Министерство здравоохранения Российской Федерации

ФЕДЕРАЛЬНОЕ ГОСУДАРСТВЕННОЕ БЮДЖЕТНОЕ ОБРАЗОВАТЕЛЬНОЕ УЧРЕЖДЕНИЕ ВЫСШЕГО ОБРАЗОВАНИЯ «РОСТОВСКИЙ ГОСУДАРСТВЕННЫЙ МЕДИЦИНСКИЙ УНИВЕРСИТЕТ» МИНИСТЕРСТВА ЗДРАВООХРАНЕНИЯ РОССИЙСКОЙ ФЕДЕРАЦИИ

Утверждено на заседании педагогического совета колледжа ФГБОУ ВО РостГМУ Минздрава России от <u>49.05</u>,20<u>24</u> г. Протокол № <u>40</u>

Утверждаю Руководитель ППССЗ по специальности

33.02.01 Фармация – директор колледжа ФГБОУ ВО

РостГМУ Минздрава России

от «29» 25 Бадальянц

РАБОЧАЯ ПРОГРАММА УЧЕБНОЙ ДИСЦИПЛИНЫ

ОГСЭ.03. ИНОСТРАННЫЙ ЯЗЫК В ПРОФЕССИОНАЛЬНОЙ ДЕЯТЕЛЬНОСТИ

специальность СПО 33.02.01 Фармация Квалификация Фармацевт очная форма обучения РАССМОТРЕНА

на заседании цикловой комиссии общегуманитарных, социально-экономических и естественно-научных дисциплин от <u>22.05.20 24</u> г. Протокол № 10

СОГЛАСОВАНА

Заместитель директора по НМР

Н.А. Артеменко

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Рабочая программа учебной дисциплины ОГСЭ.03. Иностранный язык в профессиональной деятельности разработана на основе Федерального государственного образовательного стандарта по специальности среднего профессионального образования 33.02.01 Фармация, утвержденного приказом Минпросвещения России от 13 июля 2021 г. №449, зарегистрированного в Минюсте РФ 18.08.2021 г. (регистрационный № 64689) и примерной основной образовательной программы по специальности 33.02.01 Фармация, разработанной ФУМО в 2021 г.

Составитель:

Шульженко А.И., преподаватель высшей квалификационной категории колледжа ФГБОУ ВО РостГМУ Минздрава России.

Рецензенты:

Новикова Л.В., заведующая аптекой ФГБОУ ВО РостГМУ Минздрава России;

Нектаревская Ю.Б., зав. кафедрой иностранных языков ФГБОУ ВО РостГМУ Минздрава России, канд. полит. наук; **Дерягина А.А.,** преподаватель колледжа ФГБОУ ВО РостГМУ Минздрава России.

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1. ОБЩАЯ ХАРАКТЕРИСТИКА РАБОЧЕЙ ПРОГРАММЫ УЧЕБНОЙ ДИСЦИПЛИНЫ ОГСЭ.03 ИНОСТРАННЫЙ ЯЗЫК В ПРОФЕССИОНАЛЬНОЙ ДЕЯТЕЛЬНОСТИ

1.1. Место дисциплины в структуре основной образовательной программы:

Программа учебной дисциплины ОГСЭ.03 Иностранный язык в профессиональной деятельности является обязательной частью общего гуманитарного и социально-экономического цикла основной образовательной программы в соответствии с ФГОС СПО по специальности 33.02.01 Фармация.

Учебная дисциплина ОГСЭ.03 Иностранный язык в профессиональной деятельности наряду с другими учебными дисциплинами обеспечивает развитие следующих общих компетенций:

- ОК 02. Осуществлять поиск, анализ и интерпретацию информации, необходимой для выполнения задач профессиональной деятельности
- ОК 03. Планировать и реализовывать собственное профессиональное и личностное развитие
- OК 04. Работать в коллективе и команде, эффективно взаимодействовать с коллегами, руководством, клиентами
- ОК 09. Использовать информационные технологии в профессиональной деятельности
- OК 10. Пользоваться профессиональной документацией на государственном и иностранном языках
- ОК 12. Оказывать первую помощь до оказания медицинской помощи гражданам при несчастных случаях, травмах, отравлениях и других состояниях и заболеваниях, угрожающих их жизни и здоровью

и способствует формированию следующих профессиональных компетенций:

- ПК 1.3. Оказывать информационно-консультативную помощь потребителям, медицинским работникам по выбору лекарственных препаратов и других товаров аптечного ассортимента
- ПК 1.4. Осуществлять розничную торговлю и отпуск лекарственных препаратов населению, в том числе по льготным рецептам и требованиям медицинских организаций
- ПК 1.5. Осуществлять розничную торговлю медицинскими изделиями и другими товарами аптечного ассортимента
- ПК 1.6. Осуществлять оптовую торговлю лекарственными средствами и другими товарами аптечного ассортимента

1.2. Цель и планируемые результаты освоения дисциплины:

В рамках программы учебной дисциплины обучающимися осваиваются умения и знания

Код ПК, ОК	Умения	Знания	
ПК 1.3–1.6,	- общаться (устно и письменно) на	- лексический минимум, связанный с	
ОК 02,	иностранном языке на	тематикой данного этапа обучения и	
ОК 03,	профессиональные и повседневные	соответствующими ситуациями	
ОК 04,	темы;	общения, а также ЈІЕ, связанные с	
ОК 09,	- переводить (со словарем)	медициной (1200-1400 JIE);	
ОК 10,	иностранные тексты	- грамматический минимум,	
OK 12	профессиональной направленности;	необходимый для чтения и перевода (со	
	- самостоятельно совершенствовать	словарем) иностранных текстов	
	устную и письменную речь, пополнять	гь профессиональной направленности	
	словарный запас		

2. СТРУКТУРА И СОДЕРЖАНИЕ УЧЕБНОЙ ДИСЦИПЛИНЫ ОГСЭ.03 ИНОСТРАННЫЙ ЯЗЫК В ПРОФЕССИОНАЛЬНОЙ ДЕЯТЕЛЬНОСТИ

2.1. Объем учебной дисциплины и виды учебной работы

Вид учебной работы	Объем часов
Объем образовательной программы учебной дисциплины	114
в т.ч. в форме практической подготовки	112
в том числе:	1
практические занятия	112
Самостоятельная работа ¹	-
Промежуточная аттестация в форме дифференцированного зачета	2

¹ Самостоятельная работа в рамках образовательной программы планируется образовательной организацией в соответствии с требованиями ФГОС СПО в пределах объема учебной дисциплины в количестве часов, необходимом для выполнения заданий самостоятельной работы обучающихся, предусмотренных тематическим планом и содержанием учебной дисциплины.

2.2. Тематический план и содержание учебной дисциплины

Иностранный язык в профессиональной деятельности

Наименование разделов и тем	Содержание учебного материала и формы организации деятельности обучающихся	Объем в часах	Коды компетенций и личностных результатов ² , формированию которых способствует элемент программы
1	2	3	4
Раздел 1. Вводно-ко		2	
Тема 1.1.	Содержание учебного материала	2	ОК 03, ОК 10,
Английский язык	1. Лексический материал. Активизация навыка чтения, перевода и поиска информации в		
как средство	тексте «В медицинском колледже». Монологическое высказывание: «О себе и о своей		
международного	будущей профессии».		
общения	2. Фонетический материал: типы слогов, транскрипция, произношение гласных, согласных.		
	3. Грамматический материал: глаголы to be и to have в настоящем, прошедшем и		
	будущем времени. Схемы повествовательного и вопросительного предложения.		
	В том числе практических занятий	2	
	Практическое занятие №1. Роль английского языка в современном обществе. Цели,	2	
D 4.0	задачи обучения английскому языку.	4.6	
	едицинских знаний	46	
Тема 2.1.	Содержание учебного материала	18	OK 02, OK 09,
Анатомия и	1. Лексический минимум, необходимый для перевода названий частей тела, внутренних		OK 10, OK 12,
физиология	органов и названий костей скелета на иностранный язык. Лексический минимум,		
человека	необходимый для чтения и перевода профессионально ориентированных текстов об		
	анатомии и физиологии человека.		

² Могут быть приведены коды личностных результатов реализации программы воспитания в соответствии с Приложением 3 ПООП.

	2. Грамматический материал: множественное число имен существительных, имена числительные, местоимение, артикль, предлоги времени, места и движения, степени сравнения имен прилагательных, сравнительные конструкции. 3. Изучение лексико-грамматического материала; выполнение лексико-грамматических упражнений; чтение текста и выполнение заданий по тексту; краткие и полные ответы на вопросы по теме.		
	В том числе практических занятий	18	
	Практическое занятие №2. Внутренние органы и внешнее строение.	2	
	Практическое занятие №3. Системы человеческого организма.	2	
	Практическое занятие №4. Кровь.	2	
	Практическое занятие №5. Сердце и его клапаны.	2	
	Практическое занятие №6. Кровообращение.	2	
	Практическое занятие №7. Опорно-двигательная система.	2	
	Практическое занятие №8. Дыхательная система.	2	
	Практическое занятие №9. Пищеварительная система.	2	
	Практическое занятие №10. Систематизация и обобщение знаний по разделу:	2	
	«Анатомия и физиология человека».		
Тема 2.2.	Содержание учебного материала	16	ОК 02, ОК 04,
Патология	 Лексический минимум, необходимый для чтения и перевода профессионально ориентированных текстов о симптомах, лечении и осложнении болезней. Лексический материал по теме: предметы ухода за больными. Диалог: у врача. Монологическое высказывание: инфекционные болезни. Грамматический материал: времена группы Simple, Continuous, Perfect (образование, употребление). Изучение лексико-грамматического материала по теме; выполнение лексико-грамматических упражнений; чтение текста и выполнение заданий по тексту; краткие и полные ответы на вопросы по теме. 		OK 10, OK 12,
	В том числе практических занятий	16	
	Практическое занятие №11. Предметы ухода за больными.	2	
	Практическое занятие №12. Заболевания дыхательных путей.	2	1
	Практическое занятие №13. Инфекция.	2	

	Практическое занятие №14. Инфекционные заболевания: дифтерия, гепатит, краснуха, ветряная оспа.	2	
	Практическое занятие №15. Инфекционные заболевания: свинка, коклюш, скарлатина, корь.	2	
	Практическое занятие №16. Инфекционные заболевания: полиомиелит, брюшной тиф, тонзиллит, столбняк.	2	
	Практическое занятие №17. На приеме у врача.	2	
	Практическое занятие №18. Систематизация и обобщение знаний по разделу: «Патология».	2	
Тема 2.3. Первая медицинская помощь	 Содержание учебного материала Лексический минимум, необходимый для чтения и перевода профессионально ориентированных текстов о первой медицинской помощи, о способах оказания первой помощи при ушибах, ранах, кровотечениях, переломах, ожогах, обмороке, шоке, отравлении, солнечном ударе. Устное высказывание о способах оказания первой помощи при несчастных случаях. Грамматический материал: повелительное наклонение. Изучение лексико-грамматического материала по теме; выполнение лексико-грамматических упражнений; чтение текста и выполнение заданий по тексту; краткие и полные ответы на вопросы по теме. 	12	OK 02, OK 04, OK 10, OK 12,
	В том числе практических занятий	12	
	Практическое занятие №19. Первая медицинская помощь. Ушибы.	2	
	Практическое занятие №20. Кровотечения, раны.	2	
	Практическое занятие №21. Переломы. Ожоги	2	
	Практическое занятие №22. Обморок, шок.	2	
	Практическое занятие №23. Отравление, солнечный удар.	2	
	Практическое занятие №24. Систематизация и обобщение знаний по теме: «Первая медицинская помощь».	2	
Раздел 3. Система	здравоохранения.	12	
Тема3.1. История	Содержание учебного материала	2	OK 02, OK 09,
развития медицины	1. Лексический минимум, необходимый для чтения и перевода профессионально ориентированных текстов об истории и развитии медицины, ученых-медиках. Монологическое высказывание о биографии и научных достижениях ученого.		OK 10,

	 2. Грамматический материал: страдательный залог. 3. Изучение лексико-грамматического материала по теме; выполнение лексико-грамматических упражнений; чтение текста и выполнение заданий по тексту. Употребление и распознавание в речи предложений с конструкцией страдательного залога, построение предложений с опорой на образец. Преобразование предложений из действительного залога в страдательный. В том числе практических занятий Практическое занятие №25. Развитие медицины с древних веков до наших дней. Ученые медики. 	2 2	
Тема 3.2. Здравоохранение	Тодержание учебного материала 1. Лексический минимум, необходимый для чтения и перевода профессионально ориентированных текстов о системе здравоохранения в России, Великобритании, США. Лексический минимум, необходимый для чтения и перевода профессионально ориентированных текстов о целях, функциях, персонале поликлиники, больницы, о контроле состояния пациентов и выполнении лечебных вмешательств, системе медицинского страхования. Лексический минимум, необходимый для чтения и перевода профессионально ориентированных текстов о современных проблемах здравоохранения. Монологическое высказывание о системе здравоохранения в России, о работе медицинских учреждений (поликлиника, больница). 2. Грамматический материал: модальные глаголы сап, тау, must, should и их эквиваленты. Употребление и распознавание в речи предложений с модальными глаголами, построение предложений с опорой на образец. 3. Изучение лексико-грамматического материала по теме; выполнение лексикограмматических упражнений; чтение текста и выполнение заданий по тексту; краткие и полные ответы на вопросы по теме. Развитие навыков устной речи. В том числе практических занятий Практическое занятие №26. Система здравоохранения в России. Практическое занятие №27. Система здравоохранение в Великобритании и США. Практическое занятие №28. Медицинские учреждения (поликлиника, стационар). Практическое занятие №29. Систематизация и обобщение знаний по теме: «Здравоохранение».	8 2 2 2 2	OK 02, OK 04, OK 09, OK 10,
Тема 3.3.	Содержание учебного материала	2	OK 02, OK 09,

Оформление	1. Английский язык для профессиональных целей. Лексико-грамматический минимум,		OK 10,
деловой	необходимый для составления резюме на английском языке. Структура резюме.		
(медицинской)	2. Лексико-грамматический минимум, необходимый для ведения презентации.		
документации	3. Лексико-грамматический минимум, необходимый для написания делового письма.		
	Структура письма.		
	В том числе практических занятий	2	
	Практическое занятие №30. Написание делового письма, ведение презентации,	2	
	составление резюме.		
Раздел 4. Професс	сиональная сфера общения	18	
Тема 4.1.	Содержание учебного материала	12	Π K 1.3 – Π K 1.6,
Фармация	1. Лексический минимум, необходимый для чтения и перевода профессионально		ОК 02, ОК 03,
	ориентированных текстов о фармации, профессии фармацевт, обязанностях фармацевта,		ОК 04, ОК 09,
	роли фармацевта в системе здравоохранения.		ОК 10,.
	2. Грамматический материал: Согласование времен. Прямая и косвенная речь.		
	3. Изучение лексико-грамматического материала по теме; выполнение лексико-		
	грамматических упражнений; чтение текста и выполнение заданий по тексту. Развитие		
	навыков устной речи.		
	В том числе практических занятий	12	
	Практическое занятие №31. Фармация.	2	
	Практическое занятие №32. Профессия: фармацевт.	2	
	Практическое занятие №33. Роль фармацевта в системе здравоохранения.	2	
	Практическое занятие №34. Обязанности фармацевта.	2	
	Практическое занятие №35. Развитие фармацевтической промышленности.	2	
	Практическое занятие №36. Обобщение и систематизация по теме: «Фармация».	2	
Тема 4.2.	Содержание учебного материала	6	ПК 1.3–1.6,
В Аптеке	1. Лексический минимум, необходимый для чтения и перевода профессионально		OK 02, OK 03,
	ориентированных текстов о работе аптеки, лекарствах, составления диалога «В аптеке».		OK 04, OK 09,
	Монологическое высказывание о работе аптеки. Диалог: в аптеке		OK 10,
	2. Грамматический материал: неличные формы глагола (инфинитив, причастие,		
	герундий).		
	3. Изучение лексико-грамматического материала по теме; выполнение лексико-		
	грамматических упражнений; чтение текста и выполнение заданий по тексту. Развитие		
	навыков устной речи.		

	В том числе практических занятий	6	
	Практическое занятие №37. Работа аптеки.	2	
	Практическое занятие №38. Лекарства.	2	
	Практическое занятие №39. Профессиональная этика и речевой этикет фармацевтов.	2	
Раздел 5. Организа	щия профессиональной деятельности.	24	ПК 1.3–1.6,
Тема 5.1.	Содержание учебного материала	2	ОК 02, ОК 03,
Лекарственные растения	1. Лексический минимум, необходимый для чтения и перевода профессионально ориентированных текстов о лекарственных растениях.		ОК 09,
1	2. Грамматический материал: условные предложения І, ІІ, ІІІтипа.		
	3. Изучение лексико-грамматического материала по теме; выполнение лексико-		
	грамматических упражнений; чтение текста и выполнение заданий по тексту; краткие и		
	полные ответы на вопросы по теме.		
	В том числе практических занятий	2	
	Практическое занятие №40. Лекарственные растения и препараты из них.	2	
Тема 5.2.	Содержание учебного материала	6	ПК 1.3–1.6,
Фармакология и	1. Лексический минимум, необходимый для чтения и перевода профессионально		ОК 02, ОК 03,
лекарственные	ориентированных текстов по теме: фармакология и лекарственные наименования.		ОК 09, ОК 10,
наименования	2. Грамматический материал: условные предложения I, II, IIIтипа.		
(торговое,	3. Изучение лексико-грамматического материала по теме; выполнение лексико-		
международное,	грамматических упражнений; чтение текста и выполнение заданий по тексту.		
непатентованное)	В том числе практических занятий	6	
	Практическое занятие №41. Фармакология.	2	
	Практическое занятие №42. Лекарственные наименования.	2	
	Практическое занятие №43. Лекарственные формы.	2	
Тема 5.3.	Содержание учебного материала	4	ПК 1.3–1.6,
Применение лекарственных препаратов	 Лексический минимум, необходимый для чтения и перевода профессионально ориентированных текстов по теме: применение лекарственных препаратов. Грамматический материал: условные предложения I, II, IIIтипа. Выполнение лексико-грамматических упражнений; чтение текста и выполнение заданий по тексту. 		OK 02, OK 03, OK 09, OK 10,
	В том числе практических занятий	4	=
	Практическое занятие №44. Назначение и способ применения лекарственных препаратов.	2	

енных препаратов. ние учебного материала ческий минимум, необходимый для чтения и перевода профессионально ованных текстов: фармакологические группы.		
ческий минимум, необходимый для чтения и перевода профессионально	4.0	
	12	ПК 1.3–1.6,
ованных текстов: фармакологические группы.		OK 03, OK 10,
Summer rest debuterer restricted by		
атический материал: условные предложения I, II, IIIтипа.		
ние лексико-грамматического материала по теме; выполнение лексико-		
ческих упражнений; чтение текста и выполнение заданий по тексту.		
сле практических занятий	12	
еское занятие №46. Антибактериальные препараты.	2	
еское занятие №47. Препараты, влияющие на действия ЖКТ.	2	
еское занятие №48. Анальгетики.	2	
еское занятие №49. Бета-блокаторы.	2	
еское занятие №50. Препараты, влияющие на сердечно-сосудистую систему.	2	
еское занятие №51. Обобщающее занятие по теме: «Фармакология».	2	
	10	ПК 1.3–1.6,
ние учебного материала	4	ОК 03, ОК 10,
ности лексики и перевода иностранной научно-медицинской литературы.		
атические особенности научно-медицинского стиля английского языка.		
сле практических занятий	4	
еское занятие №52. Особенности перевода иностранной научно-медицинской	2	
ры, грамматические особенности научно-медицинского стиля английского		
еское занятие №53. Активизация навыка чтения и перевода научно- ской литературы.	2	
ние учебного материала	6	ПК 1.3–1.6,
· ·		OK 03, OK 10,
нология, входящая в состав инструкций к медицинским препаратам. Разделы		
нология, входящая в состав инструкций к медицинским препаратам. Разделы ии к медицинским препаратам.	6	
нология, входящая в состав инструкций к медицинским препаратам. Разделы ии к медицинским препаратам. сле практических занятий		

Практическое занятие №55. Активизация навыка чтения, перевода инструкций к	2	
медицинским препаратам.		
Практическое занятие №56. Контрольно-индивидуальный перевод инструкций к	2	
медицинским препаратам.		
Промежуточная аттестация в форме дифференцированного зачета	2	
Bcero:	114	

3. УСЛОВИЯ РЕАЛИЗАЦИИ УЧЕБНОЙ ДИСЦИПЛИНЫ

3.1. Для реализации программы учебной дисциплины должны быть предусмотрены следующие специальные помещения:

Кабинет иностранного языка, оснащенный оборудованием:

- рабочее место преподавателя;
- посадочные места по количеству обучающихся;
- доска классная;

Технические средства обучения, необходимые для реализации программы:

- компьютерное и видеопроекционное оборудование.

