of differential diagnosis, the International Statistical Classification of Diseases and Related Health Problems (ICD)	
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N o.	Section (s), subsection(s) of the discipline (modules, modular units), forming this knowledge , skills and abilities	Task type	Task content	Correct answer	What type of control is it intended for?		
					TC	SR	PA
1.	Module 3. Diseases of older children. Module 7. Respiratory diseases. Anatomical and physiological characteristics of the upper respiratory tract and bronchopulmonary system in children. Basic research methods. Main syndromes and semiotics of respiratory damage in children of different ages. Respiratory failure in children. Bronchitis in children: classification, etiology, epidemiology, clinical features, diagnostics, principles of	1. Selecting multiple correct answers	Select three correct answers out of six. A dull or shortened percussion sound is detected over the lungs when : 1) lobar pneumonia 2) accumulation of fluid in the pleural cavity 3) lobar atelectasis 4) pneumothorax 5) pulmonary emphysema 6) diaphragmatic hernia	1) lobar pneumonia 2) accumulation of fluid in the pleural cavity 3) lobar atelectasis	Yes	Yes	No
		2. Situational tasks/cases	In May, a mother with a 5-year-old girl came to see you. That day, while	bronchial asthma	Yes	No	Yes

	<p>bronchitis treatment. Obstructive syndrome, emergency treatment. Pneumonia in children. Classification of pneumonia in children. Etiology, epidemiology, clinical features, and diagnosis of pneumonia. Principles of treatment and prevention of pneumonia. Respiratory allergies . Pathogenesis, clinical presentation, and course of respiratory allergies in children and adolescents. Etiology and forms of bronchial asthma in children and adolescents. Pathogenesis and clinical presentation in young children . Diagnosis. Differential diagnosis of bronchial asthma from other diseases. Emergency treatment measures during an asthma attack and treatment during the non-attack period.</p>		<p>out of town, the child suddenly developed an attack of difficulty breathing accompanied by a cough. The attack subsided on its own upon returning to the city. Similar attacks had occurred three times in the past year. The girl's medical history indicates that the father suffers from urticaria. The girl is intolerant to chocolate, fish, and eggs (resulting in skin rashes and swollen lips). An examination revealed no pathological changes in the child's internal organs, other than mild pulmonary emphysema. What is your preliminary diagnosis?</p>				
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GPC-4.2.1. Able to collect complaints, life history and disease history from children and adults (their legal representatives), identify risk factors and causes of disease development; apply methods of examination and physical examination of children and adults; conduct oncoscreening ; interpret the results of examination and physical examination of children and adults; formulate a preliminary diagnosis, draw up a plan for laboratory, instrumental and additional studies in children and adults, in accordance with the procedures for providing medical care, clinical guidelines, taking into account the standards of medical care; use medical devices stipulated by the procedure for providing medical care; refer children and adults for laboratory, instrumental and additional studies, consultations with specialist doctors in

accordance with the current procedures for providing medical care, clinical guidelines, taking into account the standards of medical care; interpret and analyze the results of basic (clinical) and additional (laboratory, instrumental) examination methods; conduct differential diagnostics of diseases in children and adults

Results of mastering the educational program (competencies)	Indicators of Competency Achievement	outcomes for the discipline
<p>OPK-4. Capable of using medical devices stipulated by the procedure for providing medical care, as well as conducting patient examinations for the purpose of establishing a diagnosis.</p>	<p>OPK-4.2. Can: GPC-4.2.1. Able to collect complaints, life history and disease history from children and adults (their legal representatives), identify risk factors and causes of disease development; apply methods of examination and physical examination of children and adults; conduct oncoscreening ; interpret the results of examination and physical examination of children and adults; formulate a preliminary diagnosis, draw up a plan for laboratory, instrumental and additional studies in children and adults, in accordance with the procedures for providing medical care, clinical guidelines, taking into account the standards of medical care; use medical devices stipulated by the procedure for providing medical care; refer children and adults for laboratory, instrumental and additional studies, consultations with specialist doctors in accordance with the current procedures for providing medical care, clinical guidelines, taking into account the standards of medical care; interpret and analyze the results of basic</p>	<p>U-1. Able to interview a child and/or their legal representatives, collecting complaints and assessing their medical and life history, identifying risk factors for disease development, conduct a physical examination of the child and identify objective signs of disease, formulate a preliminary diagnosis and draw up a patient examination plan taking into account standards and current recommendations, interpret the results of primary and secondary examination methods, and conduct differential diagnostics to establish a diagnosis.</p>

