Federal State Budgetary Educational Institution of Higher Education "Privolzhsky Research Medical University" Ministry of Health of the Russian Federation

BANK OF ASSESSMENT TOOLS

NURSING (SURGERY)

Speciality: 31.05.01 GENERAL MEDICINE

Department: FACULTY OF SURGERY AND TRANSPLANTOLOGY

Form of study: **FULL-TIME**

1. Fund of assessment tools for current monitoring of progress, intermediate certification of students in the discipline

This Fund of Evaluation Funds (FOS) for the discipline "Nursing (surgery)" is an integral part of the work program of the discipline "Nursing (surgery)". This FOS is subject to all the details of the approval presented in the RPD for this discipline.

2. List of evaluation tools

To determine the quality of mastering the educational material by students in the

discipline "Nursing (surgery)", the following assessment tools are used:

№	Estimator	Brief description of the evaluation tool	Presentation of the evaluation tool in the FOS
1	Test	A system of standardized tasks that allows you to automate the procedure measuring the level of knowledge and skills of the student	Test fund assignments
2	Situational tasks	A method of control that allows you to assess the criticality of thinking and the degree of assimilation of the material, the ability to apply theoretical knowledge in practice.	Task List
3	Interview	A means of control, organized as a special conversation between a teacher and a student on topics related to the discipline being studied, and designed to clarify the amount of knowledge of the student in a particular section, topic, problem, etc.	Questions on topics / sections of the discipline

3. List of competencies indicating the stages of their formation in the process of mastering the educational program and types of assessment tools

Code and wording of competen ce	\mathcal{C}	Controlled sections of the discipline	Evaluation tools
UC-8 GPC- 1,4,6,7 PC-1,2,3	Current	Section 1. The concept of general patient care, the role of general care in surgery. Topic 1.1. Organization of work in the surgical department.	Test Interview
		Topic 1.2. The concept of asepsis and antisepsis, safety precautions when working with surgical patients.	Test Interview

UC-8 GPC- 1,4,6,7 PC-1,2,3		Section 2. Preoperative period. Topic 2.1. Preparation of patients for various types of operations. Topic 2.2. Features of the reception and diagnostic department of a surgical hospital, the role in preoperative preparation.	Test Interview
UC-8 GPC- 1,4,6,7 PC-1,2,3		Section 3. Postoperative period. Topic 3.1. Features of care of surgical patients after various operations. Tpoic 3.2. The role of care in the prevention of postoperative complications.	Test Interview
UC-8 GPC- 1,4,6,7 PC-1,2,3	Intermediate	Section 1. The concept of general patient care, the role of general care in surgery. Section 2. Preoperative period. Section 3. Postoperative period.	Test Situational tasks Interview

4. The content of the evaluation means of current control

Current control is carried out by the teacher of the discipline when conducting classes in the form of: test, interview.

4.1 Situational tasks for assessing competencies: UC-8, GPC - 1, GPC-4, GPC-6, GPC-7, PC-1, PC-2, PC-3

Situational task 1

A 40-year-old patient suffering from cholelithiasis and acute cholecystitis needs to perform a number of studies, one of which is a biochemical blood test.

What manipulation is allowed to take blood for analysis, what are the most characteristic places used to perform the manipulation, describe the method of its implementation, what complications are possible, what measures should be taken to prevent complications.

Situational task 2

A patient suffering from phlegmon of the right leg, after intramuscular administration of a penicillin antibiotic, developed an allergic reaction in the form of a rash on the skin of the trunk and extremities in the form of blisters, and a feeling of suffocation. For therapeutic purposes, 10% calcium chloride was administered intravenously.

What is the name of the manipulation, what complication can develop if air is introduced, if hypertonic solutions are injected into the surrounding tissues, what other complications of this manipulation do you know, what measures should be taken in these cases.

Situational task 3

A 50-year-old patient suffering from a phlegmonous form of erysipelas with a high body temperature (up to 39°C) is injected into the vein of the right cubital fossa with 800 ml of glucose solution, 800 ml of electrolyte solution with the addition of 40 mg of furosemide at the end of the infusion.

What is the name of the manipulation, what is the indication for its implementation in this case, what other types of infusions do you know, what are the indications for their implementation, what complications are possible.

Situational task 4

A 70-year-old patient is hospitalized in the surgical department for obliterating atherosclerosis of the vessels of the lower extremities. Receives conservative vascular therapy. After another intravenous injection, the patient developed a purple-blue tumor-like mass at the injection site, which was practically painless on palpation, fluctuation was detected, and gradually increased in size.