Лицензионное программное обеспечение:

- 1. Office Standard, лицензия № 66869707 (договор №70-A/2016.87278 от 24.05.2016).
- 2. System Center Configuration Manager Client ML, System Center Standard, лицензия № 66085892 (договор №307-A/2015.463532 от 07.12.2015);
- 3. Windows, лицензия № 66869717 (договор №70-A/2016.87278 от 24.05.2016).
- 4. Office Standard, лицензия № 65121548 (договор №96-A/2015.148452 от 08.05.2016);
- 5. Windows Server Device CAL, Windows Server Standard, лицензия № 65553756 (договор № РГМУ1292 от 24.08.2015);
 - 6. Windows, лицензия № 65553761 (договор №РГМУ1292 от 24.08.2015);
- 7. Windows Server Datacenter 2 Proc, лицензия № 65952221 (договор №13466/РНД1743/РГМУ1679 от 28.10.2015);
- 8. Kaspersky Total Security 500-999 Node 1 year Educational Renewal License (Договор № 273-A/2023 от 25.07.2024).
- 9. Предоставление услуг связи (интернета): «Эр-Телеком Холдинг» договор РГМУ262961 от 06.03.2024; «МТС» договор РГМУ26493 от 11.03.2024.
- 10. МойОфис стандартный 2, 10шт., лицензия ПР0000-5245 (Договор № 491-A/2021 от 08.11.2021)
- 11. Astra Linux рабочая станция, 10 шт., лицензии: 216100055-smo-1.6-client-5974, m216100055-alse-1.7-client-max-x86_64-0-5279 (Договор № 491-A/2021 от 08.11.2021)

- 12. Astra Linux рабочая станция, 150 шт., лицензия: 216100055-alse-1.7-client-medium-x86_64-0-9783 (Договор № 328-A/2022 от 30.09.2022)
- 13. Astra Linux рабочая станция, 60 шт., лицензия: 216100055-alse-1.7-client-medium-x86_64-0-12604 (Договор № 400-A/2022 от 09.09.2022)
- 14. Astra Linux сервер 10 шт. лицензия: 216100055-alse-1.7-server-medium-x86_64-0-12604 (Договор № 400-A/2022 от 09.09.2022)
- 15. МойОфис стандартный 2, 280шт., лицензия: ПР0000-10091 (Договор № 400-A/2022 от 09.09.2022)
- 16. Система унифицированных коммуникаций CommuniGate Pro, лицензия: Dyn-Cluster, 2 Frontends, Dyn-Cluster, 2 backends, CGatePro Unified 3000 users, Kaspersky AntiSpam 3050-users, Contact Center Agent for All, CGPro Contact Center 5 domains. (Договор № 400-A/2022 от 09.09.2022)
- 17. Система управления базами данных Postgres Pro AC, лицензия: 87A85 3629E CCED6 7BA00 70CDD 282FB 4E8E5 23717(Договор № 400-A/2022 от 09.09.2022)
- 18. МойОфис стандартный 2, 600шт., лицензия: ПР0000-24162 (Договор № 500-А/2023 от 16.09.2023)
- 19. Программный комплекс ALD Pro, лицензия для клиента 800шт : 216100055-ald-2.0-client-0-19543 (Договор № 500-A/2023 от 16.09.2023)
- 20. Программный комплекс ALD Pro, лицензия для сервера 2шт : 16100055-ald-2.0-server-0-19543 (Договор № 500-A/2023 от 16.09.2023)
- 21. Astra Linux рабочая станция, 10 шт., лицензия: 216100055-alse-1.7-client-medium-FSTEK-x86_64-0-19543 (Договор № 500-A/2023 от 16.09.2023)
- 22. Astra Linux сервер, 16 шт., лицензия: 216100055-alse-1.7-server-max-FSTEK-x86_64-0-19543 (Договор № 500-A/2023 от 16.09.2023)
- 23. МойОфис Частное Облако 2, 900шт., лицензия: ПР0000-24161 (Договор № 500-A/2023 от 16.09.2023)

3.2. Информационное обеспечение реализации программы

3.2.1. Основные печатные издания

1. Козырева, Л.Г. Английский язык для медицинских колледжей и училищ : учебное пособие / Л.Г. Козырева, Т.В. Шадская. - Ростов-на-Дону : Феникс, 2024. - 329 с. – ISBN 978-5-222-41469-9.

3.2.2. Основные электронные издания

1. Козырева, Л. Г. Английский язык для медицинских колледжей и училищ : учебное пособие / Козырева Л. Г. , Шадская Т. В. - Ростов н/Д : Феникс, 2020. - 334 с. - ISBN 978-5-222-35182-6. Доступ из ЭБС «Конс. студ.». - Текст электронный.

3.2.3. Дополнительные источники

- 1. Английский язык. Базовый курс : учебник для медицинских училищ и колледжей / Марковина И.Ю. Громова Г.Е. Полоса С.В. Москва : ГЭОТАР-Медиа, 2020.-152 с. ISBN 978-5-9704-5512-8. Доступ из ЭБС «Конс. студ.». Текст электронный.
- 2. Марковина, И. Ю. Английский язык. Полный курс: учебник / И. Ю. Марковина, Г. Е. Громова, С. В. Полоса. Москва: ГЭОТАР-Медиа, 2023. 304 с. ISBN 978-5-9704-7206-4. Доступ из ЭБС «Конс. студ.». Текст электронный.
- 3. Марковина И.Ю. Английский язык. Вводный курс: учебник / И. Ю. Марковина, Г. Е. Громова, С. В. Полоса. Москва: ГЭОТАР-Медиа, 2023. 160 с.: ил. 160 с.: ISBN 978-5-9704-7761-8. Доступ из ЭБС «Конс. студ.» Текст электронный
- 4. Английский язык для обучающихся фармацевтического факультета. Пособие для преподавателей : учебно-методическое пособие / Ю. Б. Нектаревская, Л. В. Самыгина, Р. М. Селейдарян, Е. Ю. Сорокина ; Рост. гос. мед. ун-т, каф. иностр. яз-ков с курсом латин. яз. Ростов-на-Дону : Изд-во РостГМУ, 2023. 92 с.
- 5. Английский язык для обучающихся фармацевтического факультета. Практический курс : учебное пособие [для студ. мед. вузов] / Ю. Б. Нектаревская, Л. В. Самыгина, Р. М. Селейдарян, Е. Ю. Сорокина ; Рост. гос. мед. ун-т, каф. иностр. яз-ков с курсом латин. яз. Ростов-на-Дону : Изд-во РостГМУ, 2023. 163 с.
- 6. Английский язык. Лекарственные препараты : учеб.-метод. пособие / сост.: А.И. Шульженко. Ростов н/Д : Изд-во РостГМУ, 2017. 52 с.
- 7. Английский язык. Лекарственные препараты: учеб.-метод. пособие для обучающихся по специальности 33.02.01 Фармация / сост.: А.И. Шульженко: ФГБОУ ВО РостГМУ Минздрава России. Ростов н/Д: Изд-во РостГМУ, 2017. 51 с.

- 8. Английский язык. Часть 1. Основы анатомии и физиологии человека : учеб.-метод. пособие / сост.: Т.Д. Чащина : Рост. гос. мед. ун-т, колледж.— Ростов-на-Дону : Изд-во РостГМУ, 2017. 40 с. Доступ из ЭУБ РостГМУ
- 9. Вводно-фонетический курс английского языка для начинающих медиков = Phonetic course of English language for medical beginners : учеб.- метод. пособие / сост.: Т.А. Трофимова. Ростов н/Д : Изд-во РостГМУ, 2018. 104 с.
- 10. Малецкая О.П. Сборник текстов с упражнениями по дисциплине «Иностранный язык» (английский) для студентов медицинского колледжа : учебное пособие / О.П. Малецкая, И.М. Селевина. Изд. 5-е, стер. Санкт-Петербург : Лань, 2021. 192 с. ISBN 978-5-8114-7193-5:550.00.
- 11. Марковина, И. Ю. Англо-русский медицинский словарь / Под ред. И. Ю. Марковиной, Э. Г. Улумбекова Москва : ГЭОТАР-Медиа, 2013. 496 с. ISBN 978-5-9704-2473-5. Доступ из ЭБС «Конс. студ.». Текст: электронный.
- 12. Петров, В. И. Англо-русский медицинский словарь эпонимических терминов / Петров В. И., Перепелкин А. И. 2-е изд., перераб. и доп. Москва: ГЭОТАР-Медиа, 2015. Доступ из ЭБС «Конс. студ.». Текст: электронный.

Интернет-ресурсы:

	ЭЛЕКТОРОННЫЕ ОБРАЗОВАТЕЛЬНЫЕ РЕСУРСЫ	Доступ к ресурсу
1.	Электронная библиотека РостГМ — URL: http://109.195.230.156:9080/opacg/ У.	Доступ неограничен
2.	Консультант студента [Комплекты: «Медицина.	Доступ
	Здравоохранение. ВО», «Медицина. Здравоохранение СПО»,	неограничен
	«Психологические науки», к отдельным изданиям комплектов:	-
	«Гуманитарные и социальные науки», «Естественные и точные	
	науки» входящих в «ЭБС «Консультант студента»]:	
	Электронная библиотечная система. – Москва : ООО	
	«Консультант студента» URL: https://www.studentlibrary.ru +	
	возможности для инклюзивного образования	
3.	Научная электронная библиотека eLIBRARY URL:	Открытый
	http://elibrary.ru	доступ
4.	Российское образование. Единое окно доступа: - URL:	Открытый
	http://window.edu.ru/	доступ
5.	Федеральный центр электронных образовательных	Открытый
	pecypcoв URL: http://www.edu.ru/index.php	доступ

6.	Федеральная электронная медицинская библиотека	Открытый
	Минздрава России URL: https://femb.ru/femb/	доступ
7.	Президентская библиотека: сайт URL:	Открытый
	https://www.prlib.ru/collections	доступ
8.	Thieme. Open access journals: журналы открытого доступа /	Контент
	Thieme Medical Publishing Group . – URL:	открытого
	https://open.thieme.com/home	доступа
9.	Karger Open Access: журналы открытого доступа / S. Karger	Контент
	AG. – URL: https://www.karger.com/OpenAccess/AllJournals/Index	открытого
		доступа
10.	Архив научных журналов / НП НЭИКОН URL:	Открытый
	https://arch.neicon.ru/xmlui/	доступ
11.	Словари и энциклопедии на Академике URL:	Открытый
	http://dic.academic.ru/	доступ
12.	Официальный интернет-портал правовой информации	Открытый
	URL: http://pravo.gov.ru/	доступ

4. КОНТРОЛЬ И ОЦЕНКА РЕЗУЛЬТАТОВ ОСВОЕНИЯ УЧЕБНОЙ ДИСЦИПЛИНЫ

Результаты обучения	Критерии оценки	Методы оценки
Знания:		
- лексический минимум, связанный с тематикой данного этапа обучения и соответствующим и ситуациями общения, а также ЈІЕ, связанные с медициной (1200-1400 ЈІЕ)	 воспроизведение лексических единиц с правильной артикуляцией и произношением близким к нормативному; написание лексической единицы по правилам орфографии; определение значения лексической единицы; сопоставление лексической единицы с русским эквивалентом или с определением на иностранном языке; соотнесение значения лексической единицы со сходными или контрастными значениями сравниваемых лексем; узнавание изученных лексических единиц в 	Устный опрос. Самостоятельные/ Контрольные работы. Тестирование. Дифференцирован ный зачет
	речевых высказываниях и текстах	
- грамматический минимум, необходимый для чтения и перевода (со словарем) иностранных текстов профессионально й направленности	 распознавание грамматической структуры по формальным признакам в речевых высказываниях и текстах; определение значения лексической единицы по грамматическим признакам; дифференцирование грамматической формы от омонимичных форм; формулирование грамматического правила и называние исключений из правила; называние грамматических форм лексических единиц 	Устный опрос. Самостоятельные/ Контрольные работы. Тестирование. Дифференцирован ный зачет

Умения:		
- общаться (устно и письменно) на иностранном языке на профессиональны е и повседневные темы	- распознавание значений лексических единиц; - составление предложений из изученных лексических единиц; - составление высказываний на основе ключевых слов к определенной ситуации общения; - составление краткого сообщения по плану с использованием рабочих материалов; - выражение мнения по обсуждаемой теме, прочитанной информации; - формулирование ключевых идей прочитанной информации; - формулирование вопросов собеседнику с применением изученных лексических единиц; - формулирование кратких и развернутых ответов на вопросы собеседника; - составление диалога по обсуждаемой теме с использованием рабочих материалов; - формулирование ответов на вопросы по содержанию услышанной информации или видеосюжета; - выделение основной идеи звучащей речи или видеосюжета; - заполнение анкеты, бланка; - изложение сведений о себе в формах автобиографии, резюме; - оформление собственного письма; - составление письма по предложенному плану (образцу), ориентируясь на конкретный тип адресата и ситуацию; - составление письменного сообщения, эссе	Устный опрос. Самостоятельные/ Контрольные работы. Тестирование. Дифференцирован ный зачет
- переводить (со словарем) иностранные тексты профессионально й направленности	 интерпретирование символов и условных знаков в словаре; осуществление выбора значения лексической единицы в словаре по контексту; извлечение необходимой информации о изучаемой лексической единице; выполнение прямого и обратного устного, письменного перевода словосочетаний, предложений, абзацев текста; выделение в тексте фрагментов, которые переводятся дословно, и те, которые в процессе перевода требуют трансформации; выполнение перевода аннотации статьи с 	Устный опрос. Самостоятельные/ Контрольные работы. Тестирование. Дифференцирован ный зачет

	U	
	иностранного языка на русский;	
	- составление аннотации русской статьи на	
	иностранном языке;	
	- выделение главной и второстепенной	
	информации в иностранном тексте;	
	- извлечение необходимой информации в	
	иностранном тексте;	
	- перечисление основных вопросов, тем, которые	
	рассматриваются в статьях, в номере газеты, в	
	журнале, в конкретном интернет-источнике на	
	иностранном языке	
- самостоятельно	- выполнение индивидуальных устных и	Устный опрос.
совершенствовать	письменных заданий в рамках внеаудиторной	Самостоятельные/
устную и	работы;	Контрольные
письменную речь,	- составление индивидуального словаря	работы.
пополнять	незнакомой лексики	Тестирование.
словарный запас		
1		

В соответствии с требованиями ФГОС по специальности достижение личностных результатов не выносится на итоговую оценку обучающихся, а является предметом оценки эффективности воспитательно-образовательной деятельности колледжа. Оценка этих достижений проводится в форме, не представляющей угрозы личности, психологической безопасности и эмоциональному статусу обучающегося, и может использоваться исключительно в целях оптимизации личностного развития обучающихся.

Комплексная характеристика общих и профессиональных компетенций, личностных результатов составляется на основе Портфолио обучающегося. Цель Портфолио – собрать, систематизировать и зафиксировать результаты развития обучающегося, его усилия и достижения в различных областях, продемонстрировать весь спектр его способностей, интересов, склонностей, знаний и умений.

Приложение к рабочей программе учебной дисциплины ОГСЭ. 03 Иностранный язык в профессиональной деятельности

КОНТРОЛЬНО-ОЦЕНОЧНЫЕ СРЕДСТВА ПО УЧЕБНОЙ ДИСЦИПЛИНЕ

ОГСЭ.03 ИНОСТРАННЫЙ ЯЗЫК В ПРОФЕССИОНАЛЬНОЙ ДЕЯТЕЛЬНОСТИ

специальность СПО 33.02.01 Фармация Квалификация Фармацевт очная форма обучения

> Ростов-на-Дону 2024

Контрольно-оценочные средства по учебной дисциплины ОГСЭ.03 Иностранный язык в профессиональной деятельности разработана на основе Федерального государственного образовательного стандарта по специальности среднего профессионального образования 33.02.01 Фармация, утвержденного России 13 2021 $N_{\underline{0}}$ 449, приказом Минпросвещения ОΤ июля Γ. зарегистрированного в Минюсте РФ 18.08.2021 г. и рабочей программой соответствующей учебной дисциплины.

Организация-разработчик: ФГБОУ ВО РостГМУ Министерства здравоохранения Российской Федерации, колледж.

Разработчик: *Шульженко А.И.*, преподаватель высшей квалификационной категории колледжа ФГБОУ ВО РостГМУ Минздрава России;

1. Паспорт комплекта контрольно-оценочных средств

Контрольно-оценочные средства (КОС) предназначены для контроля и оценки образовательных достижений обучающихся, освоивших программу учебной дисциплины <u>ОГСЭ.03 Иностранный язык в профессиональной</u> деятельности

КОС включают контрольные материалы для проведения текущего контроля и промежуточной аттестации в форме дифференцированного зачета

КОС разработаны в соответствии с:

образовательной программой по специальности среднего профессионального образования <u>33.02.01 Фармация</u>;

программой учебной дисциплины <u>ОГСЭ.03 Иностранный язык в</u> профессиональной деятельности

2. Требования к результатам освоения дисциплины

В результате освоения учебной дисциплины обучающийся должен уметь:

- общаться (устно и письменно) на иностранном языке на профессиональные и повседневные темы;
- переводить (со словарем) иностранные тексты профессиональной направленности;
- самостоятельно совершенствовать устную и письменную речь, пополнять словарный запас.

В результате освоения учебной дисциплины обучающийся должен знать:

- лексический минимум, связанный с тематикой данного этапа обучения и соответствующими ситуациями общения, а также JIE, связанные с медициной (1200-1400 JIE);
- грамматический минимум, необходимый для чтения и перевода (со словарем) иностранных текстов профессиональной направленности.
- В результате освоения учебной дисциплины должны быть актуализированы общие компетенции, включающие в себя способность:
- ОК 02. Осуществлять поиск, анализ и интерпретацию информации, необходимой для выполнения задач профессиональной деятельности.
- ОК 03. Планировать и реализовывать собственное профессиональное и личностное развитие.
- ОК 04. Работать в коллективе и команде, эффективно взаимодействовать с коллегами, руководством, клиентами.

- ОК 09. Использовать информационные технологии в профессиональной деятельности.
- ОК 10. Пользоваться профессиональной документацией на государственном и иностранном языках.
- ОК 12. Оказывать первую помощь до оказания медицинской помощи гражданам при несчастных случаях, травмах, отравлениях и других состояниях и заболеваниях, угрожающих их жизни и здоровью.
- В результате освоения учебной дисциплины должны быть актуализированы профессиональные компетенции, включающие в себя способность:
- ПК 1.3. Оказывать информационно-консультативную помощь потребителям, медицинским работникам по выбору лекарственных препаратов и других товаров аптечного ассортимента.
- ПК 1.4. Осуществлять розничную торговлю и отпуск лекарственных препаратов населению, в том числе по льготным рецептам и требованиям медицинских организаций.
- ПК 1.5. Осуществлять розничную торговлю медицинскими изделиями и другими товарами аптечного ассортимента.
- ПК 1.6. Осуществлять оптовую торговлю лекарственными средствами и другими товарами аптечного ассортимента.

3. Формы и методы контроля и оценки результатов освоения учебной дисциплины

Контроль и оценка результатов освоения учебной дисциплины осуществляется преподавателем в процессе проведения практических занятий, тестирования, а также выполнения обучающимися индивидуальных заданий.

