DANYLO HALYTSKY LVIV NATIONAL MEDICAL UNIVERSITY

Department of Internal Medicine N 1 Department of Internal Medicine N 2

Approved

First Vice-Rector for scientific and pedagogical work

Assoc. prof. Iryna SOLONYNKO

"30"

2023

WORK PROGRAMME OF THE EDUCATIONAL DISCIPLINE

"Internal medicine" OK 25.1

5 years of study

training of specialists of the second (master's) level of higher education Field of Knowledge 22 "Health care" specialties 222 "Medicine"

Discussed and approved on the methodical meetings of the Departments of Internal Medicine N 1 and Internal Medicine N 2 protocol N 9 dated 18.04.2023

Mead of the Department of Internal Medicine N 1

1 Jhummul

prof. Orest ABRAHAMOVYCH

Head of the Department of Internal Medicine N 2

assoc. prof. Orest KOMARYTSYA

Approved by the Profile Methodical Council on the therapeutic disciplines protocol N 3 dated 04.05.2023

Head of the Profile Methodical Council prof. Olena RADCHENKO

The work programme of the discipline "Internal medicine" (OC 25.1.) 5 year training of specialists of the second level of higher education (Master of medicine) the field of knowledge 22 "Health Care" specialty 222 "Medicine" was composed by the staff of the Department of Internal Medicine No 2 Danylo Halytsky Lviv National Medical University: the Head of the department, Associate Professor Orest Komarytsya; Professor Olena Radchenko, Associate Professor Olga Korolyuk, Associate Professor Anzhelika Filipyuk, Associate Professor Olena Sorokopud, and Assistant professor Oksana Slaba

Editors: Associate Professor Orest Komarytsya; Professor Olena Radchenko; Associate Professor Olga Korolyuk

Reviewers: Head of Department Propaedeutic of Internal Diseases Professor Roman Dutka

The work programme was discussed and approved by the Profile Methodical Council of therapeutic disciplines Danylo Halytsky Lviv National Medical University

Changes and additions to the work programme for 2023-2024 academic year

№	Contents of changes (additions)	Date and protocol number of the meeting	Notes
1.	The code has been changed from OC 28 to OC 25.1. in accordance with the <i>requirements</i> of the EPP (Educational and professional programs) 2023/2024	May 3, 2023 Protocol No 10	

Head of the Department of Internal Medicine No 2

assoc. prof. Orest Komarytsya

INTRODUCTION

The work programme of the discipline "Internal medicine" (OC 25.1.) 5 year training of specialists of the second level of higher education Master of medicine the field of knowledge 22 "Health Care" specialty 222 "Medicine" specialization "Internal Medicine" was composed basing on the Law of Ukraine "About Higher Education", "The procedure for training applicants for higher education Magister of Medicine in higher primary institutions", Standard of high education – Magister of Medicine branch of knowledge 22 "Health Care", Specialty 222 "Medicine" (the Order of the Ministry of Education and Science of Ukraine dated November, 8, 2021); the Order of the Ministry of Education and Science of Ukraine No 1254 dated 01.10.2019 "On amendments to the Guidelines for the development of standards of higher education"; the Order of Danylo Halytsky Lviv National Medical University dated March, 15, 2022 "On the introduction of the curriculum for the preparation of applicants for the second (master's) level of higher education in the specialty 222 Medicine".

According to the Educational plan (the Order of Danylo Halytsky Lviv National Medical University dated 15.03.2022), the study the end-to-end discipline "Internal Medicine" is studied from the 4th year to the 6th year of study inclusively. The organization of the educational process is carried out according to the European Credit Transfer System of the Organization of the Educational Process (ECTS).

Description of the discipline (abstract).

The program of "Internal medicine" for the 5th year provides the study of the basics of internal medicine and includes the following sections of internal medicine "cardiology", "rheumatology", and "nephrology", with the emphasis on the study of aetiology, pathogenesis, clinical presentation, diagnostics, treatment, and prophylaxis of the most common internal diseases. The main purpose of the course is to teach students the basics of internal medicine. Skills of interviewing, history taking, clinical examination of the patient, diagnostics, differential diagnostics, treatment and prevention of internal diseases, diagnosis and provision of urgent medical care in case of emergencies, and performing medical manipulations are established. Students participate in the diagnostic and treatment process under the guidance and supervision of tutors. It is also provided familiarization with and acquirement of performing the procedures that most commonly used in the practice of internal medicine. Practical classes and clinical visitations of patients with tutors are the main parts of this course. Each student records and reports the clinical results of the patient's examination to the tutor on a daily basis and writes a patient's record (medical cards). According to the curriculum, there are the following types of classes: a) lectures, b) practical classes, and c) individual work of students.

The structure of the discipline The discipline is the part of the educational program for the preparation of masters of medicine and is designed for 7.5 ECTS credits (224 hours)

The structure	Number of		Number of credits, hours, particularly		Year of	Tyma of
of educational	Totally		Classroom	IWS	study,	Type of control
discipline	Totally	Lectures	Practical classes	1005	semester	control
«Internal medicine»	7.5 credits/ 224 hours	14	100 hours	110 hours	5 year (IX-X semesters)	Examination
		Durir	ng semesters			
Section 1. Cardiovascular diseases	3.0 credits/ 143 hours	10	64	44+25	IX semester	
Section 2. Rheumatic diseases	1.5 credits/ 56 hours	2	24	30	X semester	
Section 3. Renal diseases	1.0 credit/ 25 hours	2	12	11	X semester	Examination

The subject of study of the discipline is diagnosis, treatment and prevention of cardiovascular, rheumatic, and renal diseases

Internal medicine as academic discipline

- a) is based directly on the knowledge of propaedeutic of internal medicine, along with knowledge of propaedeutic of paediatrics, general surgery, and basic disciplines (i.e., medical biology, medical and biological physics, bioorganic and biological chemistry, histology, cytology and embryology, human anatomy, pathomorphology, physiology and pathophysiology, microbiology, virology and immunology, radiology) and integrates with these disciplines;
- b) lays the foundation for students' assimilation of knowledge in specialized clinical professional-practical disciplines.
- c) forms the ability to apply knowledge about internal diseases into the process of further education and professional activity in accordance with the principles of evidence-based medicine

Interdisciplinary links: normal anatomy, normal physiology, pathology, pathophysiology, histology, biochemistry, pharmacology, clinical pharmacology, propaedeutic of internal medicine, patient care, infectious diseases, phthisiology, oncology, general surgery, radiology and radiation medicine, microbiology, virology and immunology.

