Документ подписан простой электронной подписью Информация о владельце: Федеральное государственное бюджетное ФИО: Железнов Лев Михайлович образовательное учреждение высшего образования Должность: ректор Дата подписания: 01.02.26 Кировский государственный медицинский университет» Уникальный программный клю Министерства здравоохранения Российской Федерации 7f036de85c233e341493b4c0e48bb3a18c939f51

УТВЕРЖДАЮ И.о. ректора Л.М. Железнов «27» июня 2018 г.

# РАБОЧАЯ ПРОГРАММА ДИСЦИПЛИНЫ «ИНОСТРАННЫЙ ЯЗЫК»

(английский язык)

Специальность 31.05.02 Педиатрия

Направленность (профиль) ОПОП - Педиатрия

Форма обучения очная

Срок освоения ОПОП 6 лет

Кафедра иностранных языков

Рабочая программа дисциплины разработана на основе:

1) ФГОС ВО по специальности 31.05.02 Педиатрия, утвержденного Министерством образования и науки РФ «17»августа 2015г., приказ № 853.

2) Учебного плана по специальности 31.05.02 Педиатрия, одобренного ученым советом ФГБОУ ВО Кировский ГМУ Минздрава России «27» июня 2018 г. протокол № 5.

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# Раздел 1. Перечень планируемых результатов обучения по дисциплине, соотнесенных с планируемыми результатами освоения ОПОП

### 1.1. Цель изучения дисциплины

**Цель** освоения учебной дисциплины «Иностранный язык» (английский язык) состоит в профессионально-ориентированном обучении иностранному языку будущих врачей, формировании основ иноязычной коммуникативной компетенции, необходимых для профессиональной межкультурной коммуникации, овладении устной и письменной формами общения на данном языке как средством информационной деятельности и дальнейшего самообразования.

## 1.2. Задачи изучения дисциплины

- сформировать навыки анализа научной литературы и официальных статистических обзоров, навык участия в проведении статистического анализа и публичного представления полученных результатов;
- способствовать формированию языковых и речевых навыков говорения с применением профессиональной терминологии;
- сформировать лексико-грамматических навыки чтения аутентичных текстов профессиональной направленности;
- сформировать лексико-грамматические навыки перевода оригинальных профессиональных текстов с английского на русский язык;
- сформировать навыки применения стандартных наиболее частотных сокращений в клинических и фармацевтических контекстах;
- способствовать развитию навыков самостоятельной работы студентов;
- познакомить со страной изучаемого языка, в первую очередь, с системой подготовки врачей и системой здравоохранения.

## 1.3. Место дисциплины в структуре ОПОП:

Дисциплина «Иностранный язык» (английский язык) относится к блоку Б 1. Дисциплины базовой части.

Основные знания, необходимые для изучения дисциплины, формируются при изучении дисциплины: Английский язык в общеобразовательных учебных заведениях (школе, колледже).

Является предшествующей для изучения дисциплин: «Анатомия», «Нормальная физиология», «Патофизиология, клиническая патофизиология», «Деловой иностранный язык», «Госпитальная терапия», «Инфекционные болезни у детей».

#### 1.4. Объекты профессиональной деятельности

Объектами профессиональной деятельности выпускников, освоивших рабочую программу дисциплины, являются:

- физические лица в возрасте от 0 до 18 лет (далее дети, пациенты);
- физические лица родители (законные представители) детей;
- население;
- совокупность средств и технологий, направленных на создание условий для охраны здоровья летей.

#### 1.5.Виды профессиональной деятельности

Изучение данной дисциплины направлено на подготовку к следующим видам профессиональной деятельности:

- научно-исследовательская.

#### 1.6. Формируемые компетенции выпускника

Процесс изучения дисциплины направлен на формирование у выпускника следующих компетенций:

№	Номер /	Перечень планируеми	ых результатов Оценочные
п/п	индекс	обучения по дис	сциплине средства

	ком- петенции	Результаты освоения ОПОП (содержание компетенции)	Знать	Уметь	Владеть	Для текущего контроля	Для промежуто чной аттестации
1	2	3	4	5	6	7	8
1.	ОПК-2	готовностью к коммуникации в устной и письменной формах на русском и иностранном языках для решения задач профессиональн ой деятельности.	31. Лексически й минимум в объеме 4000 учебных лексических единиц общего и терминологиче ского характера; основы техники перевода научного текста по специальности, основы аннотирования и реферирования научного текста.	У1. Использова ть иностранный язык для получения профессиональ но значимой информации (читать оригинальный текст со словарем с полным и точным пониманием содержания, а также без словаря с целью ознакомления с содержанием)	В1. Владеть иностранным языком в объеме, необходимом для коммуникации и возможности получения информации из зарубежных источников.	тесты; контрольные работы; темы для собеседован ия; тексты на иностранном языке для перевода на русский язык	тестовые задания; тема для собеседовани я; текст для перевода на русский язык

Раздел 2. Объем дисциплины и виды учебной работы

Общая трудоемкость дисциплины составляет 4 зачетных единиц, 144 час.

Рега сисабала	Всего	Семестры			
Вид учебно	часов	<b>№</b> 1	№ 2		
1		2	3	4	
Контактная работа (всего)			96	72	24
		в том числе:			
Практические занятия (ПЗ	)		96	72	24
Самостоятельная работа (в	всего)		48	36	12
		в том числе:			
Подготовка к занятиям (І	<i>13)</i>		22	18	4
Подготовка к текущему к	онтролю (	ПТК)	22	18	4
Подготовка к промежуто	чному кон	тролю (ППК)	4	1	4
Вид промежуточной	зачет				+
аттестации	аттестации экзамен контактн работа (Г				
		самостоятельная работа	_		
Общая трудоемкость (чась	144	108	36		
Зачетные единицы			4	3	1

Раздел 3. Содержание дисциплины, структурированное по темам (разделам) 3.1. Содержание разделов дисциплины

<b>№</b> п/п	Код компетенции	Наименование раздела дисциплины	Содержание раздела (темы разделов)
1	2	3	4
1.	ОПК-2	Вводно-коррективный курс	Правила чтения; основные правила морфологии; основные компоненты
		курс	предложения; «О себе», «Кировский государственный медицинский университет»
2.	ОПК-2	Основы медицины: обучение чтению и переводу специальной литературы	Структура слова; части речи, степени сравнения; система времен глагола; залог; модальные глаголы; неличные формы глагола; «Системы организма человека»; «Некоторые болезни систем человека»
3.	ОПК-2	Медицинское образование: обучение основам устного профессионального общения	«Медицинское образование в России»; «Медицинское образование за рубежом (США, Великобритания)»

# 3.2. Разделы дисциплины и междисциплинарные связи с обеспечиваемыми (последующими) дисциплинами

<b>№</b> п\п	Наименование обеспечиваемых (последующих) дисциплин	-	цанной дисциплині обеспечиваемых (г		
		дисциплин			
		1	2	3	
1	Анатомия	+	+		
2	Нормальная физиология	+	+		
3	Патофизиология, клиническая патофизиология.	+	+		
4	Деловой иностранный язык	+	+	+	
5	Госпитальная терапия	+	+		
6	Инфекционные болезни у детей	+	+		

# 3.3. Разделы дисциплины и виды занятий

<b>№</b> п/п	Наименование	Наименование раздела дисциплины				Всего часов
1		2			4	5
1	Вводно-коррективный	12	6	18		
2	Основы медицины: обучение чтению и переводу специальной литературы			72	36	108
3	Медицинское образование: обучение основам устного профессионального общения			12	6	18
	Вид промежуточной	зачет				+
	аттестации:	экзамен	контактная работа (ПА)			
			самостоятельная работа			
	Итого:			96	48	144

# 3.4. Тематический план лекций - не предусмотрены учебным планом

# 3.5. Тематический план практических занятий

No	№ раздела	Тематика		Трудое	мкость
п/	дисциплины	практических занятий	Содержание практических занятий	Сем. 1	Сем. 2
1	2	3	4	5	6
1	1	О себе.	Цели, задачи дисциплины, требования к зачету. Правила чтения: понятия 4-х типов слогов, правила ударения. Ядро и второстепенные члены предложения, порядок слов в утвердительном предложении. Грамматика: глагол to be и to have в Present Simple, составление общих и специальных вопросов с этими глаголами и их отрицательная форма, спряжение личных глаголов в Present Simple и образование общих и специальных вопросов к ним Тема «О себе».	6	
2	1	Кировский государственный медицинский университет	Морфология: морфологический состав слова (корень, приставки, суффиксы) производных слов изучаемого текста Грамматика: пассив с глаголами в Present Simple, вопросы в пассиве, перевод пассива. Понятие 3-х форм личных глаголов.  Тема «Кировский ГМУ»: работа над лексическим составом текста	6	
3	2	Организм человека: скелет	Фонетика: работа над произношением лексики текста. Интонация.  Грамматика текста: множественное число существительных, артикли, конструкция thereis (аге) и вопросы с ней.  Перевод текста: особенности перевода конструкции there is (аге), перевод глагола to be в роли основного глагола.  Тема: организм человека, скелет. Работа над лексикой	4	
4	2	Организм человека: мышцы	Фонетика: работа над произношением медицинской лексики текста Грамматика: Past Simple, Future Simple в активном залоге. Перевод текста. Разговорная тема: мышечная система человека. Работа над лексикой текста	2	
5	2	Сердечно-сосудистая система: анатомия и физиология сердца	Фонетика: систематизация фонетических правил чтения слогов и предложений. Морфология: морфологический анализ лексики текста (приставки auto-, sub-, anti-), суффиксы (-ory, ful, -ive, -ation, -able, -ment, - ly). Грамматика: степени сравнения прилагательных и 3 способа их образования, модальный глагол сап и его заменители. Чтение и перевод текста: анализ изученных грамматических явлений в тексте (пассив, there is (are), степени сравнения, личные глаголы в Present Simple) Тема: анатомия и физиология сердца, работа над лексикой текста.	4	

			Видеофильм		
6	2	Сердечно-сосудистая	Закрепление навыков чтения и перевода Тема «Кровь», развитие монологической и	2	
		система: кровь	диалогической речи по теме.		
			Чтение количественных порядковых		
			числительных.		
			Грамматика: модальный глагол may и его		
			заменители.		
7	2	Респираторная	Грамматика: Present Continuous	2	
		система	Совершенствование навыков беглого чтения		
			Работа над лексикой текста		
			Развитие монологической и диалогической речи по теме.		
			Видеофильм		
8	2	Желудочно-кишечный	Совершенствование навыков беглого чтения и	2	
	_	тракт	перевода	2	
		1	Совершенствование навыков монологического		
			высказывания		
			Грамматика: пассив с глаголами в Past и Future		
			Simple, модальный глагол must и его заменители		
9	2	Нервная система	Совершенствование навыков беглого чтения,	4	
) 9	<i>L</i>	порвная система	перевода	4	
			Развитие навыков монологической речи		
			Видеофильм		
			Грамматика: Present Perfect в активном и		
			пассивном залогах.		
10	2	Мочевыделительная	Работа над лексикой текста	4	
		система	Развитие монологической и диалогической		
11	2	Болезни опорно-	речи по теме.  Синтаксис и перевод: понятие	4	
11	2	мышечной системы.	безэквивалентных атрибутивных слов и	4	
		Ревматоидный артрит	способы их перевода.		
		т сыматондный артриг	Видеофильм		
12	2	Заболевания сердечно-	Чтение текста, анализ лексико-грамматических	4	
		сосудистой системы:	явлений текста и их перевод: атрибутивные		
		сердечный приступ	словосочетания модели N+N <sup>n</sup> , синонимов,		
		(инфаркт)	пассив, модальные глаголы, причастие прошедшего времени, степени сравнения		
			прилагательных.		
			Грамматика: понятие герундия и его функция в		
			тексте.		
			Видеофильм		
13	2	Заболевания крови:	Чтение и перевод текста с анализом изученных	4	
		анемия (лейкемия)	грамматических явлений. Работа над лексикой текста		
			Развитие монологической и диалогической		
			речи по теме.		
			Грамматика: причастие.		
14	2	Заболевания	Чтение и перевод текста с анализом изученных	4	
		респираторной	грамматических явлений		
		системы: пневмония	Лексика: работа над синонимами текста и		
1.5	2	2-6	лексический минимум		
15	2	Заболевания	Чтение и перевод текста с анализом изученных грамматических явлений	6	
		респираторной	Развитие умений монологической и		
		системы: рак легкого	диалогической речи по теме.		
			Грамматика:инфинитив.		
16	2	Заболевания ЖКТ	Грамматика: анализ грамматических явлений	4	
			имеющихся в тексте.		
			Лексика: работа над лексикой и синонимами		
17	2	Зободовомия можемой	текста	_	
17	2	Заболевания нервной	Совершенствование навыков перевода текста	6	