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4. Контроль и оценка освоения учебной дисциплины по темам (разделам), видам контроля

по дисциплине ОГСЭ.03 <u>Иностранный язык в профессиональной деятельности</u> (наименование дисциплины)

№ π/π	Контролируемые разделы (темы) дисциплины	Код контролируемой компетенции (или ее части), умений, знаний	Наименование оценочного средства
1.	Раздел 1. Вводно-корректив	вный курс	1
1.1	Тема 1.1. Английский язык как средство международного общения	3 1.,3 2.,Y 1.,Y 2.,Y 3., OK 03, OK 10	Упражнения Тестовые задания Индивидуальные задания
	-		по карточкам.
2.	Раздел 2. Основы медицино		
2.1	Тема 2.1. Анатомия и физиология человека	3 1.,3 2.; Y 1.,Y 2.,Y 3., OK 02, OK 09, OK 10, OK 12	Упражнения Тестовые задания Индивидуальные задания по карточкам.
2.2	Тема 2.2. Патология	3 1.,3 2.; Y 1.,Y 2.,Y 3., OK 02, OK 04, OK 10, OK 12	Упражнения Тестовые задания Индивидуальные задания по карточкам.
2.3	Тема 2.3. Первая медицинская помощь	3 1.,3 2.; Y 1.,Y 2.,Y 3., OK 02, OK 04, OK 10, OK 12	Упражнения Тестовые задания Индивидуальные задания по карточкам.
3.	Раздел 3. Система здравоох	ранения.	
3.1	Тема 3.1. История развития медицины	3 1.,3 2.; Y 1.,Y 2.,Y 3., OK 02, OK 09, OK 10	Упражнения Тестовые задания Индивидуальные задания по карточкам.
3.2	Тема 3.2. Здравоохранение	3 1.,3 2.; Y 1.,Y 2.,Y 3., OK 02, OK 04, OK 09, OK 10	Упражнения Тестовые задания Индивидуальные задания по карточкам.
3.3	Тема 3.3 Оформление деловой (медицинской) документации	3 1.,3 2.; Y 1.,Y 2.,Y 3., OK 02, OK 09, OK 10	Упражнения Тестовые задания Индивидуальные задания по карточкам.
4.	Раздел 4. Профессиональная	я сфера общения	-
4.1	Тема 4.1. Фармация	3 1.,3 2.; У 1.,У 2.,У 3., ПК 1.3 – ПК 1.6, ОК 02, ОК 03,	Упражнения Тестовые задания Индивидуальные задания

		OV 04 OV 00	на картанкам
		OK 04, OK 09, OK 10	по карточкам.
4.2	Тема 4.2. В Аптеке	-	V
4.2	Tema 4.2. B Airreke	3 1.,3 2.; У 1.,У 2.,У 3., ПК 1.3–1.6,	Упражнения Тестовые задания
		OK 02, OK 03,	Индивидуальные задания
		OK 04, OK 09, OK 10	по карточкам.
5.	Раздел 5. Организация проф		
5.1	Тема 5.1. Лекарственные	3 1.,3 2.; Y 1.,Y 2.,Y 3.,	Упражнения
3.1	_	ПК 1.3–1.6,	Тестовые задания
	растения	OK 02, OK 03,	Индивидуальные задания
		OK 02, OK 03,	по карточкам.
		ЛР 8, ЛР 13,	по карточкам.
		лр 22	
5.2	Тема 5.2. Фармакология и	31.,32.; Y 1.,Y 2.,Y 3.,	Упражнения
٤.∠	-	ПК 1.3–1.6,	Тестовые задания
	лекарственные	OK 02, OK 03,	Индивидуальные задания
	наименования (торговое,	OK 02, OK 03, OK 09, OK 10	_
	международное,	OK 09, OK 10	по карточкам.
	непатентованное)		
5.3	Тема 5.3. Применение	3 1.,3 2.; У 1.,У 2.,У 3.,	Упражнения
	лекарственных препаратов	ПК 1.3–1.6,	Тестовые задания
	лекаретвенных пренаратов	ОК 02, ОК 03,	Индивидуальные задания
		ОК 09, ОК 10,	по карточкам.
5.4	Тема 5.4.Фармакологические		Упражнения
	группы	3 1.,3 2.; Y 1.,Y 2.,Y 3.,	Тестовые задания
		ПК 1.3–1.6,	Индивидуальные задания
		OK 03, OK 10	по карточкам.
6.	Раздел 6. Практика перевода	a.	1 **
6.1	Тема 6.1. Чтение и перевод	3 1.,3 2.; Y 1.,Y 2.,Y 3.,	Упражнения
	профессионально	ПК 1.3–1.6,	Тестовые задания
	ориентированных текстов	OK 03, OK 10,	Индивидуальные задания
	opnenimpobamibix teretob		по карточкам.
6.2	Тема 6.2. Чтение и перевод	3 1.,3 2.; У 1.,У 2.,У 3.,	Упражнения
	инструкций к медицинским	ПК 1.3–1.6,	Тестовые задания
	препаратам.	OK 03, OK 10,	Индивидуальные задания
	препаратам.		по карточкам.
	Промежуточная аттестация		Темы для перевода и
_	в форме		пересказа
7.	дифференцированного		_
	зачета		

5. КОМПЛЕКТ ТЕСТОВЫХ ЗАДАНИЙ ДЛЯ ВХОДНОГО КОНТРОЛЯ

Раздел 1. Вводный курс

1.they

1. It is a very good project, but is better.
1.our
2.ours
3.us
2. Those kids should know better shouldn't tease that boy anymore.
1.We
2.Their
3.They
4.Our
3. Why don't you come with? We're going to have a great time at the party.
1.us
2.their
3.you
4.our
4. Why don't you trust? I said I would do it and I will.
1.I
2.me
3.mine
4.my
5. We should learn how to grow our own food, so we can take care of in a healthy
and organic way.
1.ourselves
2.himself
3.itself
4.themselves
6. The dog sat down and licked paws.
1.itself
2.it
3.your
4.its
7. Don't touch your sister's clothing. Those sweaters are and she'll be very angry i
she finds you wearing them without permission.
1.theirs
2.his
3.her
4.hers
8. I thought you liked teaching children. Why don't you like teaching anymore?

2.we
3.them
4.their
9. I don't like He is rude and loud.
1.himself
2.he
3.his
4.him
10. Don't touch! I told you that I never want to see you again, so get out of my
house!
1.mine
2.me
3.myself
4.my
Оборот there is / there are
1. There 8 letters in the word "November"
1. are
2. is
3. am
2 there a bag under the table?
1. were
2. is
3. are
3. There a book on the desk last lesson.
1. were not
2. was not
3. is not
4. There a pen and two copybooks in my packet.
1. is
2. are
3. were
5. There a new shop near my house next month. 1. is
2. are
3. will be
6 There a new store next to my house in a few weeks
6. There a new store next to my house in a few weeks.
1. is
2. are
3. will be

7 there a man and a woman in that car?
1. is
2. are
3. was
8 there a teacher in the classroom?
1. is/Yes
2. is/ Yes, he is
3. is/ Yes, there is
9. There six girls and five boys in our group.
1. is
2. are
3. be
10 there a pen on my desk last lesson?
1. were
2. is
3. was
Глагол to be в настоящем времени
1. How old you?
1.are
2.is
3.am
2. What your name?
1.am
2.is
3. Harrield
3. How old your brother?
1.are
2.am 3.is
4. My mother in the kitchen.
1.am
2.are
3.is
5. I a football fan.
1.are
2.am
3.is
6. His pencil case at home.
1.are
2.am
3.is

7. Hey John! We here.
1.am
2.is
3.are
8. They in the same class.
1.am
2.is
3.are
9. What time it?
1.am
2.are
3.is
10. It 8 o'clock.
1.am
2. i s
3.are
Раздел 2. Общепрофессиональный курс
Глагол to be в прошедшем времени
1. She is twenty-five now, so last year shetwenty-four.
a. was
b. were
2it a good film?
a. Was
b. Were
3. I got married when Itwenty-three.
a. was
b. were
4. It was a great day, but weso tired.
a. was
b. were
5. I didn't buy those glasses because theytoo expensive.
a. was
b. were
6. When Ia child we lived in Rome.
a. was
b. were
7. Whereyou yesterday afternoon?
a. was
b. were
8the weather good while we were away?

- a. Was
- b. Were
- 9. They___so naughty as kids.
- a. was
- b. were
- 10. Why___he so happy?
- a. was
- b. were

The Present Simple Tense

- 1. I that man because I ... English.
 - 1.don't understand... not know
 - 2.not understand... don't know
 - 3.don't understand... don't know
- 2. ... Jane Smith ... English?
 - 1.Do ... speak
 - 2.Does ... speak
 - 3.Is ... speak
- 3. ... Dad ... any brothers or sisters?
 - 1.Does... have
 - 2.Does... has
 - 3.Have....got
- 4. We ... a car, but we are going to buy it.
 - 1.don't have
 - 2.aren't have
 - 3.hasn't
- 5. Jack lives not far from us, but we ... him often.
 - 1.don't see
 - 2.doesn't see
 - 3.not see
- 6. Don't give him cigarettes. He
 - 1.don't smoke
 - 2.isn't smoke
 - 3.doesn't smoke
- 7. Can you help me? I ... the way to the market.
 - 1.am not know
 - 2.not know
 - 3.don't know
- 8. ... Peter ... any beer in the fridge?
 - 1.Have... got
 - 2.Do... has

3.Does....have

9. My daughter Mary ... apples, but she likes oranges.

1.doesn't like

- 2.not likes
- 3.doesn't likes
- 10. What's the matter? You ... very happy.
 - 1.looks
 - 2.look

The Present Continuous Tense

- 1. Listen! Somebody ... a lovely song.
 - 1. are singing
 - 2. is singing
 - 3. sings
- 2. Don't make so much noise. I ... to work.
- 1. 'm trying
- 2. tried
- 3. 'm triing
- 3. I ... to you attentively.
- 1. am listening
- 2. listen
- 4. I'm sure you ... the right choice.
- 1. are making
- 2. make
- 3. will be made
- 5. Take your umbrella. It ... cats and dogs.
- 1. are raining
- 2. rained
- 3. is raining
- 6. I don't speak any foreign languages, but I ... English now.
- 1. learn
- 2. am learning
- 7. We ... next weekend at home.
- 1. spent
- 2. 're spend
- 3. are spending
- 8. He ... to speak to his parents.
- 1. goes
- 2. went
- 3. is going
- 9. At the moment we ... over the desert.

- 1. flied
- 2. are flying
- 3. 've flying
- 10. Have some hot tea. It ... chilly.
- 1. 's getting
- 2. getting
- 3. is getting

The Present Perfect Tense

- 1. Jane ... suddenly that there was a letter attached to the painting.
- 1. has found
- 2. had found
- 3. found
- 2. I ... that point yet.
- 1. not considered
- 2. didn't consider
- 3. haven't considered
- 3. They ... in construction business for 5 years.
- 1. have been
- 2. were
- 3. are
- 4. He can't find a job. He ... unemployed for half a year.
- 1. was
- 2. has been
- 3. have been
- 5. Nick and Sally ... each other since their school years.
- 1. knew
- 2. have known
- 3. knowed
- 6. His spirits ... a little. He's all right now.
- 1. have revived
- 2. revived
- 3. has revived
- 7. "I ... the letter you asked about, sir," said the butler.
- 1. 's brought
- 2. 've brought
- 3. brought
- 8. He ... his driving test. He is so happy. He hasn't been able to pass it for three years.
- 1. just passed
- 2. have just passed
- 3. has just passed

- 9. I ... my keys. I can't get in.
- 1. have lost
- 2. lost
- 3. have losed
- 10. The taxi Hurry up!
- 1. have arrived
- 2. has arrived
- 3. arrives

The Past Simple Tense

- 1. Every day I help my Mom about the house, but last week I was very busy with my exam. So I ... her much.
- 1. didn't helped
- 2. not helped
- 3. didn't help
- 2. Tom isn't playing tennis tomorrow afternoon, he ... tennis yesterday.
- 1. didn't played
- 2. didn't play
- 3. doesn't play
- 3. We generally have lunch at 12.30, but yesterday we ... lunch later.
- 1. had
- 2. has
- 3. have
- 4. I ... to the market myself last time, but now I don't remember how to get there.
- 1. getted
- 2. got
- 3. goted
- 5. Looking through the paper, the teacher ... several mistakes.
- 1. finded
- 2. founded
- 3. found
- 6. When ...you ... to your parents last time?
- 1. writed
- 2. did/write
- 3. wrote
- 7. Yesterday Mr. Watson ... too much at the party.
- 1. drank
- 2. drunk
- 3. drinked
- 8. Don't worry about your letter. I ... it the day before yesterday.
- 1. have sent

- 2. sent
- 3. sended
- 9. My husband ... in the bank for three years since 1990 to 1993.
- 1. worked
- 2. was worked
- 3. had worked
- 10. We ... a holiday last year.
- 1. didn't have
- 2. haven't had
- 3. haven't had

The Past Continuous Tense

- 1. The police caught Dan when he ... a shop.
- 1. was robbing
- 2. was robing
- 3. has robbed
- 4. robed
- 2. He couldn't speak because he ... of laughter.
- 1. were dying
- 2. had died
- 3. was dying
- 3. When you rang me yesterday, I ... a bath.
- 1. was having
- 2. had had
- 3. had
- 4. were having
- 4. Somebody stole the money from Dad's pocket while he
- 1. slept
- 2. were sleeping
- 3. was sleeping
- 5. I ... by the window when I heard the noise.
- 1. sitted
- 2. was sitting
- 3. sat
- 6. Just as Tom ... the street, a car came round the corner.
- 1. was crossing
- 2. were crossing
- 3. crossed
- 7. On coming up to the house I saw a man who ... to unlock the door by force.
- 1. tried
- 2. was trying

- 8. I saw a light in your window as I ... by.
- 1. had passed
- 2. passed

3. was passing

- 9. Liz's elder brother said that he ... to enter Leeds University.
- 1. will go
- 2. would go

3. was going

- 10. While my son ... for my call, somebody knocked at the door.
- 1. had waited
- 2. waited
- 3. was waiting

The Past Perfect Tense

- 1. I thought that Mrs. Fowler ... us everything.
- 1. had told
- 2. was told
- 3. told
- 2. He ... in the house he ... for himself near the Devon coast.
- 1. had lived...built
- 2. lived...had built
- 3. lived...built
- 4. had lived...had built
- 3. The telephone on his table ... and he ... it up.
- 1. had rung...picked
- 2. had rung...had picked
- 3. rang...had picked
- 4. rang...picked
- 4. He ... the bill and
- 1. paid...left
- 2. had paid...left
- 3. had paid...had
- 4. paid...had left
- 5. She ... on her coat and ... for a walk.
- 1. put...went
- 2. had put...had gone
- 3. put...had gone
- 4. had put...went
- 6. I was late because I ... in a jam.
- 1. had stick
- 2. had stuck

- 3. stick
- 7. We went out after it ... raining.
- 1. had been stopped

2. had stopped

- 3. be stopped
- 8. I thanked him for what he ... for me.
- 1. did
- 2. had been done
- 9. The house he ... was of a modern design.
- 1. had built
- 2. built
- 3. was built
- 10. My mother was worried because I ... in touch with her for a long time.
- 1. haven't been
- 2. hadn't been
- 3. wasn't

The Future Simple Tense

- 1. It's late. I think I ... a taxi.
- 1. shall take
- 2. am take
- 3. will take
- 2. We don't know their address. What ...?
- 1. will we do
- 2. are we do
- 3. shall we do
- 3. You ... in Paris tomorrow evening.
- 1. arrive
- 2. will arrive
- 3. arriving
- 4. The boy ... this day all his life.
- 1. will remember
- 2. should remember
- 3. remembers
- 5. I'm not sure I ... Jim at the hotel.
- 1. shall found
- 2. shall find
- 3. found
- 6. We ... the tickets in advance.
- 1. not book
- 2. shan't book

3. won't book

- 7. Do you think it ...?
- 1. rained
- 2. will rain
- 3. will be rain
- 8. Everybody thinks they ... married.
- 1. shall not get
- 2. not will get
- 3. won't get
- 9. There ... any wars in the world.
- 1. aren't wars
- 2. not'll be
- 3. will not be
- 10. I ... it before dinner.
- 1. 'Il not do
- 2. not shall do
- 3. not do

The Future Continuous Tense

- 1. Why are you in a hurry? If you arrive at 8 o'clock, they ... the meal.
- 1. are still be cooking
- 2. will be still cooking
- 3. still are cooking
- 2. He ... when you come back tonight.
- 1. will be sleeping
- 2. slept
- 3. would be sleeping
- 3. I ... for my exam on Philosophy all day tomorrow.
- 1. am working
- 2. will be working
- 3. works
- 4. have been working
- 4. Next Friday, the President ... ten years in power.
- 1. will be celebrated
- 2. will celebrate
- 3. celebrates
- 4. will be celebrating
- 5. I ... more about that topic in my next lecture.
- 1. will be saying
- 2. will say
- 3. am saying

- 6. After the operation you ... any sport for a while.
- 1. don't
- 2. will not be doing
- 3. won't do
- 4. didn't
- 7. She ... every day until the end of the month.
- 1. be performing
- 2. will be performing
- 3. performs
- 4. will perform
- 8. We ... to my brother's house again for Christmas.
- 1. will be going
- 2. are going
- 3. go
- 9. I ... Tom on Tuesday. That's when we usually meet.
- 1. will see
- 2. will be
- 3. saw
- 4. have seen
- 10. We ... you in half an hour.
- 1. will be joining
- 2. shall join
- 3. will join

The Future Perfect Tense

- 1. We ... the camp by 10 o'clock, I believe.
- 1. reached
- 2. will have reached
- 3. were reaching
- 2. I hope, we ... half of our way by tomorrow.
- 1. will have drived
- 2. are driving
- 3. 'll have driven
- 3. We'll ... decorating the room before you get back.
- 1. have finished
- 2. finish
- 4. By the end of August we'll
- 1. have moved
- 2. would move
- 3. will move
- 5. If we don't hurry, the party will ... before we get there.

- 1. finishes
- 2. have finished
- 6. I hope they ... this unpleasant episode by the time they meet again.
- 1. forget
- 2. 'll be forgotten
- 3. will have forgotten
- 7. I hope we will ... the market research by January.
- 1. have done
- 2. will do
- 3. be doing
- 4. are doing
- 8. By the time I come they
- 1. will go
- 2. will have gone
- 3. will be going
- 9. As you ..., he has cut off his beard.
- 1. are noticing
- 2. will notice
- 3. will have noticed
- 10. Next Thursday, I ... my present car for exactly 20 years.
- 1. will be owning
- 2. will have owned

6. КОМПЛЕКТ ЗАДАНИЙ ТЕКУЩЕГО КОНТРОЛЯ

Раздел 1. Вводно-коррективный курс

sheep-

Exercise 1. Give the plural forms of the following nouns:
bed-
wound-
body-
day-
doctor-
student-
match-
ward-
shoulder-
operation-
Exercise 2. Read and translate the nouns in plural. Women, children, knives, pages, teeth, advice, magazines, heroes, men, goods, contents, riches, wages, geese, mice, oxen, feet, leaves, wolves, wives.
Exercise 3. Give the singular form.
women-
feet-
children-
news-
leaves-
knives-

shorts-
plays-
books-
Exercise 4. Use the possessive case.
1. The book of this writer is interesting.
2. The foot of my son is big.
3. The uncle of Tom is a doctor.
4. These are the notebooks of his students.
5. The article of the researches made a sensation.
Exercise 5. Translate into English.
1. Вчера я встретила друга в аптеке.
2. Это словарь Ричарда и Артура.
1 17 1-71

3. Дочь моего брата – медсестра.
4. Мать моего друга - терапевт.
5. Это кабинет врача.
Exercise 6. Translate into Russian.
Britain's medicine. A day's work. My friend's hat. The sister's letter. The world's first spaceman. The children's hands. An hour's walk. The women's magazines. The Parliament's session. A week's rest.

Exercise 7. Insert the articles.

1. ...Volga is ... longest river in ... European part of ... Russia. 2. I'd like to go on ... excursion to ... Crimea. 3. There is ... stadium not far from our ... house. 4. My brother is a pupil of ... 8th form and he wants to become ... doctor. 5. ... chemistry is his favourite subject at ... school. 6. ... children like ... ice-cream.7. Can you tell me

Exercise 8. Translate into English.
1. Экзамен по анатомии продолжался час, и задания были трудные.
2. Мы опоздали на автобус и не поехали на экскурсию.
3. Катя — вегетариантка. Она не ест мяса.
4. Ешь морковь. В овощах много витаминов.
5. Сеченов- выдающийся русский учёный.
Exercise 9. Find and correct mistakes.
1. Sveta is a best student in the our medical college.
2. My best friend works as the surgeon.

... way to hospital? 8. My friend is ... first – year student of ... Medical College. 9. I

never eat ... chocolate. 10. Kate works as ... nurse.

3. A my boyfriend likes the chocolate and ice-cream.

4. There is the new hospital in my town.
5. Thames flows through the London.
Exercise 1. Answer the questions.
1. What is your name (first name, surname)?
2. How old are you?
3. Where are you from?
4. Where do you study?
5. What is your future profession?
6. What are your favourite subjects?

7. Where do you want to work?	
8. What are your hobbies?	
Exercise 2. Make up the resume.	
PERSONAL INFORMATION	
	-
	_
Date of Birth:	
Marital Status:	_
OBJECTIVE	
EDUCATION	
WORK	

EXPERIENCE
Duties:
LANGUAGES
OTHER SKILLS, HOBBIES & ACTIVITIES
REFERENCES
The Pronoun.
Exercise 1. Translate into Russian. Find the pronouns.
1. May I take you by the arm?
2. His hearing is weak.

3. Last week my elder brother fell ill with bad cold.

4. Her brother had to give up smoking due to chronic bronchitis?
5. Her child is two years old.
Exercise 2. Choose the necessary pronoun.
1. Here are (some, any) tablets for you.
2. How (many, much) time does it take you to get to the nearest hospital?
3. (Nobody, anybody) knows that doctor.
4. He has (little, few) knowledge about it.
5. You shouldn't lift (anything, something) heavy.

Exercise 3. Open the brackets.

1. Give (they) notebooks.

2. Let (I) know if anythin	g happens.	
3. She lives in Kemerovo v	with (she) family.	
4. This ward nurse is a frie	end of (I).	
5. (We) plant is very large	e.	
Exercise 4. Fill in the bla	nks. Use the pronouns or their den	rivatives.
a) some, any, no, every		
1. You must ask	to help you in this work. 2. If I	have
free time, I shall go	tonight. 3. Did you hear	about
our plan? 4. Did you say _ to tell him.	? – No, I said	5. I have
b) much, many, more, less	, (a) little, (a) few	
our city. 3. Hurry up. We have noise. 5. He water in the g	a words do you know? 2. There are _ havetime to waste. 4. I drankwater and felt be glass. 7. May I haveco	Please, try to make etter. 6. There was ver offee, please? 8. They
	ed. 9. Do you spendtir d? – It's a pity but he	

Exercise 5. Choose the correct answer.