1. The purpose and objectives of the discipline

- **1.1. The purpose** of the course of educational discipline "Internal Medicine" is to develop the ability to apply the acquired knowledge and skills for the typical tasks of a physician in the field of health care, the scope of which is provided by the determining of the certain lists of syndromes and symptoms of diseases and emergencies that require the special management approach, laboratory and instrumental assessment, and medical manipulations.
 - **1.2. The main objectives** of study the discipline "Internal Medicine 5th year" are the following:

- 1. to conduct an interviewing, history taking, and clinical examination of patients with the main cardiovascular, renal and rheumatic diseases; to analyse the obtained results;
- to determine the etiological and pathogenic factors of the most common cardiovascular, renal and rheumatic diseases:
- 3. to analyse the typical clinical presentation, to identify the clinical variants and complications of the most common cardiovascular, renal and rheumatic diseases;
- 4. to make a preliminary diagnosis of the most common cardiovascular, renal and rheumatic diseases;
- 5. to plan obligatory laboratory, imaging, endoscopic and functional tests that are necessary for verification of the most common cardiovascular, rheumatic and renal diseases, and their complications;
- 6. to make a differential diagnosis, substantiate and establish a clinical diagnosis of the most common cardiovascular, renal and rheumatic diseases, basing on the obtained results of laboratory and instrumental tests;
- 7. to determine need in activity limitation, regimen of rest and activity during treatment of the most common cardiovascular, renal and rheumatic diseases;
- 8. to determine the need for special diet or medical nutrition during treatment of the most common cardiovascular, renal and rheumatic diseases;
- 9. to determine the approach, principles, and regimen of therapy of the most common cardiovascular, renal and rheumatic diseases;
- 10. to administer the treatment, including disease-modifying therapy that improve survival and/or prognosis for the most common cardiovascular, renal and rheumatic diseases, and their complications
- 11. to determine the need for emergent medical care in case of urgencies or emergencies;
- 12. to provide the emergency medical care basing on the diagnosis;
- 13. to carry out the primary and secondary prevention of the most common cardiovascular, renal and rheumatic diseases;
- 14. to assess prognosis, disability, and ability to work in patients with the most common cardiovascular, renal and rheumatic diseases;
- 15. to perform the medical manipulations;
- 16. to keep medical records;
- 17. to comply with ethics, bioethics and deontology requirements during the professional activities.
- **1.3.** Competences and learning outcomes, the formation of which is facilitated by the discipline (relationships with the normative content of the training of higher education applicants, formulated in terms of learning outcomes in the EPP and in the Higher Education Standard).

General competencies (GC):

- 1. Ability to abstract thinking, analysis and synthesis.
- 2. Ability to learn and master modern knowledge.
- 3. Ability to apply knowledge in practical situations.
- 4. Knowledge and understanding of the subject area and understanding of professional activity.
- 5. Ability to adapt and act in a new situation.
- 6. Ability to make reasoned decisions.
- 7. Ability to work in a team.
- 8. Ability to interpersonal interaction.
- 9. Ability to use information and communication technologies.
- 10. Ability to search and analyse information from various sources.
- 11. Definiteness and perseverance in terms of tasks and responsibilities
- 12. Awareness of equal opportunities and gender issues.
- 13. Ability to realize rights and responsibilities as a society member, realize the values of free democratic civil society and the need for its sustainable development, the supremacy of law, the rights and freedoms of people and citizens.
- 14. Ability to preserve and multiply the moral, cultural, scientific valuables and acquisitions of society based on an understanding of the history and patterns of development of the subject area, its place in the general system of knowledge about nature and society and the development of society, techniques and technologies, to use various types and forms of motor activity for active rest and leading a healthy lifestyle.

Professional competencies (PC):

- 1. Ability to collect medical information about a patient and analyse clinical data.
- 2. Ability to determine the necessary list of laboratory and instrumental studies and to evaluate obtained results.
- 3. Ability to make preliminary and clinical diagnoses
- 4. Ability to determine the necessary regimen of rest and activity in the treatment and prevention of internal diseases.
- 5. Ability to determine type of diet and nutrition in the treatment and prevention of internal diseases.
- 6. Ability to determine the principles of treatment and prevention of internal diseases.
- 7. Ability to diagnose medical urgencies and emergencies.
- 8. Ability to determine emergency management and to provide emergency medical aid.
- 9. Ability to perform medical evacuation measures.
- 10. Ability to perform medical manipulations.
- 11. Ability to solve medical problems in a new or unfamiliar environment, in case of incomplete or limited information, considering aspects of social and ethical responsibility.
- 12. Ability to perform medical record documentation, including electronic forms.

- 13. Ability to convey own knowledge, conclusions and arguments about health care problems and related issues to specialists and non-specialists, in particular to people who are studying, clear and unambiguous
- 14. Adherence to ethical principles during work with patients or laboratory animals.
- 15. Adherence to professional and academic integrity, responsibility for the reliability of the obtained scientific results.

Program learning outcomes (PLO)

- 1. Thorough knowledge about the structure of professional activity and ability to perform professional activities requiring updating and integration of knowledge, realization of responsibility for professional development and further professional training with a high level of autonomy.
- 2. Knowledge and understanding of fundamental and clinical biomedical sciences at a level sufficient for solving professional tasks in the field of health care.
- 3. Specialized conceptual knowledge including scientific achievements in the field of health care, ability to conduct researches, critical understanding of problems in the field of medicine and related interdisciplinary problems.
- 4. Highlighting and identifying leading clinical symptoms and syndromes mentioned in the EQC list 1; formulation of preliminary diagnoses of common internal disease mentioned in the EQC list 2, using data from the patient's history, physical examination, and knowledge about human organs and systems.
- 5. Diagnoses formulation of internal diseases mentioned in the EQC list 4, taking into account the age and gender, patient's complaints, history of life and disease, evaluation of psychomotor and physical development, vital signs, physical examination of internal organs and systems, and results of additional tests.
- 6. Reasonable formulation of final clinical diagnosis EQC list 2 with differential diagnosis after analysis of the received subjective and objective data of physical examination and additional tests; implementation of relevant ethical and legal norms, working under the supervision of a managing physician in the conditions of a health care facility.
- 7. Planning and interpretation of the results of additional tests (laboratory, functional, imaging etc.) mentioned in the EQC list 4 for patients with internal diseases mentioned in the EQC list 2.
- 8. Determination the leading clinical syndrome and establishment of factors determining severity of victim's / patient's condition with a reasonable decision and assessing the person's condition in any situation mentioned in EQC list 3 and in any case (i.e., in out- or in-patient setting, out of health care facility, including situations of emergencies, lack of information or limited time).
- 9. Determination way and principles of treatment for patients with diseases listed in the EQC list 2, taking into account age and gender, in- or out-patient setting or extremal situations (including stages of medical evacuation) depending on previously established clinical diagnosis and according to existing algorithms, standards, ethical and legal norms. Substantiation of personalized recommendations under the control of the head physician of a medical institution.
- 10. Determination of rest and activity regimens, diet, nutrition, patient's ability to work, basing on the preliminary and/or final clinical diagnosis, following existing algorithms and standards and relevant ethical and legal norms
- 11. Determination tactics and providing urgent medical care in emergencies listed in the EQS list 3, including situations with limited time, in accordance with existing clinical standards and protocols.
- 12. Creation of rational medical routes for patients; organization of interaction with colleagues (including those in other hospitals, institutions or organizations), applying tools for the promotion of medical services in the market based on the analysis of the needs of the population.
- 13. Performing medical manipulations mentioned in the EQS list 5 in the inpatient or outpatient setting depending on previously established diagnosis and/or specific indications with reasoned decision following existing clinical standards and protocols, relevant ethical and legal norms.
- 14. Determination patient's functioning state or professional suitability, disability, duration of incapacity with the preparation of relevant medical documents basing on clinical diagnosis and course of the disease.
- 15. Development and implementation of anti-epidemic or preventive measures for different diseases at individual or population level.
- 16. Purposeful search for information in the professional literature and databases, analysis, evaluation and adequate use of the obtained information.
- 17. Use of modern digital technologies, specialized software, statistical methods of data analysis to solve complex problems of health care and research work.
- 18. Clear and unambiguous transfer of own knowledge, conclusions and arguments about health care problems and related issues to specialists and non-specialists.
- 19. Management of healthcare work problems that can be complex, unpredictable and require new strategic approaches; organization of work and professional development of personnel taking into account the acquired skills of effective team work with adherence to leadership positions, appropriate quality, accessibility and fairness, ensuring the provision of integrated medical care.
- 20. Free communication using native language or English (in oral or writing form) to discuss professional activities, research and projects.
- 21. Effective decisions on health care issues, assessing the necessary resources and taking into account social, economic and ethical consequences.

