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

BANK OF ASSESSMENT TOOLS FOR DISCIPLINE

PHARMACEUTICAL PROPAEDEUTICAL PRACTICE

Training program (specialty): **33.05.01 PHARMACY**

Department: **MANAGEMENT AND ECONOMICS OF PHARMACY AND PHARMACEUTICAL TECHNOLOGY**

Mode of study: **FULL-TIME**

Nizhny Novgorod
2021

1. Bank of assessment tools for the current monitoring of academic performance, mid-term assessment of students in the discipline

This Bank of Assessment Tools (BAT) for the discipline "Pharmaceutical propaedeutical practice" is an integral appendix to the working program of the discipline "Pharmaceutical propaedeutical practice". All the details of the approval submitted in the WPD for this discipline apply to this BAT.

2. List of assessment tools

The following assessment tools are used to determine the quality of mastering the academic material by students in the discipline:

No.	Assessment tool	Brief description of the assessment tool	Presentation of the assessment tool in the BAT
1	Test	A system of standardized tasks that allows you to automate the procedure of measuring the level of knowledge and skills of a student	Bank of test tasks
2	Case-task	A problem task in which the student is offered to comprehend a real professionally-oriented situation necessary to solve this problem.	Tasks for solving cases
3	Colloquium	A tool of controlling the mastering of study materials of a topic, section or sections of a discipline, organized as a class in the form of an interview between a teacher and students.	Questions on topics/sections of the discipline

3. A list of competencies indicating the stages of their formation in the process of mastering the educational program and the types of evaluation tools

Code and formulation of competence	Stage of competence formation	Controlled sections of the discipline	Assessment tools
UC-6 Able to determine and implement the priorities of own activities and ways to improve it on the basis of self-assessment and lifelong education	Entry, Current, Mid-term	**Section 1.** Introduction to the specialty	Tests Case-tasks Colloquiums

4. The content of the assessment tools of entry, current control

Entry /current control is carried out by the discipline teacher when conducting classes in the form of: test control, organization of a discussion, colloquium.

Assessment tools for current control.

4.1. Bank of test tasks

Choose one correct answer:

№	Test tasks with multiple answers	The code of the competence for the formation of which the test task is aimed
1.	THE AFFILIATION OF THE DRUG TO THE OVER-THE-COUNTER IS DETERMINED BY information provided in the instructions for use of the drug and on the packaging of the drug list of medicines approved by the Order of the Ministry of Health of the Russian Federation Government of the Russian Federation pharmacist during the release of drugs	UC-6
2.	MEDICINES FOR MEDICAL USE, DISPENSED WITHOUT A DOCTOR'S PRESCRIPTION, ARE NOT SUBJECT TO SALE THROUGH Veterinary pharmacies Pharmacy Pharmacies Pharmacy kiosks	UC-6
3.	THE DOCUMENT, WHICH IS THE BASIS FOR DISPENSING MEDICINES TO THE DEPARTMENTS OF A MEDICAL ORGANIZATION, IS Requirement-invoice of a medical organization Order-application prescription internal movement consignment note	UC-6
4.	PHARMACEUTICAL EXAMINATION OF THE PRESCRIPTION IS CARRIED OUT BY pharmacist (pharmacist) Doctor paramedic Clinical Pharmacologist	UC-6
5.	PRESCRIPTIONS FOR DRUGS CONTAINING NARCOTIC DRUGS AND PSYCHOTROPIC SUBSTANCES INCLUDED IN LIST II OF THE LIST OF NS, PV AND THEIR PRECURSORS SUBJECT TO CONTROL IN THE RUSSIAN FEDERATION ARE VALID FOR 15 days 5 days 1 month 2 months	UC-6
6.	NARCOTIC AND PSYCHOTROPIC DRUGS OF LIST II OF THE LIST OF NS, PV AND THEIR PRECURSORS SUBJECT TO CONTROL IN THE RUSSIAN FEDERATION ARE RELEASED TO THE PATIENT OR THE PERSON REPRESENTING HIM, UPON PRESENTATION identity document a document confirming the right to state social assistance	UC-6