	(clinical) and additional (laboratory, instrumental) examination methods; conduct differential diagnostics of diseases in children and adults	
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No.	Section (s), subsection(s) of the discipline (modules, modular units), forming this knowledge , skills and abilities	Task type	Task content	Correct answer	What type of control is it intended for?		
					TC	SR	PA
2.	Module 3. Diseases of older children. Module 8. Cardiovascular diseases. Anatomical and physiological features of the circulatory system in children. Intrauterine circulation and its restructuring after birth. Basic methods for examining the cardiovascular system in children. Major syndromes and semiotics of cardiovascular damage in children of different ages. Chronic heart failure in children. Cardiovascular diseases in children and adolescents. Arterial hypertension in children and adolescents: risk factors, diagnosis, prevention, and treatment. Heart rhythm disorders in children and	1. Selecting multiple correct answers	Select three correct answers out of six. Auscultatory signs of a functional heart murmur in children include: 1) significant duration 2) absence of conduction outside the heart 3) constancy 4) change in the child's upright position and after physical activity 5) conduction outside the heart 6) short duration	2) absence of conduction outside the heart 4) change in the child's upright position and after physical activity 6) short duration	Yes	Yes	No
		2. Situational tasks/cases	You are seeing a 7-year-old girl. Examination reveals pale skin, arrhythmia (heart rate 82-98 beats per minute), and blood pressure 90/60	borders of the heart	Yes	No	Yes

	<p>adolescents. Rheumatic fever: classification, diagnostic criteria, principles of staged treatment and prevention. Non-rheumatic carditis: etiology, clinical presentation, diagnosis, and treatment. Congenital heart defects in children: classification, main syndromes associated with congenital heart defects, and diagnosis.</p>		<p>mmHg . The boundaries of relative cardiac dullness are as follows: right medially from the right parasternal line, left along the left midclavicular line, and superiorly at the 3rd rib. A prolonged, blowing systolic murmur is audible at the apex of the heart, persisting during physical activity and in the upright position; the murmur radiates to the left axillary region. Which of the following parameters can be considered age-appropriate?</p>				
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GPC-7.2.1. Able to determine the scope and sequence of proposed measures for the treatment of children and adults with the most common diseases in accordance with the procedures for the provision of medical care, clinical guidelines, taking into account the standards of medical care; monitor the effectiveness and safety of non-drug and drug treatment methods, prevent or eliminate complications, side effects, adverse reactions, including unexpected ones, arising as a result of diagnostic or therapeutic procedures, the use of drugs and (or) medical devices, non-drug treatment; adjust treatment tactics taking into account the information received about the state of health and the effectiveness of treatment

Results of mastering the educational program (competencies)	Indicators of Competency Achievement	outcomes for the discipline
OPK-7. Capable of prescribing treatment and monitoring its effectiveness and safety.	OPK-7.2. Can: GPC-7.2.1 . Able to determine the scope and sequence of proposed measures for the treatment of children and adults with	U-1. Able to formulate a treatment plan for the most common childhood illnesses in accordance with current clinical guidelines.