Matrix of competencies

Matrix of competencies					
No	Competency	Kn	Skb	Coc	$\mathbf{AR^d}$
General	competencies (GC)				
GC1	Ability to abstract thinking, analysis and synthesis.				AR1
GC2	Ability to learn and master modern knowledge.	Kn1	Sk3	Co2	AR3
GC3	Ability to apply knowledge in practical situations.	Kn1	Sk2	Co1	AR1
GC4	Knowledge and understanding of the subject area, understanding of professional activity.	Kn2	Sk2	Co2	AR2
GC5	Ability to adapt and act in a new situation.		Sk3		AR2
GC6	Ability to make reasoned decisions.	Kn1	Sk3	Co1	AR1
GC7	Ability to work in a team.	Kn2	Sk3	Co1	AR2
GC8	Ability to interpersonal interaction.	Kn1	Sk3	Co1	AR2
GC10	Ability to use information and communication technologies.	Kn2	Sk3	Co2	AR3
GC11	Ability to search and analyse information from various sources.	Kn2	Sk2	Co2	AR2
GC12	Definiteness and perseverance in terms of tasks and responsibilities	Kn2	Sk3		AR3
GC13	Awareness of equal opportunities and gender issues.	Kn2	Sk1	Co1	AR1
GC14	Ability to realize rights and responsibilities as a member of society, realize the values of civil				
	free democratic society and the need for its sustainable development, the supremacy of law,	Kn1	Sk2	Co1	AR3
	the rights and freedoms of people and citizens.				
GC15	Ability to preserve and multiply the moral, cultural, scientific valuables and acquisitions of				
	society based on an understanding of the history and patterns of development of the subject				
	area, its place in the general system of knowledge about nature and society, the development	Kn2	Sk3		AR3
	of society, techniques and technologies; to use various types and forms of motor activity for				
	active rest and healthy lifestyle.				
	onal competencies (PC)				
PC1	Ability to collect medical information about a patient and analyse clinical data.				AR3
PC2	Ability to determine the necessary list of additional tests and to evaluate obtained results		Sk3		AR1
PC3	Ability to make preliminary and clinical diagnoses	Kn2	Sk3		AR2
PC4	Ability to determine the necessary regimen of rest and physical activity in the treatment and prevention of internal diseases	Kn2	Sk2	Co1	AR1
PC5	Ability to determine type of diet, nutrition in the treatment and prevention of internal diseases.	Kn2	Sk1	Co1	AR1
PC6	Ability to determine the principles of treatment and prevention of internal diseases.				AR1
PC7	Ability to diagnose medical urgencies and emergencies				AR2
PC8	Ability to determine emergency management and to provide emergency medical aid.	_			AR2
PC9	Ability to perform medical evacuation measures				AR2
PC10	Ability to perform medical manipulations.	Kn1	Sk3	Co1	AR1
PC11	Ability to solve medical problems in a new or unfamiliar environment, in case of incomplete	IZ C	CI-2	O . 1	4 D 2
	or limited information, considering aspects of social and ethical responsibility	Kn2	SK3	COI	AR2
PC16	Ability to perform medical record documentation, including electronic forms	Kn2	Sk3	Co1	AR1
PC21	Ability to convey own knowledge, conclusions and arguments about health care problems				
	and related issues to specialists and non-specialists, in particular to people who are studying,	Kn2	Sk3	Co2	AR2
	clear and unambiguous				
PC24	Adherence to ethical principles during work with patients or laboratory animals.	Kn1	Sk2	Co1	AR1
PC25	Adherence to professional and academic integrity, responsibility for the reliability of the obtained scientific results.	Kn2	Sk2	Co2	AR3
	Integral competency	•			•
Ability t	o solve typical and complex specialized tasks and practical problems in professional activities	;			
in the fi	eld of health care, or during learning process, involving research conduction / implementation	Kn2	Sk2	Co2	AR3
ot innov	ations, and is characterized by the complexity and uncertainty of conditions and requirements.				

Notes: ${}^{a}Kn = Knowledge$; ${}^{b}Sk = Skill$; ${}^{c}Co = Communication$; ${}^{d}AR = Autonomy$ and responsibility

Program learning outcomes

	1 rogi ani teat ming outcomes					
Learning	The content of the learning outcome	Reference to the				
outcome		competencies				
code		matrix code				
1	2	3				
Kn-1	To know anatomy, physiology of internal organs and systems, skin, skeleton,	PLO-1-3				
	connective tissue, and blood					
Kn-2	To know pathomorphology and pathophysiology of common internal diseases	PLO-1-3				
Kn-3	To know the biochemistry of major metabolic processes, mechanisms of action of	PLO-1-3				
	the main classes of medications					
Kn-4	To know characteristics of the pathogens that may cause internal diseases and the	PLO-1-3				
	basics of epidemiology					

1	2	3
Kn-5	To know the methods of evaluation of integrated health indicators; environmental	PLO-15-19
	factors; system of preventive measures; socioeconomic and biological	
	determinants of health, methods for doctor's activity assessment	
Sk-1	To interview complaints and medical history, to perform physical examination	PLO-4-5
Sk-2	To evaluate obtained results of additional tests	PLO-5,7
Sk-3	To perform basic medical manipulations	PLO-13
Co-1	To highlight the leading symptoms and syndromes. To diagnose the disease. To	PLO-6-8
	plan necessary additional tests. To make differential diagnosis.	
Co-2	To determine diet / plan of nutrition, to plan preventive strategies and tactics.	PLO-9-12
Co-3	To administer treatment and to determine its duration.	PLO-9-12
Co-4	To diagnose emergencies and to determine the tactics of emergent medical care.	PLO-11
Co-5	To determine health indicators; environmental factors; preventive measures;	PLO-15-19
	determinants of health, efficiency of doctor's activity and quality of medical care	
AR-1	To organize the work of medical staff; to form rational medical routes of patients;	PLO-18-21
	to interact with colleagues, organizations and institutions.	
AR-2	To guide by rights, freedoms and responsibilities. To improve professional level.	PLO-18-21
	To adhere to the requirements of ethics, bioethics and deontology.	
AR-3	To form the purposes and structure of personal activity. To adhere to a healthy	PLO-18-21
	lifestyle and self-control.	