	certificate confirming the right to receive a set of social services medical record of an outpatient	
7.	INCORRECTLY WRITTEN PRESCRIPTIONS IN THE PHARMACY ORGANIZATION ARE REPAID stamp "prescription invalid" and returned to the patient through tearing and return to the patient stamp "prescription invalid" and remain in the organization stamp "the prescription is invalid" and remain in the organization, and the signature is returned to the patient instead of the prescription	UC-6
8.	THE SHELF LIFE OF PRESCRIPTIONS FOR DRUGS WITH ANABOLIC ACTIVITY IS IN THE PHARMACY ORGANIZATION (YEARS) 3 1 5 10	UC-6
9.	TO ENSURE THE TREATMENT AND DIAGNOSTIC PROCESS, MEDICAL ORGANIZATIONS RECEIVE DRUGS FROM PHARMACY ORGANIZATIONS FOR invoice requirements Overhead invoices for the internal movement of goods Recipes	UC-6
10.	ADMISSION OF PERSONS TO WORK WITH NARCOTIC DRUGS, PSYCHOTROPIC SUBSTANCES AND PRECURSORS OF LIST IV OF THE LIST OF NS, PV AND THEIR PRECURSORS SUBJECT TO CONTROL IN THE RUSSIAN FEDERATION DOES NOT PROVIDE FOR certification of knowledge of the legislation of the Russian Federation on narcotic drugs, psychotropic substances and their precursors familiarization of persons with the legislation of the Russian Federation on narcotic drugs, psychotropic substances and their precursors conclusion of an employment contract with the inclusion of mutual obligations of the organization and the person associated with the circulation of narcotic drugs, psychotropic substances and their precursors conducting a psychiatric examination	UC-6
11.	PERSONS ARE NOT ALLOWED TO WORK WITH NARCOTIC DRUGS, PSYCHOTROPIC SUBSTANCES patients with drug addiction, substance abuse and chronic alcoholism who have reached the age of 18 who do not have outstanding or unexpunged convictions for crimes of medium gravity, serious crimes, especially serious crimes Those who have reached retirement age	UC-6
12.	FOR PATIENTS WITH CHRONIC DISEASES, PRESCRIPTIONS FOR A COURSE OF TREATMENT UP TO 60 DAYS ARE NOT ISSUED FOR Clonidine table. LPs with anabolic activity Derivatives of barbituric acid combined drugs containing codeine (its salts)	UC-6
13.	THE LIST OF DRUGS FOR PROVIDING CITIZENS ENTITLED TO RECEIVE DRUGS FREE OF CHARGE (AT THE EXPENSE OF THE FEDERAL BUDGET) IS APPROVED Government of the Russian Federation	UC-6

	Ministry of Health of the Russian Federation Federal Compulsory Medical Insurance Fund the health care management body of the constituent entity of the Russian Federation	
14.	FROM THE MOMENT THE PATIENT APPLIES TO THE PHARMACY ORGANIZATION, THE SERVICE PERIOD FOR PRESCRIPTIONS FOR DRUGS PRESCRIBED BY THE DECISION OF THE MEDICAL COMMISSION FOR OUTPATIENT TREATMENT OF CITIZENS AS PART OF THE PROVISION OF STATE SOCIAL ASSISTANCE SHOULD NOT EXCEED (WORKING DAYS) 15 2 5 10	UC-6
15.	THE BASIS FOR DISPENSING PRESCRIPTION DRUGS FROM PHARMACY ORGANIZATIONS TO A PATIENT IS Doctor's prescription Sheet of medical prescriptions invoice-requirement of a medical organization "Journal of accounting for wholesale sales and settlements with buyers"	UC-6
16.	SCHEDULED INSPECTIONS OF COMPLIANCE WITH LICENSING REQUIREMENTS IN THE IMPLEMENTATION OF PHARMACEUTICAL ACTIVITIES IN PHARMACY ORGANIZATIONS ARE CARRIED OUT no more than 1 time per year no more than 1 time in 2 years at intervals established by the relevant licensing authority no more than 1 time in 3 years	UC-6
17.	SCHEDULED INSPECTIONS OF COMPLIANCE WITH LICENSING REQUIREMENTS IN THE IMPLEMENTATION OF PHARMACEUTICAL ACTIVITIES IN DRUG WHOLESALERS ARE CARRIED OUT no more than 1 time in 2 years no more than 1 time per year at intervals established by the relevant licensing authority no more than 1 time in 3 years	UC-6
18.	ON THE CONDUCT OF A SCHEDULED INSPECTION OF LEGAL ENTITIES, INDIVIDUAL ENTREPRENEURS ARE NOTIFIED BY THE STATE SUPERVISION BODY BEFORE THE START OF ITS CONDUCT NO LATER THAN 3 working days 2 working days 2 calendar days 3 calendar days	UC-6
19.	A MEDICINAL PRODUCT ACCOMPANIED BY FALSE INFORMATION ABOUT THE COMPOSITION AND (OR) MANUFACTURER OF THE MEDICINAL PRODUCT IS falsified medicinal product patented medicine narcotic drug psychotropic substance	UC-6
20.	TO DETERMINE THE QUANTITATIVE INFLUENCE OF VARIOUS FACTORS ON	UC-6