	<p>the most common diseases in accordance with the procedures for the provision of medical care, clinical guidelines, taking into account the standards of medical care; monitor the effectiveness and safety of non-drug and drug treatment methods, prevent or eliminate complications, side effects, adverse reactions, including unexpected ones, arising as a result of diagnostic or therapeutic procedures, the use of drugs and (or) medical devices, non-drug treatment; adjust treatment tactics taking into account the information received about the state of health and the effectiveness of treatment</p>	
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N o.	Section (s), subsection(s) of the discipline (modules, modular units), forming this knowledge , skills and abilities	Task type	Task content	Correct answer	What type of control is it intended for?		
					TC	SR	PA
3.	<p>Module 3. Diseases of older children.</p> <p>Module 11. Diseases of the digestive system.</p> <p>Anatomical and physiological characteristics of the digestive system in relation to age. Basic research methods. Main syndromes and semiotics of digestive organ damage in children.</p>	1. Selecting multiple correct answers	<p>Select three correct answers out of six.</p> <p>Standard H.pylori eradication therapy in children includes:</p> <p>1) proton pump inhibitors 2) de-nol 3) amoxicillin 4) probiotics 5) clarithromycin</p>	<p>1) proton pump inhibitors 3) amoxicillin 5) clarithromycin</p>	Yes	No	No

Gastrointestinal and liver diseases in children. Chronic gastritis, duodenitis, and peptic ulcer disease: clinical presentation and course in children, modern diagnostic methods, treatment, and prevention. Biliary dyskinesia . Modern methods of clinical, instrumental, and laboratory diagnostics, treatment, and prevention. Helminthic infestations (ascariasis, enterobiasis, trichuriasis). Clinical and laboratory diagnostics, treatment, and prevention. Giardiasis : etiology, clinical presentation, diagnostics, treatment, and prevention.		6) antacids				
	2. Situational tasks/cases	A 13-year-old girl with a diagnosis of duodenal ulcer localized in the duodenal bulb, H. pylori-positive, newly diagnosed, with increased acid-producing function, and in the acute phase , received standard first-line eradication therapy. After discontinuing the PPI, dyspeptic symptoms persisted, including occasional abdominal pain. Eradication H. pylori control not achieved. Which drug added to standard triple therapy could improve its effectiveness?	bismuth tripotassium dicitrate	Yes	No	Yes

GPC-7.3.1. Possesses the skills to develop a treatment plan for children and adults with the most common diseases in accordance with current medical care procedures and clinical guidelines; select and prescribe medications, non-drug treatments, taking into account medical care standards; evaluate the effectiveness and safety of drugs, medical devices, and non-drug treatments; prevent and treat complications, side effects, and adverse reactions.

Results of mastering the educational program (competencies)	Indicators of Competency Achievement	outcomes for the discipline
OPK-7. Capable of prescribing treatment and monitoring its effectiveness and safety.	OPK-7.3. Has the following skills: GPC-7.3.1. Possesses the skills to develop a treatment plan for children and adults with the most common diseases in	n-1. Has the skill to develop a treatment plan for the most common childhood diseases in accordance with current clinical guidelines.

	accordance with current medical care procedures and clinical guidelines; select and prescribe medications, non-drug treatments, taking into account medical care standards; evaluate the effectiveness and safety of drugs, medical devices, and non-drug treatments; prevent and treat complications, side effects, and adverse reactions.	
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No.	Section (s), subsection(s) of the discipline (modules, modular units), forming this knowledge , skills and abilities	Task type	Contents of the task	Correct answer	What type of control is it intended for?		
					TC	SR	PA
4.	Module 3. Diseases of older children. Module 11. Diseases of the digestive system. Anatomical and physiological characteristics of the digestive system in relation to age. Basic research methods. Main syndromes and semiotics of digestive organ damage in children. Gastrointestinal and liver diseases in children. Chronic gastritis, duodenitis, and peptic ulcer disease: clinical presentation and course in children, modern diagnostic	1. Selecting multiple correct answers	Select three correct answers out of six. Dietary recommendations for a child with acute chronic gastroduodenitis include: 1) exclusion of spicy and fried foods 2) eating rye bread 3) fractional meals 5-6 times a day 4) increase consumption of fresh vegetables 5) Drink plenty of fluids 6) exclusion of strong meat and fish broths	1) exclusion of spicy and fried foods 3) fractional meals 5-6 times a day 6) exclusion of strong meat and fish broths	Yes	No	No