Notes: Kn = Knowledge; Sk = Skill; Co=Communication; AR=Autonomy and responsibility; PLO= Program learning outcomes

2. The format and scope of the discipline

The format of the course (full-time or distance learning)	Full-time	
Type of training sessions	Number of hours	Number of groups
lectures	14	
practical classes (practices)	100	
seminars	0	
individual work of students (IWS)	110	

3. Structure of the discipline

Thematic plan	Lectures	Practice	sIWS
1. The main principles of diagnosis, treatment and prevention of major cardiovascular dise	ases		
Topic 1. Essential arterial hypertension	1	4	3
Topic 2. Secondary arterial hypertension	1	4	3
Topic 3. Atherosclerosis, chronic forms of coronary artery disease	2	4	3
Topic 4. Acute coronary syndrome: unstable angina. The role of statins in CV risk reduction.	1	4	3
Topic 5. Acute myocardial infarction	1	4	3
Topic 6. Pulmonary heart and pulmonary embolism, COVID-19.		4	3
Topic 7. Infective endocarditis		4	2
Topic 8. Acute rheumatic fever		4	3
Topic 9. Congenital heart defects, acquired valve diseases		4	3
Topic 10. Cardiomyopathies	1	4	3
Topic 11. Myocarditis and pericarditis	1	4	3
Topic 12. Cardiac arrhythmias		4	3
Topic 13. Heart blocks		4	3
Topic 14. Modern principles of treatment of cardiac rhythm and conduction disorders		4	2
Topic 15. Acute heart failure	1	4	2
Topic 16. Chronic heart failure	1	4	2
Writing of medical record			25
2. The main principles of diagnosis, treatment and prevention of major rheumatic disease	s	ir.	
Topic 17. Systemic lupus erythematosus	1	4	5
Topic 18. Systemic sclerosis and dermatomyositis	1	4	5
Topic 19. Systemic vasculitis		4	5
Topic 20. Osteoarthritis and gout		4	5
Topic 21. Rheumatoid arthritis		4	5
Topic 22. Ankylosing spondylitis and reactive arthritis		4	5
3. The main principles of diagnosis, treatment and prevention of major renal diseases			
Topic 23. Acute kidney injury and pyelonephritis	1	4	3
Topic 24. Chronic kidney disease, glomerulonephritis, tubulointerstitial nephritis		4	5
Topic 25. Chronic renal failure, kidney amyloidosis	1	4	3
Total number of hours _224_/_7.5 ECTS credits	14	100	110
Summary control	examin	ation	
1 Thomasia plan of lastures			

No	Subject	Hours
1.	Arterial hypertension: the main principles of diagnosis, treatment and prevention.	2
2.	Atherosclerosis, chronic forms of coronary artery disease: the main principles of diagnosis, treatment and prevention.	2
3.	Acute coronary syndrome: the main principles of diagnosis, treatment and prevention.	2
4.	Myocarditis and cardiomyopathies: the main principles of diagnosis, treatment and prevention.	2
5.	Heart failure: the main principles of diagnosis, treatment and prevention.	2
6.	Systemic connective tissue disorders: the main principles of diagnosis, treatment and prevention.	2
7	Acute and chronic glomerulonephritis, chronic kidney disease, and chronic renal failure: the main principles of diagnosis, treatment and prevention	2
	Total number if hours	14

5. Thematic plan of practical classes

No	Subject	Hours
1. Tl	ne main principles of diagnosis, treatment and prevention of major cardiovascular diseases	
1.	Essential arterial hypertension: the main principles of diagnosis, treatment and prevention.	4
2.	Secondary arterial hypertension: the main principles of diagnosis, treatment and prevention.	4
3.	Atherosclerosis and chronic forms of coronary artery disease: the main principles of diagnosis,	4
	treatment and prevention.	
4.	Acute coronary syndrome: the main principles of diagnosis, treatment and prevention. The role of	4
	statins in cardiovascular risk reduction.	
5.	Acute myocardial infarction: the main principles of diagnosis, treatment and prevention.	4
6.	Pulmonary heart and pulmonary embolism: the main principles of diagnosis, treatment and	4
	prevention. Diagnosis and principles of therapy of acute coronavirus disease (COVID-19).	
7.	Infective endocarditis: the main principles of diagnosis, treatment and prevention.	4
8.	Acute rheumatic fever: the main principles of diagnosis, treatment and prevention.	4
9.	Congenital heart defects, acquired valve diseases: the main principles of diagnosis, treatment and	4
	prevention.	
10.	Cardiomyopathies: the main principles of diagnosis, treatment and prevention.	4
11.	Myocarditis and pericarditis: the main principles of diagnosis, treatment and prevention.	4
12.	Cardiac arrhythmias: the main principles of diagnosis.	4
13.	Heart blocks: the main principles of diagnosis.	4
14.	Modern principles of treatment and prevention of cardiac rhythm and conduction disorders.	4
15.	Acute heart failure: the main principles of diagnosis, treatment and prevention.	4
16.	Chronic heart failure: the main principles of diagnosis, treatment and prevention.	4
2. T	he main principles of diagnosis, treatment and prevention of major rheumatic diseases	
17.	Systemic lupus erythematosus: the main principles of diagnosis, treatment and prevention.	4
18.	Systemic sclerosis and dermatomyositis: the main principles of diagnosis, treatment and prevention.	4
19.	Systemic vasculitis: the main principles of diagnosis, treatment and prevention.	4
20.	Osteoarthritis and gout: the main principles of diagnosis, treatment and prevention.	4
21.	Rheumatoid arthritis: the main principles of diagnosis, treatment and prevention.	4
22.	Ankylosing spondylitis and reactive arthritis: the main principles of diagnosis, treatment and	4
	prevention.	
	he main principles of diagnosis, treatment and prevention of major renal diseases	
23.	Acute kidney injury and pyelonephritis: the main principles of diagnosis, treatment and prevention.	4
24.	Glomerulonephritis, tubulointerstitial nephritis, and chronic kidney disease: the main principles of	4
	diagnosis, treatment and prevention.	
25.	Chronic renal failure, kidney amyloidosis: the main principles of diagnosis, treatment and prevention.	4
	Total number of hours	100

6. Thematic plan of individual work of students

No	Subject	Hours
1	2	3
Part	1. The main principles of diagnosis, treatment and prevention of major cardiovascular diseases	
1.	Preparation for the practical class "Essential arterial hypertension (AH): the main principles of	3
	diagnosis, treatment and prevention". Mastering the skills of blood pressure measuring on the upper	
	and lower limbs, assessment of ankle-brachial index, and ECG interpretation. Mastering the skills of	
	choice of antihypertensive agents in particular clinical case.	
2.	Preparation for the practical class "Secondary AH: the main principles of diagnosis, treatment and	3
	prevention". Mastering the skills of interpreting the results of ultrasound examination of the thyroid	
	gland, adrenal glands, kidneys, and Doppler echocardiography.	