	THE MAGNITUDE OF DEMAND FOR DRUGS, THE COEFFICIENTS SHOULD BE CALCULATED correlation and elasticity Risk Magazines speed of implementation Liquidity	
21.	DEMAND CAN BE CONSIDERED ELASTIC IF A slight decrease in price significantly increases demand With a significant reduction in price, demand increases slightly price changes demand does not change With a slight decrease in supply, demand increases sharply	UC-6
22.	THE MAIN TASK OF THE PHARMACY OF A MEDICAL ORGANIZATION IS provision of departments of a medical organization with medicines and medical products Making a profit provision of outpatients with medicines providing patients with information on responsible self-medication	UC-6
23.	THE PROCEDURE FOR KEEPING RECORDS OF DRUGS WITH A LIMITED SHELF LIFE IN A PHARMACY ORGANIZATION IS ESTABLISHED the head of the organization by the licensing authority executive authority of the constituent entity of the Russian Federation Decree of the Government of the Russian Federation	UC-6
24.	PERSONS RESPONSIBLE FOR THE STORAGE OF NARCOTIC DRUGS AND PSYCHOTROPIC SUBSTANCES SHALL BE APPOINTED BY ORDER OF THE HEAD Organization of the licensing authority Federal Drug Control Service Federal Service for Surveillance in Healthcare	UC-6
25.	THE REQUIREMENTS FOR THE REGISTRATION OF THE REGISTER OF TRANSACTIONS RELATED TO THE CIRCULATION OF NARCOTIC DRUGS AND PSYCHOTROPIC SUBSTANCES DO NOT INCLUDE THE FACT THAT THE JOURNAL MUST BE certified by the head of the Ministry of Internal Affairs Numbered Corded certified by the seal of the legal entity	UC-6
26.	SUBJECT-QUANTITATIVE STUDY OF NARCOTIC DRUGS AND PSYCHOTROPIC SUBSTANCES IN PHARMACY ORGANIZATIONS IS CARRIED OUT IN Journal of registration of transactions related to the circulation of narcotic drugs and psychotropic substances Journal of registration of operations in which the number of precursors of narcotic drugs and psychotropic substances changes Journal of operations related to the circulation of medicines for medical use Narcotic Medicines Accounting Book	UC-6
27.	SUBJECT-QUANTITATIVE ACCOUNTING OF PRECURSORS OF NARCOTIC DRUGS AND PSYCHOTROPIC SUBSTANCES IN PHARMACY ORGANIZATIONS IS CARRIED OUT IN	UC-6

	Journal of registration of operations in which the number of precursors of narcotic drugs and psychotropic substances changes Journal of registration of transactions related to the circulation of narcotic drugs and psychotropic substances Journal of operations related to the circulation of medicines for medical use Narcotic Medicines Accounting Book	
28.	LOGS OF OPERATIONS IN WHICH THE NUMBER OF PRECURSORS OF NARCOTIC DRUGS AND PSYCHOTROPIC SUBSTANCES CHANGES ARE STORED IN metal cabinet (safe) a metal cabinet in a technically fortified room safe in a technically fortified room the desktop of the head of the organization	UC-6
29.	COMPLETED REGISTERS OF OPERATIONS IN WHICH THE NUMBER OF PRECURSORS OF NARCOTIC DRUGS AND PSYCHOTROPIC SUBSTANCES CHANGES ARE STORED IN THE PHARMACY ORGANIZATION (YEARS) 10 1 3 5	UC-6
30.	INVENTORY OF NARCOTIC DRUGS AND PSYCHOTROPIC SUBSTANCES IN A PHARMACY ORGANIZATION IS CARRIED OUT monthly Quarterly annually with a frequency determined by the head of the organization	UC-6
31.	FOR MEDICINES SUBJECT TO SUBJECT-QUANTITATIVE ACCOUNTING, THE NORMS OF NATURAL LOSS ARE SET IN % OF THE VALUE flow rate in natural meters receipts in the monetary meter receipts in natural meters book residue in natural meters	UC-6
32.	THE LIST OF MEDICINES SUBJECT TO SUBJECT-QUANTITATIVE ACCOUNTING SHALL BE APPROVED Ministry of Health of the Russian Federation Ministry of Health of the Constituent Entities of the Russian Federation The Ministry of Health of the Russian Federation together with Roszdravnadzor Roszdravnadzor	UC-6
33.	IN ACCORDANCE WITH THE LAW OF THE RUSSIAN FEDERATION "ON PROTECTION OF CONSUMER RIGHTS", THE CONSUMER IS a citizen who intends to order or purchase goods (works, services) exclusively for personal, family, household and other needs a citizen intending to order or purchase goods (works, services) for business purposes a legal entity intending to order or purchase goods (works, services) exclusively for personal, family, household and other needs Those who use the product for its intended purpose	UC-6
34.	THE MANUFACTURER IS OBLIGED TO ENSURE THE SAFETY OF THE GOODS DURING	UC-6