Describe the method of intravenous injection, what complication has developed, what causes it, in which patients it most often develops, what measures should be taken at the present time.

Situational task 5

A 35-year-old patient suffering from a right-sided inguinal hernia is prepared for a planned operation - hernia repair under local anesthesia. For the purpose of sedation, a 2% solution of promedol was prescribed subcutaneously.

What are the most typical places for subcutaneous injections, describe the method of their implementation, what is the depth of drug administration, where should subcutaneous injections not be performed, what are the possible complications.

Situational task 6

The operating room nurse prepared a set of rubber drainage tubes for high-temperature sterilization. What method should be used to sterilize this material and under what mode? Justify your decision.

Situational task 7

In the room for the preparation of medical devices for sterilization, there are several biks, all with closed lids. How can one determine by the appearance of bixes, without opening them, whether they are filled with sterile material or not?

Situational task 8

The surgical department received disposable infusion systems in individual packages made of transparent plastic. The labels indicate that the systems are sterile and indicate the expiration date of the product. What was the most likely way the systems were sterilized at the factory? What is the maximum period of preservation of sterility by the system, provided that the packaging is intact?

Situational task 9

The operating nurse prepares a set of instruments for laparoscopic cholecystectomy. What method should be chosen to sterilize these instruments? Describe all variants of this method known to you.

Situational task 10

During the preparation of the table for sterile material and instruments in the dressing room, the nurse, having opened the bix, found that the color of the thermal indicator «IS-132 NPF Vinar» in it remained white (did not change after sterilization). What does it say? What decision should the nurse make?

Situational task 11

On the morning of November 12, the operating sister began to equip the sterile table. The nurse brought biks with dressings and linen. Bix's belt is closed. On the tag attached to the lid of Bix, it appears that the last time he was sterilized was on November 8th. What should be the actions of the operating nurse?

Situational task 12

The nurse was given the task to control a batch of pre-sterilized instruments for possible contamination with detergent components. How should she do it?

Situational task 13

The patient was admitted to the emergency department in an unconscious state, without documents, unaccompanied, picked up on the street. What should the medical front desk nurse?

Situational task 14

The patient was admitted to the emergency department straight from work, he works as a stoker. By the severity of the condition, he cannot carry out sanitary treatment of contaminated areas torso. What are the actions of a nurse?

Situational task 15

Lice were found in a patient during examination of the scalp. What activities need to be carried out?

Situational task 16

In the gastroenterology department, a patient with gastric ulcer suddenly there was a sharp weakness, dizziness, vomiting "coffee grounds". Objectively: the skin is pale, moist, the pulse is 120 beats / min of small filling and voltage, BP 90/60 mm Hg. Art., the abdomen is soft, painful on palpation.

- 1. Identify the patient's problems
- 2. Set goals and plan your nursing intervention

Situational task 17

After passing the exam, the students rode standing in a crowded bus. Suddenly one became badly. He turned pale and fell. Objectively: there is no consciousness, pale skin, cold extremities,

the pupils are narrow to light does not react, the pulse is filiform.

- 1. What happened?
- 2. Set goals and make a plan for nursing intervention

Situational task 18

A 20-year-old patient was taken to the emergency department of the hospital in an unconscious state. According to her mother, she has been suffering from diabetes since the age of 5 and receives 62 IU of insulin per day. Went to hike for two days, did not do insulin injections. Upon returning home, he complained of weakness, drowsiness, thirst, loss of appetite. Lost consciousness in the evening. Objectively: the skin is dry, the muscles are sluggish, the pupils are constricted, there is no reaction to light, the tone of the eyeballs is reduced, the pulse is 90 per minute, blood pressure is 90/60 mm Hg, NPV 24 per minute, the smell of acetone in the exhaled air. Identify the satisfaction of which needs is violated and identify the patient's problems

Situational task 19

In a patient with a gastrostomy, redness of the visible mucosa, soreness, that is, signs of inflammation. Nursing tactics?

Situational task 20

After feeding through a temporary gastrostomy tube, the nurse secured the end of the tube with a band-aid to the patient's skin. Is the nurse's tactics correct?

Situational task 21

A patient with an ileostomy developed excessive gas. The patient turned to nurse for advice. Nursing tactics.

Situational task 22

In a patient with a tracheostomy, saliva and mucus accumulate in the oral cavity, on the lips cracks have formed. Nurse Tactics.