1	2	3
3.	Preparation for the practical class "Atherosclerosis and chronic forms of coronary artery disease: the main principles of diagnosis, treatment and prevention". Mastering the skills of interpreting the results	3
	of serum lipid profile and ECG.	
4.	Preparation for the practical class "Acute coronary syndrome: the main principles of diagnosis, treatment and prevention. The role of statins in cardiovascular risk reduction". Mastering the skills of interpreting the results of ECG and blood biochemistry (i.e., markers of myocardial necrosis). Mastering the skills of choice of statins considering lipid-lowering and pleiotropic properties, and	3
5.	possible adverse effects. Preparation for the practical class "Acute myocardial infarction: the main principles of diagnosis,	3
3.	treatment and prevention". Mastering the skills of interpreting the results of chest radiographs, ECG, and Doppler echocardiography.	3
6.	Preparation for the practical class "Pulmonary heart and pulmonary embolism: the main principles of diagnosis, treatment and prevention. Diagnosis and principles of therapy of acute coronavirus disease (COVID-19)". Mastering the skills of interpreting the results of Doppler echocardiography, ECG, and laboratory tests (e.g., CBC, blood coagulation tests, D-dimers, serum procalcitonin, RT-PCR for SARSCoV2).	3
7.	Preparation for the practical class "Infective endocarditis: the main principles of diagnosis, treatment and prevention". Mastering the skills of interpreting the results of Doppler echocardiography and	2
8.	laboratory tests (CBC, blood biochemistry, blood serology, blood culture with antibiogram). Preparation for the practical class "Acute rheumatic fever: the main principles of diagnosis, treatment and prevention". Mastering the skills of interpreting the results of ECG and blood tests (e.g., CBC, total serum protein with fractions, acute phase reactants, ASLO titre).	3
9.	Preparation for the practical class "Congenital heart defects, acquired valve diseases: the main principles of diagnosis, treatment and prevention." Mastering the skills of interpreting the results of chest radiographs and Doppler echocardiography.	3
10.	Preparation for the practical class "Cardiomyopathies: the main principles of diagnosis, treatment and prevention". Mastering the skills of interpreting the results of ECG, Doppler echocardiography, and blood tests (markers of myocardial necrosis, BNP, proNT-BNP).	3
11.	Preparation for the practical class "Myocarditis and pericarditis: the main principles of diagnosis, treatment and prevention". Mastering the skills of interpreting the results of ECG, Doppler echocardiography, and blood tests (markers of myocardial necrosis, BNP, proNT-BNP).	3
12.	Preparation for the practical class "Cardiac arrhythmias: the main principles of diagnosis". Mastering the skills of interpreting the results of ECG and Doppler echocardiography.	3
13.	Preparation for the practical class "Heart blocks: the main principles of diagnosis." Mastering the skills of interpreting the results of ECG.	3
14.	Preparation for the practical class "Modern principles of treatment and prevention of cardiac rhythm and conduction disorders". Mastering the skills of choice of antiarrhythmic agents considering their advantages and disadvantages in particular clinical case.	2
15.	Preparation for the practical class "Acute heart failure: the main principles of diagnosis, treatment and prevention". Mastering the skills of interpreting the results of ECG, Doppler echocardiography, and chest radiography.	2
16.	Preparation for the practical class "Chronic heart failure: the main principles of diagnosis, treatment and prevention". Mastering the skills of interpreting the results of ECG, Doppler echocardiography, and blood tests (i.e., BNP, proNT-BNP)	2
	Writing of medical record	25
	2. The main principles of diagnosis, treatment and prevention of major rheumatic diseases	
17.	Preparation for the practical class "Systemic lupus erythematosus: the main principles of diagnosis, treatment and prevention". Mastering the skills of interpreting the results of blood tests (CBC, serum protein electrophoresis, acute phase reactants, renal and liver profiles, ASLO titre, ANA, dsDNA antibodies, Sm-antigen etc.) and urinalysis.	5
18.	Preparation for the practical class "Systemic sclerosis and dermatomyositis: the main principles of diagnosis, treatment and prevention". Mastering the skills of interpreting the results of blood tests (i.e., CBC, serum protein electrophoresis, creatine phosphokinase, acute phase reactants, renal and liver profiles, SCL-70, Jo-1, etc.) and urinalysis.	5
19.	Preparation for the practical class "Systemic vasculitis: the main principles of diagnosis, treatment and prevention". Mastering the skills of interpreting the results of blood tests (i.e., CBC, serum protein electrophoresis, acute phase reactants, renal and liver profiles, pANCA, cANCA, serological markers for viral hepatitis B and C, etc.) and urinalysis.	5
20.	Preparation for the practical class "Osteoarthritis and gout: the main principles of diagnosis, treatment and prevention". Mastering the skills of interpreting the results of joint radiography and laboratory tests (i.e., CBC, acute phase reactants, serum uric acid level, renal profile, synovial fluid analysis etc.).	5
1	2	3
	<u> </u>	

21.	Preparation for the practical class "Rheumatoid arthritis: the main principles of diagnosis, treatment and prevention". Mastering the skills of interpreting the results of joints radiography and laboratory	5
	tests (e.g., CBC, urinalysis, acute phase reactants, rheumatoid factor, anti-CCP antibodies, and	
	synovial fluid analysis).	
22.	Preparation for the practical class "Ankylosing spondylitis and reactive arthritis: the main principles	5
22.	of diagnosis, treatment and prevention". Mastering the skills of interpreting the results of joints and	3
	sacroileal radiographs and laboratory tests (e.g., CBC, urinalysis, acute phase reactants, rheumatoid	
	factor, anti-CCP antibodies, and synovial fluid analysis).	
Dort	3. The main principles of diagnosis, treatment and prevention of major renal diseases	
23.	Preparation for the practical class "Acute kidney injury and pyelonephritis: the main principles of	3
	diagnosis, treatment and prevention". Mastering the skills of interpreting the results of kidney	
	ultrasound, CBC, blood biochemistry, urine tests and urine culture.	
24.	Preparation for the practical class "Chronic kidney disease, tubulointerstitial nephritis,	5
	glomerulonephritis: the main principles of diagnosis, treatment and prevention". Mastering the skills	
	of interpreting the results of CBC, urinalysis, blood biochemistry (i.e., acute phase reactants, protein	
	electrophoresis, plasma glucose, uric acid level, renal profile, lipid profile, etc.), calculation of	
	estimated glomerular filtration rate (eGFR).	
25.	Preparation for the practical class "Chronic renal failure, kidney amyloidosis: the main principles of	3
23.	diagnosis, treatment and prevention". Mastering the skills of interpreting the results of CBC,	3
	urinalysis, blood biochemistry and serology (i.e., acute phase reactants, total protein with fractions,	
	plasma glucose, uric acid level, renal profile, lipid profile, amyloid markers, eGFR)	440
	Total number of hours	110

7. Individual work

Individual work is a mandatory part of students' work, which is separately evaluated. It includes current work (writing home self-training tasks preparing to practical classes and writing of thematic patient's card, which are mandatory) and individual educational or research tasks. The quality of performance of mandatory individual work is included into the t assessment of study success. Additional individual work is assessed with extra points as it has different levels of difficulty, and must be completed before the end of the semester. Forms of additional individual work include the following: report of an abstract/ case presentation at a practical session or clinical conferences, writing of theses or articles, mastering practical skills, review of scientific literature by topic. Independent works from the discipline "Internal Medicine" are completed by students in written form, the control of implementation control is performed constantly during the semester during practical classes.