				72	24
	<u> </u> рго:		Перевод текста на русский язык	72	24
			Собеседование по теме;		
		Зачетное занятие	Компьютерный тест;		2
		2	рамках изучаемой темы.		2
			монологической и диалогической речи в		
			Совершенствование навыков		
			материала.		
			рамках изученного грамматического		
			Грамматическое обеспечение темы в		
			рһагтасу и др.)		
		1.5	варианта английского языка (college, drug,		
		рубежом	медицинские реалии американского		
23		образование за	общеупотребительная лексика и		J
23	3	Медицинское	Лексическое обеспечение темы:		6
			рамках изучаемой темы.		
			монологической и диалогической речи в		
			Совершенствование навыков		
			рамках изученного грамматического материала.		
		образование в России	Грамматическое обеспечение темы в		
22	3	Медицинское	Лексическое обеспечение темы.		4
22		) A	и диалогической речи		4
			Совершенствование навыков монологической		
		3oonebannin	Лексико-грамматический анализ текста		
<i>4</i> 1		заболевания	адекватного перевода текста		4
21	2	Инфекционные	Совершенствование навыков беглого чтения и		4
			словосочетания (N+N <sup>n</sup> ) и т.д. Грамматика: Present Perfect Continuous		
			безэквивалентные атрибутивные		
			причастия, инфинитив, степени сравнения,		
		острая и хроническая)	пассив, модальные глаголы, герундий,		
		недостаточность,	Анализ грамматических явлений текста:		
20	2	заболевания (почечная	перевода		4
20	2	Анатомия почки и их	Совершенствование навыков беглого чтения и		4
			и диалогической речи		
			явлений текста Совершенствование навыков монологической		
			Грамматика: анализ лексико-грамматических		
		гепатит	перевода.		
19	2	Заболевания печени:	Совершенствование навыков беглого чтения и		4
			Работа над лексическим минимумом текста		
			высказывания по изучаемой теме		
			перевода Совершенствование навыков монологического		
18	2	Анатомия печени	Совершенствование навыков беглого чтения и	4	
			Видеофильм		
			минимумом текста		
			словосочетаниями (N+N <sup>n</sup> ) и лексическим		
			синонимами, атрибутивными		
			N+N <sup>n</sup> ) Лексика: работа над лексическими		
			многочленных атрибутивных словосочетаний		
		_	контекстуальных вариантов перевода, перевод		
		системы: инсульт	(трудности перевода: нахождение		

# 3.6. Самостоятельная работа обучающегося

$\mathcal{N}_{\underline{\mathbf{o}}}$	№	Наименование раздела	Вилы СРС	Всего
$\Pi/\Pi$	семестра	дисциплины	Виды СТС	часов

1	2	3	4	5	
1	1	Вводно-коррективный курс	Подготовка к занятию Подготовка к текущему контролю	6	
2		Основы медицины: обучение чтению и переводу специальной литературы	Подготовка к занятию Подготовка к текущему контролю	30	
Итого	часов в се	местре:		36	
3	2	Основы медицины: обучение чтению и переводу специальной литературы	Подготовка к занятию Подготовка к текущему контролю	6	
4		Медицинское образование: обучение основам устного профессионального общения	Подготовка к занятию Подготовка к промежуточному контролю	6	
Итого часов в семестре:					
Всего	часов на с	амостоятельную работу:		48	

#### 3.7. Лабораторный практикум – не предусмотрен учебным планом

# **3.8. Примерная тематика курсовых проектов (работ), контрольных работ** – не предусмотрены учебным планом

# Раздел 4. Перечень учебно-методического и материально-технического обеспечения дисциплины

# 4.1. Перечень учебно-методического обеспечения для самостоятельной работы обучающихся по дисциплине

- 1. Методические указания для студентов к практическим занятиям по дисциплине «Иностранный язык (английский язык)» / сост. Т.Б. Агалакова, И.Л. Дмитриевых; 2017 г.
- 2. Методические указания для студентов по внеаудиторной самостоятельной работе по дисциплине «Иностранный язык (английский язык)» / сост. Т.Б. Агалакова, И.Л. Дмитриевых; 2017 г.

# 4.2. Перечень основной и дополнительной учебной литературы, необходимой для освоения дисциплины

4.2.1. Основная литература

№ п/п	Наименование	Автор(ы)	Год, место издания	Кол-во экземпляров в библиотеке	Наличие в ЭБС
1	2	3	4	5	6
1	Английский язык для медицинских вузов: учебник	,	2015, M.: «ГЭОТАР- МЕДИА»	50	ЭБС Кировского ГМУ
2	Medical English for firstyear students	В.А. Головин.	2011, Киров: Изд-во Кировской ГМА	1	ЭБС Кировского ГМУ

4.2.2. Дополнительная литература

№ п/п	Наименование	Автор(ы)	Год, место издания	Кол-во экземпляров в библиотеке	Наличие в ЭБС
1	2	3	4	5	6

1	Interesting Fact sand Figures (Интересные факты и цифры): учебное пособие	В.А. Головин	2012, Киров: Изд-во Кировской ГМА	1	ЭБС Кировского ГМУ
2	Grammar Practice (практическое пособие по грамматике): учебное пособие	В.А. Авдеева, И.Л.	2013,Киров: Изд-во Кировской ГМА	40	ЭБС Кировского ГМУ
3	Medical English for first-year students	В.А. Головин.	2011, Киров, Изд-во Кировской ГМА	1	ЭБС Кировского ГМУ
4	Англо-русский медицинский словарь [Электронный ресурс]	И.Ю. Марковина	2013, Москва, ГЭОТАР- Медиа		ЭБС «Консультант студента»

# 4.3. Перечень ресурсов информационно-телекоммуникационной сети «Интернет», необходимых для освоения дисциплины

- 1. http://www.merriam-webster.com/
- 2. www.lingvo.ru электронный словарь Abby Lingvo
- 3. www.multitran.ru электронный словарь Multitran
- 4. <a href="http://www.bibliomania.com/1/7/299/2034/frameset.html">http://www.bibliomania.com/1/7/299/2034/frameset.html</a>
- 5. Encyclopedia Britannica Online
- **6.** Wikipedia, the free encyclopedia

# 4.4. Перечень информационных технологий, используемых для осуществления образовательного процесса по дисциплине, программного обеспечения и информационносправочных систем

Для осуществления образовательного процесса используются:

### Видеофильмы:

- 1. Семейный альбом» (на английском языке)
- 2. «Юго-восточный медицинский центр штата Алабама 1993» (на английском языке)
- 3. «Юго-восточный медицинский центр штата Алабама 2000» (на английском языке)
- 4. «Алабама» (на английском языке)
- 5. «Эмбриология» (на английском языке)
- 6. «Гепатит С» (на английском языке)
- 7. «Ревматоидный артрит» (на английском языке)
- 8. «Что такое заболевание коронарных артерий» (на английском языке)
- 9. «Как бросить курить» (на английском языке)
- 10. «Как управлять стрессами» (на английском языке)
- 11. «Как контролировать гипертензию» (на английском языке)
- 12. «Диабет» (на английском языке)
- 13. «Болезнь Альцгеймера» (на английском языке)
- 14. «Острый и хронический синусит» (на английском языке)
- 15. «Инсульт и преходящие ишемические атаки» (на английском языке)
- 16. «Алкоголь и семья» (на английском языке)
- 17. «Физическое обследование новорожденных» (на английском языке)
- 18. «Инфаркт миокарда» (на английском языке)
- 19. «Анатомия и физиология уха, горла и носа» (на английском языке)
- 20. «Обзор актуальных проблем терапии» (на английском языке)
- 21. Желчекаменная болезнь (на английском языке)
- 22. «Сердечно-легочная реанимация» (на английском языке)

- 23. Серия фильмов по урологии и андрологии (на английском языке)
- 24. Семь трехчасовых видеофильмов по произведениям Агаты Кристи (на английском языке)

# Видеофильмы на английском и русском языках, созданные кафедрой иностранных языков совместно с советом по международным связям МСЧ № 52 г. Кирово-Чепецка

- 1. «Вятка» (на английском языке)
- 2. Кардиохирургический центр профессора Вязникова (на английском языке)
- 3. «Сотрудничество продолжается: визит профессора Мора и делегации КГМИ в Минздрав РФ и Государственную Думу РФ, переговоры и посещение клинических баз в г. Кирове», видеофильм 9 минут».
- 4. «Сотрудничество продолжается: визит профессора Мора и делегации КГМИ в Минздрав РФ и Государственную Думу РФ, переговоры и посещение клинических баз в г. Кирове», видеоклип продолжительностью 3,5 минуты
- 5. «Учимся, чтобы помогать нуждающимся: о факультете социальной работы Кировского государственного медицинского института» (видеофильм продолжительностью 16 минут)
- 6. «Известный эндохирург в Кирове» (1,5 минуты)
- 7. «Визит профессора Шлитта в КГМА»
- 8. «Что такое андролог?»
- 9. «Познакомьтесь с семьей Хандли»
- 10. «Ганноверская высшая медицинская школа»
- 11. «Юго-восточный медицинский центр штата Алабама»
- 12. «Тройский университет штата Алабама»
- 13. «Уолис-колледж»
- 14. «Клиника доктора Флауэрса»
- 15. «Медицинские клиники Бирмингемского университета»
- 16. «Эндохирургические операции в Ганноверской медицинской школе»
- 17. «Кировский НИИ гематологии и переливания крови» (на английском языке)
- 18. «Кирово-Чепецкий центр малоинвазивной хирургии» (на английском языке)
- 19. «Желчекаменная болезнь» (на английском и русском языках)
- 20. «Мост дружбы «Вятка-Дотан» на английском языке»

### В учебном процессе используется лицензионное программное обеспечение:

- 1. Договор MicrosoftOffice (версия 2003) №0340100010912000035\_45106 от 12.09.2012г. (срок действия договора бессрочный),
- 2. Договор MicrosoftOffice (версия 2007) №0340100010913000043\_45106 от 02.09.2013г. (срок действия договора бессрочный),
- 3. Договор MicrosoftOffice (версия 2010) № 340100010914000246\_45106 от 23.12.2014г. (срок действия договора бессрочный).
- 4. Договор Windows (версия 2003) №0340100010912000035\_45106 от 12.09.2012г. (срок действия договора бессрочный)
- 5. Договор Windows (версия 2007) №0340100010913000043\_45106 от 02.09.2013г. (срок действия договора бессрочный),
- 6. Договор Windows (версия 2010) № 340100010914000246\_45106 от 23.12.2014г. (срок действия договора бессрочный),
- 7. Договор Антивирус KasperskyEndpointSecurity для бизнеса Стандартный RussianEdition. 100-149 Node 1 yearEducationalRenewalLicense от 12.07.2018, лицензии 685В-МУ\05\2018 (срок действия 1 год),
  - 8. Медицинская информационная система (КМИС) (срок действия договора бессрочный),
- 9. Автоматизированная система тестирования Indigo Договор № Д53783/2 от 02.11.2015 (срок действия бессрочный, 1 год технической поддержки),
- 10. ПО FoxitPhantomPDF Стандарт, 1 лицензия, бессрочная, дата приобретения 05.05.2016г.

Обучающиеся обеспечены доступом (удаленным доступом) к современным профессиональным базам данных и информационно-справочным системам:

- 1) Научная электронная библиотека e-LIBRARY. Режим доступа: http://www.e-library.ru/.
- 2) Справочно-поисковая система Консультант Плюс ООО «КонсультантКиров».
- 3) «Электронно-библиотечная система Кировского ГМУ». Режим доступа <a href="http://elib.kirovgma.ru/">http://elib.kirovgma.ru/</a>.
- 4) ЭБС «Консультант студента» ООО «ИПУЗ». Режим доступа: http://www.studmedlib.ru.
- 5) ЭБС «Университетская библиотека онлайн» ООО «НексМедиа». Режим доступа: http://www.biblioclub.ru.
- 6) ЭБС «Консультант врача» ООО ГК «ГЭОТАР». Режим доступа: http://www.rosmedlib.ru/
- 7) ЭБС «Айбукс» ООО «Айбукс». Режим доступа: http://ibooks.ru.

# 4.5. Описание материально-технической базы, необходимой для осуществления образовательного процесса по дисциплине

В процессе преподавания дисциплины используются следующие специальные помещения:

- учебные аудитории для проведения занятий семинарского типа каб. №1-201, 1-203, 1-204, 1-207, 1-208
- учебные аудитории для проведения групповых и индивидуальных консультаций каб. №1-201, 1-202, 1-203, 1-204, 1-207, 1-208, 1-209
- учебные аудитории для проведения текущего контроля и промежуточной аттестации каб. №1-201, 1-202, 1-203, 1-204, 1-207, 1-208, 1-209
- помещения для самостоятельной работы читальный зал библиотеки г. Киров, ул. К.Маркса, 137 (1 корпус).
- помещения для хранения и профилактического обслуживания учебного оборудования каб. № 1-205, 1-208.

Специальные помещения укомплектованы специализированной мебелью и техническими средствами обучения, служащими для представления учебной информации большой аудитории.

Для проведения занятий лекционного типа предлагаются наборы демонстрационного оборудования и учебно-наглядных пособий, обеспечивающие тематические иллюстрации, соответствующие рабочей программе дисциплины (модуля).

Помещения для самостоятельной работы обучающихся оснащены компьютерной техникой с возможностью подключения к сети "Интернет" и обеспечены доступом в электронную информационно-образовательную среду организации.

#### Раздел 5. Методические рекомендации по организации изучения дисциплины

Процесс изучения дисциплины предусматривает: контактную (работа на практических занятиях) и самостоятельную работу (подготовка к практическим занятиям, подготовка к текущему контролю, подготовка к промежуточному контролю). Основное учебное время выделяется на совершенствование грамматических и лексических навыков и развитие умений всех видов иноязычной речевой деятельности для успешного осуществления иноязычной межкультурной коммуникации.

В качестве основных форм организации учебного процесса по дисциплине выступают практические занятия (с использованием интерактивных технологий обучения), а также самостоятельная работа обучающихся.

При изучении учебной дисциплины обучающимся необходимо освоить практические умения по использованию иностранного языка для решения задач профессиональной деятельности.