	<p>methods, treatment, and prevention. Biliary dyskinesia . Modern methods of clinical, instrumental, and laboratory diagnostics, treatment, and prevention. Helminthic infestations (ascariasis, enterobiasis, trichuriasis). Clinical and laboratory diagnostics, treatment, and prevention. Giardiasis : etiology, clinical presentation, diagnostics, treatment, and prevention.</p>	<p>2. Situational tasks/cases</p>	<p>A 10-year-old girl presents to you with complaints of general weakness, increased fatigue, frequent headaches, and intense, aching pain that occurs late (usually 1.5 to 2 hours after meals), and sometimes even on an empty stomach, primarily in the right side of the abdomen. Sour belching and heartburn are sometimes noted. She is prone to constipation. Appetite is often decreased. Esophagogastroduodenoscopy reveals a normal esophagus, up to 30 ml of liquid content in the gastric cavity, and mucosal hyperplasia in the antrum . The pylorus is patent. The gastric mucosa and duodenal bulb are deformed with hyperemic folds and punctate erosions at the apices. 13C - u real Helicobacter breath test Pylori is positive. Which</p>	esomeprazole	Yes	No	Yes
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			proton pump inhibitor would you prescribe in this case?				
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PC-1.2.1. Able to identify clinical signs of conditions requiring emergency medical care; perform measures to provide emergency medical care

Results of mastering the educational program (competencies)	Indicators of Competency Achievement	outcomes for the discipline
PC-1. Capable of recognizing and providing medical care in emergency or urgent forms in conditions that pose a threat to the patient's life, including clinical death (cessation of vital functions of the human body (circulation and/or respiration)).	PC-1.2. Can: PC-1.2.1. Able to identify clinical signs of conditions requiring emergency medical care; perform measures to provide emergency medical care	U-1. Able to identify signs of a condition in a child of different ages that require emergency medical care .

No.	Section (s), subsection(s) of the discipline (modules, modular units), forming this knowledge , skills and abilities	Task type	Contents of the task	Correct answer	What type of control is it intended for?		
					TC	SR	PA
5.	Module 3. Diseases of older children. Module 7. Respiratory diseases. Anatomical and physiological characteristics of the upper respiratory tract and bronchopulmonary system in children. Basic research methods. Main syndromes and semiotics of respiratory damage	1. Selecting multiple correct answers	Select three correct answers out of six. Acute bronchitis with bronchial obstruction syndrome is characterized by: 1) inspiratory dyspnea 2) expiratory dyspnea 3) moist, fine-bubble rales 4) widespread wheezing	2) expiratory dyspnea 4) widespread wheezing 5) emphysematous swelling of the chest	Yes	No	No

	<p>in children of different ages. Respiratory failure in children. Bronchitis in children: classification, etiology, epidemiology, clinical features, diagnostics, principles of bronchitis treatment. Obstructive syndrome, emergency treatment. Pneumonia in children. Classification of pneumonia in children. Etiology, epidemiology, clinical features, and diagnosis of pneumonia. Principles of treatment and prevention of pneumonia. Respiratory allergies . Pathogenesis, clinical presentation, and course of respiratory allergies in children and adolescents. Etiology and forms of bronchial asthma in children and adolescents. Pathogenesis and clinical presentation in young children . Diagnosis. Differential diagnosis of bronchial asthma from other diseases. Emergency treatment measures during an asthma attack and treatment during the non-attack period.</p>		<p>5) emphysematous swelling of the chest 6) focal shadows on the radiograph</p>				
		<p>2. Situational tasks/cases</p>	<p>You have been called to see a 5-month-old child who became ill two days ago with a low-grade fever, runny nose, and cough. Yesterday evening, noisy breathing, a frequent cough, and distant wheezing developed. On examination, the child is active . There are skin manifestations of exudative diathesis. The cough is wet. The respiratory rate is 40 breaths per minute. The pharyngeal mucosa is hyperemic . Percussion sounds are boxed, breathing is harsh, expiration is prolonged, and scattered dry whistling and wet rales of various calibers, unstable, are heard over the lungs. Heart sounds are difficult to hear due to the breath sounds, but the rhythm is</p>	<p>obstructive syndrome</p>	<p>Yes</p>	<p>No</p>	<p>Yes</p>

			regular. The abdomen is soft, and the liver and spleen are not enlarged . What complicated the child's respiratory infection?				
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PC-1.2.2. Able to identify conditions requiring emergency medical care, including clinical signs of sudden cessation of blood circulation and respiration; perform basic cardiopulmonary resuscitation in combination with electropulse therapy (defibrillation).