During the training, students must perform curation of patients with the following diseases:

2 wing the training, state its mast perform estation of patients with the following diseases.					
Essential arterial hypertension	Cardiomyopathy	Systemic diseases: systemic			
Secondary arterial hypertension	Heart failure	lupus erythematosus, systemic			
Chronic CAD	Valve diseases	sclerosis, dermatomyosytis			
Unstable angina	Cardiac arrhythmias	polymyositis, vasculutis			
Acute myocardial infarction	Heart blocks	Ankylosing spondylitis			
Chronic pulmonary heart Rheumatoid arthritis Glome		Glomerulonephritis			
Pulmonary embolism	Reactive arthritis	Pyelonephritis			
Infective endocarditis, myocarditis, pericarditis	Osteoarthritis	Chronic kidney disease			
Acute rheumatic fever, chronic rheumatic valve disease	Gout	Chronic renal failure			

The organization of the educational process should ensure the participation of students in the curation of hospitalized patients. If there is no possibility to demonstrate a patient with a disease that corresponds to the subject of the practical class, students fill in protocols, modelling presentation of the disease relevant to the topic according to tutor's recommendations. Daily patient examination reports are provided to a teacher for the control and assessment. The teacher ensure that each student receives the necessary competence in the following areas: questioning the patient and history taking, clinical examination, description and report of obtained results, diagnostic decisions and determining approach for management and treatment (critical thinking), and writing patient's medical cards.

8. Teaching methods

Practical, visual, verbal, work with a book, video method, interactive methods (business games, role-playing games, clinical cases), etc. Interactive methods such as business games, role-playing games, and cases are used during practical classes. The organization of classes consists of the following blocks: program and information, education and methodical, control, educational research, and auxiliary.

The program and information block is presented on the official website of the University.

The educational and methodical block includes theoretical lecture materials (available on MISA platform), which are conducted with the use of multimedia presentations. Methodical materials for students and teachers are updated every year and are available both in printed form and electronic version (on MISA platform), which is given to students for individual work at home. The software "Chest pain" and a phantom of the human torso for cardiopulmonary resuscitation are also used. Educational and practical materials also include educational DVD-films about methodology of physical examination etc., depending on the subject of classes (e.g., invasive diagnostic and therapeutic procedures in cardiology (angiography, stenting, shunting), atlases of clinical diagnosis, instrumental methods of examination etc.).

The control block contains materials for the current control of student activities (questions, MCQs, tests from the Licensing Exam "Step-2" base available for students on MISA platform).

The educational and research block contains topics of creative tasks, abstracts, educational and research tasks, term qualification works, etc. The department stores multimedia materials of student scientific-practical conferences of the medical faculty, which are examples and / or illustrative material for training, in addition, students have the opportunity to participate directly in procedures of echocardiography and ultrasonography of abdominal organs.

The auxiliary block is filled with video, audio, multimedia materials and electronic manuals, the materials of which can be processed on portable devices (phone, smartphone, netbook, book reader, etc.). To ensure the independent work of students, they are offered links to electronic resources that can be used.

Course policy. In teaching and studying the course of Internal Medicine 5th year, all teachers and students adhere to the policy of academic integrity, intolerance to violations of medical and human deontology and ethics. Examination of patients at the clinical bases of the department complies with the principles of the Helsinki Declaration of the World Medical Association on ethical principles of scientific medical research with human participation (1964, 2004, 2013) and Orders of the Ministry of Health of Ukraine No 690 (2009), No 944 (2009) and No 616 (2012).

9. Control methods: oral, written, test, programmable, practical control, self-control.

Types of control: current and final.

The form of final control of study success: examination.

10. Current control

Current control is performed during practical classes and is aimed checking the assimilation of educational material by students. Current control is based on a MCQ-assessment of the initial level of knowledge, checking writing home self-training task, and thematic practical work during the class. Practical work include clinical cases, examination of patients, writing examination protocols with formulation of diagnosis with rationale, writing and explanation of further diagnostic tests, estimation of the results of available tests in medical records, formulation of final clinical diagnosis and explanation of differential diagnosis, and administration of treatment and preventive measures for the patient.

Rating of each practice accounts all types of work provided by the programme using a 4-point national scale. The student must receive positive rating for each practical class. The forms of assessment of current educational activities

are standard, and include control of theoretical and practical training.

are standard, and include control of theoretical and practical training.					
ming Method of verifying learning outcomes Assessment criteria					
Assessment criteria					
lefines the methods and technologies of assessment of students' knowledge, particularly, a list of all types of work					
nts are required to perform during practical class and the criteria for their assessment. For example, test control,					
patient's examination, demonstration of practical skills, etc. Each evaluation method must be described separately.					
("5"): 90-100% answers for format A tests (10 MCQs, single best answer of 5 given answers)					
are correct; correct clear, complete and logical answers for the questions about the current					
including questions and tasks for individual work. Presence of qualitative and complete home tasks					
osely links theory to practice and correctly demonstrates practical skills; able to solve clinical					
cases of increased complexity and to summarize the material. A student correctly conducts physic					
on of thematic patient, has the necessary communication skills, and uses the principles of					
eontology.					
"): 70-89% answers for format A tests are correct; clear and right answers for the questions					
current topic, including questions and tasks for individual work. There is a qualitative home					
udent correctly demonstrates practical skills or makes non-significant mistakes; able to solve					
inical cases and cases of moderate complexity. A student correctly conducts physical					
on of thematic patient, has the necessary practical skills, and makes no fatal mistakes during					
and treatment. A student may communicate with patients and colleagues, using the principles					
of medical deontology.					
Satisfactory ("3"): 60-69% answers for format A tests are correct. Homework is incomplete o					
contains mistakes. Inadequate or incomplete answers for the questions about the current topic a					
I work. A student cannot build a clear, logical answer; makes significant mistakes when					
g and demonstrating practical skills; solves only easy typical clinical cases, has a minimum of					
practical skills; performs examination and plan treatments with errors that do not threaten					
t's life; has a minimum of communication skills, uses the principles of medical deontology.					
ctory ("2"): less than 60% answers for format A tests are correct. The home task is written					
or is absent. A student does not know the material of the current topic, cannot answer					
ently and logically to additional questions, does not understand the content of the material;					
mificant mistakes when answering and demonstrating practical skills; conducts examination					
treatment with fatal consequences for a patient; has insufficient communication or verbal					
ufficiently uses the principles of medical deontology.					

11. The form of final control of study success

General rating system	General rating system Participation in the work during the semester 100% on a 200-point scale	
Rating scales	ting scales Traditional 4-point scale, multi-point (200-point) scale, ECTS rating scale	
Admission criteria for Attendance of all practical classes and implementation of all kinds of mandatory acti		
final control	during the year with a minimum rating 72 points, maximum 120 points	

Type of final control	Methods of final control	Passing criteria	
Examination	The examination in the discipline "Internal Medicine" includes:	discipline "Internal Medicine" includes: Minimum rating for	
	Ten MCQs (single best answer of 5 given answers), each correct	the exam is 50	
	answer values 1 point	points (level below	
	Clinical case No1 with 5 open questions for a topic studied during the	is a criterion of	
	5 th year; the answer for each question is rated 0-3-4-5 points	failure that is not	
	Clinical case No2 with 5 open questions for a topic studied during the	added to the year	
	4 th year; the answer for each question is rated 0-3-4-5 points	rating);	
	Two electrocardiograms described according to the algorithm with the	Maximum rating 80	
	formation of conclusion; each description is evaluated 0-6-8-10 points	points	

12. The scheme of calculation and distribution of points received by students

Assessment is one of the final stages of educational activity and determination of educational success. Total rating for the discipline is a sum of rating for 2 semesters (table below on the left) and rating for the exam (described above).