Situational task 23

During the control of one of the batches of medical devices that underwent presterilization preparation, the benzidine test turned out to be positive. In the control of another lot, the benzidine test was negative, and the phenolphthalein test was positive. What should be the actions of medical personnel in relation to both batches of products?

Situational task 24

The nurse was instructed to control the batch of instruments that have undergone presterilization treatment for possible contamination with the remnants of a chlorine-containing antiseptic preparation. How should she do it?

Situational task 25

The nurse was given the task to check the products that had undergone pre-sterilization treatment for rust and, at the same time, for possible contamination with alkali and blood residues. Name and describe the most rational way of such control.

4.2. Test questions for assessing competencies: UC-8, GPC - 1, GPC-4, GPC-6, GPC-7, PC-1, PC-2, PC-3

- 1. Place of storage of narcotic substances:
 - a) closet
 - b) safe
 - c) treatment room
 - d) refrigerator
- 2. Enteral route of drug administration
 - a) through the gastrointestinal tract
 - b) through the respiratory tract
 - c) intradermally
 - d) on the skin
- 3. Concentration of alcohol for treatment of the injection site (in degrees)
 - a) 96
 - b) 80
 - c) 75
 - d) 70
- 4. The needle for subcutaneous injection is inserted at an angle (in degrees)
 - a) 90
 - b) 60

d) 55. Complication of intravenous injection leading to instant deatha) air embolism	
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a) air amhalicm	
, ,	
b) hematoma	
c) necrosis d) sepsis	
u) sepsis	
6. If an infiltrate occurs at the injection site (subcutaneous, intramuscular)	
it is necessary to impose	
a) ice pack	
b) local warming compress	
c) aseptic bandage	
d) venous tourniquet above the injection site	
7. The body of the deceased is transferred to the pathoanatomical department after ascertaining	,
biological death (per hour)	
a) after 6	
b) after 2	
c) after 1	
d) immediately after the declaration of death	
8.Duration of clinical death (in minutes)	
a) 10-15	
b) 4-6	
c) 1-2	
d) 0.5	
9. Temperature of the washing solution during pre-sterilization cleaning of medical instrument (C):	nts
a) 55-65	
b) 45-50	
c) 25-35	
d) 18-20	
10. The number of heartbeats per minute in an adult is normal:	
a) 100-120	
b) 90-100	
c) 60-80	
d) 40-60	
11. The number of breaths per minute in an adult is normal	
a) 30-36	
b) 22-28	
c) 16-20	
d) 10-12	
12. All places for determining the pulse, except	
a) carotid artery	
b) temporal artery	
c) radial artery	
d) abdominal artery	

13. Bed linen is changed for a seriously ill patient
a) once every 2 weeks
b) once a week
c) 1 time in 3 days
d) as it gets dirty
14. For the prevention of bedsores, it is necessary to change the position of the patient every (per
hour)
a) 24
b) 12 at 6
d) 2
u) 2
15. There are periods in the development of fever
a) four
b) three
c) two
d) one
16. Duration of body temperature measurement in the axillary region, not less than (in minutes)
a) 10
b) 5
at 3
d) 2
4) =
17. The main symptom of the first period of fever
a) chills
b) thirst
c) feeling hot
d) vomiting
18. For diet number 1 is typical
a) salt, protein, fluid restriction
b) mechanical, thermal and chemical sparing
c) restriction or complete exclusion of carbohydrates
d) physiologically complete food with a double content of vitamins
a, physiologically complete rood with a dodole content of vitalining
19. For diet number 10 is typical
a) salt, protein, fluid restriction
b) restriction of animal fats, salt, products containing cholesterol
c) restriction or complete exclusion of carbohydrates
d) physiologically complete food with a double content of vitamins
20. Use as first aid for injury
a) warm compress
b) ice pack
c) hot compress
d) wet wrap

21. Substance chosen by a medical leech when bitten a) hirudin

9
b) heparin
c) histamine
d) hyaline
22. Number of layers of warm compress pad
a) 8
b) 6
at 4
d) 2
u) 2
23. Water temperature used for wetting mustard plasters (C)
a) 60-70
b) 40-45
c) 36-37
d) 20-30
24. The indication for the use of oxygen is
a) tissue hypoxia
b) pain in the heart
c) swelling
d) visual impairment
25 I goal sami alaahal aamprass should be removed after (in hours)
25. Local semi-alcohol compress should be removed after (in hours) a) 10-12
b) 4-6
c) 2-3
d) 1-2
u) 1 2
26. One of the indications for the use of a warm compress is
a) acute appendicitis
b) bleeding
c) bruises in the first hours
d) infiltration at the injection site
27. One of the contraindications for the use of a heating pad is
a) acute appendicitis
b) uncomplicated gastric ulcer
c) dry pleurisy
d) bronchitis
28. Duration of setting cans (in minutes)
a) 60
b) 30-40
c) 10-15
d) 2-3
29. Duration of setting mustard plasters (in minutes)
a) 30-40
b) 20-30
c) 7-10
d) 2-3