Results of mastering the educational program (competencies)	Indicators of Competency Achievement	outcomes for the discipline
PC-1. Capable of recognizing and providing medical care in emergency or urgent forms in conditions that pose a threat to the patient's life, including clinical death (cessation of vital functions of the human body (circulation and/or respiration)).	PC-1.2. Can: PC-1.2.2. Able to identify conditions requiring emergency medical care, including clinical signs of sudden cessation of blood circulation and respiration; perform basic cardiopulmonary resuscitation in combination with electropulse therapy (defibrillation).	U-1. Able to identify signs of a condition in a child of different ages that require emergency medical care .

N o.	Section (s), subsection(s) of the discipline (modules, modular units), forming this knowledge , skills and abilities	Task type	Contents of the task	Correct answer	What type of control is it intended for?		
					TC	SR	PA
6.	Module 3. Diseases of older children. Module 10. Diseases of the urinary system. Anatomical and physiological	1. Selecting multiple correct answers	Select three correct answers out of six. Acute renal failure is characterized by;	2) oliguria 3) anuria 5) azotemia	Yes	No	No

<p>characteristics of the kidneys and urinary system in children. Basic research methods. Semiotics of urinary system diseases. Urinary tract diseases in children. Urinary tract infections in children. Pyelonephritis. Etiology and pathogenesis, classification, clinical presentation, and course of acute and chronic pyelonephritis in young and older children. Laboratory and radiological diagnostic methods. Treatment principles. Acute and chronic glomerulonephritis . Etiology and pathogenesis, clinical forms, and their characteristics. Pathogenetic therapy. Prognosis. Acute and chronic renal failure in children: causes, pathogenesis, and clinical and laboratory diagnostic criteria.</p>		<p>1) anemia 2) oliguria 3) anuria 4) proteinemia 5) azotemia 6) hypokalemia</p>				
	<p>2. Situational tasks/cases</p>	<p>A 9-year-old boy's urine output decreased to 100 ml/day on the 12th day of acute glomerulonephritis , and urination ceased completely three days later. Over the next two days, edema increased, and lethargy, anorexia , and vomiting developed, while anuria persisted. Blood creatinine was 440 $\mu\text{mol /L}$, and urea was 29.9 mmol /L. What complications did this child have with acute glomerulonephritis ?</p>	<p>acute renal failure</p>	<p>Yes</p>	<p>No</p>	<p>Yes</p>

2. Questions to prepare for the Intermediate assessment:

1. Childhood stages. Pathological features during different periods of childhood.
2. Problems of modern neonatology in Russia and the Volgograd region. The role of risk factors in the development of fetal and neonatal diseases. The structure of perinatal morbidity and mortality. Causes of child mortality at different stages of childhood. Child mortality rates in Russia and the Volgograd region and ways to reduce them.