	the established service life or shelf life of the goods or within 10 years after transfer to the consumer, if the service life is not established a period of at least 10 years from the date of manufacture the period established by the contract shelf life of the goods	
35.	GLUCOMETER (PROVIDED THAT THE CONSUMER HAS NO COMPLAINTS ABOUT ITS QUALITY DECLARED BY THE MANUFACTURER) PURCHASED FROM A PHARMACY ORGANIZATION Exchange and non-refundable Can be exchanged during the service life can be exchanged during the warranty period can be exchanged within 14 days if the receipt is preserved and the goods were not in use	UC-6
36.	THE RULES FOR THE STORAGE OF DRUGS ARE APPROVED Ministry of Health of the Russian Federation The Federal Service for Surveillance in Healthcare or its territorial body (Roszdravnadzor) The Federal Service for Supervision of Consumer Rights Protection and Human Welfare or its territorial body (Rospotrebnadzor) The executive authority in the field of health care of the constituent entity of the Russian Federation	UC-6
37.	DESTRUCTION OF DRUGS IS NOT CARRIED OUT owners of drugs licensed to carry out pharmaceutical activities organizations that have the appropriate license at specially equipped sites, landfills in specially equipped rooms	UC-6
38.	THERMOMETERS AND HYGROMETERS IN THE DRUG STORAGE ROOM MUST BE AT A DISTANCE OF AT LEAST (M) FROM DOORS, WINDOWS AND HEATING DEVICES 3 1 2 4	UC-6
39.	WHEN PLACING DRUGS IN STORAGE ROOMS, IT IS NOT TAKEN INTO ACCOUNT drug supplier Pharmacological group Mode of application physical and chemical properties of drugs	UC-6
40.	THE DOSAGE FORM GIVES THE DRUG OR MEDICINAL PLANT RAW MATERIALS A CONVENIENT STATE FOR USE, IN WHICH IT IS ACHIEVED Therapeutic effect Geometric shape State of aggregation Diagnostic action	UC-6
41.	IF IT IS NECESSARY TO DISPENSE THE MEDICINAL PRODUCT IN AN EMERGENCY, THE DOCTOR MUST: Put the designations "Cito" or "Statim" on the recipe Call the pharmacy At the top of the recipe, write in red pencil "Urgent!" Use a special form of prescription form	UC-6
42.	THE COLLECTION OF MANDATORY NATIONAL STANDARDS AND REGULATIONS REGULATING THE QUALITY OF MEDICINES, EXCIPIENTS, DOSAGE FORMS AND PREPARATIONS IS	UC-6

	State Pharmacopoeia Order of the Ministry of Health for quality control of medicines GUEST GMP	
43.	ORDER No. 706N ESTABLISHES THE REQUIREMENTS FOR premises for storage of medicines decoration of the trading floor storage of promotional products equipment of a medical organization	UC-6
44.	ACCORDING TO THE RULES FOR THE USE OF PHARMACOPOEIA MONOGRAPHS, "WARM" MEANS TEMPERATURE (°C) 40 to 50 35 to 37 from 18 to 20 from 36 to 38	UC-6
45.	AN ODOROUS MEDICINAL SUBSTANCE IS thymol riboflavin folic acid Methylene blue	UC-6
46.	THE COLORING PROPERTIES ASSOCIATED WITH HIGH SORPTION CAPACITY ARE POSSESSED BY potassium permanganate folic acid dry thermopsis extract sulfur	UC-6
47.	VOLATILE SOLVENTS USED IN PHARMACY PRACTICE INCLUDE ethanol glycerin olive oil Vaseline oil	UC-6
48.	THE STATE ATTACHED TO THE DRUG OR MEDICINAL PLANT RAW MATERIALS THAT IS CONVENIENT FOR USE, IN WHICH THE NECESSARY THERAPEUTIC EFFECT IS ACHIEVED, IS dosage form Medicine A medicinal product medicament	UC-6
49.	IN ORDER TO PRESERVE THE QUALITY OF THE PRODUCTS SUPPLIED, TO CREATE CONDITIONS FOR TIMELY AND CORRECT ACCEPTANCE OF ITS QUALITY, THE SENDER IS OBLIGED TO ENSURE compliance with the rules of packaging, labeling and sealing of individual places protection of transported goods removal from the warehouse Fast unloading of delivered goods	UC-6
50.	A MEANS OR A SET OF MEANS THAT PROTECT PRODUCTS FROM THE ENVIRONMENT, DAMAGE, LOSSES AND FACILITATE THE PROCESS OF CIRCULATION: TRANSPORTATION, STORAGE, SALE IS CALLED packaging standard Consignment of goods	UC-6