 30. With hemoptysis and pulmonary bleeding is contraindicated a) put cans and mustard plasters on the chest b) seat and calm the patient c) put an ice pack on the chest d) raise the head end of the body
31. Cold compress change every (in minutes) a) 60 b) 30 c) 10 d) 2-3
 32. Contraindications for the use of leeches a) anemia b) myocardial infarction c) hypertensive crisis d) thrombophlebitis
 33. During oxygen therapy, oxygen is humidified in order to a) prevent dryness of the mucous membranes of the respiratory tract b) defoaming of mucous sputum c) prevent waterlogging of the mucous membranes of the respiratory tract d) pressure drop
34. Duration of exposure to the ice pack (in minutes) a) 60 b) 45 c) 30 d) 15
35. To set up a cleansing enema, you need to prepare clean water (in l) a) 10 b) 5-6 c) 2-3 d) 1-1.5
36. To set up a hypertonic enema, it is necessary to prepare a solution a) 10% sodium chloride b) 5% magnesium sulfate c) 2% sodium bicarbonate d) 0.9% sodium chloride
37. The required amount of vegetable oil for setting an oil enema (in ml) a) 1000 b) 500 c) 100 d) 10
38. After the introduction of a medicinal enema, the patient must be in bed (per hour) a) 6-8 b) 4-6 c) 2-3

4)	at i	least	an	hour
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39.	When setting a cleansing enema, the tip is inserted to a depth (in cm)
	a) 40
	b) 20
	c) 10-12
	d) 2-4
40.	After an oil enema, a bowel movement usually occurs in (per hour)
	a) 8-10
	b) 4-6
	c) 2-4
	d) 1
42.	To set up a siphon enema, it is necessary to prepare clean water (in l)
	a) 10
	b) 5
	at 2
	d) 1
43.	One of the indications for administering a siphon enema is
	a) colorectal cancer
	b) suspected intestinal obstruction
	c) constipation in a patient with massive edema
	d) inflammation of the rectum
44.	Maximum use time of the gas tube (per hour)
	a) 4
	b) 3
	c) no more than 1
	d) 0.5
45.	The gas tube is not left in the bowel for long because
	a) bedsores may form in the intestinal wall
	b) it will tire the patient
	c) the therapeutic effect will end
	d) its sterility ends
46.	When catheterizing the bladder, the nurse has the right to use a catheter
	a) any
	b) soft
	c) semi-rigid
	d) hard
47.	The ratio of the amount of liquid drunk and excreted is called
	a) daily diuresis
	b) water balance
	c) anuresis
	d) daily diuresis

48. Zimnitsky's breakdown is determined in the urine a) the amount of sugar, acetone

- b) the number of formed elements, bacteria
- c) the presence of urobilin, bile pigments
- d) density and diuresis
- 49. As a rule, sounding of the stomach is carried out in the position
 - a) lying on the left side
 - b) lying on the right side
 - c) sitting
 - d) standing
- 50. For gastric lavage, an adult should prepare clean water at a temperature (C)
 - a) 40-45
 - b) 37-38
 - c) 20-22
 - d) 4-6

№ test task	№ response standard	№ test task	№ response standard	№ test task	№ response standard
1	b	21	a	41	a
2	a	22	a	42	b
3	d	23	b	43	С
4	c	24	a	44	c
5	a	25	b	45	a
6	b	26	d	46	b
7	b	27	a	47	b
8	b	28	c	48	d
9	b	29	c	49	c
10	c	30	a	50	c
11	c	31	d		
12	d	32	a		
13	d	33	a		
14	d	34	c		
15	b	35	d		
16	a	36	a		
17	a	37	c		
18	b	38	d		
19	b	39	С		
20	b	40	a		

4.3. Topics of interview for assessing competencies: UC-8, GPC - 1, GPC-4, GPC-6, GPC-7, PC-1, PC-2, PC-3

- 1. The concept of caring for a surgical patient
- 2. Deontology, moral and ethical aspects of patient care
- 3. Features of patient care in surgery
- 4. The work of the surgical department.
- 5. Hygiene of medical personnel
- 6. Sanitary and epidemiological regime in a surgical hospital
- 7. Sources of infection, the concept of nosocomial infection and methods of dealing with it in the department, dressing room, operating room
- 8. Safety precautions when caring for patients (including those with HIV infection, hepatitis, etc.)