3. Premature infants; causes of miscarriage . The role of sociobiological factors in miscarriage . Morphofunctional signs of prematurity. Modern methods for objective assessment of the condition of the fetus and newborn.
4. Full-term newborn: definition, morphofunctional characteristics of maturity . Care of a full-term newborn.
5. Perinatal nervous system disorders in children. Etiology and main clinical manifestations of neurological disorders in young children.
6. The main neurological syndromes characteristic of young children with damage to the nervous system, their course and outcomes.
7. Septicemia in newborns: causes and clinical manifestations. Main treatment approaches for sepsis in newborns.
8. Hemolytic disease of the fetus and newborn. Etiopathogenesis . Clinical features. Current methods of prevention, diagnosis, and treatment of various forms of hemolytic disease of the newborn.
9. Age-related characteristics of weight gain and growth in children. The concept of growth spurts. Body proportions and their changes as a child ages.
10. Physical development of children. Factors influencing physical development. Basic laws of growth. The concept of acceleration. Assessing children's physical development.
11. Psychomotor development of a child in the first year of life and after one year.
12. Anatomical and physiological features of the nervous system and sense organs of a young child.
13. Speech development in children. The influence of environment, routine, and upbringing on the neuropsychic development of children.
14. Modern approaches to natural (breast) feeding.
15. Natural (breast) feeding. Advantages and challenges.
16. Diet for infants in the first year of life. Nutritional and calorie requirements.
17. Comparative chemical composition of human and cow's milk. Immunobiological characteristics of human milk. Composition and caloric content of colostrum and mature breast milk.
18. Contraindications to breastfeeding. Breastfeeding problems.
19. Mixed feeding. Definition and indications. Concept of supplemental feeding. Methodology, nutritional and calorie requirements.
20. Hypogalactia . Causes of hypogalactia . Methods for stimulating lactation.
21. Artificial feeding. Definition. Characteristics of artificial feeding products. Classification of breast milk substitutes and selection principles.
22. Artificial feeding. Feeding techniques for this type of feeding. Common mistakes when formula feeding. Introducing complementary foods when formula feeding.
23. Complementary feeding and its importance for child development. Complementary foods, timing, and guidelines for introducing them during breastfeeding and bottle feeding.

24. Nutrition for children over 1 year of age (products used, acceptable amounts, feeding frequency). Need for food ingredients. Ratio of essential nutrients in the diet.
25. Anatomical and physiological characteristics of children's skin. Physiological changes in the skin during the neonatal period.
26. Semiotics of skin lesions in children with somatic and infectious diseases.
27. Anatomical and physiological characteristics of the skeletal system in children. Chemical composition and structure of bones in children of different ages. Timing and order of tooth eruption. Timing of fontanelle closure.
28. Formation of physiological spinal curves. Semiotics of musculoskeletal disorders in children.
29. Anatomical and physiological features of the muscular system in children and the semiotics of its damage.
30. Anatomical and physiological features of the respiratory system in children.
31. Semiotics of respiratory system damage in children.
32. Anatomical and physiological characteristics of the circulatory system in children. Fetal and neonatal circulation.
33. Semiotics of circulatory system damage in children. Measurement and assessment of blood pressure in children at different ages.
34. Anatomical and physiological characteristics of the hematopoietic organs in children. Hemogram in children of different ages.
35. Main syndromes and semiotics of hematopoietic system damage in children and adolescents. Anemic syndrome.
36. Types of bleeding. Characteristics and differential diagnosis of hemorrhagic syndrome.
37. Anatomical and physiological features of the digestive organs in children.
38. Semiotics of digestive organ damage in children.
39. Anatomical and physiological features of the urinary organs and urinary excretion in children.
40. Semiotics of kidney and urinary tract lesions in children.
41. Anatomical and physiological features of the skin and subcutaneous fat tissue and semiotics of damage.
42. Anatomical and physiological features and semiotics of lymph node lesions in children.
43. Chronic eating disorders in young children. Causes. Classification. Clinical manifestations, diagnosis, treatment, and prevention.
44. Protein-energy malnutrition. Clinical features, diagnosis, and treatment.
45. Rickets. Etiopathogenesis , classification. Clinical symptoms of the initial and acute stages. Diagnosis, treatment, and prevention. Residual effects of rickets. Spasmophilia. Etiopathogenesis , clinical features. Emergency treatment of convulsive syndrome.
46. Iron deficiency anemias in children. Main causes depending on age. Clinical and hematological manifestations of iron deficiency anemia. Diagnosis, treatment, and prevention of iron deficiency anemia in children according to Federal Clinical Guidelines.
47. Chronic gastritis and gastroduodenitis in children. Causes, clinical features, modern diagnostic methods, treatment, and prevention.