	container	

4.2. Bank of case-tasks for solving cases

№	Case-task	The code of the competence for the formation of which the case-task is aimed
1.	**Pharmacy N is municipally owned, serves the population and medical organizations. It has 3 departments: production, department of stocks and dispensing of medicines of the Ministry of Defense, department of dispensing medicines to the population. In addition, the pharmacy received a license to work with narcotic drugs and psychotropic substances (NA and PV). In the pharmacy at night there was a theft of goods. Actions of the manager in this situation.** 1) How should the safety of goods be ensured? 2) With which organizations does this pharmacy have the right to conclude a security contract? 3) What types of liability are there? 4) List the stages of conducting and documenting the verification of compliance of the actual availability of goods with accounting data. 5) What will be the composition of the inventory commission in this case? 6) What will be the procedure for compensation for damage to the pharmacy in the event of a shortage of goods based on the results of the inventory and its documentation? 7) Who has the right to work with NA and PV? 8) How should the storage room for HC and PV be organized in this pharmacy? Argue the answer with the relevant regulatory legal documentation.	UC-6
2.	**When checking the activities of the pharmacy, the licensing commission established the following: drugs of the List of SD and poisonous are stored on racks; prescriptions for diphenhydramine (table) are left in the pharmacy and stored for 1 month; there are no duly executed price tags for medicines and other goods allowed for release from pharmacies (only the price is indicated);phenobarbital for a course of treatment for up to 1 month is often dispensed by prescription with the inscription "For special purposes", signed and personal seal of the doctor; The pharmacist-analyst has not improved his qualifications for 6 years. The director explained the latter by the fact that the employee has reached retirement age and it is inappropriate to send him to advanced training courses at the expense of the pharmacy. In addition, there was no instruction on the procedure for registering the collection of information on the side effects of the drug, adverse reactions during its use, on the facts and circumstances that pose a threat to the life and health of citizens and medical workers and the transfer of information about them to Roszdravnadzor.** 1) Who has the right to inspect pharmaceutical organizations? 2) What types of inspections of legal entities are there? Give them a brief description. 3) What is the peculiarity of conducting a prosecutor's check of a pharmaceutical organization? 4) What is the procedure for checking licensing requirements and conditions? 5) List the basic rights of legal entities in the implementation of their verification. 6) Conduct a validation analysis; comment on the results; Identify violations. 7) Which violations of licensing requirements can be classified as gross and	UC-6

	which as non-gross. 8) Who in the pharmacy organization is obliged to collect information about the side effects of the drug, adverse reactions when it is used, about the facts and circumstances that pose a threat to the life and health of citizens and medical workers and transmit information about them to Roszdravnadzor? What other information must be transmitted to the specified structure? Argue the answer with the relevant regulatory documentation.	
3.	**As a result of the inspection of the pharmacy organization conducted by the Federal Antimonopoly Service, a violation of pricing for medicines included in the list of vital and essential drugs was revealed. The violation consisted in the fact that the audited organization calculated the retail price from the actual selling price of the manufacturer with VAT. The pharmacy organization itself is on the general taxation system.** 1) Describe the scheme of formation of retail (selling price) for finished medicines. Specify the peculiarity of pricing for vital and essential medicines. 2) Analyze the result of the inspection. Who is right in this situation? 3) Calculate the wholesale and retail cost of the drug "X" (for the pharmacy organization of Nizhny Novgorod), if it is known that the actual release of the manufacturer without VAT = 150 rubles, with VAT = 165 rubles, the organization of wholesale trade is also on the general system of taxation. 4) How would the retail price for this drug be calculated if the pharmacy organization were a payer of a single tax on imputed income (imputed income)? 5) Which organizations can pay imputed? The procedure for paying this type of tax. 6) What other control and supervisory organizations, in addition to the FAS, have the right to verify the correctness of pricing in pharmaceutical organizations?	UC-6
4.	**The patient turned to the pharmacy with a request to let him go without a prescription package of Solpadein tablets No. 12 (8 mg of codeine per 1 tablet), 2 packs of Nurofen Plus tablets table. p / o No. 12 (10 mg of codeine per 1 tablet), Tempalgin table. p / o No. 20, No-shpy table. 40mg No. 6 and Baralgetas table. 500mg No. 10. The pharmacist did not release all the drugs, referring to the current vacation rules. Another visitor demanded a refund for an over-the-counter drug sold the day before in the same pharmacy, arguing that after reading the instructions for the drug again, he realized that it was not suitable for him. The pharmacist refused to return.** 1) Did the pharmacist do the right thing in the first case? Which of the following drugs can be dispensed without a prescription? How do you explain the refusal of vacation to the patient? 2) What are the conditions and procedure for storing these drugs? Requirements for storage facilities. 3) What are the rules for prescribing and dispensing these drugs? 4) List the goods that the pharmacy organization has the right to sell. For the sale of what goods should it obtain additional permission and in what form? 5) Did the pharmacist do the right thing in the second case? 6) What is the consumer entitled to, according to the Federal Law of the Russian Federation of 07.02.1992 No. 2300-1 "On Protection of Consumer Rights"? Argue the answer with the relevant regulatory documents.	UC-6
5.	**The prescription prescribes a solution of atropine sulfate for oral administration. The prescription is certified by the signature and personal seal of the doctor. The highest single dose is exceeded 100 times. Taking a prescription, the pharmacist noticed that today this is the third prescription incorrectly written by this doctor.** 1) What is the pharmaceutical examination of a prescription? 2) What group of drugs does atropine sulfate belong to and what other lists of drugs exist? 3) How should a prescription be issued if a doctor prescribes a drug in a dose exceeding the highest single dose.	UC-6