При проведении учебных занятий кафедра обеспечивает развитие у обучающихся навыков командной работы, межличностной коммуникации, принятия решений, лидерских качеств (путем проведения групповых дискуссий, ролевых игр, тренингов, анализа ситуаций и имитационных моделей с учетом региональных особенностей профессиональной деятельности выпускников и потребностей работодателей).

### Практические занятия:

Практические занятия по дисциплине проводятся с целью приобретения практических навыков в области иностранного языка для успешного владения им в профессионально обусловленных ситуациях.

Практические занятия проводятся в виде собеседований, обсуждений, дискуссий в микрогруппах, отработки практических навыков, решения тестовых заданий.

Выполнение практической работы производится как в устной, так и в письменной форме, в виде презентаций и докладов.

Практическое занятие способствует более глубокому пониманию теоретического материала учебной дисциплины, а также развитию, формированию и становлению различных уровней составляющих профессиональной компетентности обучающихся.

При изучении дисциплины используются следующие формы практических занятий:

- традиционное занятие по темам: Организм человека: скелет; Организм человека: мышцы; Болезни опорно-мышечной системы. Ревматоидный артрит; Сердечно-сосудистая система: анатомия и физиология сердца; Сердечно-сосудистая система: кровь; Заболевания крови: анемия (лейкемия);
- дискуссия по темам: Медицинское образование в России; Медицинское образование за рубежом;
- учебно-ролевая игра по темам: О себе; Кировский государственный медицинский университет.

# Самостоятельная работа:

Самостоятельная работа студентов подразумевает подготовку по всем разделам дисциплины «Иностранный язык» (английский язык) и включает подготовку к занятиям, подготовку к текущему контролю, подготовку к промежуточному контролю.

Работа с учебной литературой рассматривается как вид учебной работы по дисциплине «Иностранный язык» и выполняется в пределах часов, отводимых на её изучение (в разделе СРС). Каждый обучающийся обеспечен доступом к библиотечным фондам университета и кафедры. Во время изучения дисциплины обучающиеся (под контролем преподавателя) самостоятельно проводят переводы профессионально-направленных иноязычных текстов, готовят устные выступления на учебных конференциях. Работа обучающегося в группе формирует чувство коллективизма и коммуникабельность.

Исходный уровень знаний обучающихся определяется тестированием, собеседованием. Для осуществления текущего контроля освоения дисциплины используются тесты, контрольные работы, темы для собеседования, тексты на иностранном языке для перевода на русский язык

По окончании изучения дисциплины проводится промежуточная аттестация с использованием следующих оценочных средств: компьютерные тестовые задания, тема для собеседования (монологическое высказывание), текст для перевода на русский язык

## Раздел 6. Методические указания для обучающихся по освоению дисциплины (приложение А)

Изучение дисциплины следует начинать с проработки данной рабочей программы, методических указаний, прописанных в программе, особое внимание уделяется целям, задачам, структуре и содержанию дисциплины.

Успешное изучение дисциплины требует от обучающихся активной работы на практических занятиях, выполнения всех учебных заданий преподавателя, ознакомления с базовыми учебниками, основной и дополнительной литературой.

Основным методом обучения является самостоятельная работа студентов с учебнометодическими материалами, научной литературой, Интернет-ресурсами.

Правильная организация самостоятельных учебных занятий, их систематичность, целесообразное планирование рабочего времени позволяют обучающимся развивать умения и навыки в усвоении и систематизации приобретаемых знаний, обеспечивать высокий уровень успеваемости в период обучения, получить навыки повышения профессионального уровня.

Основной формой промежуточного контроля и оценки результатов обучения по дисциплине является зачет. На зачете обучающиеся должны продемонстрировать практические навыки, полученные на практических занятиях.

Постоянная активность на занятиях, готовность ставить и обсуждать актуальные проблемы дисциплины - залог успешной работы и положительной оценки.

Подробные методические указания к практическим занятиям и внеаудиторной самостоятельной работе по каждой теме дисциплины представлены в приложении А.

# Раздел 7. Оценочные средства для проведения текущего контроля и промежуточной аттестации обучающихся по дисциплине (модулю) (приложение Б)

Оценочные средства – комплект методических материалов, нормирующих процедуры оценивания результатов обучения, т.е. установления соответствия учебных достижений запланированным результатам обучения и требованиям образовательной программы, рабочей программы дисциплины.

ОС как система оценивания состоит из следующих частей:

- 1. Перечня компетенций с указанием этапов их формирования в процессе освоения образовательной программы.
- 2. Показателей и критерий оценивания компетенций на различных этапах их формирования, описание шкал оценивания.
  - 3. Типовых контрольных заданий и иных материалов.
- 4. Методических материалов, определяющих процедуры оценивания знаний, умений, навыков и (или) опыта профессиональной деятельности, характеризующих этапы формирования компетенций.

Оценочные средства для проведения текущего контроля и промежуточной аттестации по дисциплине представлены в приложении Б.

Федеральное государственное бюджетное образовательное учреждение высшего образования «Кировский государственный медицинский университет» Министерства здравоохранения Российской Федерации

Кафедра иностранных языков

# Приложение А к рабочей программе дисциплины

# Методические указания для обучающихся по освоению дисциплины

# «ИНОСТРАННЫЙ ЯЗЫК»

(английский язык)

Специальность 31.05.02 Педиатрия Направленность (профиль) ОПОП - Педиатрия

Раздел 1. Вводно-коррективный курс

**Тема 1.1:** О себе

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topic.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, rules of reading. **Practical skills and knowledge after the lesson:** the students should ask and answer questions and make up a short story or a dialogue on the above topic.

Self-improvement work: Conversational topic «About myself». Use the most appropriate tense forms and make up your own dialogues on the analogy.

What	your name (to	be)? My (firs	t, middle, last)	name (to be)	W	When and when	re you (to	bear,
bore, born)		? I (to bear	, bore, born) _		in the city o	f Kirov on the	1st of August	1990.
Where	_you (to live) _	?I	(to live)	in	the city of K	irov. What	your home a	ddress
(to be)? My	home address	(to be)	_ apartment 5,	building of fl	ats 25, Karl	Marx Street. V	Vhat your	phone
number? M	y phone numb	er (to be)	What	_ your mobile	['moubail]	phone numbe	r? My mobile	phone
number (to	be) W	hat you	ir parents (to b	e)? What	_ your paren	ts (to do)	? What	your
parents' occ	cupation? My f	ather (to be)_	a doctor (	an engineer, a	businessman	n, a teacher, a	manager, a law	yer, a
worker, a d	river). What	your m	nother (to be)?					

**Home work**: 1. P. 19, ex. 13-15; p. 24, ex. 13.

2. Make up a story and/or a dialogue according to the following plan: Name, surname, DOB, place of birth, home address, parents, high school, Unified State exams, Subjects, tests, exams, daily schedule.

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

**Optional literature:** Grammar Practice (практическое пособие по грамматике): учебное пособие. Т.Б. Агалакова, В.А. Авдеева, И.Л. Дмитриевых, Е.Н. Шубина. Киров: Изд-во Кировской ГМА, 2013.

Раздел 1. Вводно-коррективный курс

Тема 1.2: О себе

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topic.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, rules of reading. **Practical skills and knowledge after the lesson:** the students should ask and answer questions and make up a short story or a dialogue on the above topic.

- **1. Exercises:** p.37. ex.7; p.40, ex.9-13; p.43, ex.17; p.55, ex.1, 2.
- 2. Use the most appropriate tense forms and make up your own dialogues on the analogy.

What school you (to gra	duate) from	n? I (to graduate)	fro	m school 37 (school
specializing in Biology and Ch	emistry (natural Science	es). How you (t	o finish)	school? I (to
complete)school	l with honors ['onez] (	with good and excelle	nt marks). Why _	you (to decide)
to enter Kirov State	Medical Academy. I (to	make up)	my mind	to enter the Internal
Medicine Department of Kirov S	State Medical Academy	because I (to want)	to be a doctor	(because I (to want)
to treat and cure patie	ents, because Kirov Sta	te Medical Academy	is one of the best	medical schools of
Russia). What Unified State Exa	ıms you (to take) _	? I (to tal	ke)	Unified State Exams
in three subjects (in Biology, Ch	emistry and Russian). F	Iow many points	you (to get)	for the exams?
I (to get) 211 points.				

**Home work**: Make up a dialogue according to the following plan: Name, surname, DOB, place of birth, home address, parents, high school, Unified State exams.

#### **Basic literature**:

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

**Optional literature:** Grammar Practice (практическое пособие по грамматике): учебное пособие. Т.Б. Агалакова, В.А. Авдеева, И.Л. Дмитриевых, Е.Н. Шубина. Киров: Изд-во Кировской ГМА, 2013.

Раздел 1. Вводно-коррективный курс

**Тема 1.3:** О себе

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topic.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, rules of reading.

<b>Practical skills and knowledge after the lesson</b> : the students should ask and answer questions and make up a short story or a dialogue on the above topic.
<ol> <li>Exercises: p.37. ex.7; p.40, ex.9-13; p.43, ex.17; p.55, ex.1, 2.</li> <li>Self-improvement work: Conversational topic «About myself».</li> <li>Use the most appropriate tense forms and make up your own dialogues on the analogy.</li> </ol>
What subjects (what discipline) you (to study) ? We (to study) English, Latin, Histology, History of Russia, History of Medicine, General Chemistry, Biochemistry, Normal Anatomy, Pathological Anatomy, Physics, Mathematics, Data Processing, Biology, Normal Physiology, Pathological Physiology, Microbiology, Pharmacology, and General Hygiene. What subjects you (to take) tests in? We (to take) exams in? We (to take) exams in What subjects you (to have) lectures on? We (to have) lectures on How many and what examination sessions you (to have) ? We (to have) two examination sessions in winter and in summer (in January and in June). How many credit tests and exams you (to take) ? We (to take) over 10 credit tests and from 1 to 5 exams each examination session.  When you usually (to get up) ? I usually (to get up) at 6 a.m. (at 6 o'clock in the morning). How many lessons you usually (to have) ? We usually (to have) 5 or 6 lessons every day. When your lessons (to begin) ? My lessons usually (to begin) at 8.30 (half past 8). When your lessons (to be) over? My lessons (to be) over at 4 or 5 p.m.
<b>Home work</b> : 2. Make up a story and/or a dialogue according to the following plan: Name, surname, DOB, place of birth, home address, parents, high school, Unified State exams, Subjects, tests, exams, daily schedule.
Basic literature: Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская М.: «ГЭОТАР-МЕДИА», 2015. Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.
<b>Optional literature:</b> Grammar Practice (практическое пособие по грамматике): учебное пособие. Т.Б. Агалакова, В.А. Авдеева, И.Л. Дмитриевых, Е.Н. Шубина. Киров: Изд-во Кировской ГМА, 2013.
Раздел 1. Вводно-коррективный курс  Тема 1.4: Кировский государственный медицинский университет  Aim of the lesson: development of speaking reading retelling translation and comprehension skills

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topic.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, rules of reading. **Practical skills and knowledge after the lesson:** the students should ask and answer questions and make up a short story or a dialogue on the above topic.

	1		
Self-improvement work: Conversation	nal topic «About Myself: F	Kirov State	Medical Academy».
Use the most appropriate tense form	ms. Find sentences with t	he verbs ir	Indefinite Passive and
translate them into Russian. Make up	your own dialogues on the	e analogy.	
When your medical school (to found,	to establish, to organize)	? The	medical school (to found, to
establish, to organize)	<b>on</b> the 2 <sup>nd</sup> <b>of</b> April 1987.	Who(m)	_ the academy (to found, to
establish, to organize)	by. It (to found, to establi	ish, to organi	ze)
by Professor Zhuravlev, the famous Russia	an surgeon. How many studen	its (to study)	at Kirov
State Medical University. Over 4,500 stud	dents (to study)	at my	medical school. How many
professors and instructors (to work)	at (for) the a	cademy. Ove	er 300 professors, associate
	18		

professors, assistant professors and clinical ins	structors (to work)	at (for) the medical scho	ool. How many
faculties the medical school (to consist of			
include, to have)7	faculties. What	the main faculties (to be)? The	main faculties
(to be) the Internal Medicine Faculty, t			
Food Expertise Faculty, the Nursing Faculty, the	he Social Work Faculty	y, and the Professional Postgrad	uate Education
Faculty. What the major facilities of the m	nedical school (to be)?	The medical academy (to consist	st of, to include,
to have) three ed	ducational buildings, a	big clinic, over 30 clinical dep	artments in the
best teaching hospitals and medical centers of	Kirov, a big library, a	lot of laboratories, three museu	ıms, and a data
processing center. What the main clinica	l specializations? The	most important clinical disciplii	nes (to include)
Psychiatry, Neurology, Neurosu	rgery, Ophthalmolog	y, Otorhinolaryngology [ai],	Stomatology,
Pulmonology, Cardiology, Gastroenterology,	, Hepatology, Endoci	rinology, Urology, Andrology	, Gynecology,
Oncology, TB, Traumatology, Pediatrics, Pe	ediatric Surgery, Obs	tetrics, General Surgery, Surg	gical Diseases,
Rheumatology, Hematology, Transfusion M	ledicine, Epidrmiolog	y, Infectious Diseases, Pedia	tric Infectious
Diseases. Whothe head of the acad	lemy (to be)? The	academy (to lead, to guide,	to supervise)
by Profess	sor Igor V. Sheshuno	v, the famous Russian manag	ger of medical
education. Who the dean of the Internal 1	Medicine Faculty? The	e dean of the Internal Medicine	Faculty (to be)
Associate Professor	th	e dean of the Pediatrics Facult	y? The dean of
the Pediatrics Faculty (to be) Associate	Professor of Surgery _	What	_ your hobbies
(to be) ? What you (to interest) _	in? My hobbies	s (to be) I (to interest) _	in
reading, dancing, singing, cooking, sports, p	op music, rock music	e, classical music, do-it-yourse	elf, sports, and
gardening.			