- 9. The concept of asepsis
- 10. Sterilization methods in the department, sterilization control methods
- 11. The concept of antiseptics, types of antiseptics
- 12. The work of the dressing room
- 13. Features of care for patients with purulent-necrotic lesions and fistulas
- 14. Reception and diagnostic department
- 15. Features of patient care in the emergency department
- 16. Types of transportation of patients
- 17. The concept of the preoperative period
- 18. Preparation of patients for various types of operations, manipulations, diagnostic examinations
 - 19. The concept of the postoperative period
 - 20. Features of patient care after operations on the abdominal cavity
- 21. The role of care in the prevention of postoperative complications in abdominal surgery
 - 22. Measures for postoperative intestinal paresis
 - 23. Measures for urinary retention
 - 24. Prevention of postoperative pneumonia
 - 25. Prevention of thromboembolic complications
 - 26. Prevention of bedsores
 - 27. Organization of nutrition of patients in the postoperative period
 - 28. Methods of drug administration in surgery. Types of syringes
- 29. Injections (intradermal, subcutaneous, intramuscular, intravenous), indications for use, complications and their prevention
 - 30. Injection Care
 - 32. Observation and care of patients with intravenous infusions
 - 33. Caring for your venous catheter
 - 34. Disinfection and preparation for disposal of disposable syringes
 - 35. The concept of desmurgy
 - 36. Principles of applying the main types of dressings
 - 37. The concept of transport immobilization
 - 38. Features of patient care after operations on the organs of the urinary system
 - 39. Peculiarities of patient care after operations on the organs of the chest
 - 40. Features of care for patients with injuries of the musculoskeletal system

5. The content of the assessment means of intermediate certification: test, situational tasks, interview

Intermediate certification in the 1th semester of the 1st is carried out in the form of a credit

- 5.1 The list of control tasks and other materials necessary for assessing knowledge, skills and experience: tests in sections test tasks, situational tasks and interview questions.
- 5.1.1. Test questions with answer options for the credit in the discipline "Nursing (surgery)" are presented in paragraph 4.2
- 5.1.2. The task list with situational tasks for the credit in the discipline "Nursing (surgery)" are presented in paragraph 4.1
- 5.1.2. The list of questions for the interview for the credit in the discipline "Nursing (surgery)" are presented in paragraph 4.3

6. Criteria for evaluating learning outcomes

For credit:

Lagraina Outcomes	Evaluation criteria		
Learning Outcomes	Not credited	Passed	
Completeness of knowledge	The level of knowledge is below the minimum requirements. There were gross errors.	The level of knowledge in the amount corresponding to the training program. Minor errors may be made	
Availability of skills	When solving standard problems, the basic skills were not demonstrated. There were gross errors.	Demonstrated basic skills. Typical tasks are solved, all tasks are completed. Minor errors may be made.	
Availability of skills (possession of experience)	When solving standard problems, basic skills were not demonstrated. There were gross errors.	Demonstrated basic skills in solving standard problems. Minor errors may be made.	
Motivation (personal attitude)	Educational activity and motivation are poorly expressed, there is no qualitative readiness to solve the assigned tasks	Learning activity and motivation are manifested, readiness to perform the assigned tasks is demonstrated.	
Characteristics of the formation of competence	Competence is not fully formed. The available knowledge, skills and abilities are not enough to solve practical (professional) problems. Re-learning required	The formation of competence meets the requirements. The available knowledge, skills and motivation are generally sufficient to solve practical (professional) problems.	
Competence level	Low	Medium/High	

Criteria for evaluating learning outcomes

For testing:

Rating "5" (Excellent) - points (100-90%)

Rating "4" (Good) - points (89-80%)

Grade "3" (Satisfactory) - points (79-70%)

Less than 70% - (Unsatisfactory) - Grade "2"

A complete set of assessment tools for the discipline "Hospital Surgery" is presented on the portal of the LMS of the Volga Research Medical University https://sdo.pimunn.net/course/view.php?id=1547

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