	4) What types of prescription forms are there? List for each of them: basic and additional details, validity and storage. 5) What drugs can be prescribed on each prescription form? 6) What are the specifics of prescriptions for medical devices? 7) How is it necessary to organize the process of storing drugs in a pharmacy organization? Argue the answer with the relevant regulatory documentation.	
6.	**On the 10th day of the current month, goods packed in boxes were delivered to the pharmacy by road of a wholesale pharmaceutical organization. When accepting the goods in terms of the number of units and quality, a shortage of 5 packages of the D / in solution was found. 50mg 2ml No. 10 "Pipolfen" at a price of 563 rubles. At the same time, the pharmacy received a batch of narcotic drugs and psychotropic substances (HC and PV), during the inspection of which no violations were found. Laying out these drugs in their storage areas, the pharmacist accidentally dropped one package on the floor, breaking one ampoule, which he immediately reported to the head of the pharmacy.** 1) How are the economic ties between the pharmacy and the wholesale pharmaceutical organization formalized? 2) How and by whom should the goods be accepted at the time of receipt? 3) What are the indicators of acceptance quality control of incoming medicines? 4) Your actions, as a materially responsible person, in case of discrepancies in the acceptance of goods, documentation. 5) In what documents, and in what expression (meter) should the received goods be capitalized? 6) Where should the received medicines be stored? 7) List the actions of the head of the pharmacy in case of detection of battle, damage to medicines related to NA and PV. 8) How is the process of write-off and destruction of various categories of medicines in a pharmaceutical organization? Argue the answer with the relevant regulatory documents.	UC-6
7.	**The pharmacy of the regional clinical hospital, serving 1400 beds, received a requirement for ethyl alcohol from the surgical department for January of this year. The estimated number of patients for the current year in this department is 1100 people. The approximate standard for the consumption of ethyl alcohol for the surgical department per 1 treated patient (per year) is 225 g.** 1) Determine the approximate consumption rate of the surgical department in ethyl alcohol for the year and January of this year. 2) What are the norms for the release of ethyl alcohol from the pharmacy to the departments of a medical organization? Argue the answer with the relevant regulatory documentation. 3) What are the rules for prescribing requirements for medicines and other pharmaceutical products to the pharmacy of a medical organization. 4) What are the requirements for the organization of the storage room for ethyl alcohol? Argue the answer with the relevant regulatory documentation. 5) List the safety requirements when working with ethyl alcohol. 6) What is the responsibility of pharmacy officials for the safety of ethyl alcohol? Argue the answer with the relevant regulatory documentation. 7) List all the main accounting documents on the turnover of ethyl alcohol in the pharmacy organization. Name the employees responsible for their registration. Argue the answer with the relevant regulatory documentation.	UC-6
8.	**In April of this year, the pharmacy released to the population on preferential prescriptions of medicines in the amount of 45.5 thousand rubles, which amounted to 16% of the total turnover.** 1) Which pharmacies have the right to dispense medicines on preferential prescriptions? 2) How is the preferential leave financed? How is the pharmacy paid for drugs	UC-6

	released on preferential prescriptions? 3) List the population groups and categories of diseases, in the outpatient treatment of which drugs are released on preferential terms. 4) What about thespecifics of prescribing preferential prescriptions, the procedure for their registration and shelf life in a pharmacy? 5) How should the process of storing different groups of preferential drugs be organized? 6) How is the wholesale and retail price of drugs included in the list of vital and essential drugs formed? Argue the answer with the relevant regulatory documentation.	
9.	**The pharmacy received the following goods: rubber heating pads, alcohol iodine solution 5% 10 ml, clonidine tab. No. 10, promedol, solution for injection 1% 1.0. You, as a financially responsible person, need to place the received goods in storage locations.** 1) In accordance with what principles of storage will you do this? 2) What regulatory documents should be followed when organizing the storage of received goods? 3) To which groups do these goods belong in terms of storage conditions? 4) How should their storage be organized? Justify the distribution of the received goods to storage locations. 5) For the turnover of which of these drugs is the pharmacy organization obliged to obtain an additional permit? 6) Conditions for the release of the above drugs from the pharmacy. 7) Rules for accounting for the above drugs in a pharmacy. Argue the answer with the relevant regulatory documentation.	UC-6
10.	**In the surgical department of the medical organization (MO) N**, a **special room for storing narcotic drugs and psychotropic substances (NA and PV) is equipped. Applications for NA and PV are drawn up by the head nurse of the department and signed by the chief physician. In the course of her work, the newly appointed head nurse faced the following situation: from her department during night duty (and in her absence), a nurse from the therapeutic department was taken one package of narcotic drugs, without the appropriate order of the head of the organization.** 1) What requirements in the field of turnover of NA and PV were violated by this MO? 2) Who is responsible for the process of organizing activities related to the turnover of NA and PV in the Ministry of Defense? 3) What is the liability for the above violations? 4) How should a senior nurse behave in this situation? 5) Describe the process of obtaining medicines and medical devices from the pharmacy of a medical organization to its branches. 6) What are the requirements for the registration of the invoice requirement? How many copies of it should be issued, and for how long should it be stored in the Ministry of Defense? 7) What are the functions of the pharmacy of a medical organization? 8) What are the main methods used in the process of analyzing and calculating the need for MO in medicines and medical devices? Argue the answer with the relevant regulatory documentation.	UC-6