48. Peptic ulcer disease in children. Etiology, clinical presentation, modern diagnostic methods, and treatment based on current clinical guidelines. Prevention.
49. Biliary dyskinesia in children: Forms, clinical features, diagnosis, treatment, and prevention.
50. Giardiasis . Clinical and laboratory diagnostics, treatment.
51. Myocarditis in children. Etiology, classification, clinical features, diagnosis, and treatment according to clinical guidelines.
52. Heart rhythm disturbances in children. Supraventricular and ventricular extrasystoles, tachyarrhythmias . Etiology, clinical manifestations, diagnosis, and treatment principles.
53. Heart rhythm disturbances in children. Atrioventricular block. Etiology, types of atrioventricular blocks, clinical manifestations, diagnosis, and treatment principles.
54. Arterial hypertension in children and adolescents. Risk factors. Essential and symptomatic arterial hypertension. Diagnosis, treatment, and prevention in accordance with current clinical guidelines. ABPM. Potential of the method.
55. Congenital heart defects in children. Causes and risk factors for congenital heart defects in children. Classification of congenital heart defects according to the Federal Clinical Guidelines for the Provision of Medical Care to Children with Congenital Heart Defects. The system for providing medical care to children with congenital heart defects in Volgograd and the Volgograd Region.
56. Semiotics and general principles of diagnosis of congenital heart defects in children from the standpoint of Federal clinical guidelines for the provision of medical care to children with congenital heart defects.
57. Tetrad Fallot . Hemodynamic characteristics. Clinical manifestations. Diagnosis based on Federal Clinical Guidelines for the Provision of Medical Care to Children with Congenital Heart Defects. Emergency treatment of hypercyanotic attacks.
58. Ventricular septal defect. Hemodynamic characteristics. Clinical manifestations, indications for surgical correction from the perspective of Federal Clinical Guidelines for the Provision of Medical Care to Children with Congenital Heart Defects.
59. Patent ductus arteriosus. Hemodynamic characteristics, clinical manifestations, diagnosis, and treatment principles from the perspective of Federal Clinical Guidelines for the Provision of Medical Care to Children with Congenital Heart Defects.
60. Coarctation of the aorta. Anatomy and hemodynamics, clinical features in young children and later in life, diagnosis, and treatment based on the Federal Clinical Guidelines for the Provision of Medical Care to Children with Congenital Heart Defects.
61. Chronic heart failure in children and adolescents. Clinical presentation, diagnosis, and treatment principles according to national clinical guidelines.
62. Bronchitis in children. Etiopathogenesis , classification, clinical presentation, diagnosis, and treatment of acute bronchitis based on current clinical guidelines.
63. Obstructive bronchitis in children. Clinical features, diagnosis, and treatment.

64. Pneumonia in children. Etiology. Epidemiology. Pathogenesis. Classification. Clinical presentation. Treatment. Complicated pneumonia. Suppurative-destructive complications of pneumonia in children. Clinical features and treatment.
65. Community-acquired pneumonia in children. Clinical presentation. Diagnosis. Treatment according to clinical guidelines. Characteristics of pneumonia caused by atypical pathogens (chlamydia , mycoplasma): clinical and paraclinical . Treatment principles.
66. Atopic dermatitis. Classification, clinical features, diagnosis, and treatment according to Federal Clinical Guidelines .
67. Respiratory allergies . Etiopathogenesis . Clinical manifestations of allergic rhinitis in children. Treatment according to clinical guidelines, prevention. Emergency treatment of acute allergic reactions.
68. Bronchial asthma in children: pathogenesis, clinical presentation, and course. Classification. Clinical presentation. Diagnosis. Treatment approaches according to Federal Clinical Guidelines. Emergency treatment during an asthma attack.
69. Rheumatic fever in children. Epidemiology in Russia and the Volgograd region, etiopathogenesis , classification, and diagnostic criteria.
70. Diffuse connective tissue diseases in children. Current theories of etiology and pathogenesis. Common clinical and laboratory manifestations. Differential diagnosis of systemic lupus erythematosus, dermatomyositis, scleroderma, and periarteritis nodosa in children. Current treatment principles in accordance with clinical guidelines.
71. Juvenile Idiopathic arthritis. Current concepts of etiology and pathogenesis. Classification. Characteristics of the main forms and course variants. Criteria for disease activity. Current treatment principles in accordance with clinical guidelines.
72. Immune thrombocytopenic purpura in children. Etiopathogenesis , classification, clinical features, diagnosis, differential diagnosis with other hemorrhagic diatheses, treatment principles according to Federal Clinical Guidelines.
73. Hemophilia in children. Clinical presentation, characteristics of hemorrhagic syndrome, and diagnosis in accordance with Federal Clinical Guidelines. Treatment in accordance with Federal Clinical Guidelines. Prevention of exacerbations. Social and professional orientation for adolescents with hemophilia.
74. Hemorrhagic Vasculitis in children. Etiopathogenesis , main clinical manifestations of the disease, characteristics of hemorrhagic syndrome, differential diagnosis. Laboratory diagnostics. Treatment principles in accordance with clinical guidelines.
75. Differential diagnostics of diseases with increased bleeding according to leading clinical and laboratory syndromes.
76. Glomerulonephritis in children. Etiology and pathogenesis of acute and chronic glomerulonephritis . Classification. Main clinical and laboratory manifestations. Diagnosis, treatment, prevention.
77. Spicy Glomerulonephritis in children. Etiopathogenesis , clinical forms, their characteristics, diagnosis, treatment, prevention, and clinical examination.
78. Pyelonephritis in children. Etiology, pathogenesis, classification, clinical and laboratory diagnostics. Acute Pyelonephritis in children. Clinical features of young and older children. Treatment according to clinical guidelines. Prevention. Clinical follow-up.

