

OBJECTIVE STRUCTURED CLINICAL EXAMINATION

ID:

Faculty: General medicine

Date:

Discipline: Intravenous injection

Situation number:

CEO of Simulation Center: Z.Vezirova

№	Action of the accrediting	Evaluation criteria		Coefficient
		<input type="checkbox"/> yes	<input type="checkbox"/> no	
1	Contacted with the patient (greeted, introduced himself, indicated his role)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.64
2	Identified the patient (asked the patient to introduce himself, name age, checked with medical documentation)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
3	Inquired about the patient's well-being by using his/her first name and patronymic	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.64
4	Asked about the presence/absence of allergic reactions to the administration of drugs in the illness history, including the one administered	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
5	Confirmed that voluntary informed consent of the patient	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.8
Preparation for manipulation				
6	Washed hands in a hygienic way	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
7	Examined the veins and choose the right one for injection	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.8
8	Checked compliance of medical equipment with approved regulations	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.8
9	Checked the compliance of drugs with the approved standards	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
10	Opened the tray up from packaging, placed the filled syringe and 4 cotton balls in the tray	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
11	Put on examination gloves	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
12	Applied skin antiseptic to cotton balls	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
13	Opened the ampoule, discarded its head with cotton ball in a puncture-proof container for class B waste	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.8
14	Inserted the drug in the syringe in corresponding dose	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
15	Replaced the needle	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
16	Put a venous tourniquet on the middle third part of the shoulder through a cloth/napkin	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.8
17	Treated the injection site twice	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
18	Pushed the air out of the syringe and dispose of its cap	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
Implementation of manipulation				
19	Made sure about the presence of the needle in vein before had opened the a tourniquet	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
20	Injected proper dosage of the drug	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
21	Asked the patient's condition before and after injection	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
22	Dispose of the syringe properly	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
23	If necessary, ask the patient to stay for 15-20 minutes	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.8
Conclusion				
24	Properly disposed of the cloth/napkin	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.64
25	Handed over the tray for disinfection and further sterilization	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.64
26	Properly disposed of examination gloves	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.64
27	Performed hands hygiene	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
28	Noted the performed manipulation in the medical documentation	<input type="checkbox"/> yes	<input type="checkbox"/> no	1

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CEO of Simulation Center:

Z.Vezirova

OBJECTIVE STRUCTURED CLINICAL EXAMINATION

ID:

Date:

Faculty: General medicine

Discipline: Emergency medical care

Situation number: 1

CEO of Simulation Center: Z.Vezirova

№	Action of the accrediting	Evaluation criteria		Coefficient
		<input type="checkbox"/> yes	<input type="checkbox"/> no	
1	Convinced that there was no danger to itself and the patient (looked around, a gesture of safety)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.475
2	Evaluated consciousness	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
3	Ensured the availability of kit, and also asked for assistant(s)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.475
4	Put on gloves and invited the assistant to do same	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
5	A - Correctly assessed the patency of the respiratory	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
6	B - Correctly and fully assessed the activity of the respiratory system (pulse oximetry, auscultation, percussion, respiratory rate, examination of the trachea and neck veins)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
7	Provided oxygen therapy according to indications	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
8	C - Correctly and fully assessed the activity of the cardiovascular system (assessment of the peripheral pulse, measurement of blood pressure, cardiac auscultation, ECG recording, blood sampling, checking the symptom of a white spot, evaluating the color of the skin)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
9	Provided intravenous access	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
10	Placed electrodes correctly	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
11	Correctly interpreted ECG	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
12	D - Right and fully assessed neurological status (the reaction of the pupils, assessment of the level of glucose in capillary blood using a glucometer, the correct interpretation of results, evaluation of the muscular tone)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
13	E - Correctly and fully assessed the General condition (palpation of the abdomen, palpation of the pulse in the femoral arteries, examination of the back, legs and feet, the measurement of body temperature, legs and feet, the measurement of body temperature, rectal examination according to indications)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
14	Correctly called CCDS	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
15	Correctly established the diagnosis and reported it CCDS	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
16	Applied double antiplatelet therapy	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
17	Used the right dosages of antiplatelet agents	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
18	Used the optimal method of administration of antiplatelet agents	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
19	Used additional medicines	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
20	Observed the priority of the introduction of medicines	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
21	Observed the sequence of ABCDE examination	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
22	Repeated ABCDE examination	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
23	Used only the indicated medications (did not use ammonia, etc.)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.475
24	Commented his/her actions aloud (used a skill that ensures teamwork)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
25	Favorable expert opinion	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.475

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OBJECTIVE STRUCTURED CLINICAL EXAMINATION

ID:

Date:

Faculty: General medicine

Discipline: Emergency medical care

Situation number: 2

CEO of Simulation Center: Z.Vezirova

№	Action of the accrediting	Evaluation criteria		Coefficient
		<input type="checkbox"/> yes	<input type="checkbox"/> no	
1	Convinced that there was no danger to itself and the patient (looked around, a gesture of safety)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.45
2	Evaluated consciousness	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.3
3	Ensured the availability of kit, and also asked for assistant(s)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.45
4	Put on gloves and invited the assistant to do same	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.7
5	A - Correctly assessed the patency of the respiratory	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.3
6	B - Correctly and fully assessed the activity of the respiratory system (pulse oximetry, auscultation, percussion, respiratory rate, examination of the trachea and neck veins)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.3
7	Provided oxygen therapy according to indications	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.3
8	C - Correctly and fully assessed the activity of the cardiovascular system (assessment of the peripheral pulse, measurement of blood pressure, cardiac auscultation, ECG recording, blood sampling, checking the symptom of a white spot, evaluating the color of the skin)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.3
9	Provided intravenous access	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.3
10	Placed electrodes correctly	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.7
11	Correctly interpreted ECG	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.3
12	D - Right and fully assessed neurological status (the reaction of the pupils, assessment of the level of glucose in capillary blood using a glucometer, the correct interpretation of results, evaluation of the muscular tone)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.7
13	E - Correctly and fully assessed the General condition (palpation of the abdomen, palpation of the pulse in the femoral arteries, examination of the back, legs and feet, the measurement of body temperature, legs and feet, the measurement of body temperature, rectal examination according to indications)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.3
14	Correctly called CCDS	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.7
15	Correctly established the diagnosis and reported it CCDS	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.3
16	Applied double antiplatelet therapy	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.3
17	Used the right dosages of antiplatelet agents	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.3
18	Used the optimal method of administration of antiplatelet agents	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.7
19	Used additional medicines	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.7
20	Observed the priority of the introduction of medicines	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.7
21	Gave an elevated position to the head end	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.7
22	Observed the sequence of ABCDE examination	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.3
23	Repeated ABCDE examination	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.3
24	Used only the indicated medications (did not use ammonia, etc.)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.45
25	Commented actions aloud (used a skill that ensures teamwork)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.7
26	Favorable expert opinion	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.45