2. How old are you?

1. I invited my friend to place.
a) me
b) his
c) my
d) mine
2. It's easy, you can do it
a) you
b) your
c) yours
d) yourself
3. There is place like home.
a) no
b) none
c) nothing
d) nobody
Моя семья. Мой дом.
Exercise 1. Answer the questions.
1. What is your first name? What is your surname?

3. When is your birthday?
4. Is your family large? How many are you in the family?
5. Have you got any brothers or sisters?
6. What are your parents? Where do they work?
7. How long have your parents been married?
8. Do they have much in common?
9. Do you spend a lot of time with your family?
10. What sort of things do you do together?
11. Do you go out with your parents?

12. Who runs the house in your family?
13. What are your household duties?
14. What are your parent's hobbies?
15. Can you describe your mother?
16. Can you describe your father?
17. Do you have pets in your house?

Exercise 2. Find misfit.

Family: niece, nephew, aunt, uncle, cousin, son, sibling, brother, sister, neighbour, twin, stepfather, stepmother, foster daughter, foster son, father, mother, half- sister, daughter-in-law, son-in-law.

Exercise 3. Choose the correct answer.

- 1. She is the daughter of my mother. She is my...
- a) aunt c) grandmother
- b) sister d) cousin

2. He is the father of my father. He is my... a) grandfather c) uncle b) grandson d) cousin 3. He is the father of my brother. He is my... a) uncle c) father b) son d) grandfather 4. He is the son of my uncle. He is my... a) cousin c) grandfather b) father d) brother 5. She is the sister of my mother. She is my... a) grandmother c) aunt b) daughter d) cousin 6. He is the son of my brother. He is my... a) cousin c) uncle b) nephew d) father 7. He is the brother of my mother. He is my... a) nephew c) uncle b) son d) cousin 8. He is the husband of my aunt. He is my...

a) uncle c) cousin

b) father d) brother

9. She is the mother of my mother. She is my
a) aunt c) daughter
b) niece d) grandmother
10. She is the daughter of my sister. She is my
a) niece c) mother
b) aunt d) cousin
11. She is the wife of my uncle. She is my
a) mother c) aunt
b) daughter d) niece
12. She is the daughter of my aunt. She is my
a) cousin c) mother
b) niece d) grandmother
Раздел 2. Основы медицинских знаний
The verbs "to be", "to have"
Exercise 1. Choose the correct answer.
1 Kata and I and my nationts
1. Kate and Lena my patients.
a) am
b) are
c) is
2 Gauza on the table
2. Gauze on the table.
a) am

b) is
c) are
3. I a therapeutist.
a) am
b) is
c) are
4. He a charge nurse.
a) am
b) is
c) are
5. You my best friend.
a) am
b) is
c) are
6. Hey Mark! We here.
a) am
b) is
c) are
7. They in the same ward
a) am
b) is
c) are

8. Mr and Mrs Baker going to visit their distant relative in nospital.
a) am
b) is
c) are
9. She a good doctor.
a) am
b) is
c) are
10. My cousin midwife.
a) am
b) is
c) are
11.The operation successful.
a) was
b) were
12. Pain acute.
a) was
b) were
13. Drugs expensive.
a) was
b) were

14. The hearts beating in unison.
a) was
b) were
15. Infection not dangerous.
a) was
b) were
16. His bones broken.
a) was
b) were
17.Antibiotics necessary for him.
a) was
b) were
18. My throat dry.
a) was
b) were
19.Our blood tests good.
a) was
b) were
20. Her diet light.
a) was
b) were

Exercise 2. Transform the sentences into the Future Indefinite Tense.

Model: My parents are in Moscow now. (in summer)
My parents will be in Moscow in summer.
1. My friend is a doctor. (in 5 years)
2. They are in London. (during winter vacations)
3. On Monday our first lesson is English. (next Monday)
4. The lesson is over. (in 5 minutes)
5. The book is translated into English. (soon)
Exercise 3. Make the sentences interrogative.
Model: The students are at the Anatomy lesson now.
Are the students at the Anatomy lesson now?
1. My father is a pharmacist.

2. This operation was made by a group of our best surgeons.
3. Our students were in London last year.
4. We will be in Moscow in summer.
5. The report was interesting.
Exercise 4. Translate the sentences into Russian. 1. I have much work to do.
2. We have got many books on this question.
3. She had a meeting yesterday.
4. The students will have a lecture in pharmacology tomorrow.
5. They usually have their dinner in the canteen.

Exercise 5. Transform the sentences into the past.

Model: We have an English lesson today. (yesterday) We had an English lesson yesterday.
1. She has a lot of free time. (last week)
2. We have a dictation in Russian today. (two days ago)
3. He has a headache. (yesterday)
4. They have to start this experiment now. (several weeks ago)
5. The students of our group have a scientific conference today. (last week)
Exercise 6. Transform the sentences into the Future.
Model: The students have a lecture in stomatology. (tomorrow) The students will have a lecture in stomatology tomorrow.
1. We have a good rest every Sunday. (next Sunday)

2. I have just finished my work. (by 5 o'clock)
3. They have plenty of fruit in their garden. (in autumn)
4. She has to do this research today. (in a day)
5. The teacher has to explain this grammar rule again. (at the next lesson)
Exercise 7. Choose the correct answer.
1. The doctor stayed at his hospital very late because he a lot of work.
a) has
b) have
c) will have
d) had
2. I not seen you for ages.
a) has
b) have
c) will have
d) had
3. My friend an increased temperature.
a) has
b) have

c) will have
d) had
4. She a pneumonia last year.
a) has
b) have
c) will have
d) had
5. He an appointment with the doctor tomorrow.
a) has
b) have
c) will have
d) had
The Numeral.
Exercise 1. Match the corresponding numerals.
1. 567 a. Eleven million
2. 9 th b. The nineth
3. 1943 c. The twentieth
4. 0.36 d. Eighteen nought five
5. 11,000,000 e. Five hundred and sixty-seven
6. October 12 f. One seventh

7. 1805 g. Nineteen forty-three

8. 1/7 h. October the twelfth

9. xx i. Two point eighteen

Exercise 2. Say it in words.

2; 18; 80; 100; 90; 14; 5; 99; 19; 705; 3,679; 21st; 1992; 1.015; 16 th ; 60; 1876; January 5; 4 ½.
Exercise 3. Make the numerals ordinal.
25; 100; 21; 5; 12; 13; 20; 346; 31.

Exercise 4. Translate into English.
1) 5 процентов
2) 22 сентября 1959 года
3) 43-й президент

Affirmative sentences.

Exercise 1	1 Da	ordor	tha s	words	to s	writa	cantance	O.C
rxercise	I. Ke	oraer	une v	vorus -	10	write	semence	-5-

1. are / my / doctors / parents
2. must / patient / a / carefully / doctor / examine / a
3. works / nurse / as / a / sister / my
4. operations / eyes / surgeon / delicate / the / performs / the / on
5. to / the / she / go / decided / hospital / to
6. of / bad / boy / headache / complained / a / the
7. twice / temperature / day / she / the / a / take

8. you / injection / I / an / give / will

9. stay / patient / bed / the / must / in
10. treat / by / they / diet / many / diseases
Exercise 2. Find and correct the sentence with the error.
1. The main symptoms of tonsillitis are fever, cough and sore throat.
2. Nurses can specialize in many different fields.
3. A paediatrician treats children.
4. Vitamins a very important role play in human health.
5. A good dentist can extract teeth painlessly.
Медицинский колледж. Учебный процесс в медицинском колледже.
The timetable.
Exercise 1. Translate into English
Биология, английский язык, химия, анатомия, фармакология, терапия, хирургия глазные болезни, зубные болезни, педиатрия, акушерство, гинекология, инфекционные болезни, история медицины, кожные болезни, сестринское дело, патология, кардиология.

Exercise 2. Guess the word.

1. The scientific study of the body and how its parts are arranged.
A
2. The study of medicines and drugs, including their action, their use and their effects on the body.
P
3. The area of medicine which deals with pregnancy and the birth of babies.
O
4. The treatment of injuries or diseases in people or animals by cutting open the body and removing or repairing the damaged part.
S
5. The science or study of medical care for children.
P
The departments and professions of the Medical College.
Exercise 1. Answer the questions.
Exercise 1. Answer the questions.
1. Where do you study?
2. How many departments are there in your college?

3. What kind of qualification does the "Nursing Affair" department give?

life in purity and to practice my profession faithfully. I will abstain from whatever is deleterious and mischievous, and will not take or knowingly administer any harmful	Florence Nightingale is the founder of modern nursing. The "Nightinga Pledge".	ale
dramatically improved conditions for soldiers in field hospitals, and educated people about the importance of hygiene. She saved thousands of lives and became very famous. She later started her own training college for nurses, and wrote many books on nursing. Exercise 2. Translate the "Nightingale Pledge" into Russian. I solemnly pledge myself before God and in the presence of this assembly, to pass my life in purity and to practice my profession faithfully. I will abstain from whatever is deleterious and mischievous, and will not take or knowingly administer any harmful drug. I will do all in my power to maintain and elevate the standard of my profession, and will hold in confidence all personal matters committed to my keeping and all family affairs coming to my knowledge in the practice of my calling. With loyalty will I endeavor to aid the physician, in his work, and devote myself to the welfare of	Exercise 1. Translate into Russian.	
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	life in purity and to practice my profession faithfully. I will abstain from who deleterious and mischievous, and will not take or knowingly administer any drug. I will do all in my power to maintain and elevate the standard of my pand will hold in confidence all personal matters committed to my keeping a family affairs coming to my knowledge in the practice of my calling. With will I endeavor to aid the physician, in his work, and devote myself to the ways.	hatever is harmful profession, and all loyalty

Раздел 2. Основы медицинских знаний Анатомическое строение тела человека. The parts of the body and internal organs. Section 1. The parts of the body. Exercise 1. Match these words. Big Hair Little Ears Long Nose **Short Eyes** Fair Cheeks Dark Neck Blue Lips Red Legs Round Eyebrows **Oval Chin**

Pale Face

Sharp Head
Long Hands
Short Feet
Exercise 2. Complete these sentences.
You see with your
You hear with your
You bite with your
You hold with your
You smell with your
You eat with your
You walk with your
You stand on your
You kneel on your
You carry a backpack on your
Exercise 3. Answer the questions.
1. What colour is your hair?
2. What colour are your eyes?

3. Is your hair long or short?
4. Is your face round or oval?
5. Are your cheeks rosy or pale?
Exercise 4. Divide these words into two groups.
back, chin, cheeks, ears, eyes, forehead, hair, head, hands, lips, legs, neck, nose, stomach.
Body:
Face:
Exercise 5. Translate these words into English.
Тело, голова, лоб, лицо, щека, подбородок, волосы, челюсть, глаз, бровь, веко, ресница, нос, ноздри, рот, зуб (зубы), плечо, грудь, грудь (молочная железа), спина, поясница, рука, кисть (руки), запястье, нога, стопа (стопы), бедро, голень, палец (руки), палец (ноги), ягодица.

Имя прилагательное

The Adjective.

Exercise 1. Write the comparative and superlative forms of these adjective	Exercise 1	. Write	the com	parative	and sur	perlative	forms o	of these	adjective
--	------------	---------	---------	----------	---------	-----------	---------	----------	-----------

1. hard-harder-the hardest
2. fast
3. weak
4. painful
5. frightening
6. sensitive
7. sleepy
8. strong
9. effective
10. bad
Exercise 2. Read each sentence. If it is correct, write a tick. If there is a mistake correct it.
1. The <u>most worst</u> pain many women experience is in childbirthworst
2. It more hurts than it did yesterday
3. Physiotherapy can sometimes be more effective for back pain than drugs.
4. These tests are less painfuler than others, because only a drop of blood is needed.
5. Which drug will give the most effective pain relief?
6. The fingers are one of most sensitive parts of the body
7. My legs ache less when I'm walking than when I'm standing still
8. Kidney stones are one the most painful condition you can have
9. It's difficult to say where it hurts the more.

10.	Winter is	the most usual	season for di	iphtheria.	
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Exercise 3. Complete these sentences with the comparative or superlative forms of the adjectives.

1. Aspirin is the strongest (strong) pair	nkiller we've got, I'm afraid.
2. Can I do anything to make you feel _	(well).
3. Moving around is getting	(hard) to do.
4. Injection is ((fast) way to administer pain relief.
5. He is (wea	k) he was yesterday.
6. For children, thinking about the inject pain itself.	etion is(frightening) the
7. Your fingers are	(sensitive) your shoulders.
8. He is feeling	(sleepy) now and the pain is decreasing.
9. I can't ignore the pain any more –it's	s just getting (bad).
10. These pills are much	(effective) than those.
Exercise 4. Translate these proverbs	into Russian.
1. Better late than never.	
2. It is easier sad that done.	
3. Two heads are better than one.	

4. The grass is always greener on the other side.

5. A good friend is my nearest relation.
Exercise 5. Translate into English.
1. Сегодня я чувствую себя лучше.
2. Пациент пожаловался на более сильную боль.
3. Дорогие таблетки более эффективные, чем дешёвые.
4. Это самый лучший хирург в нашей больнице.
5. Ему помогло только самое сильное обезболивающее.
Appearance.
Exercise 1. Describe your friend's appearance using the appropriate adjective

 $Hair-auburn,\,black,\,brown,\,red,\,dark,\,fair,\,grey,\,long,\,short,\,shoulder-length,\,waist-length,\,straight,\,wavy,\,curly,\,bald.$

 $Face-oval, \, round.$

Nose – straight, upturned, snub, aquiline, fleshy, flat.
Lips – thin, compressed, thick.
Eyes – slanted, narrow, bulging, close -/ deep-/ wide-set, brown, green, dark, blue, grey.
Chin – dimpled, flat, pointed, square, protruded.
Forehead – high, low, narrow, broad.
Skin – cream-white, sunburnt / tanned, elastic, sluggish.
Hands – soft, tender, delicate, calloused, puffy, hairy, strong.
Legs – plump, slender, short, long, shapely.
Shoulders – narrow-shouldered, broad-shouldered, round-shouldered.
Appearance – beautiful, good-looking, pretty, pleasant-looking, elegant, handsome, smart.

Анатомия человека

1. What is MRSA?

Hygiene and care of the body.

Exercise 1. Test your knowledge of hygiene by doing this quiz.

a) a virus
b) a bacterium
c) an antibiotic
2. How do you catch MRSA?
a) by eating from dirty plates
b) from poor hospital hygiene
c) by drinking bad water
3. Which of these things has nothing to do with bacteria?
a) wine making
b) yoghurt
c) the common cold
d) bad smells
4. In an operating theatre, which of these things breaks hygiene rules?
a) wearing your mask over your nose
b) wearing your hair loose
c) wearing make-up

5. Which of these things is most important in stopping the spread of MRSA?

a) hospital staff should wash their hands between patients

b) clearners should disinfect door handles
c) visitors should wear masks
6. Where do staphylococcus bacteria live?
a) in noses
b) in soil
c) in toilets
7. When Florence Nightingale, founder of modern nursing, worked in a hospital during the Crimean war (1854-1856), the death rate dropped from 60% to 2.2%. Why?
a) She made nurses wash their hands
b) She gave her patients fruit and vegetables to eat
c) The ventilation was improved
8. How long should you wash your hands in hot water to be sure they are clean?
a) fifteen seconds
b) half a minute
c) one minute
Exercise 2. What are the main rules of hygiene? Write down some important rules which you must follow every day.

Exercise 3. Translate into Russian.

Toothpaste, toothbrush, cream, soap, sh deodorant, napkin.	
Exercise 4. Complete the sentences wi	ith the words below.
contamination, antimicrobial agent, path resistant, spotless	nogens, swab, disinfectant, susceptible,
1. An will kill micr	oorganisms.
2. Use a sterile to g	et a sample from the back of the throat.
3. Our bodies have ways to kill	such as viruses and bacteria.
4. The old, the young, and the very ill arinfection.	re most to hospital
5. Staphylococcus is	_ to most antibiotics.
6. There is a risk of	from urine and blood.
7. Wash floors and door handles with _	·
8. A home doesn't have to be	, but it does have to be clean.
The Imperative Mood.	
Exercise 1. Translate into Russian.	
1. Call a doctor, please.	

2. Oder this ointment in the chemist's.

3. Shake this mixture before use.				
4. Give an intravenous injection to this patient.				
5. Insert a thermometer to a patient.				
Exercise 2. Complete the sentences with the words below. finish, buy, wash, air, drink				
1. Don't this tea, it's very hot.				
2. Let's the room.				
3. Let them the exercise, it's important.				
4 your hands, you're going to have a sandwich.				
5. Let's these expensive drugs for heartache.				
Exercise 3. Rewrite the following questions as commands. Example: Can you open the window? Open the window, please.				
1. Can you take the dog to the vet?				
2. Can they go for a walk now?				
3. Can you help me now?				
4. Can we stay here longer?				
5. Can he write this report?				

Exercise 1. Translate into Russian.
Duodenum, appendix, small intestine, rectum, kidney, urinary bladder, uterus, salivary gland, thyroid gland, gut, pancreas, gall bladder, liver, stomach, oesophagus, pharynx, tongue, lungs, heart, spleen.
Exercise 2. Translate into English.
1. У него здоровое / больное / доброе сердце.
2. В лёгких патологии не обнаружено.
3. У ребёнка расстройство желудка.
4. Причины заболевания почек могут быть разными.
5. Операция на щитовидной железе прошла успешно.

Раздел 2. Основы медицинских знаний

Внутренние органы тела

The internal organs.

Exercise 3. Guess this riddle.

If you break me
I do not stop working,
If you touch me
I may be snared,
If you lose me
Nothing will matter.
Heart and blood. Work of the human heart. Exercise 1. Read and translate this fitness program for a healthy heart.
Discretise 1. Read and translate this fitness program for a hearthy fieure.
1. Strengthen your heart and cardiovascular system.
2. Improve your circulation and help your body use oxygen better.
3. Improve your heart failure symptoms.
4. Increase energy levels so you can do more activities without becoming tired or short of breath.
5. Increase endurance.
6. Lower blood pressure.
7. Improve muscle tone and strength.

8. Improve balance and joint flexibility.
9. Strengthen bones.
10. Help reduce body fat and help you reach a healthy weight.
11. Help reduce stress, tension, anxiety and depression.
12. Boost self-image and self-esteem.
13. Improve sleep.
14. Make you feel more relaxed and rested.
15. Make you look fit and feel healthy.
Exercise 2. Complete this text with the words below.
pump, leaves, valve, enters, artery, flows, atrium, fills, aorta, opens, closing, beat
The heart is a muscle as big as your fist in the centre of your chest. It is an efficient that can get blood to the furthest cell in your body within sixty seconds On its circular journey around the body, blood the heart twice-once with oxygen and once without oxygen. Blood without oxygen comes into the right side of the heart. It the right atrium. Then the tricuspid valve and the blood goes into the right ventricle. Then the pulmonary opens and the blood through the pulmonary Blood carrying oxygen comes into the left side of the heart. The left
fills, the mitral valve opens and the blood into the left ventricle. The aortic valve opens and the blood leaves through the
When you listen to a heart you hear "lub dub, lub dub". This is the sound of the valves

Exercise 3. Translate into English.

Человеческое сердце, сокращаться, артерия, 72 удара в минуту, сердечный цикл эритроциты, лейкоциты, тромбоциты, систола предсердия, систола желудочка,
диастола, врождённый порок сердца, кислород.
Exercise 4. Complete the text using the words below.
slide, drop, microscope, syringe, vein, test tube, pipette
Use a to take some blood from a in the patient's arm. Put the blood into aThen, use a to put a of the blood onto a Examine it under a What do you see?
Exercise 5. Test your medical IQ.
1. If you have a heart attack, you also have heart disease.
a) true
b) false
2. What is meant by the term myocardial infarction?
a) heart failure
b) heart attack
c) brain aneurism
d) all of the above

3. Sudden cardiac arrest means that the heart	
a) stops beating	
b) beats dangerously slow	
c) has a cycle of beating and stopping	
d) skips beats	
4. Symptoms of heart disease can include	
a) dizziness, weakness, arm pain, pressure in the chest	
b) heart palpitations, shortness of breath, weakness	
c) no symptoms at all	
d) all of the above	
5. Risks for heart disease include	
a) high blood pressure and high cholesterol	
b) smoking	
c) lack of exercise	
d) all of the above	
6. In the heart a clogged artery causes a heart attack. In the brain it causes a	
a) migraine	
b) mental illness	
c) stroke	
d) seizure	
7. The term "heart failure" means the heart has stopped working.	
a) true	
b) false	

8. People can be born with heart disease.
a) true
b) false
9. The medical term for chest pain is
a) angina
b) there is no medical term for chest pain
c) flutter
d) arrhythmia
10. When heart trouble is sensed, who waits at least two hours before help is called.
a) men
b) women
c) both men and women
d) children
Скелет
Skeleton. The names of bones.
Exercise 1. Read and translate these terms. Compare these words with Latin ones.
Parietal, frontal, temporal, occipital, skull, cervical, vertebra, clavicle, scapula, rib, thorax, dorsal, spine, dorsal, spine, lumbar, pelvis, sacrum, coccyx, humeral, ulna, radius, phalanges, femur, fibula, tibia.

Exercise 2. Translate into English.