4.3. Questions for colloquiums

1. Features of the pharmaceutical market. State regulation of the pharmaceutical market. Three-tier system of legislation on the circulation of medicines.

2. Organization of the relationship between the pharmacist and the consumer of drugs. The Law "On Protection of Consumer Rights": basic concepts and provisions. Government Decree "Rules for the Sale of Certain Types of Goods": Basic Concepts and Provisions.

3. Retail link in the system of promotion of pharmacy products. Nomenclature of pharmacy organizations, tasks and functions. Forms of ownership and organizational and legal forms of pharmacy organizations.

4. Nomenclature of full-time positions of pharmacy workers. Options for the organizational structure of the pharmacy. The composition of the premises of pharmacy organizations, depending on the functions performed.

5. Legislation of the Russian Federation in the field of licensing of pharmaceutical activities. The procedure for opening and licensing a pharmacy organization. Licensing of activities related to the turnover of NA and PV.

6. General principles of organization of storage of drugs in pharmacy organizations.

7. Features of storage of certain groups of goods in a pharmacy warehouse. Receiving, storing and accounting for goods in a pharmacy warehouse, inventory management.

8. Requirements for the design of the trading floor of the pharmacy organization and the design of shop windows. Basic principles of merchandising.

9. Organization of the work of pharmacy organizations for the sale of goods and services. Over-the-counter medication. Organization of workplaces of specialists on the trading floor.

10. Organization of the work of the pharmacy for the reception of prescriptions and dispensing of drugs: pharmaceutical expertise, registration. Registration of primary documentation at the workplace of the pharmacist, technologist.

11. Organization of the manufacture of drugs, semi-finished products, intra-pharmacy preparations, production of concentrates and semi-finished products. Taxation of recipes and the procedure for their registration.

12. Intra-pharmacy quality control of drugs dispensed from pharmacy organizations. Equipment of the workplace for quality control of drugs, basic documentation. Withdrawal of drugs for analysis by drug quality control centers.

13. State regulation of the circulation of controlled groups of drugs. Subject-quantitative accounting in the pharmacy.

14. Features of receipt, storage and accounting of narcotic drugs, psychotropic substances and their precursors.

15. Pharmacoeconomics, methods of pharmacoeconomic analysis. Formulary system. Standardization of rational use of drugs.

5. The content of the assessment tools of mid-term assessment

Mid-term assessment is carried out in the form of a credit.

5.1 The list of control tasks and other materials necessary for the assessment of knowledge, skills and work experience

5.1.1. Questions for the credit in the discipline

1) Features of the pharmaceutical market. State regulation of the pharmaceutical market. Three-tier system of legislation on the circulation of medicines.
2) Organization of the relationship between the pharmacist and the consumer of drugs. The Law "On Protection of Consumer Rights": basic concepts and provisions. Government Decree "Rules for the Sale of Certain Types of Goods": Basic Concepts and Provisions.