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OBJECTIVE STRUCTURED CLINICAL EXAMINATION

ID:

Date:

Faculty: General medicine

Discipline: Emergency medical care

Situation number: 3

CEO of Simulation Center: Z.Vezirova

№	Action of the accrediting	Evaluation criteria		Coefficient
		<input type="checkbox"/> yes	<input type="checkbox"/> no	
1	Convinced that there was no danger to itself and the patient (looked around, a gesture of safety)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.475
2	Evaluated consciousness	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
3	Ensured the availability of kit, and also asked for assistant(s)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.475
4	Put on gloves and invited the assistant to do same	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
5	A - Correctly assessed the patency of the respiratory	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
6	B - Correctly and fully assessed the activity of the respiratory system (pulse oximetry, auscultation, percussion, respiratory rate, examination of the trachea and neck veins)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
7	Provided oxygen therapy according to indications	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
8	C - Correctly and fully assessed the activity of the cardiovascular system (assessment of the peripheral pulse, measurement of blood pressure, cardiac auscultation, ECG recording, blood sampling, checking the symptom of a white spot, evaluating the color of the skin)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
9	Provided intravenous access	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
10	Placed electrodes correctly	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
11	Correctly interpreted ECG	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
12	D - Right and fully assessed neurological status (the reaction of the pupils, assessment of the level of glucose in capillary blood using a glucometer, the correct interpretation of results, evaluation of the muscular tone)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
13	E - Correctly and fully assessed the General condition (palpation of the abdomen, palpation of the pulse in the femoral arteries, examination of the back, legs and feet, the measurement of body temperature, legs and feet, the measurement of body temperature, rectal examination according to indications)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
14	Correctly called CCDS	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
15	Correctly established the diagnosis and reported it CCDS	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
16	Applied adrenaline	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
17	Used the right dosages of adrenaline	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
18	Used the optimal method of administration of adrenaline	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
19	Used additional medicines	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
20	Observed the priority of the introduction of medicines	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
21	Observed the sequence of ABCDE examination	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
22	Repeated ABCDE examination	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
23	Used only the indicated medications (did not use ammonia, etc.)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.475
24	Commented actions aloud (used a skill that ensures teamwork)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
25	Favorable expert opinion	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.475

CEO of Simulation Center:

Z.Vezirova

OBJECTIVE STRUCTURED CLINICAL EXAMINATION

ID:

Date:

Faculty: General medicine

Discipline: Emergency medical care

Situation number: 4

CEO of Simulation Center: Z.Vezirova

№	Action of the accrediting	Evaluation criteria		Coefficient
		<input type="checkbox"/> yes	<input type="checkbox"/> no	
1	Convinced that there was no danger to itself and the patient (looked around, a gesture of safety)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.45
2	Evaluated consciousness	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.3
3	Ensured the availability of kit, and also asked for assistant(s)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.45
4	Put on gloves and invited the assistant to do same	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
5	A - Correctly assessed the patency of the respiratory	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.3
6	B - Correctly and fully assessed the activity of the respiratory system (pulse oximetry, auscultation, percussion, respiratory rate, examination of the trachea and neck veins)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.3
7	Provided oxygen therapy according to indications	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.3
8	C - Correctly and fully assessed the activity of the cardiovascular system (assessment of the peripheral pulse, measurement of blood pressure, cardiac auscultation, ECG recording, blood sampling, checking the symptom of a white spot, evaluating the color of the skin)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.3
9	Provided intravenous access	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.3
10	Placed electrodes correctly	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
11	Correctly interpreted ECG	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.3
12	D - Right and fully assessed neurological status (the reaction of the pupils, assessment of the level of glucose in capillary blood using a glucometer, the correct interpretation of results, evaluation of the muscular tone)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
13	E - Correctly and fully assessed the General condition (palpation of the abdomen, palpation of the pulse in the femoral arteries, examination of the back, legs and feet, the measurement of body temperature, legs and feet, the measurement of body temperature, rectal examination according to indications)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.3
14	Correctly called CCDS	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
15	Correctly established the diagnosis and reported it CCDS	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.3
16	Applied infusion therapy	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.3
17	Used the correct volume and speed of administration	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.3
18	Used additional medicines	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
19	Observed the priority of the introduction of medicines	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
20	Observed the sequence of ABCDE examination	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.3
21	Repeated ABCDE examination	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.3
22	Used only the medications shown (did not use ammonia, etc.)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.45
23	Commented actions aloud (used a skill that ensures teamwork)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
24	Favorable expert opinion	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.45

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CEO of Simulation Center:

Z.Vezirova

OBJECTIVE STRUCTURED CLINICAL EXAMINATION

ID:

Date:

Faculty: General medicine

Discipline: Emergency medical care

Situation number: 5

CEO of Simulation Center: Z.Vezirova

№	Action of the accrediting	Evaluation criteria		Coefficient
		<input type="checkbox"/> yes	<input type="checkbox"/> no	
1	Convinced that there was no danger to itself and the patient (looked around, a gesture of safety)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.475
2	Evaluated consciousness	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
3	Ensured the availability of kit, and also asked for assistant(s)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.475
4	Put on gloves and invited the assistant to do same	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
5	A - Correctly assessed the patency of the respiratory	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
6	B - Correctly and fully assessed the activity of the respiratory system (pulse oximetry, auscultation, percussion, respiratory rate, examination of the trachea and neck veins)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
7	Provided oxygen therapy according to indications	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
8	C - Correctly and fully assessed the activity of the cardiovascular system (assessment of the peripheral pulse, measurement of blood pressure, cardiac auscultation, ECG recording, blood sampling, checking the symptom of a white spot, evaluating the color of the skin)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
9	Provided intravenous access	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
10	Placed electrodes correctly	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
11	Correctly interpreted ECG	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
12	D - Right and fully assessed neurological status (the reaction of the pupils, assessment of the level of glucose in capillary blood using a glucometer, the correct interpretation of results, evaluation of the muscular tone)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
13	E - Correctly and fully assessed the General condition (palpation of the abdomen, palpation of the pulse in the femoral arteries, examination of the back, legs and feet, the measurement of body temperature, legs and feet, the measurement of body temperature, rectal examination according to indications)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
14	Correctly called CCDS	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
15	Correctly established the diagnosis and reported it CCDS	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
16	Used salbutamol	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
17	Used the correct dosage of salbutamol	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
18	Used the optimal method of administration of salbutamol	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
19	Used additional medicines	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
20	Observed the priority of the introduction of medicines	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
21	Observed the sequence of ABCDE examination	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
22	Repeated ABCDE examination	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
23	Used only the indicated medications (did not use ammonia, etc.)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.475
24	Commented actions aloud (used a skill that ensures teamwork)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
25	Favorable expert opinion	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.475

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CEO of Simulation Center:

Z.Vezirova

OBJECTIVE STRUCTURED CLINICAL EXAMINATION

ID:

Date:

Faculty: General medicine

Discipline: Emergency medical care

Situation number: 6

CEO of Simulation Center: Z.Vezirova

№	Action of the accrediting	Evaluation criteria		Coefficient
		<input type="checkbox"/> yes	<input type="checkbox"/> no	
1	Convinced that there was no danger to itself and the patient (looked around, a gesture of safety)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.475
2	Evaluated consciousness	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
3	Ensured the availability of kit, and also asked for assistant(s)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.475
4	Put on gloves and invited the assistant to do same	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
5	A - Correctly assessed the patency of the respiratory	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
6	B - Correctly and fully assessed the activity of the respiratory system (pulse oximetry, auscultation, percussion, respiratory rate, examination of the trachea and neck veins)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
7	Provided oxygen therapy according to indications	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
8	C - Correctly and fully assessed the activity of the cardiovascular system (assessment of the peripheral pulse, measurement of blood pressure, cardiac auscultation, ECG recording, blood sampling, checking the symptom of a white spot, evaluating the color of the skin)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
9	Provided intravenous access	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
10	Placed electrodes correctly	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
11	Correctly interpreted ECG	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
12	D - Right and fully assessed neurological status (the reaction of the pupils, assessment of the level of glucose in capillary blood using a glucometer, the correct interpretation of results, evaluation of the muscular tone)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
13	E - Correctly and fully assessed the General condition (palpation of the abdomen, palpation of the pulse in the femoral arteries, examination of the back, legs and feet, the measurement of body temperature, legs and feet, the measurement of body temperature, rectal examination according to indications)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
14	Correctly called CCDS	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
15	Correctly established the diagnosis and reported it CCDS	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
16	Applied heparin	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
17	Used the right dosage of heparin	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
18	Used the optimal method of administration of heparin	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
19	Used additional medicines	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
20	Observed the priority of the introduction of medicines	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
21	Observed the sequence of ABCDE examination	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
22	Repeated ABCDE examination	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
23	Used only the indicated medications (did not use ammonia, etc.)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.475
24	Commented actions aloud (used a skill that ensures teamwork)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
25	Favorable expert opinion	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.475

CEO of Simulation Center:

Z.Vezirova

OBJECTIVE STRUCTURED CLINICAL EXAMINATION

ID:

Date:

Faculty: General medicine

Discipline: Emergency medical care

Situation number: 7

CEO of Simulation Center: Z.Vezirova

№	Action of the accrediting	Evaluation criteria		Coefficient
		<input type="checkbox"/> yes	<input type="checkbox"/> no	
1	Convinced that there was no danger to itself and the patient (looked around, a gesture of safety)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.675
2	Evaluated consciousness	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.4
3	Ensured the availability of kit, and also asked for assistant(s)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.675
4	Put on gloves and invited the assistant to do same	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
5	A - Correctly assessed the patency of the respiratory	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.4
6	B - Correctly and fully assessed the activity of the respiratory system (pulse oximetry, auscultation, percussion, respiratory rate, examination of the trachea and neck veins)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.4
7	Provided oxygen therapy according to indications	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.4
8	C - Correctly and fully assessed the activity of the cardiovascular system (assessment of the peripheral pulse, measurement of blood pressure, cardiac auscultation, ECG recording, blood sampling, checking the symptom of a white spot, evaluating the color of the skin)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.4
9	Provided intravenous access	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.4
10	Placed electrodes correctly	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
11	Correctly interpreted ECG	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.4
12	D - Right and fully assessed neurological status (the reaction of the pupils, assessment of the level of glucose in capillary blood using a glucometer, the correct interpretation of results, evaluation of the muscular tone)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
13	E - Correctly and fully assessed the General condition (palpation of the abdomen, palpation of the pulse in the femoral arteries, examination of the back, legs and feet, the measurement of body temperature, legs and feet, the measurement of body temperature, rectal examination according to indications)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.4
14	Correctly called CCDS	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
15	Correctly established the diagnosis and reported it CCDS	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.4
16	Correctly performed a puncture of the pleural cavity	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.4
17	Observed the sequence of ABCDE examination	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.4
18	Repeated ABCDE examination	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.4
19	Used only the medications shown (did not use ammonia, etc.)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.675
20	Commented his/her actions aloud (used a skill that ensures teamwork)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
21	Favorable expert opinion	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.675