Home work: 1. P. 44 (practice pronunciation and learn the words).

2. Make up a story and/or a dialogue according to the following plan: foundation and founders of KSMA, students, educators, faculties, departments, teaching hospitals, medical practice.

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

**Optional literature:** Grammar Practice (практическое пособие по грамматике): учебное пособие. Т.Б. Агалакова, В.А. Авдеева, И.Л. Дмитриевых, Е.Н. Шубина. Киров: Изд-во Кировской ГМА, 2013.

# Раздел 1. Вводно-коррективный курс

Тема 1.5: Кировский государственный медицинский университет

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topic.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, rules of reading. **Practical skills and knowledge after the lesson:** the students should ask and answer questions and make up a short story or a dialogue on the above topic.

# 1. Exercises:

*I. p.74, ex.1.* 

- II. Составьте вопросы (общие и специальные) к следующим предложениям. Поставьте предложения в отрицательную форму. Переведите предложения.
- 1. The man was advised to be in the open air as much as possible. 2. The patient was asked to strip to the waist as the physician wanted to sound his heart. 3. Such subjects as physics, chemistry, anatomy are

included in the first-year curriculum. 4. High temperature is kept down with aspirin. 5. The patient was listened to most attentively. 6. No lung or heart troubles were revealed by X-ray examination.

III. Изложите следующую информацию в действительном залоге, сохранив временную форму глагола.

1. The operation was followed by a serious complication. 2. Only correct diagnoses are made by this local physician. 3. The thermometer was given to me by the nurse. 4. The lecture on biology was missed by 10 students. 5. English classes are usually attended regularly by our students.

# 2. Pair Work (striking a dialogue between a student of Kirov State Medical University and a student from India)

**Home work**: Make up a story according to the following plan: foundation and founders of KSMA, students, educators, faculties, departments, teaching hospitals, medical practice.

### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

**Optional literature:** Grammar Practice (практическое пособие по грамматике): учебное пособие. Т.Б. Агалакова, В.А. Авдеева, И.Л. Дмитриевых, Е.Н. Шубина. Киров: Изд-во Кировской ГМА, 2013.

# Раздел 1. Вводно-коррективный курс

Тема 1.6: Кировский государственный медицинский университет

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topic.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, rules of reading. **Practical skills and knowledge after the lesson:** the students should ask and answer questions and make up a short story or a dialogue on the above topic.

### Self-Improvement Work: Writing a Letter to a Pen-Friend.

**Home work**: 1. Revision on theory: pp.276-277;

2. Read and translate the text below, write out new words.

#### The Human Body

The human body consists of nine main systems: the skeleton, the muscles, the nervous system, the hormonal system, the circulatory system, the digestive system, the respiratory system, the immune system, and the reproductive system.

Each system is made up of a number of organs. An organ is a part of the body with a specific purpose. Some organs, such as the liver or the skin, have more than one function.

Organs are made from tissues. A tissue is a part of the organ made from similar cells and extracellular material.

Cells are the fundamental components of all organisms. They are composed of several different parts—the nucleus, the cytoplasm, the cell membrane, and various smaller parts—that have different functions.

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

**Optional literature:** Grammar Practice (практическое пособие по грамматике): учебное пособие. Т.Б. Агалакова, В.А. Авдеева, И.Л. Дмитриевых, Е.Н. Шубина. Киров: Изд-во Кировской ГМА, 2013.

Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы

Тема 2.1: Организм человека: скелет

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topic.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms.

**Practical skills and knowledge after the lesson**: the students should know basic vocabulary, ask and answer questions and make up a short story on the above topic.

#### 1. Test.

Translate.

- 1. Москва старше Кирова.
- 2. Английский язык не такой трудный, как немецкий.
- 3. Японский самый трудный язык для изучения.
- 4. После реабсорбции жидкость становится более концентрированной.
- 5. В.Бехтерев один из самых знаменитых российских физиологов и психологов.
- 6. Верхние конечности не такие длинные, как нижние.
- 7. Евровидение более популярное шоу, чем Дом-2, 3 и т.д.

### 2. Reading and Speaking: Conversational topic «The Skeleton»: p.44, pp. 47-50, ex. 12-19.

**Home work**: 1. P.50-51, ex. 22-24.

2. Make up a story on the topic «The Human Body. The Skeleton».

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

**Optional literature:** Grammar Practice (практическое пособие по грамматике): учебное пособие. Т.Б. Агалакова, В.А. Авдеева, И.Л. Дмитриевых, Е.Н. Шубина. Киров: Изд-во Кировской ГМА, 2013.

Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы

Тема 2.2: Организм человека: скелет

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topic.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of

innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms.

**Practical skills and knowledge after the lesson**: the students should know basic vocabulary, ask and answer questions and make up a short story on the above topic.

**Self-Improvement Work: ex.24**, p.51.

**Home work**: Make up a story on the topic «The Human Body. The Skeleton».

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕЛИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

**Optional literature:** Grammar Practice (практическое пособие по грамматике): учебное пособие. Т.Б. Агалакова, В.А. Авдеева, И.Л. Дмитриевых, Е.Н. Шубина. Киров: Изд-во Кировской ГМА, 2013.

Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы

Тема 2.3: Организм человека: мышцы

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topic.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms.

**Practical skills and knowledge after the lesson**: the students should know basic vocabulary, ask and answer questions and make up a short story on the above topic.

#### **Exercises:**

I. p.64. ex.1. 2.

II. Answer the questions. Use the verb in the Present Perfect Tense.

E x a m p l e: Are the rooms clean? (do) – Yes, Mother has done them.

- 1. Is breakfast ready? (cook)
- 2. Do you know the poem? (learn)
- 3. Does he know how tasty the pie is? (eat)
- 4. Is Mother at home? (come)
- 5. Are the papers ready? (type)
- 6. Do you know the song? (hear)
- 7. Is Ann on holiday? (go to Spain)
- 8. Are you ready with the report? (write)

III. You are writing a letter to your friend and giving news about people you both know. Use the given words to make sentences.

E x a m p l e: Andrew / go to the USA – Andrew **has gone** to the USA.

Dear Helen,

Lots of things have happened since I last wrote a letter to you.

- 1. Chris / arrive from abroad
- 2. Monica and Bill / decide to get married
- 3. Mike / give up smoking
- 4. Phil / pass his driving test
- 5. Kate / have a baby
- 6. Suzanne / start working as a nurse

- 7. Donald / find a new job
- 8. Mary / graduate from the university
- 9. Sidney / buy a new Ford
- 10. Robert / become Actor of the Year

IV. Respond to the following commands and requests. Use Present Perfect and adverbs of indefinite time.

E x a m p l e: Will you make some sandwiches, please? – But I have already made them.

- 1. Do the room, please.
- 2. Answer all the questions in the application form.
- 3. You must pay the bill.
- 4. Try to phone the project manager to get more information.
- 5. Will you reserve three seats on a day flight to Sochi, please?
- 6. Please, sent the fax to Nottingham University.
- 7. Go and tell your boss about the problem.
- 8. Bring some more milk from the kitchen, please!
- 9. Read this book by all means.
- 10. Will you wash up the dishes, please?

V. Answer the following questions in the negative using yet.

Ex a mple: Have you seen a new film at the Kolizey? – No, I haven't seen it yet, but I'm going to see it.

- 1. Have you visited the exhibition of Zurab Tsereteli's works?
- 2. Have you worked abroad?
- 3. Have you traveled abroad?
- 4. Has Alex asked Natasha to marry him?
- 5. Have you read books by S. King?
- 6. Has your mother been on a tour round the Mediterranean Sea?
- 7. Have your parents borrowed money from the bank?
- 8. Have you ridden a camel or an elephant?
- 9. Have you invited guests to your birthday party?
- 10. Have you tasted Spanish wine?

VI. Закончите предложения, используя for или since.

- 1. She has been in London ... the middle of April.
- 2. We have had no rain ... two weeks.
- 3. You haven't written to me ... four month.
- 4. We have been here ... 1998.

**Home work**: Make up a story on the topic «The Muscles». Use the plan (p.57, ex.12).

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

**Optional literature:** Grammar Practice (практическое пособие по грамматике): учебное пособие. Т.Б. Агалакова, В.А. Авдеева, И.Л. Дмитриевых, Е.Н. Шубина. Киров: Изд-во Кировской ГМА, 2013.

Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы

Тема 2.4: Сердечно-сосудистая система: анатомия и физиология сердца

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topic.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

Practical skills before the lesson: the students should know basic tense- and voice forms.

**Practical skills and knowledge after the lesson**: the students should know basic vocabulary, ask and answer questions and make up a short story on the above topic.

Reading and Speaking: pp.66-69, ex.10-17.

**Home work**: 1. P. 69, ex.20 (in writing). 2. P.69, ex.21.

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

**Optional literature:** Grammar Practice (практическое пособие по грамматике): учебное пособие. Т.Б. Агалакова, В.А. Авдеева, И.Л. Дмитриевых, Е.Н. Шубина. Киров: Изд-во Кировской ГМА, 2013.

Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы

Тема 2.5: Сердечно-сосудистая система: анатомия и физиология сердца

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topic.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, basic vocabulary on the above topic.

**Practical skills and knowledge after the lesson**: the students should know basic vocabulary, ask and answer questions and make up a short story on the above topic.

# **Self-Improvement Work:**

Ex. 17, 18, 20, 21, pp. 68-69.

#### Home work:

Use the most appropriate tense and voice forms.

The <b>heart</b> (to be) a pear shaped, <u>muscular organ</u> . It (to be)responsible for pumping <u>blood</u>
through the <u>blood vessels</u> by repeated, rhythmic contractions. The heart (to compose) of <u>cardiac</u>
muscle. It (to be)an involuntary muscle tissue
In the human body, the heart (to situate)normally to the left of the middle of the
thorax. The left lung (to be)smaller than the right lung because the heart (to occupy) more of
the left hemithorax. The heart (to enclose)by a sac known as the pericardium and (to surround)
by the lungs. It (to consist)of four chambers, the two upper atria and the two
lower ventricles.
The blood vessels (to be) part of the <u>circulatory system</u> . They (to function) to transport
blood throughout the body. The most important types, arteries and veins, (to carry) blood away from or
towards the <u>heart</u> , respectively.
All blood vessels (to have) the same basic structure. The inner lining (to be) the
endothelium. It (to surround) by subendothelial connective tissue. Around this there
(to be) a layer of vascular smooth muscle. This layer (to develop) highly in arteries.
Finally, there (to be)a further layer of connective tissue known as the adventitia. This layer (to contain)
that (to supply) the muscular layer, as well as nutrient capillaries in
the larger blood vessels.

Laid end to end, the blood vessels in an average human body will (to stretch) approximately
62,000 miles.
Basic literature:
Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская М.: «ГЭОТАР-МЕДИА», 2015.
Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.
<b>Optional literature:</b> Grammar Practice (практическое пособие по грамматике): учебное пособие. Т.Б. Агалакова, В.А. Авдеева, И.Л. Дмитриевых, Е.Н. Шубина. Киров: Изд-во Кировской ГМА, 2013.
Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы
Тема 2.6: Сердечно-сосудистая система: кровь
<b>Aim of the lesson:</b> development of speaking, reading, retelling, translation, and comprehension skills,
competence within the above topic.
<b>Educational importance of the topic:</b> Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and
subject reflection.
<b>Practical skills before the lesson:</b> the students should know basic tense- and voice forms. <b>Practical skills and knowledge after the lesson:</b> the students should know basic vocabulary, ask and answer questions and make up a short story on the above topic.
Self-Improvement Test (30 tasks).
1.
Which blood cell carries oxygen to cells throughout the body?
a. lymphocyte b. neutrophil c. erythrocyte d. platelet
2.
carry blood directly from the heart. They have thick,
muscular walls.
Circle the correct terms. The pulmonary artery / vein carries blood from the heart
to the lungs. In the lungs, the blood picks up oxygen / carbon dioxide.
4.
The left ventricle pumps blood into the pulmonary artery / aorta.
5. Blood transports
a. oxygen and carbon dioxide between the lungs and sells
b. nutrients, enzymes, and hormones to cells
c. waste products
d. air to different parts of the body
<b>6.</b> Blood red blood cells (erythrocytes), white blood cells (leukocytes) and platelets
(thrombocytes).
a. contains
b. includes
c. is composed of
d. all of the above  7 count for 5,000-7,000 per cu mm but many more when fighting a disease or
infection.
a. erythrocytes b. leukocytes c. platelets d. lymphocytes
8. The veins are than capillaries.
a. large b. larger c. the largest d. more large

<b>9.</b> The aorta is	8	artery in the human body.	
a. large	b. larger	c. the largest	d. more large
<b>10.</b> The heart _		by the heart through the c	irculatory system.
a. pump	b. pumps	c. is pumped	d. pumped
<b>11.</b> The heart _		60-80 times a minute.	
a. beating	b. beat	c. beats	d. is beated
12. System, the	e, what, circul	atory, centre, is, of?	
13. The, what,  14. The, locate	<u> </u>	<u> </u>	

Home work: 1. P. 106, ex.16 (in writing).