1. Трепанация черепа была проведена успешно.
2. Позвоночник пациента не пострадал.
3. Рентген грудной клетки был сделан немедленно.
4. Этот пациент пожаловался на боль в бедре.
5. Ключица была сломана.

7. КОМПЛЕКТ УПРАЖНЕНИЙ

FUSYS

Composition:

Active substance: fluconazole; 1 g of gel contains 5 mg of Fluconazole;

benzyl alcohol, polysorbate 80, propylene Excipients: carbomer, glycol,

octyldodecanol, sodium, hydroxide, Delite flavor, purified water.

Medicine form: Gel.

Colorless transparent or opaque homogeneous gel with characteristic odor.

Indications:

Dermatomycosis caused by yeasts and dermatophytes, that is: tinea pedis,

trichophytosis of smooth skin, tinea cruris, tinea versicolor, infections caused by

Candida.

Contraindications:

Hypersensitivity to Fluconazole or other azoles with chemical structure similar to

Fluconazole one.

Special precautions:

The use, especially long-term, of preparations for external use, including Fusys, may

cause sensitization and side effects. In such case it is necessary to discontinue the

treatment and consult a doctor. Fusys gel is not used in ophthalmology. **Pregnancy**

and lactation:

During pregnancy or lactation period the preparation is administered only when the

expected benefit to the mother overweights the potential risk to the fetus or child.

Ability to influence on velocity reactions while driving a motor transport and

operating other mechanisms:

It does not have an influence.

Children:

There is no data concerning this preparation use in children.

Administration and Dosage:

90

The preparation is applied once a day by gently rubbing in the affected skin area and surrounding area. On the interior parts the gel should be applied in small amounts and should be well rubbed all over the affected surface area to avoid maceration. The treatment duration for infectious etiological factors varies, but for the most patients for recovering it is usually enough 1–3 weeks treatment. In particular, the treatment period for resistant forms can be increased up to 6 weeks. The treatment duration is determined by a physician.

Overdose:

There were no reports on case of overdose.

Side effects:

Skin irritation is possible. In case of such reaction it is necessary to discontinue the treatment.

Drug interaction and other types of interaction:

There are no reports on interaction or incompatibility with other medicines. Separate studies of interaction of Fluconazole gel and other medicines have not been carried out. It is not applied on skin simultaneously with other agents for topical use.

Shelf-life:

2 years.

Storage conditions:

Store at the temperature not more 25 °C in a protected from sun light place.

Keep it out of reach of children.

Do not freeze it.

Package:

30 g of gel is in a tubes. 1 tube is in a carton box.

Conditions of supply:

Without prescription.

2. Answer the questions:

What class of drugs does this medicine belong to?

What is this drug for?

What are the contraindications, side effects or warnings?

- 3. Give the main information about this drug.
- 4. Find 5 names of other preparations of the same action.

1. Translate the instruction in written form.

Instruction for medical use of preparation Utrogestan

Trade name:

Utrogestan

International nonproprietary name:

Progesterone

Pharmaceutical form:

Capsules 100 mg, 200 mg

Composition:

Each capsule contains:

active ingredient: natural micronized progesterone 100 or 200 mg,

excipients: peanut oil, soya lecithin

composition of capsule coating: titanium dioxide E 171, glycerine, gelatin

Appearance:

Round for dosage 100 mg and oval for dosage 200 mg soft shiny gelatin capsules of yellowish color. The contents of capsules -oil white homogenous suspension.

Pharmacotherapeutic group:

Sex hormones. Derivatives of pregnen.

ATC code: G03DA04

Pharmacological properties

Oral route

Micronized progesterone is absorbed from the gastrointestinal tract. The progesterone concentration in blood plasma increases gradually within the first hour, the maximum concentration in blood (Cmax) is noted 1-3 hours after administration. The bond with plasma proteins is 90%. The progesterone concentration in blood plasma increases

from 0.13 ng/mg to 4.25 ng/mg in 1 hour, to 11.75 ng/ml in 2 hours and is 8.37 ng/ml in 3 hours, 2 ng/ml in 6 hours and 1.64 ng/ml in 8 hours. The main metabolites which are determined in blood plasma are 20-alpha-hydroxy-delta-4-alpha-pregnanolon and 5-alpha-dihydroprogesterone. Eliminated in the urine in the form of metabolites 95% of which are glucuron conjugated metabolites, mainly 3-alpha, 5-beta-pregnandiol (pregnandion). The above metabolites determined in the blood plasma and urine are similar to the substances which are formed during physiological secretion of the corpus luteum.

Indications

- Progesterone-deficiency conditions.

Oral route

- infertility due to luteal insufficiency
- menace of preterm delivery
- premenstrual syndrome
- menstrual irregularities due to ovulation disorders or anovulation
- fibrous-cystic mastopathy
- premenopause
- hormone replacement therapy of menopause (in combination with estrogen agents)

Administration and dosage

Duration of treatment is determined by the character and specifics of the disease.

The pharmaceutical product is taken orally with water. In most cases in progesterone deficiency the daily dose of Utrogestan is 200-300 mg divided into 2 doses (to take in the morning and in the evening).

In luteal phase insufficiency (premenstrual syndrome, fibrous-cystic mastopathy, dysmenorrhea, premenopause) the daily dose is 200 or 400 mg taken for 10 days (usually from the 17th through the 26th day of the cycle).

At the threat of preterm delivery: 400 mg of progesterone every 6-8 hours depending on the clinical results obtained during the acute phase, then in the maintenance dosage (for example, in a dose of 200 mg three times a day) till the 36th week of pregnancy. During hormone replacement therapy in peri-and postmenopause against the background of administration of estrogens Utrogestan is used is a dose of 200 mg a day for 10-12 days.

Side effects

- allergic reactions (skin eruptions, pruritis)
- drowsiness, headaches passing to dizziness (1-3 hours after the intake of the product)
- extremely rarely intermenstrual bleeding

Contraindications

- hypersensitivity to the active ingredient or to excipients of the product
- predisposition to thromboses; acute forms of phlebitis or thromboembolic diseases
- bleedings from the genital tracts of unclear genesis
- incomplete abortion
- porphyria
- the established or suspected malignant neoplasms of the mammary glands and genital organs
- liver impairment

With caution

- cardiovascular diseases
- arterial hypertension
- chronic renal insufficiency
- diabetes mellitus
- bronchial asthma
- epilepsy

- migraine
- depression
- hyperlipoproteinemia
- pregnancy, trimesters II and III
- period of lactation

Drug interaction

Increases the action of diuretics, hypotensive medicinal products, immunodepressants, anticoagulants. Decreases the lactogenic effect of oxytocin.

Warnings and precautions

The product should not be used with the purpose of contraception.

Pregnancy and lactation:

should be used with caution in trimesters II and III of pregnancy because of the risk of liver impairment. The delivery of progesterone into the human milk has not been studied with sufficient accuracy. It is preferable to avoid the use of progesterone during breast feeding.

Peculiarities of the product influence on the ability to drive or operate potentially hazardous machines:

caution should be exercised while driving and engaging in other potentially hazardous kinds of the activities requiring increased concentration of attention and quickness psychomotor reactions.

Overdose

An increase of adverse effects listed in section "side effects" indicates most often about overdose. They spontaneously disappear at a decrease of the product dose.

In some patients a usual dose can prove to be excessive due to existence or recurrence of unstable endogenous secretion of progesterone, particular sensitivity of the product or too low associated estradiolemia; in this case it is enough

Treatment:

- to decrease the dose or to administer progesterone IN THE EVENING AT BEDTIME for ten days during the cycle in case of drowsiness or transient sensation of dizziness;
- to postpone the beginning of treatment for a later day of the cycle (for example, to the 19th day instead of the 17th day) if it becomes shorter or spotting appears;
- to check that estradiolemia is sufficient in premenopause and during hormone replacement therapy of menapause.

How supplied

Capsules 100 mg, 15 capsules in each blister, 2 blisters in each cardboard pack together with the instruction for use in the National and Russian languages.

Capsules 200 mg, 7 capsules in each blister, 2 blisters in each cardboard pack together with the instruction on use.

Storage

At a temperature not exceeding 25C.

Keep out of the reach of children!

Shelf life

3 years.

Do not use after the expiry date.

How dispensed

Prescription medicine.

Manufacturer

Besins Manufacturing Belgium

128, Groot Bijgaardenstraat, 1620 Drogenbos, Belgium

2. Answer the questions:

What class of drugs does this medicine belong to?

What is this drug for?

What are the contraindications, side effects or warnings?

- 3. Give the main information about this drug.
- 4. Find 5 names of other preparations of the same action.
 - 1. Translate the instruction in written form.

Instruction for medical use of preparation DUGLIMAX

Composition:

active substances: metformin hydrochloride, glimepiride;

1 tablet contains metformin hydrochloride (long-acting) 500 mg and glimepiride 1 mg or metformin hydrochloride (long-acting) 500 mg and glimepiride 2 mg;

excipients (tablets 500 mg/1 mg): Sodium carboxy methyl cellulose, Hypromellose, Microcrystalline cellulose, Magnesium Stearate, Lactose monohydrate, Croscarmellose Sodium, Hydroxy Propyl cellulose, iron oxide red (E 172);

excipients (tablets 500 mg/2 mg): Sodium carboxy methyl cellulose, Hypromellose, Microcrystalline cellulose, Magnesium Stearate, Lactose monohydrate, Croscarmellose Sodium, Hydroxy Propyl cellulose, Pigment Blend PB-51323 green.

Pharmaceutical form. Tablets.

Pharmacotherapeutic group. Antidiabetic drugs. The combination of oral hypoglycemic drugs.

Clinical characteristics.

Indications. As an adjunct to diet and exercise for patients with insulin-independent type 2 diabetes

mellitus:

- if metformin or sulfonylureas monotherapy does not provide an adequate level of glycemic control;
- shifting from combination therapy to metformin and sulfonylureas.

Contraindications.

- Insulin-dependent type I diabetes mellitus (e.g., diabetes with ketonemia in anamnesis), diabetic ketonemia, diabetic coma and precoma, acute or chronic metabolic acidosis.
- Hypersensitivity to any of the excipients forming the drug formulation, sulphonylurea, sulfanilamide or biguanide.
- Severe liver function abnormality or hemodialysis (no experience in drug administration). In case of severe renal or hepatic function disorders, a changeover to insulin is required to achieve adequate control of blood sugar level.
- Propensity for lactic acidosis, cases of lactic acidosis in anamnesis, kidney disease or renal dysfunction (as shown, for example, by increasing in plasma creatinine ≥ 1.5 mg/dL in men and ≥ 1.4 mg/dL in women, or decreasing creatinine clearance), which can also be caused by conditions such as cardiovascular collapse (shock), acute myocardial infarction and septicemia.
- Intravenous administration of radiopaque agents containing iodine, because these drugs can cause acute renal failure (the administration of DuglimaxR should be suspended) (see section "Peculiarities of use").
- Severe infections, status before and after surgery, major trauma.
- Undernutrition, abstinence from food or exhaustion of the patient, or patients with pituitary or adrenal hypofunction.
- Abnormal liver function, severe pulmonary function disorder and other conditions, which might be accompanied by hypoxemia, excessive alcohol consumption, dehydration, gastrointestinal disorders, including diarrhea and vomiting.
- Congestive heart failure, which requires drug treatment; recent myocardial infarction, severe circulatory failure or rough breathing.
- Impaired renal function.

Dosage and administration.

The dosage of antidiabetic drugs should be individualized based on the patient's blood glucose levels. It is recommended to initiate the treatment with the lowest effective dose in the following clinical situations.

For patients whose diabetes is not controlled by sulfanilamide or metformin monotherapy the usual starting dose of this drug is 500/1 mg, which is administered 1 time per day and can be adjusted depending on the concomitant treatment with another antihyperglycemic drug, or in accordance with patient's glycemic level. When transferring from sulfonylureas with long half-life (e.g., chlorpropamide), the patient should be carefully monitored in case of hypoglycemia, because hypoglycemia may occur as a result of increasing the effect of drugs.

When transferring from combination therapy with certain tableted drugs: the usual starting dose is already taken dose of glimepiride and metformin. If necessary the dose may be increased to 3 tablets per day, maximum daily dose on the basis of 6 mg of glimepiride per day, given the applied therapy, efficacy or tolerance of the drug. In this regard blood sugar levels should be carefully monitored.

The daily dose of glimepiride over 6 mg is more effective only for a small number of patients. The drug should be taken 1 time per day before or during breakfast or first main meal. Mistakes in the drug administration, such as missing of regular dose administration, could never be corrected by the subsequent acceptance of higher dose. The tablet should be swallowed whole, without breaking or chewing it.

Adverse reactions.

Taking into account the experience of using the drug DuglimaxR and the data about other sulphonylurea derivatives, the possibility of the following adverse effects should be considered.

Lactic acidosis: see section "Peculiarities of use".

Hypoglycemia: see section "Peculiarities of use".

Visual disturbance: during treatment (especially at the beginning) transitory visual disturbances due to the changes in blood sugar level may be observed.

Gastrointestinal disorders: gastrointestinal symptoms, including diarrhea, nausea, vomiting, abdominal distension, flatulence and anorexia are the most common reactions to this drug and occur about 30% more often in patients taking metformin, compared to those taking placebo, especially at the beginning

of therapy with this drug. Usually, these symptoms are self-treated. Sometimes dose reduction is necessary. As the gastrointestinal symptoms at the beginning of treatment are dose-dependent, their severity may be reduced during the gradual increase of dosage by taking the drug with meal. As severe diarrhoea and/or vomiting may cause dehydration and extrarenal azotemia, the drug should be suspended in such case. For patients whose condition has been stabilized by the drug, nonspecific gastrointestinal symptoms should not be associated with the therapy, but with the intercurrent disease and lactic acidosis.

Nervous system disorders: about 3% of patients may complain of unpleasant or metallic taste at the beginning of drug therapy, but usually it is self-treated.

Hypersensitivity: sometimes — allergic or pseudoallergic reactions (such as itching, urticaria or rash). Almost in all cases such reactions are moderate, but they may progress and be accompanied by shortness of breath and arterial blood pressure fall, until the emergence of shock. In case of urticaria, seek medical attention immediately. Blood system: there may be changes in blood picture; rarely — thrombocytopenia, in exceptional cases — leukopenia, hemolytic anemia, or erythrocytopenia, granulocytopenia, agranulocytosis, or pancytopenia. Close monitoring of the patient's condition is required, as during the therapy with sulphonylurea there were cases of aplastic anemia and pancytopenia. In case of development of any of

these phenomena, the drug should be stopped, and appropriate treatment should be started. Asymptomatic reduction of vitamin B12 in blood serum was observed (folic acid levels in serum were not significantly decreased). Despite this, only megaloblastic anemia was registered during the drug therapy, there was no increase in the incidence of neuropathy. Therefore, careful control of level of

vitamin B12 in blood serum or periodic additional parenteral administration of vitamin B12 is recommended.

Liver and biliary tract disorders: in isolated cases, increase of liver enzymes activity and liver function impairment (cholestasis and jaundice) are possible, as well as hepatitis which may progress to liver failure.

Other: in isolated cases, allergic vasculitis, photosensitization and decreased serum sodium may be observed.

In case of the above stated adverse reactions, other adverse reactions or unexpected changes, the patients should inform their physician immediately. Certain adverse reactions, including severe hypoglycemia, special hematologic changes, severe allergic and pseudoallergic reactions, and renal failure may be life-threatening if accompanied by some diseases, and in case of such reactions, the patients should inform their physician immediately and stop the drug till further medical instructions.

Overdose. As this drug contains glimepiride, its overdose may cause hypoglycemia. In case of glimepiride overdose, inform your physician immediately. If the physician has not yet prescribed the treatment of overdose, the patient should immediately take sugar, preferably in the form of glucose.

The therapeutic measures mainly consist in prevention of absorption through inducing vomiting and prescription of lemonade with activated carbon (adsorbent) and sodium sulfate (laxative) to the patient. Significant overdose and severe reactions with such symptoms as loss of consciousness or other serious neurological disorders are the life-threatening conditions. In such case, urgent medical treatment and hospitalization are necessary. If hypoglycemic coma is diagnosed or suspected due to the serious overdose, it is necessary to administer for instance, a rapid intravenous injection of 40 mL of glucose 20% solution to the patient. Then, less concentrated (10%) glucose solution should be administered in the form of infusion in a quantity which permits to maintain the blood glucose level over 100 mg/dL. Alternatively, in adults glucagon may be used, for instance, in doses ranging from 0.5 mg to 1 mg intravenously,

subcutaneously or intramuscularly. The patient should be constantly monitored for 24-48 hours as after the visible clinical recovery a recurrent episode of hypoglycemia is

possible. In particular, during the treatment of hypoglycemia arising from accidental intake of glimepiride in children, the prescribed dose of glucose should be carefully calculated, and the blood glucose level should be constantly monitored. In case of intake of a big quantity of the drug, gastric lavage is recommended with subsequent use of activated carbon and sodium sulfate. Since this drug contains metformin, it may cause lactic acidosis. In case of intake of up to 85 g of metformin hydrochloride, hypoglycemia was not observed, though the development of lactic acidosis is possible after such a dose. The drug is excreted during hemodialysis with a clearance up to 170 mL/min on condition of satisfactory hemodynamics. Therefore, hemodialysis may be used for excretion of the cumulated drug in patients with suspected overdose.

Using during pregnancy and breast-feeding. DuglimaxR must not be used during pregnancy due to the possibility of adverse effects on the child. The pregnant women and the patients attempting to conceive should inform their physician. Such patients should be transferred to insulin. To avoid getting the drug DuglimaxR into the body of a child with the breast milk, women should not take the drug during breast-feeding. If it is necessary, the patient should use insulin or completely stop breast-feeding.

Children. The safety and efficacy of using the drug in children have not been ascertained.

Special precautions for use.

Precautions. Serious lactic acidosis may occur (see section "Peculiarities of use") or hypoglycemia.

During the first week of treatment, close monitoring of the patient's condition is required due to the high risk of hypoglycemia. The risk of hypoglycemia exists in patients with the following conditions:

- unwillingness or inability of the patient to cooperate with the physician (especially in the elderly);
- malnutrition, irregular meals, skipping meals;
- imbalance between physical activity and consumption of carbohydrates;
- changes in diet;
- using alcohol, especially accompanied by skipping meals;
- renal dysfunction (patients with renal dysfunction may be more sensitive to the glucose-lowering effect of the drug);
- -severe liver dysfunction;
- overdose of the drug;
- -certain decompensated diseases of endocrine system (such as thyroid dysfunction and adenohypophysis or adrenocortical failure) which affect carbohydrate metabolism and counterregulation of hypoglycemia;
- co-administration of some other drugs (see section "Interaction with other medicinal products and other types of interaction").

In such cases close monitoring of blood sugar level is necessary, and the patient should inform his physician about the above factors and the episodes of hypoglycemia, if there were such. If there are risk factors of hypoglycemia, the dose of DuglimaxR or the whole treatment regimen should be adjusted. This should also be done in case of any disease or changes in the lifestyle of the patient. The symptoms of hypoglycemia which reflect adrenergic counterregulation may be slight or absent if the development of hypoglycemia is gradual: in elderly patients, in patients with autonomic neuropathy or in those concomitantly treated with beta adrenoreceptor antagonists, clonidine, reserpine, guanethidine or other sympatholytic agents.

High risk of cardiovascular mortality. There have been reports about the connection between the use of antidiabetic drugs and the risk of cardiovascular mortality, which is higher than when using only diet therapy or diet therapy combined with insulin. This observation is based on the data of a long-term

prospective clinical trial conducted within the University Group Diabetes Program (UGDP), which involved the efficacy evaluation of the glucose-lowering drugs, on prevention or delay of development of vascular complications in patients with insulinindependent diabetes. According to the data of UGDP, in patients receiving diet therapy plus treatment with a fixed dose of tolbutamide (1.5 g/day) or diet therapy plus treatment with a fixed dose of phenformin (100 mg/day) during 5-8 years cardiovascular mortality was 2.5 times higher than in patients receiving only diet therapy, which was the reason for cessation of therapy in both cases during the UGDP study. Despite the controversy in the interpretation of these data, the information received during the UGDP study provides an appropriate background for such warning. The patient should be informed about the possible risk and benefit of using metformin and about the alternative ways of treatment. Although this study involved only one drug from the group of sulfonylureas (tolbutamide) and one drug from the group of biguanide (phenformin), in terms of safety, it is appropriate to consider that this warning may also refer to other antidiabetic drugs due to the similar action and chemical structure of the drugs of each group.

Peculiarities of use.

General precautions

Patients should be warned that this drug should be swallowed whole, without breaking or chewing the tablet and that the inactive ingredients can sometimes be excreted with feces in the form of mash that may resemble a tablet.