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OBJECTIVE STRUCTURED CLINICAL EXAMINATION

ID:

Date:

Faculty: General medicine

Discipline: Emergency medical care

Situation number: 8

CEO of Simulation Center: Z.Vezirova

№	Action of the accrediting	Evaluation criteria		Coefficient
		<input type="checkbox"/> yes	<input type="checkbox"/> no	
1	Convinced that there was no danger to itself and the patient (looked around, a gesture of safety)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.5
2	Evaluated consciousness	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.4
3	Ensured the availability of kit, and also asked for assistant(s)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.5
4	Put on gloves and invited the assistant to do same	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.8
5	A - Correctly assessed the patency of the respiratory	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.4
6	B - Correctly and fully assessed the activity of the respiratory system (pulse oximetry, auscultation, percussion, respiratory rate, examination of the trachea and neck veins)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.4
7	Provided oxygen therapy according to indications	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.4
8	C - Correctly and fully assessed the activity of the cardiovascular system (assessment of the peripheral pulse, measurement of blood pressure, cardiac auscultation, ECG recording, blood sampling, checking the symptom of a white spot, evaluating the color of the skin)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.4
9	Provided intravenous access	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.4
10	Placed electrodes correctly	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.8
11	Correctly interpreted ECG	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.4
12	D - Right and fully assessed neurological status (the reaction of the pupils, assessment of the level of glucose in capillary blood using a glucometer, the correct interpretation of results, evaluation of the muscular tone)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.8
13	E - Correctly and fully assessed the General condition (palpation of the abdomen, palpation of the pulse in the femoral arteries, examination of the back, legs and feet, the measurement of body temperature, legs and feet, the measurement of body temperature, rectal examination according to indications)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.4
14	Correctly called CCDS	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.8
15	Correctly established the diagnosis and reported it CCDS	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.4
16	Applied glucose	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.4
17	Used the right dosage of glucose	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.4
18	Used the optimal method of administration of glucose	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.8
19	Observed the sequence of ABCDE examination	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.4
20	Repeated ABCDE examination	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.4
21	Used only the indicated medications (did not use ammonia, etc.)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.5
22	Commented actions aloud (used a skill that ensures teamwork)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.8
23	Favorable expert opinion	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.5

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LIFE SCIENCES

CEO of Simulation Center:

Z.Vezirova

OBJECTIVE STRUCTURED CLINICAL EXAMINATION

ID:

Faculty: General medicine

Date:

Discipline: Emergency medical care

Situation number: 9

CEO of Simulation Center: Z.Vezirova

№	Action of the accrediting	Evaluation criteria		Coefficient
		<input type="checkbox"/> yes	<input type="checkbox"/> no	
1	Convinced that there was no danger to itself and the patient (looked around, a gesture of safety)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.4
2	Evaluated consciousness	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.5
3	Ensured the availability of kit, and also asked for assistant(s)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.4
4	Put on gloves and invited the assistant to do same	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
5	A - Correctly assessed the patency of the respiratory	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.5
6	B - Correctly and fully assessed the activity of the respiratory system (pulse oximetry, auscultation, percussion, respiratory rate, examination of the trachea and neck veins)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.5
7	Provided oxygen therapy according to indications	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.5
8	C - Correctly and fully assessed the activity of the cardiovascular system (assessment of the peripheral pulse, measurement of blood pressure, cardiac auscultation, ECG recording, blood sampling, checking the symptom of a white spot, evaluating the color of the skin)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.5
9	Provided intravenous access	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.5
10	Placed electrodes correctly	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
11	Correctly interpreted ECG	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.5
12	D - Right and fully assessed neurological status (the reaction of the pupils, assessment of the level of glucose in capillary blood using a glucometer, the correct interpretation of results, evaluation of the muscular tone)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
13	E - Correctly and fully assessed the General condition (palpation of the abdomen, palpation of the pulse in the femoral arteries, examination of the back, legs and feet, the measurement of body temperature, legs and feet, the measurement of body temperature, rectal examination according to indications)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.5
14	Correctly called CCDS	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
15	Correctly established the diagnosis and reported it CCDS	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.5
16	Correctly performed a puncture of the pericardial cavity	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
17	Applied infusion therapy and used the correct volume and speed of administration	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.5
18	Observed the sequence of ABCDE examination	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.5
19	Repeated ABCDE examination	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.5
20	Used only the indicated medications (did not use ammonia, etc.)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.4
21	Commented actions aloud (used a skill that ensures teamwork)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
22	Favorable expert opinion	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.4

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CEO of Simulation Center:

Z.Vezirova

OBJECTIVE STRUCTURED CLINICAL EXAMINATION

ID:

Date:

Faculty: General medicine

Discipline: Emergency medical care

Situation number: 10

CEO of Simulation Center: Z.Vezirova

№	Action of the accrediting	Evaluation criteria		Coefficient
		<input type="checkbox"/> yes	<input type="checkbox"/> no	
1	Convinced that there was no danger to itself and the patient (looked around, a gesture of safety)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.4
2	Evaluated consciousness	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.5
3	Ensured the availability of kit, and also asked for assistant(s)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.4
4	Put on gloves and invited the assistant to do same	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
5	A - Correctly assessed the patency of the respiratory	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.5
6	B - Correctly and fully assessed the activity of the respiratory system (pulse oximetry, auscultation, percussion, respiratory rate, examination of the trachea and neck veins)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.5
7	Provided oxygen therapy according to indications	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.5
8	C - Correctly and fully assessed the activity of the cardiovascular system (assessment of the peripheral pulse, measurement of blood pressure, cardiac auscultation, ECG recording, blood sampling, checking the symptom of a white spot, evaluating the color of the skin)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.5
9	Provided intravenous access	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.5
10	Placed electrodes correctly	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
11	Correctly interpreted ECG	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.5
12	D - Right and fully assessed neurological status (the reaction of the pupils, assessment of the level of glucose in capillary blood using a glucometer, the correct interpretation of results, evaluation of the muscular tone)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
13	E - Correctly and fully assessed the General condition (palpation of the abdomen, palpation of the pulse in the femoral arteries, examination of the back, legs and feet, the measurement of body temperature, legs and feet, the measurement of body temperature, rectal examination according to indications)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.5
14	Correctly called CCDS	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
15	Correctly established the diagnosis and reported it CCDS	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.5
16	Used the correct dosage and the optimal method of administration the drug	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.5
17	Gave an elevated position to the head end	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
18	Observed the sequence of ABCDE examination	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.5
19	Repeated ABCDE examination	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.5
20	Used only the indicated medications (did not use ammonia, etc.)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.4
21	Commented actions aloud (used a skill that ensures teamwork)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.9
22	Favorable expert opinion	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.4