2. P.106, ex.18.

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

**Optional literature:** Grammar Practice (практическое пособие по грамматике): учебное пособие. Т.Б. Агалакова, В.А. Авдеева, И.Л. Дмитриевых, Е.Н. Шубина. Киров: Изд-во Кировской ГМА, 2013.

Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы

Тема 2.7: Респираторная система

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topic.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms.

**Practical skills and knowledge after the lesson**: the students should know basic vocabulary, ask and answer questions and make up a short story on the above topic.

**1. Exercises:** p.74, ex.1, 2.

**2. Reading and Speaking:** pp.75-79, ex.11-20, 24.

Home work: 1. P. 79, ex.25 (in writing).

2. P.82, ex.3.

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

**Optional literature:** Grammar Practice (практическое пособие по грамматике): учебное пособие. Т.Б. Агалакова, В.А. Авдеева, И.Л. Дмитриевых, Е.Н. Шубина. Киров: Изд-во Кировской ГМА, 2013.

Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы

Тема 2.8: Желудочно-кишечный тракт

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topic.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, basic modal verbs.

**Practical skills and knowledge after the lesson**: the students should know basic vocabulary, ask and answer questions and make up a short story on the above topic.

- **1. Exercises:** pp.55-56, ex.4, 5; p.60, ex.20, 21; p.63, ex.2.
- **2. Reading and Speaking:** pp.85-87, ex.9-17.

Home work: 1. P. 88, ex.19 (in writing).

- 2. P.88, ex.20.
- 3. Self-Improvement Test. Use the most appropriate tense and voice forms and make up your own story on the analogy.

<i>J</i>	
I. The digestive system (to extend)	_ from the mouth to the anus. The inside of the mouth
(to line) with mucus membrane. The t	
A small muscular flap (epiglottis) (to close) to	prevent food from going down the windpipe (trachea)
toward the lungs. The esophagus (to be)	
with mucus membrane. The esopha	
stomach. The stomach (to be)a large, bean-shaped	
II. The small intestine (to compose)	
duodenum (to receive) pancreatic enz	
jejunum and the ileum (to be) responsible for	
produce) digestive enzymes and hormon	
III. The liver (to be) the largest gland. The liver (	
body's cholesterol. About 80% of this cholesterol (to use)	to make bile. The liver also (to secrete)
bile. The bile (to store) in t	
.Between meals bile salt (to concentrate)	in the gallbladder. Bile (to have)
two important functions. Bile (to assist)	
Bile (to be) responsible for the elimination of certain	waste products from the body.
IV. The large intestine (to secrete) mucus.	Many bacteria (to inhabit) the large
intestine. Some important substances such as vitamin K (to n	nake) in the large intestine.
V. The digestive tract (to study) by 0	Gross Anatomy, Pathological Anatomy, Physiology and
Pathophysiology. Gastroenterology (to study)	diagnosis and treatment for GI diseases. Junior
medical students (to study) Anatomy, Patho	ological Anatomy, Physiology and Pathophysiology of
the digestive tract. GI diseases (to study)	

#### **Basic literature**:

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

**Optional literature:** Grammar Practice (практическое пособие по грамматике): учебное пособие. Т.Б. Агалакова, В.А. Авдеева, И.Л. Дмитриевых, Е.Н. Шубина. Киров: Изд-во Кировской ГМА, 2013.

Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы

Тема 2.9: Нервная система

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topic.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, basic modal verbs and their equivalents.

**Practical skills and knowledge after the lesson**: the students should know basic vocabulary, ask and answer questions and make up a short story on the above topic.

- **1. Exercises:** pp.92, ex.1-3; p.189, ex.1.
- 2. Reading and Speaking: Conversational topic « Organization of the Nervous System»:
- 2.1. Read the text and do comprehension check exercises.

### THE ORGANIZATION OF THE NERVOUS SYSTEM

The nervous system is divided into two major areas, the central nervous system (CNS) and the peripheral nervous system (PNS).

#### The CNS and the PNS

The central nervous system (CNS) contains the brain and the spinal cord. The brain and spinal cord are the control centers of the body. The brain is in charge when you make decisions like where to go on vacation or what to eat for dinner. The spinal cord is in charge of most reflex decisions. Recall that a reflex is an automatic movement. For example, if your hand touches a hot stove, you automatically pull away from it.

The peripheral (pə'rɪfərəl) nervous system (PNS) contains the nerves that carry messages to and from the CNS. The PNS also contains sensory receptors. Sensory receptors are cells or parts of cells that feel things such as pain, heat, and pressure. For example, your fingers contain many sensory receptors. The PNS also contains sensory organs such as the ears, eyes, and nose. Your sensory receptors and sensory organs gather information and then send it along nerves to your brain and spinal cord.

#### COMPREHENSION CHECK

Circle the correct word(s) to complete each sentence. Take turns reading the correct sentences aloud with a partner.

- 1. The central nervous system is comprised of the brain and nerves / spinal cord.
- 2. The part of the nervous system that makes decisions is the CNS / PNS.
- 3. Nerves / Sensory receptors carry messages to the CNS.
- A sensory receptor / sensory organ is comprised of a single cell or part of a cell.
- 5. Nerves are part of the CNS / PNS.

# The CNS and the PNS: A Story

The central nervous system (CNS) and the peripheral nervous system (PNS) have different jobs to do. The following story will show these differences.

One day, a man named Joe was cooking when his hand accidentally touched the stove. "Ouch!" he yelled. The sensory receptors (ends of the nerves) in Joe's finger felt pain and heat. These sensory receptors sent a message along a nerve to Joe's spinal cord. The spinal cord interpreted the message to mean: "Joe's hand felt pain and heat." The spinal cord then made a decision for Joe to move his hand away from the stove. The spinal cord sent that message along a nerve to the muscles in Joe's hand and arm, making those muscles contract. Joe had already moved his hand before realizing he was getting burned. This is an example of a spinal cord decision. The experience made Joe think about what had happened. "That was dumb. I'll be more careful next time." The decision to be more careful was made by the brain. Usually, automatic movements come from the spinal cord, while ideas are produced by the brain.

Remember, the spinal cord is often in charge of making reflex decisions. Obviously, Joe didn't have to think about removing his hand from the stove. Let's look at the steps of Joe's reflex.

- 1. Sensory receptors in his hand felt heat and pain. (PNS)
- 2. A message was sent along nerves (PNS) to the spinal cord (CNS).
- The spinal cord (CNS) interpreted the message about the heat and pain in his hand and decided what to do.
- After the spinal cord decided what to do, it sent a message along a nerve (PNS) to his hand and arm.
- 5. Muscles in his hand and arm contracted to move away from the stove.

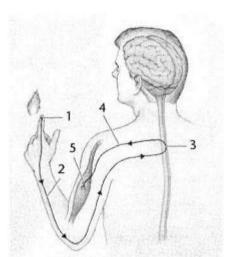


FIGURE 5.3 A reflex. Sensory receptors in the finger detect pain and heat. A message is sent along nerves to the spinal cord, which decides to send a message along a nerve to the muscle that moves the hand away from the fire.

The brain differs from the spinal cord in function. The brain is in charge of remembering information. A message about pain and heat went to Joe's brain. The message went to at least two places in his brain, the memory center (to remember not to touch the hot stove again) and the speech center (to direct him to say "Ouch!"). You will be learning more about the parts of the brain later.

#### COMPREHENSION CHECK

Circle the correct word(s) to complete each sentence. Take turns reading the correct sentences aloud with a partner.

- 1. The sensory organs / sensory receptors in Joe's hand felt pain and heat.
- A message was sent along Joe's nerve to his PNS / CNS.
- 3. The spinal cord / brain made the reflex decision for Joe's hand to move.
- 4. Joe's spinal cord / brain will remind Joe to be more careful next time.
- 5. Only the brain is in charge of reflexes / memory.

**3.2.** pp.154-155, ex.4-5.

**Home work**: read and translate the text about the CNS, write out new words.

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

**Optional literature:** Grammar Practice (практическое пособие по грамматике): учебное пособие. Т.Б. Агалакова, В.А. Авдеева, И.Л. Дмитриевых, Е.Н. Шубина. Киров: Изд-во Кировской ГМА, 2013.

Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы

Тема 2.10: Нервная система

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topic.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, basic modal verbs and their equivalents.

**Practical skills and knowledge after the lesson**: the students should know basic vocabulary, ask and answer questions and make up a short story on the above topic.

# 1. Draw a mind map on the topic «The Nervous System. The Brain» and describe it.

#### 2. Self-improvement Work.

Write questions to the following sentences; make them negative.

- 1. The brain sends orders through the nerve fibers in the spinal cord to the parts of the body.
- 2. The weight of the human brain is about two kg.
- 3. The human brain consists of 12 billion cells.
- 4. Each cell is connected to the other by nerve fibers.
- 5. The brain is located in the scull.
- 6. The brain is the centre of a wide system of communication.
- 7. A constant flow of stimuli comes into the brain through the spinal cord.
- 8. The brain controls vision, hearing, physical movements, emotions.

Home work: 1. P. 159, ex.8.

**2.** Speak about the central nervous system using the picture on p.155 and questions in ex. 7 on p.156 as a plan for your story.

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

**Optional literature:** Grammar Practice (практическое пособие по грамматике): учебное пособие. Т.Б. Агалакова, В.А. Авдеева, И.Л. Дмитриевых, Е.Н. Шубина. Киров: Изд-во Кировской ГМА, 2013.

Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы

Тема 2.11: Мочевыделительная система

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topic.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

Practical skills before the lesson: the students should know basic tense- and voice forms.

**Practical skills and knowledge after the lesson**: the students should know basic vocabulary, ask and answer questions and make up a short story on the above topic.

Self-Improvement Test: Read and translate the following text and make up your own story on the
analogy.
Humans (to produce) about 1.5 liters of urine over 24 hours, although this amount may (to vary)
according to circumstances. Increased fluid intake generally (to increase) urine
production, while increased <u>perspiration</u> and <u>respiration</u> may (to decrease) the amount of fluid
excreted through the kidneys. A reduced intake of water (to result) normally in less
urine production as well.
The <b>urinary system</b> (to be)the <u>organ system</u> that (to produce, to store, and to eliminate)
<u>urine</u> . In humans it (to include) two <u>kidneys</u> , two <u>ureters</u> ,
the <u>urinary bladder</u> , two <u>sphincter muscles</u> , and the <u>urethra</u> .
The kidney (to play)a crucial role in regulating electrolytes in the human blood (e.g. sodium, potassium,
<u>calcium</u> ). <u>pH</u> balance (to regulate) by the removal of excess hydrogen ions (H <sup>+</sup> ) from blood. In
addition, they (to remove) urea, a nitrogenous waste product from the metabolism of proteins from
amino acids. The metabolism process (to form) by
blood to the <u>liver</u> and (to detoxify) to a less harmful byproduct called urea.
Urine (to collect) in the renal pelvis (or pyelum), which (to connect) to the
ureters, which (to carry) urine to the bladder. The ureters (to be) about 200 to 250 mm (8
to 10 inches) long. Smooth muscular tissue in the walls of the ureters (to force) the urine
downward.
The <u>urinary bladder</u> (to be)a hollow muscular organ shaped like a balloon. It (to locate) in
the <u>pelvic fossa</u> . It (to hold) in place by <u>ligaments</u> attached to the pelvic bones.
The bladder (to store) urine; it (to swell) into a round shape when it (to be) full and
(to get) smaller when empty. In the absence of bladder disease, it can (to hold) up to 500 mL of
urine comfortably for 2 to 5 hours.
<b>Sphincters</b> (circular muscles) (to regulate) the flow of urine from the bladder. The bladder itself
(to have) a muscular layer that, when contracted, (to increase) pressure on the bladder
and (to create) urinary flow.

**Home work**: Draw the scheme of the urinary system. Speak about the organs of the urinary system and their functions using the scheme.

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

**Optional literature:** Grammar Practice (практическое пособие по грамматике): учебное пособие. Т.Б. Агалакова, В.А. Авдеева, И.Л. Дмитриевых, Е.Н. Шубина. Киров: Изд-во Кировской ГМА, 2013

Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы

Тема 2.12: Мочевыделительная система

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topic.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms.

**Practical skills and knowledge after the lesson**: the students should know basic vocabulary, ask and answer questions and make up a short story on the above topic.

- **1. Revision on Grammar**: p.175-176, ex.1, 2; pp.181-182, ex.1, 2.
- 2. Self-Improvement Test: Read and translate the following text and make up your own story on the analogy.

The	urinary	system	(to	be)	the	organ	system	that	(to	produce,	to	store,	and	to	eliminate)
					urine	. In hun	nans it (to	inclu	de) _			two	kidne	ys, t	wo <u>ureters</u> ,
the u	rinary blac	<u>lder</u> , two	sphir	ncter	<u>muscles</u> , a	nd the <u>l</u>	<u>ırethra</u> .								
The l	<mark>kidneys</mark> (t	o be)	c	one of	the variou	is organ	s (togethe	er with	the ]	ungs, intes	tine	and <mark>ski</mark>	n) that	(to p	participate)
			in the	e elim	ination of	the wa	stes of the	e orga	nism	. The kidn	eys (	to be)_		be	ean-shaped
orgai	ns about th	ne size of	a ba	r of s	oap. They	(to be)		near	the r	niddle of t	he sı	oine, ju	st belo	ow tl	he ribcage.
They	(to situate	e)				retrop	eritoneal	to the	orga	ns of diges	tion	within	the ab	domi	inal cavity.
Situa	ted on the	superior	surfa	ce of	each kidn	ey (to b	e)	_an <u>ad</u>	lrena	l gland.					
A kio	dney (to co	onsist)			of abo	ut 1 mi	llion filte	ring u	nits.	They (to te	erm)			nepl	nrons, each
consi	isting of a	a glomer	<u>ulus</u> ,	ball	-shaped n	etwork	of capil	<u>laries,</u>	and	a networ	k of	tubule	s. Blo	od 1	plasma (to
filter	)		_by	the g	lomerulus	, and th	ne resulta	nt "pi	rouri	ne" (to pas	ss) _			tł	nrough the
tubul	ar system	where w	ater,	and r	nutrients (	to reabs	sorb)			u	nder	the sup	ervisi	on o	f hormone
activ	ity and the	autonon	nic ne	rvous	system.										