г	discipline is a sum of faming for 2 semicontrol (there exists)							
	Scale (T = traditional, $200 = 200$ -point scale)							
	T	200	T	200	T	200	T	200
	5	120	4.45	107	3.91	94	3.37	81
	4.95	119	4.41	106	3.87	93	3.33	80
	4.91	118	4.37	105	3.83	92	3.29	79
	4.87	117	4.33	104	3.79	91	3.25	78
	4.83	116	4.29	103	3.74	90	3.2	77
	4.79	115	4.25	102	3.7	89	3.16	76
	4.75	114	4.2	101	3.66	88	3.12	75
	4.7	113	4.16	100	3.62	87	3.08	74
	4.66	112	4.12	99	3.58	86	3.04	73
	4.62	111	4.08	98	3.54	85	3	72
	4.58	110	4.04	97	3.49	84	Less	
	4.54	109	3.99	96	3.45	83	than	not
	4.5	108	3.95	95	3.41	82	3	enough

Discipline scores for students who successfully
completed the programme are converted into a
traditional 4-point scale:

A multi-point (200) scale scoring	A 4-point scale scoring
170-200 points	"5"
140-169 points	"4"
139 -120 points	"3"
Below 120 points	"2"

The points of students studying in one specialty are ranked into the ECTS scale

ECTS assessment	Statistical parameter
"A"	Best 10 % of students
"B"	Next 25 % of students
"C"	Next 30 % students
"D"	Next 25 % students
"E"	The remaining 10% of students

Points for the discipline are independently converted to both the ECTS scale and the 4-point scale. The points of the ECTS scale are not converted into a 4-point scale and vice versa.

13. Material, technical and methodological support of the discipline

- 1. Work programme and syllabus of the discipline.
- 2. Plans for practical classes and individual student's work.
- 3. Recommendations and guides for learning the course of internal medicine for students and teachers.
- 4. Tasks for independent work
- 5. Questions, tests (MCQs) and clinical cases for current control
- 6. Algorithms for treatment and emergency care according to the standards of evidence-based medicine
- 7. Algorithms for performing skills practices and medical manipulations
- 8. Results of laboratory tests; electrocardiograms, radiographs, lung function test results, etc.
- 9. Models, mannequins, multimedia equipment, presentations for training.

14. Recommended literature

- 1. eMPendium electronic compendium "Internal diseases" in open access [Electronic resource]. Access mode: https://empendium.com/mcmtextbook/.
- 2. Davidson's Principles and Practice of Medicine 23rd Edition. Editors: Stuart Ralston, Ian Penman, Mark Strachan Richard Hobson. Elsevier. 2018. 1440 p.
- 3. USMLE Step 2 CK Lecture Notes 2017: Internal Medicine (Kaplan Test Prep). 2016. Published by Kaplan Medical. 474 p.
- 4. Kasper, Dennis L., Anthony S. Fauci, Stephen L. Hauser, Dan L. 1949- Longo, J. Larry Jameson, and Joseph Loscalzo. Harrison's Principles of Internal Medicine. 19th edition. New York: McGraw Hill Education, 2015.
- 5. Goldberger's clinical electrocardiography: a simplified approach / Ary L. Goldberger, Zachary D. Goldberger, Alexei Shvilkin. -8^{th} ed. Elsevier Saunders 2013, Philadelphia, -231 p.
- 6. Reactive arthritis before and after the onset of the COVID-19 pandemic. / Bekaryssova, D., Yessirkepov, M., Zimba, O. et al. // Clin Rheumatol. 2022. Vol. 41. P. 1641-1652. https://doi.org/10.1007/s10067-022-06120-3
- 7. Highly cited papers in Takayasu arteritis on Web of Science and Scopus: cross-sectional analysis. / Misra D, Agarwal V, Gasparyan A, Zimba O, Sharma A. // Clin Rheumatol. 2022. Vol. 41(1). P. 129-135. https://doi:10.1007/s10067-021-05901-6.
- 8. Mechanisms of thrombosis in ANCA-associated vasculitis. / Misra DP, Thomas KN, Gasparyan AY, Zimba O. // Clin Rheumatol. 2021. Vol. 40(12). P. 4807-4815. https://doi:10.1007/s10067-021-05790-9
- 9. Challenges in diagnosis of limited granulomatosis with polyangiitis. / Zimba O, Doskaliuk B, Yatsyshyn R, et al. // Rheumatol Int. 2021. Vol. 41(7). P. 1337-1345. https://doi:10.1007/s00296-021-04858-8.