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CEO of Simulation Center:

Z.Vezirova

OBJECTIVE STRUCTURED CLINICAL EXAMINATION

ID:

Faculty: General medicine

Date:

Discipline: Physical examination of the patient

Situation number:

CEO of Simulation Center: Z.Vezirova

№	Action of the accrediting	Evaluation criteria		Coefficient
		<input type="checkbox"/> yes	<input type="checkbox"/> no	
1	Established contact with the patient (greeted, introduced himself/herself, outlined his/her role, identified the patient (asked to introduce himself/herself, name age, checked with medical documentation)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.5
2	Informed about the patient's condition	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
3	Informed about the upcoming procedure, explained its purpose and obtained voluntary informed consent	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.5
Preparation for the examination				
4	Treated their hands in a hygienic way and put on gloves	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.5
5	Examined the patient in a lying position with the raised headboard of the couch at an angle of 30-45°	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.5
Examination				
6	Assessed the skin, fingers, checked the capillary pulse, conjunctiva, oral mucosa	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
7	Used a light source to examine the internal jugular veins	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
8	Performed palpation of the anterior surface of the lower leg, assessed the presence of edema	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
9	Assessed the pulse on the carotid arteries alternately from both sides; on the brachial, radial and femoral arteries simultaneously, checked for signs of aortic coarctation	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
10	Assessed the pulse on the radial artery; calculated the respiratory rate by placing the other hand on the epigastric region while looking at the clock for at least 10 seconds	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
11	Measured blood pressure on both arms, after asking questions about the factors affecting the results	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
Palpation of the heart				
12	Palpated the apex beat, announced the result	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
13	Evaluated the presence of a pulse deficit	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
14	Palpated the parasternal heave	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
Auscultation of the heart				
15	Performed auscultation at the point of the aortic valve	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
16	Performed auscultation of the right and left carotid arteries for at least 5 seconds	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
17	Performed auscultation at the point of the pulmonic valve	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
18	Performed auscultation at the point of the mitral valve	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
19	Performed auscultation in the axillary region in order to identify the irradiation of the noise	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
20	Performed auscultation at the point of the tricuspid valve	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
21	Correctly performed auscultation of the heart in the position of the patient on the left side and in a sitting position with a slight forward tilt	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
Auscultation of the lungs				
22	Performed auscultation of the lungs in symmetrical areas in front, side, back	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
Additional research				
23	Prescribed electrocardiography, correctly interpreted the ECG	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
24	Assigned an echocardiography of the heart, correctly interpreted the ECHO CG	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
Conclusion				
25	Formulated the correct conclusion, informed the patient about the progress of the study	<input type="checkbox"/> yes	<input type="checkbox"/> no	2
26	Dispose of examination gloves, treated hands in a hygienic manner	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.5
27	Followed the order of inspection	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.5

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CEO of Simulation Center:

Z.Vezirova

OBJECTIVE STRUCTURED CLINICAL EXAMINATION

ID:

Date:

Faculty: General medicine

Discipline: Gynecological examination of the patient

Situation number: 1

CEO of Simulation Center: Z.Vezirova

№	Action of the accrediting	Evaluation criteria		Coefficient
1	Established contact (said hello, introduces himself/herself, defined his/her role) and identified patient (asked her to introduce herself, give an age, compared data with medical records), asked about her well-being	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.8
2	Told about the upcoming procedure, explained its purpose and obtained informed voluntary consent	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.8
Preparation for the procedure				
3	Checked the operation of the lighting equipment, the availability of the necessary tools and consumables, marked the glasses for microscopy	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.52857143
4	Desinfect his hands in a hygienic way and put on sterile examination gloves	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.52857143
5	Opened packages with the instruments used for examination in the presence of a patient	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.8
6	Asked the patient to go behind the screen, expose the body below the waist	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.52857143
Implementation of procedure				
7	Carried out examination of the external genitalia, commented	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.8
8	With the thumb and index finger of the subdominant hand pulled apart the labia majora and minora	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
9	Correctly took the bivalve Cusco speculum in working hand	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
10	Using working hand, inserted a bivalve Cusco speculum in a straight size to the middle of vagina	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
11	Changed the speculum to a transverse size and moved it to the fornix	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
12	Opened the valves of the speculum, exposing the cervix for examination and fixed the speculum	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
13	Visually assessed character of the mucous walls of the vagina and cervix, commented	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
14	Delicately, with a gauze swab, removed mucus from the surface of the cervix	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.8
15	Disposed of the swab in class B waste container and dropped Meyer forceps in container with the disinfectant solution	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.52857143
16	Took cytobrush, inserted into cervical canal, announced an area of sample extraction	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
17	Pressed cytobrush to the surface of cervix, made 5 full rotations (3 - clockwise and 2 - counterclockwise)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
18	Applied contents of the cytobrush on the glass slide, with linear movements along the glass, using both sides of the brush Disposed of cytobrush in class B waste container	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
19	Sprayed the glass slides with a fixative spray, after drying in the open air	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
20	Unfixed the speculum, gradually withdrawing it, examining and evaluating the walls of vagina. Disposed of the speculum in class B waste container	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
21	Changed examination gloves	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.52857143
Bimanual vaginal examination				
22	Pulled apart the labia majora and minora with the subdominant hand, inserted thumb and index finger of working hand into vagina	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
23	Placed the subdominant hand along the midline of the abdomen above the pubis and found the body of uterus, bringing closer fingers determined and assessed its parameters	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
24	Conducted bimanual palpation of the left and right appendages, vaginal fornix, commented on the estimated parameters	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
25	Removed the fingers of working hand from the vagina, assessed and commented on the character of the discharges from the vagina on the examination glove	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
Conclusion				
26	Thanked the patient, informed her that the examination is over and asked her to get up, get dressed and sit in a chair at the desk	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.52857143
27	Took off gloves and placed them in class B container for disposal. Rubbed hands with disinfectant solution	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.52857143
28	Informed the patient about the results of examination, correct plan of further examination and appropriate date of the next visit	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.8