**Home work**: Speak about the kidneys and their functions.

# **Basic literature**:

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

**Optional literature:** Grammar Practice (практическое пособие по грамматике): учебное пособие. Т.Б. Агалакова, В.А. Авдеева, И.Л. Дмитриевых, Е.Н. Шубина. Киров: Изд-во Кировской ГМА, 2013.

Тема 2.13: Болезни опорно-мышечной системы. Ревматоидный артрит

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topic; revision on Anatomy and Physiology.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, basic Anatomy and Physiology vocabulary.

**Practical skills and knowledge after the lesson**: the students should know basic vocabulary on the above topic and patterns for retelling texts about diseases.

# 1. Self-improvement work: Read and translate the following text. Pay special attention to the words and word combinations in bold type and remember them.

from http://www.bbcnews.com

Rheumatoid arthritis (RA	(to be) a chro	onic, <u>inflammatory</u>	autoimmune disorder	. RA (to cause)
the immune system to attach	ck the joints. RA (to b	e) a disablir	<b>ng</b> and painful <u>inflamm</u>	atory condition. It can (to
lead) to substantial	loss of mobility [mou	'biliti] due to pain a	nd <b>joint destruction</b> . T	The disease (to be)
also systemic. It often also	(to affect) r	nany extra-articula	r tissues throughout the	e body including the skin,
blood vessels, heart, lungs	, and <u>muscles</u> . The sy	ymptoms (to be) _	inflammation as	nd soft-tissue swelling of
many joints at the same t		-	•	
over 1 hour. Thus, the pain	of rheumatoid arthriti	s (to be) us	ually worse in the morr	ning. Rheumatoid arthritis
(to occur) most		0 0 1		• •
history (to be) an in				
When RA (to suspect)	clin	nically, <mark>immunolog</mark>	<u>cical</u> studies (to require	e), such
as rheumatoid factor. Also	o, several other <u>blood</u>	tests are usually	done to allow for othe	er causes of arthritis. The
erythrocyte sedimentation	rate (ESR), C-reacti	ive protein, full b	lood count, renal fund	ction, liver enzymes and
immunological test (to per	form) Ph	armacological tre	atment of RA can (to	<i>divide</i> )
	Joine)	armacological tre	aument of Real (10	,
into disease-modifying an	•		·	analgesics. DMARDs (to
into disease-modifying an found)	tirheumatic drugs (D	MARDs), anti-infl	ammatory agents and	analgesics. DMARDs (to
found) disease progres	tirheumatic drugs (D to produce d sion. Other therapies (	MARDs), <u>anti-inflational inflations.</u> (to be) we	ammatory agents and These drugs (to <b>delay</b> ) ight loss, occupationa	analgesics. DMARDs (to or (to halt) l therapy, physiotherapy,
found)	tirheumatic drugs (D to produce d sion. Other therapies (I tools to improve hard	MARDs), anti-influrable remissions. (to be) we have movements (e.g. s	ammatory agents and These drugs (to delay) ight loss, occupationa special tin-openers). Se	analgesics. DMARDs (to or (to halt) l therapy, physiotherapy,

# 2. Self-Improvement Test.

# I. Choose the correct verb form.

- 1. Betty wrote/has written her test yesterday.
- 2. She was/has been to London four times.
- 3. I don't know this man. I never met/have met him.
- 4. We travel/have traveled to lots of countries.
- 5. Mrs. Green worked/has worked in the office for 25 years. And she is still working.
- 6. I met/have met in Oxford Street two days before.
- 7. She rang/has rung her boss yesterday.
- 8. Sheila went/has gone to the market at 8 o'clock in the morning.
- 9. David saw/has seen this play before.
- 10. Lorna read/has read the letter already.

#### II. Tick the correct sentence.

- 1. a John has lived here since 1990.
  - b John lived here since 1990.
- 2. a Hi! I didn't see you for ages.
  - b Hi! I haven't seen you for ages.
- 3. a This is the first time I was to New York.
  - b This is the first time I've been to New York.
- 4. aWere you busy this morning?

- b Have you been busy this morning?
- 1. a Have you heard from Ben recently?
- b Did you hear from Ben recently?
- 6. a Where is mother? She has gone to the shops.
  - b Where is mother? She went to the shops.
- 7. a Have you been at home on Friday?
  - b Were you at home on Friday?
- 8. a Your mother phoned a few minutes ago.
  - b Your mother has phoned a few minutes ago.
- 9. a Victoria has been a great queen.
  - b Victoria was a great queen.

**Home work**: 1. Read and translate the text «RA», Learn basic vocabulary on the topic.

2. P. 60, ex.23 (in writing).

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

**Optional literature:** Grammar Practice (практическое пособие по грамматике): учебное пособие. Т.Б. Агалакова, В.А. Авдеева, И.Л. Дмитриевых, Е.Н. Шубина. Киров: Изд-во Кировской ГМА, 2013.

Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы

Тема 2.14: Болезни опорно-мышечной системы. Ревматоидный артрит

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topic; revision on basic English grammar and preparation for a final test.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, basic vocabulary on the above topic.

**Practical skills and knowledge after the lesson**: the students should ask and answer questions on the above topic and speak about causes, risk factors and risk groups, common symptoms, evaluation, treatment and prevention for the disease.

# 1. Write notes to the topic «RA» according to the following plan, use the text «RA». Make a report on RA.

Definition of the disease

Symptoms, signs, clinical manifestations, clinical features

Epidemiology, onset

Risk groups

Causes/risk factors

Evaluation:

- 1. History
- 2. Physical examination
- 3. Instrumental evaluation

Diagnostic criteria

Treatment:

- 1. Non-pharmacological treatment
- 2. Pharmaceutical treatment

**2. Do revision grammar exercises:** pp.175-176, ex.1, 2; pp.181-182, ex.1, 2.

**Home work**: Make up a story and/or a dialogue about RA according to the above plan.

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

**Optional literature:** Grammar Practice (практическое пособие по грамматике): учебное пособие. Т.Б. Агалакова, В.А. Авдеева, И.Л. Дмитриевых, Е.Н. Шубина. Киров: Изд-во Кировской ГМА, 2013

http://www.wikipedia.org

Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы

Тема 2.15: Заболевания сердечно-сосудистой системы: сердечный приступ (инфаркт)

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topics.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, basic Anatomy and Physiology vocabulary.

**Practical skills and knowledge after the lesson**: the students should ask and answer questions on the above topic and speak about causes, risk factors and risk groups, common symptoms, evaluation, treatment and prevention for the disease.

### Do exercises to the text «Acute Myocardial Infarction».

- I. Complete the sentences. Translate them into Russian.
- 1. Each year more than one million Americans have (сердечный приступ).
- 2. Most patients feel (сильную боль в груди) or pressure during (сердечного приступа).
- 3. Some people feel indigestion and (тошноту) during (сердечного приступа).
- 4. The heart needs a continuous (снабжение) of oxygen and sugar to be able to function.
- 5. Fatty material, called (бляшка), can narrow the blood vessels of the heart.
- 6. The first sign of coronary artery disease may be (боль в груди) called (стенокардия).
- 7. At the hospital, your doctor will do (электрокардиограмму), to help confirm whether you are having (сердечный приступ). (Анализы крови) are also done to check for heart muscle damage.
- 8. If (сердечный приступ) is confirmed, your doctor can (назначить) you (лекарства) to dissolve blood clots and open the arteries.
- 9. If the cardiac angiogram isn't successful, (шунтирование) may be recommended.
- 10. It is important to call 9-1-1 because emergency personnel can give a variety of treatments and medicines for (сердечного приступа), including oxygen, aspirin, nitroglycerin and (облегчение боли) treatments.
- II. What does the text say about:
- 1. the main cause of MI;
- 2. risk factors of MI;
- 3. risk groups;
- 4. the symptoms of the disease;
- 5. instrumental evaluation for MI;
- 6. the first aid to the patients with MI (given at home and at the hospital);
- 7. treatment for MI.

**Home work**: Make up a story and/or a dialogue on the topic «Heart and Heart Disorders», using patterns for retelling texts on diseases.

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

**Optional literature:** Grammar Practice (практическое пособие по грамматике): учебное пособие. Т.Б. Агалакова, В.А. Авдеева, И.Л. Дмитриевых, Е.Н. Шубина. Киров: Изд-во Кировской ГМА, 2013.

http://www.wikipedia.org; http://www.bbcnews.com.

Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы

Тема 2.16: Заболевания сердечно-сосудистой системы: сердечный приступ (инфаркт)

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topics.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, basic Anatomy and Physiology vocabulary.

**Practical skills and knowledge after the lesson**: the students should ask and answer questions on the above topic and speak about causes, risk factors and risk groups, common symptoms, evaluation, treatment and prevention for the disease.

### 1. Speaking. «Acute Myocardial Infarction».

### 2.1. Prove that

- 1. MI is a medical emergency.
- 2. MI is often a complication of some other cardiovascular disease.
- 3. Men develop a heart disease earlier than women.
- 4. Life style is an important risk factor of MI.
- 5. Women with a heart attack often experience different symptoms than men.
- 6. MI is the leading cause of death all over the world.
- 7. Many heart attacks can be prevented.
- 8. Instrumental evaluation is necessary to diagnose the disease.
- 9. Management of MI includes both pharmaceutical and non-pharmaceutical treatment.
- 2. Watch the video «Understanding Coronary Heart Disease» and do the test on it.

# 3. Do the clinical test on the topic «Acute Myocardial Infarction» (20 tasks).

**Home work**: Make up a story about the patient with a heart disease using the information from the video.

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

Optional literature: <a href="http://www.wikipedia.org">http://www.bbcnews.com</a>.

Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы

Тема 2.17: Заболевания крови: анемия (лейкемия)

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topics.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, basic Anatomy and Physiology vocabulary.

**Practical skills and knowledge after the lesson**: the students should ask and answer questions on the above topic and speak about causes, risk factors and risk groups, common symptoms, evaluation, treatment and prevention for the disease.

1.	. Make a story	/a	dialogue on	blood	according	to	the	plan	below:

Definition.

Functions.

Structure.

Types of blood corpuscles and their main functions.

The most common diseases of blood.

#### 2. Read and translate the following text.

Anemia (to be) due to a deficiency of red blood cells and/or hemoglobin. Anemia (to result)
in a reduced ability of blood to transfer <u>oxygen</u> to the <u>tissues</u> . It (to cause) <u>hypoxia</u> .
Anemia (to be) the most common disorder of the blood. There (to be) several kinds of anemia. They
(to produce) by a variety of underlying causes. Anemia can (to classify) in a
variety of ways, based on the morphology of RBCs, underlying etiologic mechanisms, and clinical feautures.
Anemia (to go) undetected in many people, and symptoms can (to be) vague. Most commonly, people
with anemia (to report0 a feeling of weakness or fatigue. People with more severe anemia sometimes
(to report) <u>shortness of breath</u> .
Pallor (pale skin) (to be) only notable in cases of severe anemia, and (to be) therefore not a reliable
sign.
The only way to definitively diagnose most cases of anemia (to be) with a <u>blood test</u> . Generally, clinicians (to
order) a full blood count. Flow cytometry (to be) an important tool in distinguishing between
the causes of anemia. A visual examination of a <u>blood smear</u> can also (to be) helpful in some cases.
The lack of iron associated with anemia can (to cause) many complications, including <u>hypoxemia</u> ,
brittle or rigid fingernails, cold intolerance, impaired immune function, and possible behavioral disturbances in
children.
Anemia (to affect) 20% of all females of childbearing age in the United States. Because of the
subtlety of the symptoms, women (to be) often unaware that they (to have) this disorder.
Possible problems for the fetus (to include) increased risk of growth retardation, <u>prematurity</u> , and
infection.
Consumption of food rich in iron (to be) essential to prevention of iron deficiency anemia.
2. Iron-rich foods include red meat; green, leafy vegetables; dried beans; dried apricots,
raisins, and other dried fruits, and whole grains. In extreme cases of anemia, researchers (to
recommend) consumption of beef liver, lean meat, lamb or chicken.
There (to be) many different treatments for anemia, including increasing dietary intake of readily available
iron and iron supplementation; the treatment (to determine) by the type of anemia that (to
diagnose). In severe cases of anemia, a blood transfusion may (to be) necessary.

**Home work**: Read and translate the text and make notes about the most common causes, risk factors and risk groups, symptoms, evaluation and treatment for the disease.

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

Optional literature: <a href="http://www.wikipedia.org">http://www.bbcnews.com</a>.

Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы

Тема 2.18: Заболевания крови: анемия (лейкемия)

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topics.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, basic Anatomy and Physiology vocabulary.

**Practical skills and knowledge after the lesson**: the students should ask and answer questions on the above topic and speak about causes, risk factors and risk groups, common symptoms, evaluation, treatment and prevention for the disease.