79. Chronic Pyelonephritis in children. Causes, clinical and laboratory diagnostics. Treatment principles.
80. Acute renal failure in children. Causes. Main clinical and laboratory symptoms. Diagnostic criteria. Treatment principles. Indications for hemodialysis.
81. Chronic renal failure in children. Causes. Main clinical and laboratory symptoms. Treatment principles. Prognosis.
82. Differential diagnostics of pyelonephritis and glomerulonephritis in children.
83. Acute leukemia in children. Clinical, morphological, and immunological characteristics of various leukemia variants. Determining an individual prognosis. Current treatment protocols in accordance with clinical guidelines.
84. Diabetes mellitus in children and adolescents. Etiology, pathogenesis, clinical presentation. Basic treatment principles according to Federal Clinical Guidelines.
85. Diabetic coma. Differential diagnosis and emergency treatment in accordance with Federal Clinical Guidelines.
86. Congenital hypothyroidism. Causes, clinical features, and diagnosis. Treatment according to Federal Clinical Guidelines.
87. Diffuse toxic goiter. Diagnosis (clinical, laboratory, and instrumental). Treatment principles in accordance with clinical guidelines.
88. Endemic goiter. Prevalence in the Volgograd region. Clinical features and diagnostics.
89. Outpatient monitoring of children in the first year of life. Assessment of the health of a child in the first year of life . Outpatient monitoring of children with various pathologies.
90. Assessment of the health status of children and adolescents. Assessment criteria. Health groups.

3. Example of a ticket for Intermediate assessment:

Federal State Budgetary Educational Institution institution of higher education
Volgograd State Medical University
Ministry of Health of the Russian Federation

Discipline: Pediatrics
Specialist in specialty 31.05.01 General Medicine, focus (profile) General Medicine
Academic year: 2026–2027 (9th semester)

Examination ticket No. 1

1. Primary and secondary school age: characteristics and features of age-related pathology. Physiological characteristics and features of pathology during puberty.
2. Iron deficiency anemias in children. Main causes depending on age. Clinical and hematological manifestations of iron deficiency anemia. Diagnosis, treatment, and prevention of iron deficiency anemia in children according to Federal Clinical Guidelines.
3. Thyroid disease in children and adolescents. Endemic goiter. Prevalence in the Volgograd region. Clinical presentation and diagnostics.

Head of the Department M.Ya. Ledyaeв

The full fund of assessment tools for the discipline is available in the Electronic Information and Analysis System of the Federal State Budgetary Educational Institution of Higher Education Volgograd State Medical University of the Ministry of Health of the Russian Federation.

Reviewed and approved at the meeting of the Department of Children's Diseases, Minutes №16, dated "26" May 2026.

Head of the Department



M.Ya. Ledyaeв