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CEO of Simulation Center:

Z.Vezirova

OBJECTIVE STRUCTURED CLINICAL EXAMINATION

ID:

Faculty: General medicine

Date:

Discipline: Gynecological examination of the patient

Situation number: 2

CEO of Simulation Center: Z.Vezirova

№	Action of the accrediting	Evaluation criteria		Coefficient
1	Established contact (said hello, introduces himself/herself, defined his/her role) and identified patient (asked her to introduce herself, give an age, compared data with medical records), asked about her well-being	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.7
2	Told about the upcoming procedure, explained its purpose and obtained informed voluntary consent	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.7
Preparation for the procedure				
3	Checked the operation of the lighting equipment, the availability of the necessary tools and consumables, marked the glasses for microscopy	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.54285714
4	Disinfect his hands in a hygienic way and put on sterile examination gloves	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.54285714
5	Opened packages with the instruments used for examination in the presence of a patient	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.7
6	Asked the patient to go behind the screen, expose the body below the waist	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.54285714
Implementation of procedure				
7	Carried out examination of the external genitalia, commented	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.7
8	With the thumb and index finger of the subdominant hand pulled apart the labia majora and minora	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
9	Correctly took the bivalve Cusco speculum in working hand	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
10	Using working hand, inserted a bivalve Cusco speculum in a straight size to the middle of vagina	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
11	Changed the speculum to a transverse size and moved it to the fornix	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
12	Opened the valves of the speculum, exposing the cervix for examination and fixed the speculum	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
13	Assessed parameters during the examination of a vagina and cervix, commented	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
14	Delicately, with a gauze swab, removed mucus from the surface of the cervix	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.7
15	Disposed of the swab in class B waste container and dropped Meyer forceps in container with the disinfectant solution	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.54285714
16	Took a free-lying discharge from the cervical canal with the smaller side of Volkmann's curette and applied on a glass marked "C" - cervical canal	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
17	Took a free-lying discharge from the cervical canal with the wider side of Volkmann's curette and applied on a glass marked "V" - vagina	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
18	Left the glasses to dry in the open air for 10 minutes	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.7
19	Disposed of Volkmann's curette in class B waste container	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.7
20	Unfixed the speculum, gradually withdrawing it, examining and evaluating the walls of vagina. Disposed of the speculum in class B waste container	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
21	Changed the gloves	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.54285714
Bimanual vaginal examination				
22	Pulled apart the labia majora and minora with the subdominant hand, inserted thumb and index finger of working hand into vagina	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
23	Placed the subdominant hand along the midline of the abdomen above the pubis and found the body of uterus, bringing closer fingers determined and assessed its parameters	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
24	Conducted bimanual palpation of the left and right appendages, vaginal fornix, commented on the estimated parameters	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
25	Removed the fingers of working hand from the vagina, assessed and commented on the character of the discharges from the vagina on the examination glove	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
Conclusion				
26	Thanked the patient, informed her that the examination is over and asked her to get up, get dressed and sit in a chair at the desk	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.54285714
27	Took off gloves and placed them in class B container for disposal. Rubbed hands with disinfectant solution	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.54285714
28	Informed the patient about the results of examination, correct plan of further examination and appropriate date of the next visit	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.7

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CEO of Simulation Center:

Z.Vezirova

OBJECTIVE STRUCTURED CLINICAL EXAMINATION

ID: _____ Date: _____
 Faculty: General medicine Discipline: Gynecological examination of the patient
 Situation number: _____
 CEO of Simulation Center: Z.Vezirova

№	Action of the accrediting	Evaluation criteria		Coefficient
1	Established contact (said hello, introduces himself/herself, defined his/her role) and identified patient (asked her to introduce herself, give an age, compared data with medical records), asked about her well-being	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.7
2	Told about the upcoming procedure, explained its purpose and obtained informed voluntary consent	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.7
3	Asked the patient to go behind the screen and expose the body below the waist	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.25
Preparing for the examination				
4	Desinfect his hands in a hygienic way and put on sterile examination gloves	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.25
Examination of mammary glands and description of results by assessed parameters (N.B.! If it is impossible to determine any of the estimated parameters with this equipment, nevertheless, it is necessary to articulate the name, which is mandatory for the assessment of parameter)				
5	Examined mammary glands and nipples, commented	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
6	Assessed presence /absence of nipple discharges, commented	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
7	Assessed the vascular pattern, its kind, formulated result	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
8	Inspect the inframammary areas, commented	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
9	Asked the patient to raise her hands and cross them behind her head Reexamined the mammary glands and assessed the presence/absence of local changes in the skin of the mammary glands, commented	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.7
Palpation of the mammary glands in the position of the patient standing with arms raised up and crossed behind the head				
10	Warned about the upcoming palpation Asked the patient to inform in case of pain	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.7
11	Performed circular superficial palpation of the entire surface of the left mammary gland	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
12	Performed circular superficial palpation of the entire surface of the right mammary gland	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
13	Performed deep circular palpation of the entire surface of the left mammary gland	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
14	Performed deep circular palpation of the entire surface of the right mammary gland	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
15	Supported the mammary gland with the palm of subdominant hand from below or from the opposite side from palpation	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
Palpation of the mammary glands in the patient's standing position, arms lowered along the body				
16	Asked the patient to put her hands down and report if pain occurs during palpation	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.7
17	Performed circular palpation of the entire surface of the right mammary gland counter-clockwise and formulated the result	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
18	Performed circular palpation of the entire surface of the left mammary gland counter-clockwise and formulated the result	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
19	Warned the patient about the upcoming compression of the nipple at its base, compressed the mammary gland tissue at the base of the nipple, sequentially on both sides	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
20	In the absence of discharge from the nipples, said that if they were found, he/she would take a smear of an imprint for a cytological examination. Described the method	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
Palpation of regional lymph nodes on both sides				
21	Suggested that the patient put her hands on the hips and palpated the apical group of axillary lymph nodes on both sides, formulated the result	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.7
22	Asked the patient to lower her arms along the body and palpated the remaining groups of axillary lymph nodes on both sides at the same time, formulated the result	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.7
23	Palpated subclavian lymph nodes simultaneously on both sides, formulated the result	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.7
24	Asked the patient to turn her back to him and palpated supraclavicular lymph nodes simultaneously on both sides, formulated the result	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.7
Palpation of mammary glands with the patient lying down				
25	Asked the patient to lie on the couch to continue examination	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.25
26	Performed circular palpation of the entire surface of the right mammary gland, formulated the result	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
27	Performed circular palpation of the entire surface of the left mammary gland, formulated the result	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.1
End of examination				
28	Thanked the patient, offered to get dressed, go and sit on a chair	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.25
29	Took off gloves and placed them in class B container for disposal. Rubbed hands with disinfectant solution	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.25
30	Informed the patient about the results of examination, correct plan of further examination and appropriate date of the next visit	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.7
31	Made a note about the performed manipulation in medical documentation	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.25