#### **Self-Improvement Test.**

I. Use the right prepositions if necessary.

I graduated one of the best high schools Kirov. I entered Kirov State Medical Academy
July. The academy is famous its education and science. It consists 8 faculties. It also includes 30 clinical
departments and a big hospital. The academy was organized 2 <sup>nd</sup> April 1987 Professor Zhuravlev,
the famous Russian surgeon. I study the Internal Medicine Faculty. I have a very busy life. I usually get up
5 a.m. I do morning exercises 15 minutes breakfast I have a cup tea and a sandwich. I leave home
the academy a quarter 7 a.m. It takes me half an hour to get the academy bus. If the weather is fine
I usually go foot. We have classes 8.30 a.m. 5.00 p.m. I'm also engaged student research work and
take partstudent conferences. I usually sleep6 hours. I go bed11 p.m Sundays I go the
cinema, theatre or dancing parties.
II. Use the appropriate tense-form of the verbs in brackets.
AT THE PRESS CONFERENCE
I hear you (to be) from the USA. What you (to do) ? What your medical specialty (to
be) ? Where you (to work) ? What medical school you (to graduate)
from? What (to be) the competition for medical schools in your country? How medical students (to
pay) for their education? How long you (to study) to become a doctor? What hospital
you (to work) at? When the hospital (to found)? How many departments the hospital (to
consist) of? What departments the hospital (to include)? How many physicians (to
work) for your hospital? How many nurses (to work) for your hospital? Who (to be) responsible for
the management of the hospital? What (to be) the most common types of hospitals in your country? all
USA citizens (to receive) health care insurance? How longa doctor (to work) every day?
you (to have) to work on weekends?

**Home work**: Make up a story and/or a dialogue on the topic «Diseases of Blood», using the notes.

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

Optional literature: http://www.wikipedia.org; http://www.bbcnews.com.

Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы

Тема 2.19: Заболевания респираторной системы: пневмония

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topics.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of

innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, basic Anatomy and Physiology vocabulary.

**Practical skills and knowledge after the lesson**: the students should ask and answer questions on the above topic and speak about causes, risk factors and risk groups, common symptoms, evaluation, treatment and prevention for the disease.

Reading and Speaking, Grammar Analysis.
Pneumonia [nju:'mounie] (to be) an illness of the <u>lungs</u> and respiratory system. Pneumonia can (to result)
from a variety of causes. It may (to cause) by infection with bacteria, viruses,
from a variety of causes. It may (to cause) by infection with bacteria, viruses, fungi [ai], or parasites ['paeresaits]. Pneumonia may also (to occur) from chemical or physical
injury to the lungs. It may (to induce) indirectly due to another medical illness, such as <u>lung</u>
cancer or alcohol abuse.
Typical symptoms associated with pneumonia (to include) cough, chest pain, fever, and difficulty
breathing. Diagnostic tools (to include) x-rays and examination of the sputum. Treatment (to depend)
on the cause of pneumonia; bacterial pneumonia (to treat)with antibiotics.
Pneumonia (to be) a common illness. It (to occur) in all age groups. Pneumonia (to be)
a leading cause of death among the elderly and people who are chronically ill. Vaccines to prevent certain types of
pneumonia (to be) available.
People with infectious pneumonia often (to have) a cough that (to produce) greenish or
yellow <u>sputum</u> and a high <u>fever</u> that may (accompany) by <u>shaking chills</u> . <u>Shortness of breath</u>
(to be) also common, as (to be) pleuritic chest pain, a sharp or stabbing pain, either felt or worse
during deep breaths or coughs. People with pneumonia may (to cough up) blood. They may (to
experience) <u>headaches</u> , or (to develop) <u>sweaty</u> skin. Other symptoms may (to
include) <u>loss of appetite</u> , fatigue, <u>blueness of the skin</u> , <u>nausea</u> , <u>vomiting</u> , and <u>joint pains</u> or
<u>muscle aches</u> .
To diagnose ['daiegnouz] pneumonia, health care providers (to rely) on a patient's symptoms and
findings from physical examination. Information from a chest X-ray, blood tests, and sputum cultures may also (to
be) helpful. The chest X-ray (to use) typically for diagnosis in hospitals and some
clinics with X-ray facilities. However, in general practice, pneumonia (to diagnose) usually based
on symptoms and physical examination alone. Diagnosing pneumonia can (to be) difficult in some
people, especially those who (to have) other illnesses. Occasionally a chest <u>CT scan</u> or other tests
may (to need) to distinguish pneumonia from other illnesses.
Individuals with symptoms of pneumonia (to need) medical evaluation. <u>Physical examination</u> by a health care provider may (to reveal) fever or sometimes <u>low body temperature</u> , an
increased respiratory rate, low blood pressure, a fast heart rate, or a low oxygen saturation, which (to be) the
amount of oxygen in the blood as indicated by either <u>pulse oximetry</u> or <u>blood gas analysis</u> . People who (to struggle)
to breathe, confused, or who (to have) <u>cyanosis</u> (blue-tinged skin) (to require)
immediate attention.
Listening to the lungs with a <u>stethoscope</u> ( <u>auscultation</u> ) can (to reveal) several things. An important test
for detecting pneumonia in unclear situations (to be) a chest <u>x-ray</u> . In some cases, chest CT ( <u>computed</u>
tomography) can (to reveal) pneumonia which (not to see) on chest x-ray. X-rays
can (to be) misleading, because other problems, like lung scarring and congestive heart failure, can (to
mimic) pneumonia on x-ray. Chest x-rays (to use)also to evaluate for
complications of pneumonia.

**Home work**: read and translate the text, learn Active Vocabulary.

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

#### **Optional literature:**

http://www.wikipedia.org

http://www.bbcnews.com

Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы

Тема 2.20: Заболевания респираторной системы: пневмония

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topics.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, basic Anatomy and Physiology vocabulary.

**Practical skills and knowledge after the lesson**: the students should ask and answer questions on the above topic and speak about causes, risk factors and risk groups, common symptoms, evaluation, treatment and prevention for the disease.

**Self-Improvement Work:** write notes on the most common causes, risk factors and risk groups, symptoms, evaluation and treatment for pneumonia.

**Home work**: Make up a story and/or a dialogue about the respiratory system and pneumonia as the most common disease of the respiratory system using patterns for retelling texts on diseases.

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

#### **Optional literature:**

http://www.wikipedia.org http://www.bbcnews.com

Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы

Тема 2.21: Заболевания респираторной системы: рак легкого

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topics.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, basic Anatomy and Physiology vocabulary.

**Practical skills and knowledge after the lesson**: the students should know basic vocabulary on the above topic.

- **1.** Test on Respiratory Diseases (10 tasks)
- 2. Read and translate the text. Write out Active Vocabulary.

#### **LUNG CANCER**

There are more than 38,000 new cases of lung cancer in the UK every year. It has always been more common in men, particularly those aged over 40. However, recently, the number of women with the disease has increased considerably and it now claims more lives than <u>breast cancer</u>.

Lung cancer isn't infectious and can't be passed on to other people.

This article deals with primary lung cancer - when the cancer has started in the lung. It shouldn't be confused with secondary lung cancer, when cancer in another part of the body spreads to the lung.

#### Causes

Cigarette smoking is the cause of nearly all lung cancers. The risk increases with the number and type of cigarettes smoked.

One in ten lung cancers occur in non-smokers. But in a number if cases, exposure to passive smoke (inhalation of other people's cigarette smoke) may be a cause.

Pipe and cigar smokers have a lower risk than cigarette smokers, but it's still a far greater risk than that of non-smokers.

Some rare types of lung cancer are not related to smoking. Other causes include exposure to certain chemicals and substances, such as asbestos, uranium, chromium and nickel. These have all been linked to lung cancer but are very rare. Contact your local environmental health officer if you're concerned.

#### **Symptoms**

If you have the following, or any other symptoms, you must have them checked by your doctor. But remember, all occur in many conditions other than cancer.

- a persistent cough or change in the nature of a longstanding cough
- shortness of breath
- coughing up blood-stained phlegm (sputum): blood is a warning sign that always needs urgent investigation
- chest discomfort a dull ache or sharp pain when you cough or take a deep breath
- loss of appetite and weight

**Home work:** read and translate the text, write out Active Vocabulary.

#### **Diagnosis**

At present there's no effective screening test for lung cancer. If you suspect you have any of the symptoms mentioned, see a GP immediately. Initial tests will include a chest x-ray. You may also be asked to bring samples of phlegm for examination.

There are several tests that can be done to diagnose lung cancer and these include:

- **Bronchoscopy** a thin flexible tube is passed gently through your nose or mouth and into the lung airways. Photographs and cell samples are then taken.
- **Mediastinoscopy** a small cut is made through the skin at the base of the neck under general anaesthetic. A tube is then passed into the chest, allowing the doctor to examine the area at the centre of the chest and local lymph nodes.
- **Lung biopsy** a needle is passed through the skin into the lung and a sample of cells is taken for examination.

Llung cancer patients may be referred to special clinics.

#### **Treatment**

There are two main types of lung cancer: about a quarter are rapidly spreading small-cell lung cancers (SCLC); the remainder are relatively slow-growing non-small-cell lung cancers (NSCLC).

When the tumour is away from the centre of the chest and there's little or no spread (NSCLC), surgery is often used. A small part of the lung may be removed (wedge resection), or a lobe of the lung (lobectomy) or an entire lung (pneumonectomy).

Chemotherapy and/or radiotherapy are usually more effective in treating SCLC because this type of cancer rarely occurs in one place.

Sometimes lung cancer causes breathlessness by obstructing the wind pipe or one of the main airways. In such cases laser therapy can provide some relief.

You can breathe normally with only one lung. However, if you had breathing difficulties before the operation you may be more breathless afterwards. Breathing tests will be carried out to help you and your doctor decide on the best course of action.

New ways of treating lung cancer are being studied. In NSCLC cases, different ways of giving radiotherapy and chemotherapy are being investigated.

Sometimes new symptoms can develop during your illness. These may be caused by the spread of the cancer to other parts of the body, but could also come about because some lung cancer cells produce hormones that upset the body's chemical balance. If you have any new symptoms, tell your GP straight away so you can be given treatment or reassured that there's nothing to worry about.

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

#### **Optional literature:**

http://www.wikipedia.org

http://www.bbcnews.com

Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы

Тема 2.22: Заболевания респираторной системы: рак легкого

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topics.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, basic Anatomy and Physiology vocabulary.

**Practical skills and knowledge after the lesson**: the students should ask and answer questions on the above topic and speak about causes, risk factors and risk groups, common symptoms, evaluation, treatment and prevention for the disease.

#### **Self-Improvement Work:**

#### I. Complete the sentences. Translate into Russian.

- 1. Bronchitis is an (воспаление) of the lining of the bronchial tubes, or bronchi.
- 2. Acute bronchitis is usually a short illness that commonly develops from a severe cold or following other (вирусные инфекции) and is characterized by (кашель) with green (мокрота) and a soreness in the centre of the chest and perhaps (высокая температура) and some (одышка).
- 3. If one starts coughing (мокрота с прожилками крови), one should see a doctor. In rare cases, doctors may conduct tests to see if the (причина) is a serious condition such as tuberculosis or (рак легких).
- 4. In those at risk for bronchitis, (вакцинация) with pneumococcal polysaccharide vaccine (PPV) may (снизить риск) of acute bronchitis.
- 5. (Антибиотики) have no effect on (вирусную инфекцию).
- 6. History, physical examination, (рентген грудной клетки, общий анализ крови, анализ мокроты, анализ газов артериальной крови) can aid in the (диагностика пневмонии).
- 7. When the (злокачественная опухоль) is away from the center of the chest and there's little or no spread, (операция) is often used.

#### II. Open the brackets.

- 1. Acute bronchitis almost always (cause) by viruses that (get) into the bronchi and (cause) infection. Sometimes bacteria (cause) acute bronchitis, especially after viral infections like colds.
- 2. As the body's immune system (fight) against these viruses, more swelling (occur) and more mucus (produce).
- 3. Chronic bronchitis may (result) from a series of attacks of acute bronchitis. Other causes (include) air pollution and industrial dusts and fumes.
- 4. Chronic bronchitis can (treat) more effectively if diagnosed in the early stages of the disease.
- 5. In the late 20<sup>th</sup> century lung cancer (be) the leading cause of cancer-related death among men in some 28 developed countries, including the United States.
- 6. Rapid increase in the incidence of lung cancer (be) due mostly to the increased use of cigarettes that (begin) after World WR I.
- 7. Lung cancer (occur) primarily in persons between 45 and 75 years of age.
- 8. The main treatments for lung cancer (be) surgery, chemotherapy and radiation. The choice of treatment (depends) on the patient's general health, the stage of extent of the disease, and the type of cancer.

**Home work**: write notes on the most common causes, risk factors and risk groups, symptoms, evaluation and treatment for lung cancer.

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

#### **Optional literature:**

http://www.wikipedia.org

Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы

Тема 2.23: Заболевания респираторной системы: рак легкого

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topics.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, basic Anatomy and Physiology vocabulary.

**Practical skills and knowledge after the lesson**: the students should know basic vocabulary on the above topic

#### Ex. 1, 2, pp. 186-188.

**Home work**: Make up a story and/or a dialogue about the respiratory system and lung cancer as the most common disease of the respiratory system using patterns for retelling texts on diseases.

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

## **Optional literature:**

http://www.wikipedia.org

http://www.bbcnews.com

Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы

Тема 2.24: Заболевания ЖКТ

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topics.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, basic Anatomy and Physiology vocabulary.