3) Retail link in the system of promotion of pharmacy products. Nomenclature of pharmacy organizations, tasks and functions. Forms of ownership and organizational and legal forms of pharmacy organizations.
4) Nomenclature of full-time positions of pharmacy workers. Options for the organizational structure of the pharmacy. The composition of the premises of pharmacy organizations, depending on the functions performed.
5) Legislation of the Russian Federation in the field of licensing of pharmaceutical activities. The procedure for opening and licensing a pharmacy organization. Licensing of activities related to the turnover of NA and PV.
6) General principles of organization of storage of drugs in pharmacy organizations.
7) Features of storage of certain groups of goods in a pharmacy warehouse. Receiving, storing and accounting for goods in a pharmacy warehouse, inventory management.
8) Requirements for the design of the trading floor of the pharmacy organization and the design of shop windows. Basic principles of merchandising.
9) Organization of the work of pharmacy organizations for the sale of goods and services. Over-the-counter medication. Organization of workplaces of specialists on the trading floor.
10) Organization of the work of the pharmacy for the reception of prescriptions and dispensing of drugs: pharmaceutical expertise, registration. Registration of primary documentation at the workplace of the pharmacist, technologist.
11) Organization of the manufacture of drugs, semi-finished products, intra-pharmacy preparations, production of concentrates and semi-finished products. Taxation of recipes and the procedure for their registration.
12) Intra-pharmacy quality control of drugs dispensed from pharmacy organizations. Equipment of the workplace for quality control of drugs, basic documentation. Withdrawal of drugs for analysis by drug quality control centers.
13) State regulation of the circulation of controlled groups of drugs. Subject-quantitative accounting in the pharmacy.
14) Features of receipt, storage and accounting of narcotic drugs, psychotropic substances and their precursors.
15) Pharmacoeconomics, methods of pharmacoeconomic analysis. Formulary system. Standardization of rational use of drugs.

Coursework as an element of an academic discipline should contribute to the formation of competencies provided for in the competence matrix for this discipline and specified in the WPD.

6. Criteria for evaluating learning outcomes

For the credit:

Learning outcomes	**Evaluation criteria**	
	Not passed	**Passed**
Completeness of knowledge	The level of knowledge is below the minimum requirements. There were bad mistakes.	The level of knowledge in the volume corresponding to the training program. Minor mistakes may be made
Availability of skills	Basic skills are not demonstrated when solving standard tasks. There were bad mistakes.	Basic skills are demonstrated. Typical tasks have been solved, all tasks have been completed. Minor mistakes may be made.
Availability of skills (possession of experience)	Basic skills are not demonstrated when solving standard tasks. There were bad mistakes.	Basic skills in solving standard tasks are demonstrated. Minor mistakes may be made.

Motivation (personal attitude)	Educational activity and motivation are poorly expressed, there is no willingness to solve the tasks qualitatively	Educational activity and motivation are manifested, readiness to perform assigned tasks is demonstrated.
Characteristics of competence formation*	The competence is not fully formed. The available knowledge and skills are not enough to solve practical (professional) tasks. Repeated training is required	The competence developed meets the requirements. The available knowledge, skills and motivation are generally sufficient to solve practical (professional) tasks.
The level of competence formation	Low	Medium/High

For the exam:

Learning outcomes	**Assessment of competence developed**			
	unsatisfactory	**satisfactory**	**good**	**excellent**
Completeness of knowledge	The level of knowledge is below the minimum requirements. There were bad mistakes	The minimum acceptable level of knowledge. A lot of light mistakes were made	The level of knowledge in the volume corresponding to the training program. A few light mistakes were made	The level of knowledge in the volume corresponding to the training program, without errors
Availability of skills	Basic skills are not demonstrated when solving standard tasks. There were bad mistakes	Basic skills are demonstrated. Typical problems with light mistakes have been solved. All tasks have been completed, but not in full.	All basic skills are demonstrated. All the main tasks have been solved with light mistakes. All tasks have been completed, in full, but some of them with shortcomings	All the basic skills were demonstrated, all the main tasks were solved with some minor shortcomings, all the tasks were completed in full
Availability of skills (possession of experience)	Basic skills are not demonstrated when solving standard tasks. There were bad mistakes	There is a minimal set of skills for solving standard tasks with some shortcomings	Basic skills in solving standard tasks with some shortcomings are demonstrated	Skills in solving non-standard tasks without mistakes and shortcomings are demonstrated
Characteristics of competence formation*	The competence is not fully formed. The available knowledge and skills are not enough to solve professional tasks. Repeated training is required	The formation of competence meets the minimum requirements. The available knowledge and abilities are	The formation of competence generally meets the requirements, but there are shortcomings. The available	The formation of competence fully meets the requirements. The available knowledge, skills and motivation are fully sufficient

Learning outcomes	Assessment of competence developed			
	unsatisfactory	**satisfactory**	**good**	**excellent**
		generally sufficient to solve professional tasks, but additional practice is required for most practical tasks	knowledge, skills and motivation are generally sufficient to solve professional tasks, but additional practice is required for some professional tasks	to solve complex professional tasks
The level of competence formation*	Low	Below average	Intermediate	High

For testing:
Mark "5" (Excellent) - points (100-90%)
Mark "4" (Good) - points (89-80%)
Mark "3" (Satisfactory) - points (79-70%)
Mark "2" (Unsatisfactory) - less than 70%

Developer:
Maxim Alekseevich Mishchenko, PhD in pharmaceutical sciences, associate professor of the Department of management and economics of pharmacy and pharmaceutical technology.