Hypoglycemia

As the drug reduces blood sugar levels, it can lead to hypoglycemia, which can last for a long time, taking into account the experience of other sulfonylureas administration. Possible symptoms of hypoglycemia include headache, strong feeling of hunger (canine appetite), nausea, vomiting, apathy, drowsiness, fatigue, anxiety, disorientation, sleep disturbance, apprehension, aggressiveness, clouded sensorium, decrease in vigilance and reaction, depression, confusion, speech disturbance, aphasia, visual disturbances, tremor, paresis, sensory disturbances, dizziness, helplessness, loss of self-control, delirium, convulsions of central genesis, drowsiness and loss of consciousness up to coma, shallow breathing and bradycardia. Moreover, there may be symptoms of adrenergic counter-regulation:

hyperhidrosis, clammy skin, anxiety, tachycardia, arterial hypertension, palpitations, angina attacks and cardiac arrhythmia. The clinical presentation of a severe attack of hypoglycemia may resemble a stroke. Patients with severe hypoglycemia require immediate therapy and medical examination, in some cases hospitalizing. Almost always it is possible to put the hypoglycemia under control by immediate carbohydrate intake (glucose or sugar, for example, a lump of sugar, fruit juice with sugar, tea with sugar, etc.). For suchcases, patients should always have at least 20 g of sugar. Family members should also be informed about the risk of hypoglycemia, symptoms, treatment, and factors contributing its emergence. To prevent the risk of complications, the help of others may be needed. Artificial sweeteners are not effective to control hypoglycemia.

Pharmaceutical characteristics.

Basic physical and chemical properties:

Duglimax (500 mg/1 mg): double-layer, capsule form, biconvex tablets with one pink layer and one white layer, plain on both sides; marbling is permitted;

Duglimax (500 mg/2 mg): double-layer, capsule form, biconvex tablets with one green layer and one white layer, plain on both sides; marbling is permitted.

Shelf-life.

2 years.

Storage.

Store below 25°C in a dark and dry place. Keep it out of reach of children.

Package.

15 tablets in blister; 2 or 4 blisters in a carton box.

Conditions of supply.

On prescription.

2. Answer the questions:

What class of drugs does this medicine belong to?

What is this drug for?

What are the contraindications, side effects or warnings?

- 3. Give the main information about this drug.
- 4. Find 5 names of other preparations of the same action.
- 1. Translate the instruction in written form.

1. Translate the instruction in written form.

Instruction for medical use of preparation AKRUSTAL

Generic Name:

Akrustal

Pharmacologic Group:

Skin-care product

Pharmacological Effect:

Protective and preventive phyto-cream "Akrustal" is a glucocorticoids-free (non-hormonal) product for external application designed to eliminate skin manifestations of psoriasis, eczema, Vidal's disease, atopic and allergic dermatitis. It has anti-inflammatory, cheratolic, antipruritic effects as well as stimulates skin regeneration.

Indications for Use:

Psoriasis, seborrheic dermatitis, Vidal's disease, atopic and allergic dermatitis, eczema.

Application:

The phyto-cream shall be applied on an affected skin area in gentle circular motions. Never rub the cream in your skin! The treatment of a vast affected area of skin shall be gradual starting from areas on legs, in 3 days the cream shall be applied on arms and in 2-3 more days – on all the rest affected areas.

Do not use bandages, use clothes you won't wear. Apply the cream on plaques of psoriasis once every two days for at least 6 hours during the first week. Since the beginning of the second week apply the phyto-cream every day, do not miss a day until your skin will become clean. First positive results of cream application are usually observed after 1-2 weeks of treatment. 38 The course of treatment takes from 2-3 weeks to 2-3 months. Sometimes, hyper pigmentation – skin color change - may

remain after plaques. To eliminate it the phyto-cream shall be applied once a day for up to 1 month with prophylactic purpose.

Side Effects:

Local skin reaction such as contact-allergic dermatitis (grease acne), temporal itching exasperation in the areas of cream application is a rare complication case. In such a case consult a dermatovenerologist.

Product Form:

The phyto-cream is a heavy viscous mass from yellow to dark-brown color with characteristic odor.

Produced in 60 gr. cans.

Storage Conditions:

Keep in a refrigerator with t + 5C; or you may also keep it with indoor temperature up to + 25C. Keep out of the reach of children.

Period of validity:

24 months

2. Answer the questions:

What class of drugs does this medicine belong to?

What is this drug for?

What are the contraindications, side effects or warnings?

- 3. Give the main information about this drug.
- 4. Find 5 names of other preparations of the same action.

Задание І

Прочитайте и сделайте письменный перевод следующего текста FIXED OILS, FATS AND WAXES

Fixed (*тасыщенный*) oils, fats, and waxes are esters of the saturated (*насыщенный*) and unsaturated acids. In fats and fixed oils the acids are combined with the trihydric glycerol (*трехатомный спирт*, глицерол). Waxes are also esters of fatty acids, but in this case they are combined with the higher monohydric (*одноатомный спирт*) alcohols such as acetyl alcohol and melissyl alcohol (*этиловый спирт*).

Fixed oils, fats, and waxes may be either liquid or solid (*meepdoe вещество*) at room temperatures and of vegetable origin (происхождение). For example, olive oil, cocoa butter and carnauba wax (воск листьев бразильской пальмы) are of vegetable origin. The fluidity of fats and fixed oils depends on temperature, molecular weight, and on whether the esters are derived from saturated or unsaturated acids. For example, liquids such as olive oil and cod-liver oil are rich in esters of unsaturated acids, while oil of theobroma (дерево какао) and suet (кожевенное масло) consist chiefly of esters of saturated acids. The determination of the chemical content of oils, fats, and waxes is described in the Pharmacopoeia. The amount of unsaturated acids is indicated by the iodine value. Drying and semidrying oils such as linseed (льняное масло) oil and cod-liver oil have high iodine values. Every ester requires a definite percentage of sodium hydroxide for its saponification (омыление). The saponification value of each oil varies within narrow limits. The use of inferior (низший, худший) plant or animal material, long storage may lead to partial hydrolysis of the esters with the formation of glycerol and a free fatty acid. For example, if castor seeds are ground with water and allowed to stand for some time the liquid soon becomes acid to litmus, owing to the action of the lipase (*nunasa*) present in the seeds of the castor oil. The amount of free fatty acids present in the oil is therefore some indication of purity and freshness.

Vegetable oils and fats occur mainly in the endosperm (эндосперм) or embryo (зародыш) of the seed. Palm oil and olive oil are exceptional in this respect, since they are obtained from the fleshy (мясистый) pericarp (околоплодник) on the fruit.

Задание II Часть I

Прослушайте внимательно текст, постарайтесь понять его содержание с тем, чтобы в части II данного задания, сделать правильный выбор ответов на вопросы.

At the Chemist's

Chemists' shops are specialized shops for selling drugs. They are usually situated on the ground floor.

There are usually two departments in a large chemist's. At the prescription department medicines are sold or made up according to the prescriptions. One can also see here boxes of different powders, ampoules of drugs for intramuscular and intravenous injection, different pills and tablets administered orally.

At the chemist department various drugs, medicinal plants and different things for medical care are sold without prescriptions. All medicines are kept in drug cabinets, on the open shelves and in the refrigerator. Poisonous drugs are kept in the drug cabinet with the letter A. Strong effective drugs are kept in the drug cabinet having the letter B. Medicines are placed according to the therapeutic effect: drugs for cough, cardiac medicines, drugs for headache. Disinfectants, herbs and things for medical care such as hot-water bottles, medicine droppers, thermometers and others are kept separately.

Every small bottle or box has a label with the name of the medicine. There are labels of four colors for the drugs prepared at the chemist's: white labels indicate drugs for internal use, yellow ones

indicate drugs for ixternal use, blue ones indicate drugs used for injections. Drugs used for treatment of eye diseases have labels of a pink color. The dose to be taken is indicated on the label. Indicating the dose and the name of any medicine is necessary for sick persons and for those who take care of them.

The personnel of a large chemist's consists of a manager of the chemist's, a dispensing pharmacist who takes prescriptions and delivers drugs, a chemist controlling the prescriptions, that is, pharmacological compatibility of the ingredients of the compounds prescribed by physician, a chemist-analyst controlling effectiveness of the drug prepared at the chemist's as well as that of manufactured drugs and a pharmacist who is in charge of the supply of necessary medicines.

Часть II

Просмотрите и выберите правильный ответ на вопрос, соответствующий содержанию текста.

1. Which floor are chemist's shops usually situated on?

Chemist's shops are usually situated on the

- a) first floor b) second floor c) ground floor
- 2. How many departments are there in a large chemist's?

There are usually_____ in a large chemist's.

- a) 3 departments b) 2 departments c) 4 departments
- 3. What things can one buy at the chemist department?

At the chemist department one can buy____

a) various drugs without prescriptions, medicinal plants, different things for medical care, etc.

b) special books on chemistry, cigarettes, toxic substances, etc.
c) poisonous and strong effective drugs.

4. At what department are medicines made up according to the prescription?

According to the prescription medicines are made up____

a) at the chemist department.
b) at the analytical laboratory.
c) at the prescription department.

5. Where are different drugs kept at the chemist's?

At the Chemist's different drugs are kept____

a) in the drug cabinet with the letter A.

Задание III

c) in drug cabinets, on the open shelves and in the refrigerators.

Определите на какой из вопросов данное утверждение является ответом

- 1. The patient took aspirin in the dosage of 1 gr. four times a day
 - a) How many days did the patient take aspirin in the dosage of 1 gr. four times a day.
 - b) How many times a day did the patient take aspirin in the dosage of 1 gr.
- 2. The patient complain of a general malaise, early fatigue on exertion, cardiac discomfort and palpitation.
 - a) What did the patient complain of?

b) at a very low temperature.

- b) How long did the patient complain of a general malaise, early fatigue on exertion, cardiac discomfort and palpitation?
- 3. The patient was administered Adonis preparation.
 - a) How often was the patient administered Adonis preparation?
 - b) What was the patient administered?
- 4. The patient with diagnosis of rheumatic endocarditis was treated at the inpatient department.
 - a) When was the patient with diagnosis of rheumatic endocarditis treated at the in-patient department?
 - b) Where was the patient with rheumatic endocarditis treated?

Задание *IV*

Дополните предложения лексическими единицами, соответствующими содержанию текста

Between two boys on Injuries

B :	Hello, Mike. What? Why is your arm in a sling?
M :	I had a bad fall from my bicycle and
В:	How? Have you got any now?
M :	It still but not so much as
	The broken have has been set and now my arm is in plaster of
	Paris.
В:	So, you won't be able to use your arm until theis taken off.
M:	Yes, you are
B:	I hope everything will be

Задача 1. Прослушайте внимательно текст, постарайтесь понять его содержание с тем, чтобы в части II данного задания, ответить правильно на вопросы.

Pharmaceutical science

Pharmacy as a science deals with medical substances. It treats not only of medicines but of their composition, analysis, combination and standardization. The word «pharmacy» is also used to designate the place where medicines are compounded, dispensed and sold. The title «pharmacist» refers to a person who demonstrates that he is scientifically and professionally able to work in the practice of pharmacy. The composition of medicines usually requires the scientific combination of two or more ingredients as prescribed by a physician. It demands special knowledge, experience and high professional standards. Pharmaceutical students learn different subjects, such as physics, chemistry, botany, pharmacognosy, etc.

Chemistry is that science which explains the structure of matter and the transformations which it undergoes. Botany treats of plants with reference to their compositions, functions, and classification. Pharmacognosy is the science which the history, source, cultivation, collection, preparation, distribution, embraces identification, composition, purification and preservation of drugs of vegetable and animal origin. Pharmacology is broadly defined as the science of drugs. a book containing a list of medicinal substances with their pharmacopoeia is description, tests and formulas. The pharmacopoeial ofnames chemical substances do not always represent their chemical composition. The official description usually includes the physical properties of the drug, such as colour, crystalline and other forms, odour, taste and the result of exposure to air.

Задача 2. Просмотрите и выберите правильный ответ на вопрос, соответствующий содержанию текста.

- 1. What does pharmacy treat of?
- 2. Who learns physics, chemistry, botany, pharmacology, etc.?
- 3. Whom does the title «pharmacist» refer to?
- 4.. What type of science is chemistry?
- 5. How many ingredients of scientific combination does the composition of medicines require?
 - 6. Where is pharmacist capable to work?
- 7. How often do the pharmacopoeial names of chemical substances represent their chemical composition?
 - 8. Whom is the composition of medicines prescribed by?

Задание III

Задание 1. Прочитайте и переведите текс, используя словарь

What is pharmacy?

The word «pharmacy» comes from Greek and in the modern language means «a drug». The civilization of the past contributed to our present knowledge by the collection of drugs and medicinal preparations. Pharmacy was an integral part of medicine when preparative pharmaceutical techniques were simple. It became an independent branch of medicine when an increasing variety of drugs and their complex compositions demanded specialists familiar with such technologies.

However, only in the late eighteenth and nineteenth centuries chemical knowledge advanced to the point at which it became capable to contribute significantly to pharmacology. The first and the most important was the isolation in relatively pure chemical form of the active constituents of plants. For example, in 1806 Serturner isolated morphine from opium. It took man over five thousand years to make this very important step.

The industrial revolution of the last century gave birth to synthetic organic chemistry and established a new branch of knowledge necessary for the synthesis of new drugs. At present pharmacy is defined as the art and science of recognition, identification, collection, preparation, storage, test, composition and distribution of all substances used in preventive or in curative medicine for people's treatment. It includes different subjects, such as physics, chemistry, botany, pharmacognosy, pharmacology, etc. which pharmaceutical students master to become highly good qualified pharmaceutists.

8. КОМПЛЕКТ ЗАДАНИЙ ДЛЯ ТВОРЧЕСКИХ РАБОТ

Blood quiz

Student A

Use the set of facts on your card to test the other team's knowledge of blood. For each fact, make a question with three possible answers.

- 1. A red blood cell lives for about three months. (How long...)
- 2. Your blood travels about 20,000 kilometres every day. (How far...)
- 3. You lose almost half a kilo when you donate blood. (How much...)
- 4. There are 25,000 white blood cells in a drop of blood. (How many...)
- 5. One in ten people entering hospital need a blood transfusion. (How many...)
- 6. You give three quarters of a litre in one donation of blood. (how much...)
- 7. Blood plasma is 96 % water. (what percentage of...)
- 8. There are 5.6 litres of blood in an adult human. (How much...)
- 9. Your heart beats 35 million times in a year. (How many...)
- 10. Red blood cells form about 40 % of the volume of blood. (What percentage of...)

Student B

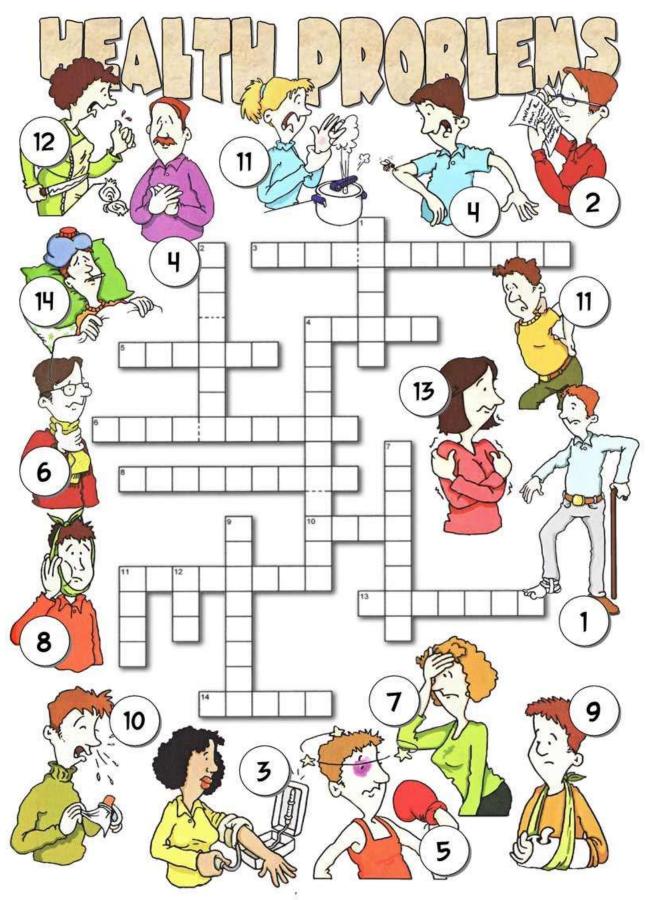
Use the set of facts on your card to test the other team's knowledge of blood. For each fact, make a question with three possible answers.

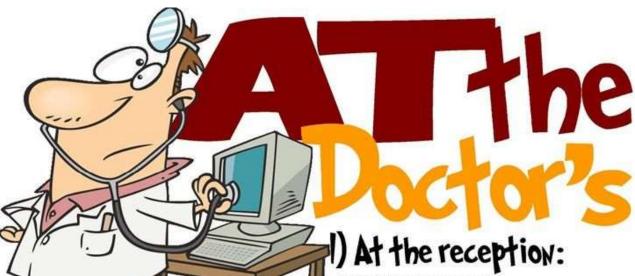
A newborn child has one cupful of blood in its body. (How much...)
 It takes about ten minutes to make a blood donation. (How long...)
 There are 96,000 kilometres of blood vessels in an adult human. (How many...)
 80 million units of blood are donated every year worldwide. (How many...)
 It takes eight weeks for a human body to replace red blood cells. (How long...)
 55 % of blood is plasma. (What percentage of...)
 Donated blood goes through eleven tests. (How many...)
 There are about half a billion red blood cells in one drop of blood. (How many...)

9. Blood is 7 % of your body's weight. (What percentage...)

10. You must wait 56 days between each donation of blood. (How long...)

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2) Seeing the doctor:

Doctor: How can I help you? / What is the problem? **Patient:** I have got a temperature/sore throat/heada-

che etc.

Patient: I have got a pain in my back/chest etc. Patient: I am asthmatic/diabetic/epileptic etc.

Patient: I am in a lot of pain./I have been feeling sick.

Patient: I have got diarrhoea.

Patient: I have got a lump/swollen ankle,leg etc.

Patient: I need another inhaler/some more insulin/so-

me medicine etc.

Doctor: How long have you been feeling like this? **Doctor:** Are you on any sort of medication?

Doctor: Do you have any allergies?

Patient: I am allergic to antibiotics.

Patient: I need a sick note.

3) Being examined:

Doctor: Can I have a look? Doctor: Where does it hurt?

Doctor: Does it hurt when I pres here?

Doctor: I am going to take your blood pressure/tem-

perature/pulse.

Doctor: Could you roll up your sleeve?

Doctor: Your blood pressure is quite low/normal/high

very high.

Doctor: Your temperature is normal/a little high/very

high.

Doctori Spen Compaticpleasee. COM

Doctor: Cough, please.

Patient: I want to see a doctor.

Medical receptionist: Do you have an appoinment? Patient: Yes,I have an appoinment at 3 o'clock. Patient: No,I would like to make an appoinment to see Dr.Brown.

Medical receptionist: Do you have private medical

insurance?

Medical receptionist: Is it urgent?

Medical receptionist: Please take a seat.

Medical receptionist: The doctor is ready to see you

now.

4) Treatment and advice:

Doctor: You need a few stiches.

Doctor: I am going to give you an injection.

Doctor: Your leg/arm etc. is broken. We need to put it

in a plaster.

Doctor: We need to take an urine sample/a blood sa-

mple.

Doctor: You need to have a blood test.

Doctor: I am going to prescribe you some antibiotics/ a syrup for your cough/a cream for your rash etc. Doctor: Take two of these pills three times a day. Doctor: Take this prescription to the chemist. Doctor: You should stop smoking/cut down on your

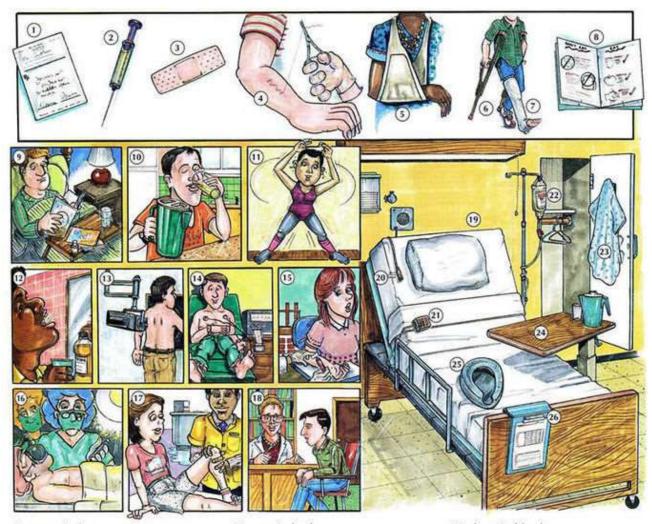
drinking/take a rest/lose some weight etc.

Doctor: I want to send you for an X-ray.

Doctor: I want you to see a specialist.

Useful Vocabulary:

make an appoinment-have an insurance-temperature pain-ache-have an allergy-hurt-blood pressure-stich injection-sample-plaster-sample-chemist-prescription



- 1. prescription
- injection/shot
 bandaid
- 4. stitches
- 5. sling
- 6. crutches
- 7. cast
- 8. diet

- 9. rest in bed
- 10. drink fluids
- 11. exercise
- 12. gargle 13. X-rays 14. tests
- 15. blood work/blood tests
- 16. surgery17. physical therapy18. counseling

- hospital bed
 call button
 bed control

- 22. I.V.
- 23. hospital gown24. bed table
- 25. bed pan
- 26. medical chart



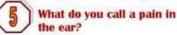
a) Nose bleed.

b) Hangover.

c) Runny nose.