- 11. Systemic lupus erythematosus in the light of the COVID-19 pandemic: infection, vaccination, and impact on disease management. / Mehta P, Gasparyan AY, Zimba O. et al. // Clin Rheumatol. 2022. https://doi.org/10.1007/s10067-022-06227-7
- 12. COVID-19 and the clinical course of rheumatic manifestations / Ahmed S, Zimba O, Gasparyan A // Clin Rheumatol. 2021. Vol. 40. P. 2611-2619. https://doi.org/10.1007/s10067-021-05691-x
- 13. Misra D, Gasparyan AY, Zimba O. Benefits and adverse effects of hydroxychloroquine, methotrexate and colchicine: searching for repurposable drug candidates. // Rheumatol Int. 2020. Vol. 40. P. 1741-1751. https://doi.org/10.1007/s00296-020-04694-2
- 14. Doskaliuk B, Zaiats L, Yatsyshyn R, Gerych P, Cherniuk N, Zimba O. Pulmonary involvement in systemic sclerosis: exploring cellular, genetic and epigenetic mechanisms. // Rheumatol Int. 2020. Vol. 40. P. 1555-1569. https://doi.org/10.1007/s00296-020-04658-6
- 15. Ahmed S, Zimba O, Gasparyan A. Thrombosis in Coronavirus disease 2019 (COVID-19) through the prism of Virchow's triad // Clin Rheumatol. 2020. Vol. 39. P. 2529-2543. https://doi.org/10.1007/s10067-020-05275-1
- 16. Korolyuk O, Radchenko O. Hypertriglyceridemia is associated with long-term risk of cardiovascular events and specific comorbidity in very high-risk hypertensive patients // Ukr.Biochem.J. 2020. Vol. 92(2). P. 8-19. https://doi.org/10.15407/ubj92/02.008
- 17. Korolyuk O. Ya. The results of 5-year atorvastatin therapy at the doses of 20-40 mg daily in metabolically compromised patients at very high risk // https://esc365.escardio.org/Congress/ESC-CONGRESS-2020-The-Digital-Experience/Pharmacology-and-Pharmacotherapy-ePosters/218520-the-results-of-5-year-atorvastatin-therapy-at-the-doses-of-20-40-mg-daily-in-metabolically-compromised-patients-at-very-high-risk#abstract
- 18. Information and Misinformation on COVID-19: a Cross-Sectional Survey Study. / Gupta L, Gasparyan A, Misra D, Agarwal V, Zimba O, Yessirkepov M. // J Korean Med Sci. 2020. Vol. 35(27). P. e256. Available at https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7358067/
- 19. Ahmed S, Zimba O, Gasparyan AY Thrombosis in Coronavirus disease 2019 (COVID-19) through the prism of Virchow's triad. // Clin Rheumatol. 2020. Vol. 39. P. 2529-2543. https://doi.org/10.1007/s10067-020-05275-1
- 20. McDonagh T, Metra M, Adamo M et al, ESC Scientific Document Group, 2021 ESC Guidelines for the diagnosis and treatment of acute and chronic heart failure: Developed by the Task Force for the diagnosis and treatment of acute and chronic heart failure of the European Society of Cardiology (ESC) With the special contribution of the Heart Failure Association (HFA) of the ESC. // Eur Heart J. 2021. Vol. 42 (36). P. 3599–3726, https://doi.org/10.1093/eurheartj/ehab368
- 21. Hindricks G, Potpara T, Dagres N, et al., ESC Scientific Document Group, 2020 ESC Guidelines for the diagnosis and management of atrial fibrillation developed in collaboration with the European Association for Cardio-Thoracic Surgery (EACTS): The Task Force for the diagnosis and management of atrial fibrillation of the European Society of Cardiology (ESC) Developed with the special contribution of the European Heart Rhythm Association (EHRA) of the ESC. // Eur Heart J. 2021. Vol. 42 (5). P 373–498, https://doi.org/10.1093/eurhearti/ehaa612
- 22. Konstantinides SV, Meyer G, Becattini C, et al., ESC Scientific Document Group. 2019 ESC Guidelines for the diagnosis and management of acute pulmonary embolism developed in collaboration with the European Respiratory Society (ERS): The Task Force for the diagnosis and management of acute pulmonary embolism of the European Society of Cardiology (ESC). // Eur Heart J. 2020. Vol. 41 (4). P. 543–603, https://doi.org/10.1093/eurheartj/ehz405
- 23. Collet J-P, Thiele H, Barbato E, et al., ESC Scientific Document Group, 2020 ESC Guidelines for the management of acute coronary syndromes in patients presenting without persistent ST-segment elevation: The Task Force for the management of acute coronary syndromes in patients presenting without persistent ST-segment elevation of the European Society of Cardiology (ESC) // Eur Heart J. 2021. Vol. 42 (14) P. 1289–1367, https://doi.org/10.1093/eurheartj/ehaa575
- 24. Brugada J, Katritsis DG, Arbelo E et al., ESC Scientific Document Group. 2019 ESC Guidelines for the management of patients with supraventricular tachycardia. The Task Force for the management of patients with supraventricular tachycardia of the European Society of Cardiology (ESC): Developed in collaboration with the Association for European Paediatric and Congenital Cardiology (AEPC). // Eur Heart J. 2020. Vol. 41(5). P. 655–720, https://doi.org/10.1093/eurheartj/ehz467
- 25. Knuuti J, Wijns W, Saraste A et al., ESC Scientific Document Group. 2019 ESC Guidelines for the diagnosis and management of chronic coronary syndromes: The Task Force for the diagnosis and management of chronic coronary syndromes of the European Society of Cardiology (ESC) // Eur Heart J. 2020. Vol. 41(3). P. 407–477, https://doi.org/10.1093/eurheartj/ehz425
- 26. Williams B, Mancia G, Spiering W et al.; ESC Scientific Document Group. 2018 ESC/ESH Guidelines for the management of arterial hypertension // Eur Heart J. 2018. Vol. 39(33). P. 3021-3104. https://doi.org/10.1093/eurheartj/ehy339.
- 27. Thygesen K, Alpert JS, Jaffe AS, et al., ESC Scientific Document Group. Fourth universal definition of myocardial infarction. // Eur Heart J. 2019. Vol. 40(3). P. 237–269, https://doi.org/10.1093/eurheartj/ehy462
- 28. Brignole M, Moya A, de Lange FJ, et al.; ESC Scientific Document Group. 2018 ESC Guidelines for the diagnosis and management of syncope. // Eur Heart J. 2018. Vol. 39(21). P. 1883-1948. https://doi.org/10.1093/eurheartj/ehy037
- 29. Neumann F, Sousa-Uva M, Ahlsson A et al.; ESC Scientific Document Group. 2018 ESC/EACTS Guidelines on myocardial revascularization. // Eur Heart J. 2019. Vol. 40(2). P. 87-165. https://doi.org/10.1093/eurheartj/ehy394
- 30. Ibanez B, James S, Agewall S, et al., ESC Scientific Document Group. 2017 ESC Guidelines for the management of acute myocardial infarction in patients presenting with ST-segment elevation: The Task Force for the management of acute myocardial infarction in patients presenting with ST-segment elevation of the European Society of Cardiology (ESC). // Eur Heart J. 2018. Vol. 39(2). P. 119–177, https://doi.org/10.1093/eurheartj/ehx393

- 31. FitzGerald J, Dalbeth N, Mikuls T, et al. 2020 American College of Rheumatology Guideline for the Management of Gout. // Arthritis Care Res (Hoboken). 2020. Vol. 72(6). P. 744-760. https://doi.org/10.1002/acr.24180.
- 32. Kolasinski SL, Neogi T, Hochberg MC, et al. 2019 American College of Rheumatology/Arthritis Foundation Guideline for the Management of Osteoarthritis of the Hand, Hip, and Knee. // Arthritis Care Res (Hoboken). 2020. Vol. 72(2). P. 149-162. https://doi:10.1002/acr.24131.
- 33. Fraenkel L, Bathon JM, England BR, et al. 2021 American College of Rheumatology Guideline for the Treatment of Rheumatoid Arthritis. // Arthritis Rheumatol. 2021. Vol. 73(7). P. 1108-1123. https://doi:10.1002/art.41752.
- 34. Chung S, Langford C, Maz M, et al. 2021 American College of Rheumatology / Vasculitis Foundation Guideline for the Management of Antineutrophil Cytoplasmic Antibody-Associated Vasculitis. // Arthritis Rheumatol. 2021. Vol. 73(8). P. 1366-1383. https://doi:10.1002/art.41773.
- 35. Nagy G, Roodenrijs N, Welsing P et al. EULAR points to consider for the management of difficult-to-treat rheumatoid arthritis. // Ann Rheum Dis. 2022. Vol. 81(1). P. 20-33. https://doi:10.1136/annrheumdis-2021-220973.
- 36. Smolen J, Landewé R, Bijlsma J et al. EULAR recommendations for the management of rheumatoid arthritis with synthetic and biological disease-modifying antirheumatic drugs: 2019 update. // Ann Rheum Dis. 2020. Vol. 79(6). P. 685-699. https://doi:10.1136/annrheumdis-2019-216655.
- 37. Hellmich B, Agueda A, Monti S et al. 2018 Update of the EULAR recommendations for the management of large vessel vasculitis // Ann Rheum Dis. 2020. Vol. 79(1). P. 19-30. https://doi:10.1136/annrheumdis-2019-215672.

15. Information resources

Website: https://new.meduniv.lviv.ua/kafedry/kafedra-vnutrishnoyi-medytsyny-2/

Phone of the Department: 0322601490 E-mail: <u>kaf_internalmed_2@meduniv.lviv.ua</u>

The tutor of the student scientific circle: Professor Yeugen Dzis

Websites related to Internal Medicine:

http://www.ers-education.org/guidelines.aspx

http://www.esmo.org/Guidelines/Haematological-Malignancies

 $\underline{https://ehaweb.org/organization/committees/swg-unit/scientific-working-groups/structure and-guidelines/groups/structure and guidelines/groups/structure and groups/structure an$

https://www.aasld.org/ www.ginasthma.org http://www.gastro.org/guidelines

http://www.diabetes.org/ http://goldcopd.org. http://www.oxfordmedicaleducation.com/

http://www.eagen.org/ https://www.nice.org.uk https://www.ueg.eu/guidelines/