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OBJECTIVE STRUCTURED CLINICAL EXAMINATION

ID:
Faculty: General medicine

Date:
Discipline: Obstetrics examination of the patient
Situation number:
CEO of Simulation Center: Z.Vezirova

№	Action of the accrediting	Evaluation criteria		Coefficient
		<input type="checkbox"/> yes	<input type="checkbox"/> no	
1	Established contact (said hello, introduces himself/herself, defined his/her role) and identified patient (asked her to introduce herself, give an age, compared data with medical records), asked about her well-being	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
2	Told about the upcoming procedure, explained its purpose and obtained informed voluntary consent	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
Preparation for the procedure				
3	Asked the patient to take a comfortable position on the couch and expose the abdomen	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.56
4	Disinfect hands in a hygienic way and put on examination gloves	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.56
Implementation of procedure				
5	Carried out the I maneuver of the external obstetric examination (Leopold's), correctly placing hands, identified large part of the fetus located in the uterine fundus, carefully palpating the uterine fundus	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
6	Carried out the II maneuver of the external obstetric examination (Leopold's), correctly placing hands, identified large part of the fetus determined lie, position and view of fetus and uterine tone by gently palpating the lateral sections of the uterus	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
7	Carried out the III maneuver of the external obstetric examination (Leopold's), correctly placing hands, identified large part of the fetus pressed against the pelvic inlet	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
8	Stood facing the patient's feet. Carried out the IV maneuver of the external obstetric examination (Leopold's), correctly placing hands, determined the relationship of the presenting part of the fetus to the planes of true pelvis	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
Auscultation of the fetus				
9	Pressed the stethoscope's wide bell to the mother's abdomen	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
10	Correctly determined the place of listening to the fetal heartbeat and listened for 1 minute	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
11	Treated wide bell of the stethoscope with the disinfectant solution	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.56
Calculation of the estimated weight of the fetus				
12	Accurately measured the circumference of the abdomen and fundal height	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
13	Estimated weight of fetus (weight of fetus (g) = fundal height (cm) × abdominal circumference (cm) ± 200 g)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
Pelvic measurements				
14	Holds the pelvimeter correctly	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
15	Determined D.spinarum - distance between the spina iliaca anterior superior	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
16	Determined D.cristarum - the largest distance between the left and right iliac crests	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
17	Determined D.trochanterica – distance between the greater trochanters	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
18	Determined Conjugata externa - distance between the depression of the lumbar vertebrae and middle of the upper external edge of the symphysis	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
Determination of diagonal conjugate				
19	Took sterile gauze swab and treated it with disinfectant solution	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.56
20	Treated external genitalia with the disinfectant solution	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.56
21	Disposed of the swab in class B container, dropped Meyer forceps in container with disinfectant solution	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.56
22	With subdominant hand pulled apart the labia majora and minora, inserted the index and middle fingers of working hand into the vagina and moved towards the promontory	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
23	With subdominant hand noted the point of contact of the investigating hand with the lower edge of symphysis	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
24	Asked assistant to measure the distance from the tip of middle finger to the point of contact with the lower edge of symphysis	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.56
End of procedure				
25	Informed the patient about the end of procedure, asked her to get dressed	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.56
26	Took off gloves and placed them in class B container for disposal. Disinfect hands in a hygienic way	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.56
27	Made a note about the examination in medical documentation	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.56

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OBJECTIVE STRUCTURED CLINICAL EXAMINATION

ID:

Faculty: General medicine

Date:

Discipline: Obstetrics examination of the patient

Situation number: 5

CEO of Simulation Center: Z.Vezirova

№	Action of the accrediting	Evaluation criteria		Coefficient
1	Said: "I delivered a live baby and the baby lies on the mother's abdomen"	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.54285714
2	Put on sterile examination gloves and took measures to prevent bleeding	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.8
Implementation of procedure				
3	Correctly set up two Kocher's clamps	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
4	Treated sterile gauze swab with the disinfectant solution	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.54285714
5	Treated an area of the umbilical cord dissection	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.8
6	Disposed of the swab in class B container and dropped Meyer forceps in container with disinfectant solution	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.54285714
7	Cut the umbilical cord between the clamps, dropped scissors in container with disinfectant solution	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.8
Signs of the placenta detachment				
8	Assessed Schroder's signs (change of the form and fundal height)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
9	Assessed Alfeld's signs (extension of the outer piece of the umbilical cord)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
10	Assessed Klein's signs (after the pushing, the extended piece of the umbilical cord is not pulled into the vagina)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
11	Assessed Kustner-Chukalov signs (when the suprapubic area is pressed with the edge of hand, umbilical cord is not pulled into the vagina)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
Methods of external placenta detachment				
12	Used Abuladze method (brought an uterus into middle position, stroked lightly, grasped the anterior abdominal wall with both hands and lifted it slightly, asked the patient to push)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
13	Used Crede-Lazarevich method (bring an uterus into middle position, stroke lightly, grasp the uterine fundus with a working hand, ask the patient not to push, at the same time press on the uterus with the whole hand)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
14	Used Genter's method (bring an uterus into middle position, stroke lightly, clench both hands into fists, place the dorsal surface on the uterine fundus in the area of the tubal angles, ask the patient not to push, press with the fists on the uterus in the direction down to the sacrum)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
15	Said: "There were no signs of the placenta detachment during 30 minutes after the childbirth. Bleeding began"	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.8
16	Called for anesthesiologist and change gloves	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.8
Begin manual detachment of the placenta				
17	Took sterile gauze swab and treated it with disinfectant solution	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.54285714
18	Treated external genitalia with the disinfectant solution	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.54285714
19	Disposed of the swab in class B container, dropped Meyer forceps in container with disinfectant solution	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.54285714
20	With subdominant hand pulled apart the labia majora and minora, inserted working hand folded as a cone ("obstetrician's hand") into the vagina, and then into the uterus	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.8
21	With the subdominant hand, through the anterior abdominal wall, take and fix the uterine fundus, determine the edge of placenta with working hand	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.8
22	Began detaching placenta from the wall of the uterus with sawlike movements	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
23	With a subdominant hand, tighten the umbilical cord and take it out, placenta in a basin	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
24	With the hand within the uterine cavity examine its walls	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.8
25	Checked integrity of the placenta	<input type="checkbox"/> yes	<input type="checkbox"/> no	1.2
26	Assessed the uterus tone	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.8
27	Asked anesthesiologist about the patient's well-being	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.8
28	Took off gloves and placed them in class B container for disposal. Disinfect hands in a hygienic way	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.54285714

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OBJECTIVE STRUCTURED CLINICAL EXAMINATION

ID:

Faculty: General medicine

Date:

Discipline: Basic cardiopulmonary resuscitation

Situation number:

CEO of Simulation Center: Z.Vezirova

№	Action of the accrediting	Evaluation criteria		Coefficient
		<input type="checkbox"/> yes	<input type="checkbox"/> no	
1	Made sure that there was no danger to himself/herself and the victim, ensured safety	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.6
2	Gently shook the victim by the shoulders	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.6
3	Loudly addressed him: "Do you need help?"	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.6
4	Called for help: "Help, a man down!"	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.6
5	Put the palm of one hand on the victim's forehead, with two fingers of the other hand picked up the victim's lower jaw and moderately tilted his head, opening his airway	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
Identified signs of life				
6	Brought his ear close to the victim's lips	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
7	Observed the excursion of the victim's chest visually	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
8	Evaluated the presence of normal breathing for no more than 10 seconds	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
Called a specialist (EMS) according to the algorithm:				
9	The fact of the brigade call	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
10	• Coordinates of the scene	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
11	• Number of casualties	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.6
12	• Sex	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.31
13	• Approximate age	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.6
14	• Condition of the victim	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
15	• The extent of your help	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
Prepared for chest compressions				
16	Kneeled on the side of the victim, facing him	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.6
17	Freed the victim's chest from his clothing	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.6
18	Started on the CCC as soon as possible	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.6
19	Placed the base of the palm of one hand on the center of the victim's chest	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
20	Placed the second palm on the first, joining the fingers of both hands in a lock	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
Chest compressions				
21	30 compressions in a row	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
22	• The hands of the rescuer are vertical	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.31
23	• Do not bend at the elbows	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.6
24	• The fingers of the upper hand pull up the fingers of the lower hand	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.31
25	• Compressions are counted out loud	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.6
Trainer performance				
26	• Adequate depth of compression (at least 90%)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
27	• Adequate hand position during compressions (at least 90%)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
28	• Complete hand release between compressions (at least 90%)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
29	• Adequate compression rate (at least 90%)	<input type="checkbox"/> yes	<input type="checkbox"/> no	1
Completing the test				
30	When the command: "One minute left," the resuscitation is not stopped	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.6
Unregulated and unsafe practice				
31	Compressions were not performed at all (artificial circulation was not maintained)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.31
32	Carotid pulse was assessed without respiration assessment	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.31
33	The pulse on the radial and/or other peripheral arteries was assessed	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.31
34	Neurological status was assessed (checking the reaction of the pupils to the light)	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.31
35	Collection of anamnesis, search for medical records was assessed	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.31
36	A search for unregulated fixtures (handkerchiefs, bandages, etc.) was assessed	<input type="checkbox"/> yes	<input type="checkbox"/> no	0.31

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CEO of Simulation Center:

Z.Vezirova

**Azərbaycan Respublikası Səhiyyə Nazirliyi
Azərbaycan Tibb Universiteti**

**X Müalicə-profilaktika fakültəsinin buraxılış kurs tələbələri üçün
“Daxili xəstəliklər”, “Cərrahi xəstəliklər” və “Mamalıq və ginekologiya” fənlərindən yekun
Obyektiv strukturlaşdırılmış klinik imtahana (OSKİ) dair**

QIYMƏTLƏNDİRMƏ VƏRƏQƏSİ

Venadaxili inyeksiyalar	Təcili tibbi yardım	Pasiyentin fizikal müayinəsi	Pasiyentin ginekoloji müayinəsi	Pasiyentin mamalıq müayinəsi	ÜAR
0	0	0	0	0	0

Tədris Simulyasiya Mərkəzinin rəhbəri:

SIMULATION CENTER
SECHENOV UNIVERSITY
BAKU

Z. Ş. Vəzirova

SECHENOV UNIVERSITY
LIFE SCIENCES