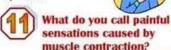
- a) a cold.
- b) a flu.
- c) constipation.



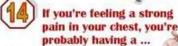
- a) Deafness.
- b) Ear ache.
- c) Bad earing.



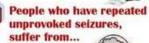
- a... a) throat ache.
- b) sore throat.
- c) rash.



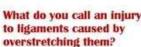
- a) Insect bite.
- b) Blister.
- c) Cramps.



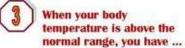
- a) heart attack.
- b) heartburn.
- c) asthma attack.



- a) epilepsy.
- b) strokes.
- c) acne.



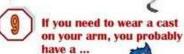
- a) Sprain.
- b) Contusion.
- c) Bump.



- a) a fever.
- b) a cough.
- c) a sore throat.



- What do you call a head injury with temporary loss of brain function?
- a) Amnesia.
- b) Concussion.
- c) Fracture.



- a) rash.
- b) burn.
- c) fracture.



- What do you call it when a person has difficulty falling asleep?
- a) Insomnia.
- b) Hiccups.
- c) Hysteria.



What do you call it when a person has high blood sugar?

- a) Diabetes.
- b) Insulin.
- c) High blood pressure.



- What do you call the shedding of dead skin from the scalp?
- a) Sunburn.
- b) Bleed.
- c) Dandruff.





- a) Sneezing.
- b) Bronchitis.
- c) Asthma.

































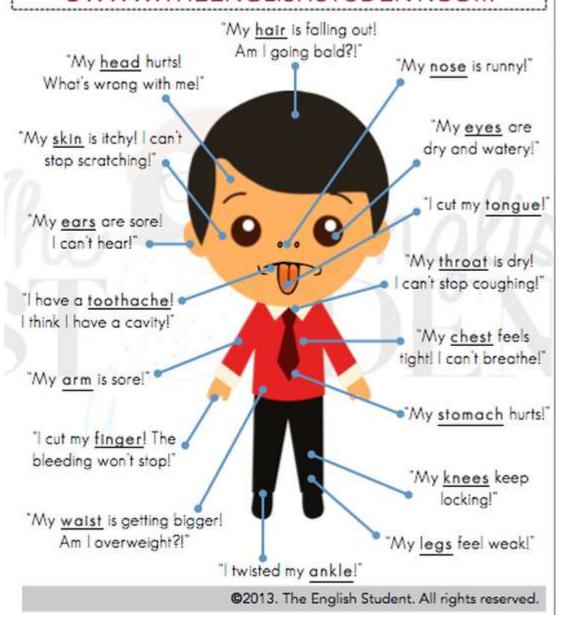


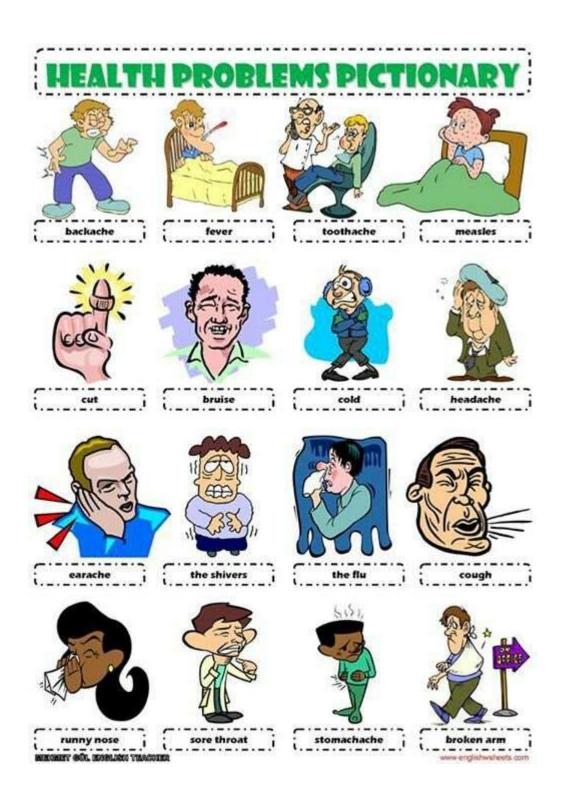


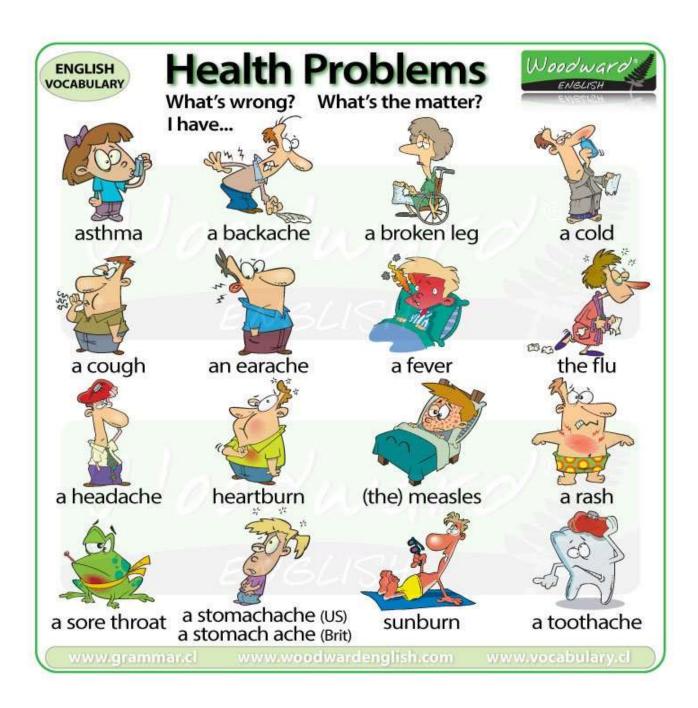


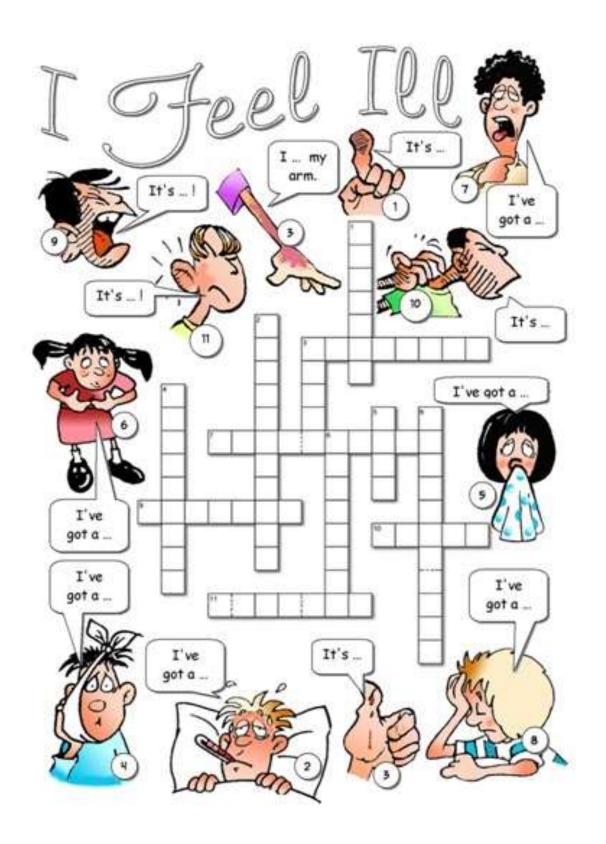
"DOCTOR! I NEED YOUR HELP!"

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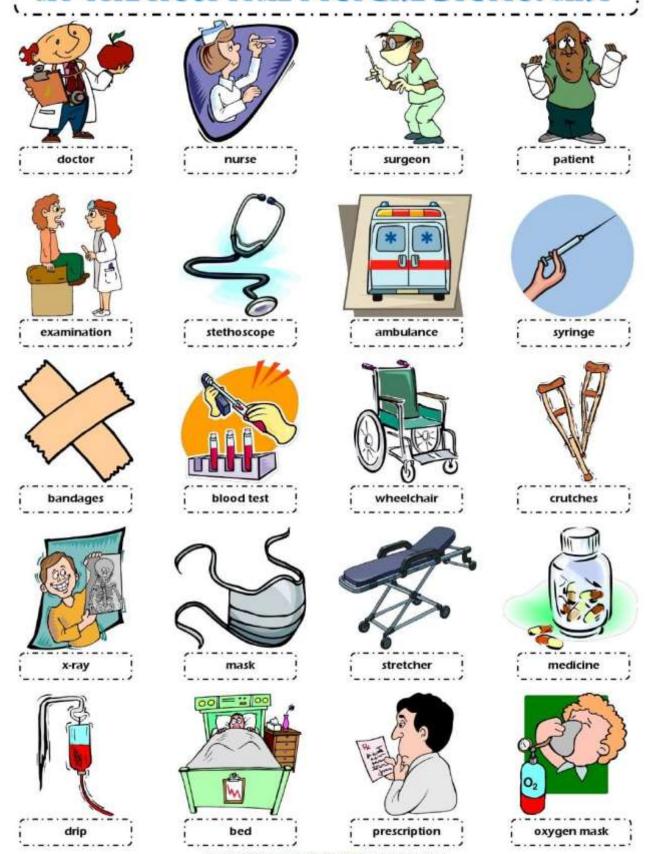








AT THE HOSPITAL PICTURE DICTIONARY



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to have a prescription made up заказать лекарство (в аптеке)

have a tooth crowned nocra-

вить коронку на зуб to have a tooth filled запломбировать зуб

to have a tooth (pulled) out Bup-

вать зуб to beal [hi:l] заживать; излечн-Bath The wound healed slowly,

Pana заживала медленно. to keep one's bed оставаться в постели, соблюдать постельный режим

to listen to one's heart (lungs) выслушать сердце (легкие) to make one's blood-count делать

анализ крови

to make out a prescription выпиto measure one's blood pressure

измерять давление крови

to prescribe some medicine выписать лекарство

to recover [ri'kavə] выздороветь, выздоравливать. Не recovered slowly after his long illness. Он медленно вындоравливал после своей длительной болезци. She recovered her eyesight. К ней возвратилось эрение,

to sneeze [sniz] чихать to sound one's lungs (chest) прослушать легкие, грудную клетку to suffer from (a disease) страдать от (болезки) to take a treatment for (a disease) прикимать лечение (от болезки)

to take a medicine принимать лекарство

to take one's temperature измерять температуру

to treat (for an illness) лечить (от болезии) Which doctor is treating you for your illness? Какой доктор лечит вас от этой болевни?

6

I am running a temperature. У меня температура. I am sick. Меня тошинт.

I feel seedy. Мне не по себе. I got an infection from him. Я от него заразился. I have a sore throat (a toothache, an ear-ache, a sore eye). У меня болит горло (зубы, уши, гляз).

I have a pain in my back (side, etc.). У меня болит спинз (бок и т. д.), It hurts (badly). (Очень) болит.

It is hard to swallow. Трудно глотать. My cheek is swollen. У меня

опухла щека. My foot is out of joint. Я вы-

вихнул себе ногу. My head is swimming. У меня кружится голова.

My nose is clogged up. У меня заложен нос. The flu (quinsy, etc.) is catching.

Грипп (ангина и т.д.) заразен. What do you complain of? Ha

"I don't think it's going to be as easy as it looks. He's swallowed a magnet." что вы жалуетесь? What do you take for a headache? Что вы принимаете от голов-ной боли?

Where do you feel pain? Где у вас болит? I'm quite fit. Я чувствую себя (вполне) хорошо,

C. ILLUSTRATION OF USE

SUBSTITUTION PATTERNS

"What do you complain of, sir?"
 "I've got a splitting headache."
 a terrible toothache

an awful ear-ache a stomach-ache a pain in my back

 "Did you ever suffer from malaria, sir?" bronchitis mumps pneumonia No, never."

"Where's Jack? I can't see him anywhere."
"Well, he isn't at work. He's down with flu,

quinsy Indigestion pneumonia



"I wish I had your health,"



Match the jobs with the correct pictures.

teacher • vet • surgeon • lawyer • priest • hairdresser • painter • accountant • computer programmer • doctor • scientist • dentist policeman • photographer • cook/chef • nurse • pharmacist • judge







Take Care of Your Health

I don't feel well - Я чувствую себя неважно

I feel sick - Мне плохо

I have pain in my back - У меня болит спина

I have chills - Меня знобит

I feel dizzy - У меня кружится голова My head is spinning - У меня сильное головокружение

I feel faint - Мне плохо

I have a headache - У меня болит голова

I'm allergic to - У меня аллергия на ...

I have high blood pressure - У меня высокое давление

I have a pain here - У меня болит здесь

I have a fever - У меня температура

I have a cold - Я простыл (у меня насморк)

My nose is running - У меня насморк

I have a severe toothache - У меня сильно болит зуб

I have something in my eye - Что-то попало в глаз

I feel like throwing up - Меня тошнит

I've got a heart problem - У меня проблемы с сердцем

My ankle is sprained - Я растянул связки на ноге

I've got a sore throat - У меня болит горло

I'm suffering from insomnia - Я страдаю от бессонницы

I have a stuffy nose - У меня заложен нос

I fell a little better - Я чувствую себя немного лучше



Unit 14. Болезии

۰

- Ecan y reds npoctyga man rpunn, to rede npurogates atu dapasa:

 Thave a (had) bendache. У меня (умасно) болит голова.

 Thave a sore throat. У меня болит горло.

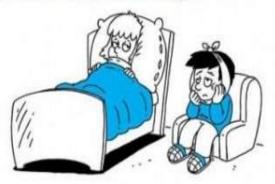
 Thave a runny nose. У меня масхорк.

 Thave a fever. У меня высхорк.

 I feel (very) III. Я (очень) болен.

 Teel (very) III. Я (ovenь) болен.

 Teel had. (I dun's feel well.) Я плохо себя чувствую.
- Еще у нас иногда могут болеть зубы. В этом случае мы скажем: thave a touthache. — У меня болит зуб. (У меня зубная боль.)
- Мари и ее друг заболели. Послушай и повтори за ней, что ова рассивамвеет о своем состоянии и о состоянии своего друга:



I don't feel well.
I have a bad headache.
I have a sore throat.
I have a runny nose.
And I have a fever.
I feel very ill.

My friend feels very bad. He has a bad headache. He has a sore throat. He has a bad toothache. And he has a fever. My friend is very ill.

Ю. Национа, J. Whalen, Живые фразы английского плына

Unit 14.

7) (throat)

ЗАДАНИЯ

14.1. Составь предложения о состоянии своего адоровья, используя сло-

- 14.2. Братъв Вилли и Дилли заболели одинаковой болежью. Вилли рассиваваниет о состоянии своего здоровья. Помоги ему, что ок должен сказать о состоянии здоровья Дилли.
 - 1) I feel bad. He feels bad.
 2) I don't feel well.
 3) I have a headache.
 4) I have a toothache.
 5) I have a fever.
 6) I have a sore throat.
 7) I have a runny nose.
- 14.3. Расшифруй, накие проблемы со здороваем у Рина.

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9. КОМПЛЕКТ МАТЕРИАЛОВ ДЛЯ ПРОМЕЖУТОЧНОЙ АТТЕСТАЦИИ

СПИСОК ТЕМ ДЛЯ ПРОМЕЖУТОЧНОЙ АТТЕСТАЦИИ

- 1. Topic: "At the Chemist's"
- 2. Topic: "Antibiotics"
- 3. Topic: "Drug taking"
- 4. Topic: "Medicinal Plants"
- 5. Topic: "Anatomy of a human body"
- 6. Topic: "Health Service in England"
- 7. Topic: "Pharmacy"
- 8. Topic: "Some rules for taking drugs"
- 9 .Topic: "Solution"
- 10. Topic: "Tablets"
- 11. Topic: "Our Medical College"
- 12. Topic: "Care of drugs"
- 13. Topic: "Vitamins"
- 14. Topic: "The Hippocratic Oath"
- 15. Topic: "Medical Service in the USA"
- 16. Topic: "Studies at the Medical College"

At a Chemist's

On receiving a prescription from a doctor or on following a home treatment all of us need medicines which are ordered or bought at a chemist's. There are usually two departments in a large chemist's. At the chemist's department one can have the medicine immediately; other drugs have to be ordered at the prescription department. At any chemist's all the drugs are kept in drug cabinets. Each medicine has a label on it. White labels indicate drugs for internal use, yellow-for external use and blue-for injections. The dose to be taken and the directions for the administration are also indicated on a label. It is very important for chemists, nurses, doctors and patients themselves. It prevents confusing different remedies, some of which are poisonous. Their over dosage may cause unfavorable reactions and even death. At the chemist's one can buy different drugs for intramuscular and injections, for oral administration and for external use.

At the Chemist's

Chemists' shops are specialized shops for selling drugs. They are usually situated on the ground floor.

There are usually two departments in a large chemist's. At the prescription department medicines are sold or made up according to the prescriptions. One can also see here boxes of different powders, ampoules of drugs for intramuscular and intravenous injection, different pills and tablets administered orally.

At the chemist department various drugs, medicinal plants and different things for medical care are sold without prescriptions. All medicines are kept in drug cabinets, on the open shelves and in the refrigerator. Poisonous drugs are kept in the drug cabinet with the letter A. Strong effective drugs are kept in the drug cabinet having the letter B. Medicines are placed according to the therapeutic effect: drugs for cough, cardiac medicines, drugs for headache. Disinfectants, herbs and things for medical care such as hot-water bottles, medicine droppers, thermometers and others are kept separately.

Every small bottle or box has a label with the name of the medicine. There are labels of four colors for the drugs prepared at the chemist's: white labels indicate drugs for internal use, yellow ones indicate drugs for ixternal use, blue ones indicate drugs used for injections. Drugs used for treatment of eye diseases have labels of a pink color. The dose to be taken is indicated on the label. Indicating the dose and the name of any medicine is necessary for sick persons and for those who take care of them.

The personnel of a large chemist's consists of a manager of the chemist's, a dispensing pharmacist who takes prescriptions and delivers drugs, a chemist controlling the prescriptions, that is, pharmacological compatibility of the ingredients of the compounds prescribed by physician, a chemist-analyst controlling effectiveness of the drug prepared at the chemist's as well as that of manufactured drugs and a pharmacist who is in charge of the supply of necessary medicines.

Antibiotics

Antibiotics have played a major role in our society thanks to Sir Alexander Fleming s careful observations in 1928. Without it, many lives would be in danger due to infectious diseases.

Antibiotics are chemical substances produced by various species of microorganisms and other living systems that are capable in small concentrations of inhibiting the growth of or killing bacteria and other microorganisms. These organisms can be bacteria, viruses, fungi, or animals called protozoa. A particular group of these agents is made up of drugs called antibiotics, from the Greek word anti ("against") and bios ("life"). Some antibiotics are produced from living organisms such as bacteria, fungi, and molds. Others are wholly or in part synthetic – that is, produced artificially.

Penicillin is perhaps the best known antibiotic. Its discovery and later development is among mankind s greatest achievements. Antibiotics have enabled the medical profession to treat effectively many infectious diseases, including some that were once life-threatening.

How Antibiotics Work?

Antibiotics can be bacteriostatic (bacteria stopped from multiplying) or bactericidal (bacteria killed). To perform either of these functions, antibiotics must be brought into contact with the bacteria.

It is believed that antibiotics interfere with the surface of bacteria cells, causing a change in their ability to reproduce. Testing the action of an antibiotic in the laboratory shows how much exposure to the drug is necessary to halt reproduction or to kill the bacteria. Although a large amount of an antibiotic taken at one time might kill the bacteria causing an illness, such a dose usually would make the person suffer from illness caused by the drug. Therefore, antibiotics are given in a series of smaller amounts. This assures that the bacteria are either killed or reduced enough in numbers so that the body can repel them. When too little antibiotic is taken, bacteria can often

develop methods to protect themselves against it. The next time the antibiotic is needed against these bacteria, it will not be effective.

Taking in Antibiotics.

To work against infecting organisms, an antibiotic can be applied externally, such as to a cut on the skin s surface, or internally, reaching the bloodstream within the body. Antibiotics are made in several forms and given in different ways.

Topical. Topical application means "to a local area" such as on the skin, in the eyes, or on the mucous membrane. Antibiotics for topical use are available in the form of powders, ointments, or creams.

Oral. Tablets, liquids, and capsules are swallowed. The antibiotic is released in the small intestine to be absorbed into the bloodstream. Troches, or lozenges, are allowed to dissolve in the mouth, where the antibiotic is absorbed through the mucous membrane.

Parenteral. Applications outside the intestine are called parenteral. One form is an injection, which can be subcutaneous (under the skin), intramuscular (into a muscle), or intravenous (into a vein). Parenteral administration of an antibiotic is used when a physician requires a strong, quick concentration of the antibiotic in the bloodstream.

"Drug taking"

Much is known to people about the harmful effect of drugs, but still they ignore the fact, known to them and put their life into trouble. I consider that my task as a teacher is to increase knowledge about the harmful effect of drugs. It's time we got serious about the danger of drugs and started acting responsibly to fix the problem we have for the sake of young people. Although it's foolish to think that we can fully eradicate the problem, we can minimize it if people become "drug educated". It is important nowadays, because despite potential risks many teens take drugs either because of addiction or because of environmental exposure, such as peer pressure. That's why they should get the real deal on how drugs affect a body and brain. The statistics is frightening: the use of illegal drugs contributes to 53,000 deaths annually, the American College Of Emergency Physicians says.

Achievements in the sporting world can be overshadowed by controversy regarding performance enhancing drugs. There are over 4,000 drugs banned by the Olympic Committee. Unfortunately these substances are used in present competitive sports today. As a result, the short-term positive benefits cause the long-term negative effects. Is it worth risks?

No doubt, people should be aware that drugs damage the body and brain, lead to dangerous situations. So, let our club discussion be a piece of drug education, a small contribution to solving this difficult key problem.

" Medicinal Plants"

A person is surrounded by a huge, diverse, natural world. Fauna is the animal world, flora is the world of plants. Life on planet Earth is impossible without plants. Trees, shrubs, grasses and flowers produce the oxygen we breathe.

Plants can be useful (medicinal) and dangerous (poisonous), there are even predator plants capable of catching and digesting small insects.

People noticed the benefits of some plants a long time ago, watching animals. Knowledge about the beneficial properties of plants has been passed down from generation to generation. Then they began to write down information in books called «Herbalists», learned how to make medicines (tinctures, potions and pills).

Let's take a closer look at the examples of medicinal plants.

Chamomile

A widespread plant. Chamomile decoction can be gargled, can be used as an anti-inflammatory, soothing, diuretic. Chamomile is also used to create shampoos, creams and toothpaste.

Dandelion

People have known and loved this flower since childhood, they weave wreaths, make dolls. When a dandelion turns into a white ball, you can blow on it and look at the flying air parachutes of seeds. Dandelion flowers can be used to make salads and make jam. Dandelion is used as an expectorant for coughing, antipyretic and diaphoretic.

Mother-and-stepmother

The leaves of this plant have a different coating. On the one hand, the leaf is soft like velvet, has a white tint, and on the other, the leaf is green, hard and cold. Hence the name. Mother-and-stepmother appears in early spring one of the first and pleases with its bright color after a long winter. Mother-and-stepmother strengthens the immune system, is used for coughing, will get rid of gum inflammation.

Plantain

Plantain helps to stop the blood, heal wounds and cuts, relieves swelling from wasp and bee stings. Plantain leaves are used to soften cough, they also have a soothing and analgesic effect.

Mint

An incredibly fragrant plant that has a pleasant taste and smell. Mint is added to ready meals, drinks and pastries, and is used to make marinades. If you add a mint leaf to the milk, it will not sour for a long time. Mint has an anti-inflammatory and relaxing effect, helps with stomach pain, cramps, heartburn, nausea and headache. Mint helps to restore strength, relieves nervous overexcitation.

Rosehip

A tall bush, thickly studded with thorns. Rosehip berries contain a large amount of vitamins and minerals. Rosehip is used to treat liver diseases, as a mild laxative. Rosehip improves metabolism, lowers blood pressure, strengthens the walls of blood vessels. Tea with rosehip fruits will not only be delicious, but also very useful.

Aloe

Aloe leaves are used to make juice, which is used in medicine, and aloe gel is used in cosmetology. Aloe juice contains many useful trace elements. It helps to strengthen the immune system, purify the blood, treats eye diseases, heals wounds and ulcers.

Nettle

Nettle is famous not only for its burning qualities, but also for its useful properties. Nettle contains more vitamin C than lemon, and more carotene than carrots. Experienced chefs know many recipes for cooking nettle dishes. Nettle is also widely used for medical purposes. Nettle improves heart function, relieves muscle pain, normalizes the digestive system, has a healing effect. It is used in cosmetology for hair and scalp care.

"Anatomy of a human body"

There are several main systems of the body: the skeletal, the muscular, the nervous, the digestive, the respiratory, the urinary, the endocrine and the reproductive systems.

The skeletal system consists of the bones of the body and ligaments and cartilages, which join them. The chief function of the skeletal system is structural.

The muscular system consists of the skeletal muscles and their associated structures. The main function of this system is to move us about.

The nervous system consists of the brain and spinal cord, nerves, ganglia and receptors. It is a complex information system with all the necessary means for receiving, processing and communicating information.

The circulatory system consists of the heart and blood vessels and the blood, which is pumped through the blood vessels by the heart. Its function is mainly that of

transportation system: the nutrients, oxygen, special substances which are required by cells are carried by the blood stream; and the cellular wastes and sometimes other materials produced by the cells are carried away by the blood stream.

The digestive system consists of the alimentary canal and a number of associated glands.

The respiratory system consists of the lungs, the air passages leading to them and associated structures. Its main function is to convey oxygen to the lungs, where it can enter the blood stream and to remove carbon dioxide, which escapes from the blood into the lung spaces.

The urinary system consists of the kidneys which produce urine by removing nitrogenous and other wastes from the blood: the two ureters, which convey the urine away from the kidneys; the urinary bladder, where the urine is stored until it is discharged; and the urethra through which the urine is discharged.

The endocrine system consists of a number of glands throughout the body, which produce regulatory substances called hormones. The endocrine system serves to regulate a large number of activities.

"Health Service in England"

The National Health Service in England was inaugurated on July 5,1948by the Minister for Health under the National Health Service Act of 1946.

The number of doctors in England is not quite enough to serve millions of patients treated at the National Health Service. Nurses are also in short supply.

All doctors may take part in the Family Doctor .System. They may have private practice receiving the pay directly from the patients for their medical advice. Health Service doctors are paid by the government. The pay depends on the number of patients they have served every month. The hospital service includes general and special hospitals, tuberculosis sanatoria, infectious disease units and all forms of specialized treatment together with the provision of most surgical and medical needs.

In the main this part of the service is organized by 15 Regional Hospital Boards. In each hospital area there is a University having a teaching hospital or a medical school.

"Pharmacy"

The word «pharmacy» comes from Greek and in the modern language means «a drug». The civilization of the past contributed to our present knowledge by the collection of drugs and medicinal preparations. Pharmacy was an integral part of

medicine when preparative pharmaceutical techniques were simple. It became an independent branch of medicine when an increasing variety of drugs and their complex compositions demanded specialists familiar with such technologies.

However, only in the late eighteenth and nineteenth centuries chemical knowledge advanced to the point at which it became capable to contribute significantly to pharmacology. The first and the most important was the isolation in relatively pure chemical form of the active constituents of plants. For example, in 1806 Serturner isolated morphine from opium. It took man over five thousand years to make this very important step.

The industrial revolution of the last century gave birth to synthetic organic chemistry and established a new branch of knowledge necessary for the synthesis of new drugs. At present pharmacy is defined as the art and science of recognition, identification, collection, preparation, storage, test, composition and distribution of all substances used in preventive or in curative medicine for people's treatment. It includes different subjects, such as physics, chemistry, botany, pharmacognosy, pharmacology, etc. which pharmaceutical students master to become highly good qualified pharmaceutists.

"Tablets"

The tablet is the most common form for the administration of a drug in a dry state.

A tablet shows definite properties of mechanical strength and is characterized by a definite rate of disintegration with water.

It is observed that tablets can be made from certain drugs, even without the addition of auxiliary substances.But for some drugs,, the addition of auxiliary substances is found to be necessary to overcome certain difficulties in their tableting.

The application of different pressure during tableting plays a very important role. It helps to avoid unnecessary complications. Tablets, which should dissolve in the mouth, must be more strongly compressed than other tablets for internal administration.

Another important effect of higher pressures is an increase in friction, which demands the use of greater amounts of lubricants and glidants. Glidants are added to the tablets to improve their flow properties.

Tablets are solid dose pharmaceutical preparation containing drug substances usually prepared with the aid of suitable pharmaceutical excipients. They may vary in

size, shape, weight, hardness, thickness, disintegration, and dissolution characteristics and in other aspects, depending on their intended use and method of manufacture.

It has been estimated that solid-dosage forms constitute approximately 90% of all dosage forms clinically used to provide systemic administration of therapeutic agents. The widespread use of tablets has been achieved as a result of their convenience and also the diversity of tablet types.

Tablets are prepared primarily by compression of granules or powder blends, with a limited number prepared by moulding. Most tablets are used in the oral administration of drugs. Many of these are prepared with colourants and coatings of various types. Other tablets, such as sublingual, buccal, or vaginal tablets, are prepared to have features most applicable to their particular route of administration.

"Vitamins"

Vitamins A, D, E and K are all fat soluble vitamins. Fat soluble vitamins are given this name because they dissolve within the body's fat cells. They are largely found in fats and fatty foods such as animal fat, dairy products and vegetable oils. Fat soluble vitamins are preserved in foods even when they have been cooked. If they are not needed immediately they can be stored in your liver and fatty tissues for later use. Therefore, you do not need to consume fat soluble vitamins every day because your body can get what it needs from these stores.

Vitamins B and C fall under the term water soluble vitamins are given this name because they need to be taken with water to dissolve. They are largely found in fruits, vegetables and grain. Water soluble vitamins are not preserved as easily as fat soluble vitamins and can be lost during cooking and preparation.

10. КРИТЕРИИ ОЦЕНИВАНИЯ

КРИТЕРИИ ОЦЕНИВАНИЯ ЗАДАНИЙ В ТЕСТОВОЙ ФОРМЕ ВХОДНОГО КОНТРОЛЯ

(остаточных знаний)

Оценка «5» (отлично) – 100-80% правильных ответов

- из 10 тестов не менее 8 правильных ответов
- из 15 тестов не менее 12 правильных ответов
- из 20 тестов не менее 16 правильных ответов
- из 30 тестов не менее 24 правильных ответов
- из 35 тестов не менее 28 правильных ответов
- из 50 тестов не менее 40 правильных ответов
- из 100 тестов не менее 80 правильных ответов

Оценка «4» (хорошо) – 79-70% правильных ответов

- из 10 тестов не менее 7 правильных ответов
- из 15 тестов не менее 10 правильных ответов
- из 20 тестов не менее 14 ответов правильных
- из 30 тестов не менее 21 правильных ответов
- из 35 тестов не менее 24 правильных ответов
- из 50 тестов не менее 35 правильных ответов
- из 100 тестов не менее 70 правильных ответов

Оценка «3» (удовлетворительно) – 69-60% правильных ответов

- из 10 тестов не менее 6 правильных ответов
- из 15 тестов не менее 9 правильных ответов
- из 20 тестов не менее 12 правильных ответов
- из 30 тестов не менее 18 правильных ответов
- из 35 тестов не менее 21 правильных ответов
- из 50 тестов не менее 30 правильных ответов
- из 100 тестов не менее 60 правильных ответов

Оценка «2» (неудовлетворительно) – менее 60% правильных ответов

- из 10 тестов 5 и менее правильных ответов
- из 15 тестов 10 и менее правильных ответов
- из 20 тестов 11 и менее правильных ответов
- из 30 тестов 17 и менее правильных ответов
- из 35 тестов 20 и менее правильных ответов

КРИТЕРИИ ОЦЕНИВАНИЯ ТЕРМИНОЛОГИЧЕСКОГО ДИКТАНТА

Оценка «5» (отлично) – 100-90% правильных ответов

- из 10 вопросов не менее 9 правильных ответов
- из 15 вопросов не менее 14 правильных ответов
- из 20 вопросов не менее 18 правильных ответов

Оценка «4» (хорошо) – 89-80% правильных ответов

- из 10 вопросов не менее 8 правильных ответов
- из 15 вопросов не менее 12 правильных ответов
- из 20 вопросов не менее 16 ответов правильных

Оценка «3» (удовлетворительно) – 79-70% правильных ответов

- из 10 вопросов не менее 7 правильных ответов
- из 15 вопросов не менее 11 правильных ответов
- из 20 вопросов не менее 14 правильных ответов

Оценка «2» (неудовлетворительно) – менее 70% правильных ответов

- из 10 вопросов 6 и менее правильных ответов
- из 15 вопросов 10 и менее правильных ответов
- из 20 вопросов 13 и менее правильных ответов

КРИТЕРИИ ОЦЕНИВАНИЯ ЗАДАНИЙ В ТЕСТОВОЙ ФОРМЕ

Оценка «5» (отлично) – 100-90% правильных ответов

- из 10 тестов не менее 9 правильных ответов
- из 15 тестов не менее 14 правильных ответов
- из 20 тестов не менее 18 правильных ответов
- из 30 тестов не менее 27 правильных ответов
- из 35 тестов не менее 31 правильных ответов
- из 50 тестов не менее 45 правильных ответов
- из 100 тестов не менее 90 правильных ответов

Оценка «4» (хорошо) – 89-80% правильных ответов

- из 10 тестов не менее 8 правильных ответов
- из 15 тестов не менее 12 правильных ответов
- из 20 тестов не менее 16 ответов правильных
- из 30 тестов не менее 24 правильных ответов

- из 35 тестов не менее 28 правильных ответов
- из 50 тестов не менее 40 правильных ответов
- из 100 тестов не менее 80 правильных ответов

Оценка «3» (удовлетворительно) – 79-70% правильных ответов

- из 10 тестов не менее 7 правильных ответов
- из 15 тестов не менее 11 правильных ответов
- из 20 тестов не менее 14 правильных ответов
- из 30 тестов не менее 21 правильных ответов
- из 35 тестов не менее 24 правильных ответов
- из 50 тестов не менее 35 правильных ответов
- из 100 тестов не менее 70 правильных ответов

Оценка «2» (неудовлетворительно) – менее 70% правильных ответов

- из 10 вопросов 6 и менее правильных ответов
- из 15 вопросов 10 и менее правильных ответов
- из 20 вопросов 13 и менее правильных ответов
- из 30 тестов 20 и менее правильных ответов
- из 35 тестов 23 и менее правильных ответов
- из 50 тестов 34 и менее правильных ответов
- из 100 тестов 69 и менее правильных ответов

КРИТЕРИИ ОЦЕНКИ ТЕОРЕТИЧЕСКОГО КОМПОНЕНТА

- **5** (отлично) обучающийся демонстрирует знания в полном объеме программы основной учебной дисциплины, свободно владеет материалом смежных дисциплин, дает полные ответы на вопросы, выделяя при этом основные и самые существенные положения, приводит точные и полные формулировки, свободно владеет понятийным аппаратом учебной дисциплины, отвечает без наводящих вопросов, мыслит последовательно и логично, способен вести полемику, развивать положения предлагаемые преподавателем.
- 4 (хорошо) обучающийся демонстрирует знания в полном объеме программы основной учебной дисциплины, в основном владеет материалом смежных учебных дисциплин, понимает предмет разбора, однако дает не вполне исчерпывающие ответы, отвечая на дополнительные наводящие вопросы, владеет понятийным аппаратом учебной дисциплины, мыслит последовательно и логично.
- 3 (удовлетворительно) обучающийся демонстрирует знания основ изучаемой учебной дисциплины, владеет основами смежных учебных дисциплин,

понимает предмет разбора, однако дает не вполне исчерпывающие ответы, на наводящие дополнительные вопросы отвечает в целом правильно, но не полно, испытывает затруднения при использовании понятийного аппарата учебной дисциплины.

2 (неудовлетворительно) — обучающийся не знает значительной части вопросов по основной и смежным учебным дисциплинам, затрудняется систематизировать материал и мыслить логично.

КРИТЕРИИ ОЦЕНКИ РЕШЕНИЯ ПРОБЛЕМНО-СИТУАЦИОННОЙ ЗАДАЧИ

- **5 «отлично»** комплексная оценка предложенной ситуации; знание теоретического материала с учетом междисциплинарных связей, правильный выбор тактики действий; последовательное, уверенное выполнение практических умений в соответствии с алгоритмами действий;
- 4 «хорошо» комплексная оценка предложенной ситуации, незначительные затруднения при ответе на теоретические вопросы, неполное раскрытие междисциплинарных связей; правильный выбор тактики действий; логическое обоснование теоретических вопросов с дополнительными комментариями педагога; последовательное, уверенное выполнение практических умений в соответствии с алгоритмом действий;
- 3 «удовлетворительно» затруднения с комплексной оценкой предложенной ситуации; неполный ответ, требующий наводящих вопросов педагога; выбор тактики действий, в соответствии с ситуацией, возможен при наводящих вопросах педагога, правильное последовательное, но неуверенное выполнение практических умений в соответствии с алгоритмом действий;
- **2 «неудовлетворительно»** неверная оценка ситуации; неправильно выбранная тактика действий, приводящая к ухудшению ситуации, нарушению правил безопасности пациента (клиента аптеки) и медицинского персонала; неправильное выполнение практических умений.

КРИТЕРИИ ОЦЕНКИ РЕФЕРАТА

Критерии качества	0 баллов	2 балла	3 балла	4 балла	5 балов
Соответствие содержания реферата теме и поставленны м задачам	Реферат не соответству ет теме	Содержание реферата не полностью соответству ет теме	в основном	Содержани е реферата полностью соответству ет теме и поставленн ым задачам	Содержани е реферата полностью соответству ет теме и поставленн ым задачам
Полнота раскрытия темы и использовани я источников		Тема раскрыта недостаточно, использовано мало источников	но	Тема раскрыта, однако некоторые положения реферата изложены не слишком подробно, требуют уточнения, использова ны все основные источники литературы	Тема полностью раскрыта, использова ны современны е источники литературы в достаточно м количестве
Умение обобщить материал и сделать	Выводы не сделаны	Материал не обобщен, выводов нет	обобщен,	Материал обобщен, сделаны четкие	Материал обобщен, сделаны четкие и

краткие выводы			, не четкие	выводы	ясные выводы
Иллюстрации , их информативн ость	Иллюстрац ий нет	Иллюстраци и не информатив ные	ии	Иллюстрац ии информати вные, хорошего качества	Иллюстрац ии информатив ные высокого качества
Соответствие оформления реферата предъявляем ым требованиям	Не соответству ет	Не соблюден ы основные требовани я к оформлени ю реферата	Основные требования к оформлени ю реферата соблюдены	Оформлени е реферата полностью соответству ет предъявляе мым требования м	Оформлени е реферата полностью соответству ет предъявляе мым требования

Максимальный балл, который может получить обучающийся за реферат, — **баллов.**

Шкала перевода рейтинга в четырёхбалльную шкалу оценок

Оценка	«2»	«3»	«4»	«5»
	неудовлетворительно	удовлетворительно	хорошо	отлично
Первичный балл	0-12	13-16	17-20	21-25

КРИТЕРИИ ОЦЕНКИ ПРЕЗЕНТАЦИЙ

Оценк	5	4	3	2
a				
	Работа полностью завершена	Почти полностью сделаны наиболее важные компоненты работы	Не все важнейшие компоненты работы выполнены	Работа сделана фрагментарно и с помощью педагога
	Работа демонстрирует глубокое понимание описываемых процессов	Работа демонстрирует понимание основных моментов, хотя некоторые детали не уточняются	Работа демонстрируе т понимание, но неполное	Работа демонстрирует минимальное понимание
Содержание	Даны интересные дискуссионные материалы. Грамотно используется научная лексика	Имеются некоторые материалы дискуссионного характера. Научная лексика используется, но иногда не корректно.	Дискуссионн ые материалы есть в наличии, но не способствуют пониманию проблемы. Научная терминология или используется мало или используется некорректно.	Минимум дискуссионны х материалов. Минимум научных терминов

	Обучающийся предлагает собственную интерпретацию или развитие темы (обобщения, приложения, аналогии)	Обучающийся большинстве случаев предлагает собственную интерпретацию или развитие темы	Обучающийс я иногда предлагает свою интерпретаци ю	Интерпретаци я ограничена или беспочвенна
	Везде, где возможно выбирается более эффективный и/или сложный процесс	Почти везде выбирается более эффективный процесс	Обучающему ся нужна помощь в выборе эффективного процесса	Обучающийся может работать только под руководством педагога
Дизайн	Дизайн логичен и очевиден	Дизайн есть	Дизайн случайный	Дизайн не ясен
Ди	Имеются постоянные элементы дизайна. Дизайн подчеркивает содержание.	Имеются постоянные элементы дизайна. Дизайн соответствует содержанию.	Нет постоянных элементов дизайна. Дизайн может и не соответствова ть содержанию.	Элементы дизайна мешают содержанию, накладываясь на него.
	Все параметры шрифта хорошо подобраны (текст хорошо читается)	Параметры шрифта подобраны. Шрифт читаем.	Параметры шрифта недостаточно хорошо подобраны, могут мешать восприятию	Параметры не подобраны. Делают текст трудночитаем ым
Графика	Хорошо подобрана, соответствует содержанию, обогащает содержание	Графика соответствует содержанию	Графика мало соответствует содержанию	Графика не соответствует содержанию

	Нет ошибок: ни	Минимальное	Есть ошибки,	Много	
CTB	грамматических, ни	количество	мешающие	ошибок,	
НО	синтаксических	ошибок	восприятию	делающих	
[OT				материал	
a M				трудным для	
Γp				восприятия	

Максимальный балл, который может получить обучающийся за презентацию, — **50 баллов**.

Шкала перевода рейтинга в четырёхбалльную шкалу оценок

Оценка	«2»	«3»	«4»	«5»
	неудовлетворительно	удовлетворительно	хорошо	отлично
Первичный балл	0-32	33-37	38-42	43-50