**Practical skills and knowledge after the lesson**: the students should ask and answer questions on the above topic and speak about causes, risk factors and risk groups, common symptoms, evaluation, treatment and prevention for the disease.

# 1. Make a report on the gastrointestinal tract according to the plan below:

Definition.

Functions.

Location.

Structure.

Length.

The most common diseases:

esophagitis, esophagus cancer, gastritis, peptic ulcer disease (PUD), stomach perforation, stomach cancer, gastroenteritis, enteritis, duodenitis, colitis, colon cancer, proctitis, rectum cancer.

**2. Reading and Speaking:** pp.192-194, ex. 1-5 (1).

**Home work**: ex. 6, p.194 (1).

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

Optional literature: http://www.wikipedia.org; http://www.bbcnews.com.

Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы

Тема 2.25: Заболевания ЖКТ

Aim of the lesson: development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topics.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, basic Anatomy and Physiology vocabulary.

Practical skills and knowledge after the lesson: the students should ask and answer questions on the above topic and speak about causes, risk factors and risk groups, common symptoms, evaluation, treatment and prevention for the disease.

Read, complete and translate the text, write out Active Vocabulary.
3. Gastritis (to be) inflammation of the gastric mucosa.
The following (to be) known <b>causes</b> of gastritis:
Bacterial infection (most often by <i>Helicobacter pylori</i> and other <i>Helicobacter</i> bacteria)
Fungal infection (most often in people with AIDS)
Parasitic infection (most often from poorly cooked seafood)
Viral infection
Bile reflux
NSAIDs
Cigarette smoke
Autoimmune disorders
Excessive alcohol consumption
Certain allergens
Certain types of radiation
The following <b>symptoms</b> can (to be) a result of gastritis or can (to relate) to the
underlying cause:
Upper <u>abdominal pain</u> or discomfort
Gastric hemorrhage
Appetite loss
Belching
Nausea Nausea
Vomiting

<u>Fever</u>
Fatigue

1

" Diagnosis: 11 doctor may (to order) a gastroscopy or, ress frequency, a current
meal to investigate suspected gastritis and related conditions such as peptic ulcer disease and
gastric cancer. The appearances at endoscopy, with or without histological examination of
biopsy specimens, can (to use) to determine the cause of the gastritis. However, a
relevant patient history (to be) also very important, particularly with regard to smoking,
alcohol intake and medication use. In most cases, a biopsy from the gastric antrum (to take)
to detect the presence of Helicobacter pylori. Alternatively, a non-invasive
method to detect Helicobacter such as a urea breath test or stool antigen test may (to consider)
, particularly in younger patients and those without more worrying
symptoms such as weight loss or bleeding.
Treatment usually (to consist) of removing the irritant or the infection. In the case o
Helicobacter infection, a doctor may (to prescribe)antibiotics.

a gastroscopy or less frequently a harium

**Home work**: write notes on the most common causes, risk factors and risk groups, symptoms, evaluation and treatment for the disease and make up a story about the disease.

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

#### **Optional literature:**

http://www.wikipedia.org http://www.bbcnews.com

Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы

Тема 2.26: Заболевания нервной системы: инсульт

Diagnosis A doctor may (to order)

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topics.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, basic Anatomy and Physiology vocabulary.

**Practical skills and knowledge after the lesson**: the students should ask and answer questions on the above topic and speak about causes, risk factors and risk groups, common symptoms, evaluation, treatment and prevention for the disease.

#### 1. Make a report on the central nervous system according to the plan below:

**Definition:** the part of the nervous system that coordinates the activity of all parts of the body.

Function: to control behaviour.

**Structure:** the brain and the spinal cord.

Location: the brain: in the cranium (the skull); the spinal cord: in the spinal column

The brain: <u>left and right cerebral hemispheres</u>; grey and white substances; folded surface of the cerebral cortex; **50** billion <u>-100</u> billion <u>neurons</u>; 4 lobes: functions: **the frontal lobe**: is responsible for thought; **the parietal lobe**: integration of sensory information; **the occipital lobe**: sense of sight; **the temporal lobe**: sense of smell and sound.

The cerebellum: location: at the back; functions: balance and muscle coordination.

**The spinal cord**: the main pathway for information;

the main function: to connect the brain and peripheral nervous system;

the length: about 45 cm long in men and 43 cm long in women; 3 spinal meninges; 31 (or 25, counting the sacral as one solid piece) spinal cord nerve segments: 8 cervical segments; 12 thoracic segments; 5 lumbar segments; 1 or 5 sacral segments; 1 coccygeal segment.

**The most common diseases:** encephalitis or inflammation of the brain, meningitis or inflammation of the meninges, stroke or cerebrovascular accident, hemorrhagic stroke, ischemic stroke, transient ischemic attack (TIA), brain tumours, benign brain tumours, malignant brain tumours, polio or poliomyelitis, paralysis, etc.

2. Self-improvement work.	Read and translate the following text,	, fill in the blanks with the right ver	b
form			

iorm.
A stroke (to know) as cerebrovascular accident (CVA). It (to be) an acute
neurologic injury in which the <u>blood</u> supply to a part of the <u>brain</u> (to interrupt) It (to be)
the third leading cause of <u>death</u> and adult disability in the US and industrialized European nations. Of every 5 deaths
from stroke, 2 (to occur) in men and 3 in women.
Risk factors (to include) advanced age, <a href="https://newsrund.com/hypertension">hypertension</a> (high blood pressure), <a href="mailto:diabetes mellitus">diabetes mellitus</a> ,
high cholesterol, and cigarette smoking. Cigarette smoking (to be) the most important risk factor of stroke.
5. Strokes can (to classify) into two major categories: ischemic and
hemorrhagic. Ischemic stroke (to occur) in approximately 85-90% of strokes. In
ischemic stroke, a <u>blood vessel</u> (to become) occluded and the blood supply to part of
the brain totally or partially (to block).
Embolic stroke refers to the blockage of arterial access to a part of the brain by an embolus a traveling particle or
debris in the arterial bloodstream originating from elsewhere. An embolus is most frequently a blood clot, but it can
also be a plaque broken off from an atherosclerotic blood vessel or a number of other substances including fat (e.g.,
from bone marrow in a broken bone), air, and even cancerous cells. Another cause is bacterial emboli released in
infectious endocarditis.
6. A hemorrhagic stroke, or <u>cerebral hemorrhage</u> , (to be) a form of stroke that (to occur)
when a blood vessel in the brain (to rupture)or (to bleed)
Hemorrhagic strokes (to be) more dangerous than ischemic strokes.
The symptoms of stroke (to depend) on the type of stroke and the area of the brain affected.
Ischemic strokes usually only (to affect) regional areas of the brain. Hemorrhagic strokes can (to affect)
local areas, but often can also (to cause) more global symptoms due to bleeding
symptoms may (to include): muscle weakness or numbness (hemiplegia),
reduction of pain or temperature sensation, reduction in sensory or vibratory sensation
In most cases, the symptoms (to affect) one side of the body, from the neck downwards, excluding
the face. There may (to be):
altered smell, taste, hearing, or vision (total or partial)
• drooping of eyelid ( <u>ptosis</u> ) and weakness of ocular muscles
decreased reflexes
<ul> <li>decreased sensation and muscle weakness of the face</li> </ul>
balance problems
altered breathing and heart rate
• inability to turn head to one side
<ul> <li>weakness in tongue (inability to protrude and/or move from side to side)</li> </ul>
Strokes also can also (to produce) the following symptoms:
• <u>aphasia</u> (inability to speak or understand)
<ul> <li>altered voluntary movements</li> </ul>
<ul> <li>disorganized thinking, confusion</li> </ul>
<ul> <li>altered vision</li> </ul>
<ul> <li>memory deficits</li> </ul>
If the <u>cerebellum</u> is involved, the patient may have the following: trouble walking, altered movement coordination,
dizziness
Loss of consciousness, headache, and vomiting usually (to occur) more often in hemorrhagic stroke
than in thrombosis.
If the symptoms (to resolve) within an hour, or maximum 24 hours, the diagnosis (to be)
<u>transient ischemic attack</u> (TIA), and not a stroke. This syndrome may (to be) a warning sign, and
a large proportion of patients (to develop) strokes in the future.

**Home work**: study the text «Stroke», learn the new words.

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

Optional literature: <a href="http://www.wikipedia.org">http://www.bbcnews.com</a>.

Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы

Тема 2.27: Заболевания нервной системы: инсульт

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topics.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, basic Anatomy and Physiology vocabulary.

**Practical skills and knowledge after the lesson**: the students should ask and answer questions on the above topic and speak about causes, risk factors and risk groups, common symptoms, evaluation, treatment and prevention for the disease.

Self-improvement work. Read and translate the following text, fill in the blanks with the right verb

±	0 /	O
form.		
Stroke (to diagnose)	through several techniques: a neurological examination	, blood tests, CT
scans or MRI scans, Doppler ultrasound	d, and arteriography.	
It (to be) important to identify	a stroke as early as possible because patients who (to treat)	earlier
(to have) better recov	reries.	
	a blood clot occluding a cerebral artery, a patient (to give)	
antiplatelet medication (aspirin, clopide	ogrel, dipyridamole), or anticoagulant medication (warfarin	
Patients with bleeding into or around t	he brain (to require) neurosurgical evaluati	ion to detect and
treat the cause of the bleeding.		
For most stroke patients, physical therap	vy (to be) the cornerstone of the rehabilitation process	s. Often, assistive
technology such as a wheelchair and sta	anding frame may (to be) beneficial. Another type of	of therapy (to be)
occupational therapy (OT). O	T (to involve) exercise and training. Speed	ch and language
therapy (to be) appropriate for I	patients with problems understanding speech or written wo	rds, or problems
forming speech.		
7. Stroke rehabilitation ca	in (to last) anywhere from a few days to	several months.
Disability affects 75% of stro	oke survivors. Stroke can (to affect) patie	ents physically,
mentally, emotionally, or a c	ombination of the three.	
Some of the physical disabilities that of	can (to result) from stroke (to include)	paralysis,
numbness, pressure sores, pneumonia,	incontinence, difficulties carrying out daily activities, app	etite loss, vision
loss, and pain. If the stroke (to be)	severe enough, <u>coma</u> or <u>death</u> can (to result).	
30 to 50% of stroke survivors (to suffer	) post stroke <u>depression</u> . <u>Post stroke depression</u>	(to characterize)
by lethargy, irritabil		
	ke (to include) perceptual disorders, sp	
dementia, and problems with atten	tion and memory. Up to 10% of all stroke patient	ts (to develop)
<u>seizures</u> .		

**Home work**: study the text «Stroke», learn the new words, make notes about causes, risk factors and risk groups, common symptoms, evaluation, treatment for the disease (in writing).

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Optional literature: http://www.wikipedia.org; http://www.bbcnews.com.

Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы

Тема 2.28: Заболевания нервной системы: инсульт

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topics.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, basic Anatomy and Physiology vocabulary.

**Practical skills and knowledge after the lesson**: the students should ask and answer questions on the above topic and speak about causes, risk factors and risk groups, common symptoms, evaluation, treatment and prevention for the disease.

- 1. Watch the film «Stroke Overview». Speak about the disease following the plan: types of stroke, main causes, risk factors and risk groups, common symptoms, evaluation, treatment for the disease.
- 2. Watch the film «Stroke Prevention». Discuss the most common preventive methods for stroke.

**Home work**: Make up a story and/or a dialogue on the topic «The CNS and Diseases of the CNS», using patterns for retelling texts on diseases.

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

Optional literature: <a href="http://www.wikipedia.org">http://www.bbcnews.com</a>.

Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы

Тема 2.29: Анатомия печени

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topics.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, basic Anatomy and Physiology vocabulary.

**Practical skills and knowledge after the lesson**: the students should ask and answer questions on the above topic and speak about causes, risk factors and risk groups, common symptoms, evaluation, treatment and prevention for the disease.

#### **Self-Improvement Test.**

2011 1111p1 0 / 01110110 1 0500		
The <b>liver</b> (to be) an <u>organ</u> in <u>humans</u> . It (to play) a	major role in metabolism and (to have) _	a number of
functions in the body. The main functions of the liver (to include)	first, drug detoxification, second,	glycogen storage,
third, plasma protein synthesis, and fourth, bile production. The a	dult human liver normally (to weigh)	between 1.0
and 2.5 kilograms. The abnormal liver may (to weigh)	16 kilograms and even 20 kilograms.	The liver (to be)
a soft, pinkish-brown "boomerang shaped" organ. The liver	(to be) the second largest organ. The	e largest organ (to

be)	the <u>skin</u> . The liver (to l	ocate) <b>u</b>	nder the <u>diaphragm</u> on the right :	side of the upper abdomen.
The li	ver (to lie) on t	he right of the stomach. The li	ver (to make) a kind of	f bed for the gallbladder. The
gallbla	adder (to store) bi	le. The liver (to supply)	by two major blo	ood vessels on its right lobe.
These	two vessels (to be)	the <u>hepatic artery</u> and t	the portal vein. The liver (to be)	capable of natural
regen	eration of lost tissue. 25%	of remaining liver can (to rege	enerate) into a who	le liver again.
The li	ver (to cover)	_ by visceral peritoneum [,per	rite'niem]. The peritoneum (to be) _	a thin, double-layered
memb	orane. It (to reduce)	friction against other orga	ns. The liver (to divide)	into four lobes.
The v	arious functions of the live	r (to carry)	out by the liver cells or hepatocytes	<u>s</u> .
•	The liver (to produce)	and (to excrete) _	<u>bile</u> . Bile (to require)	)for
	food digestion. Some of	the bile (to drain)	directly into the <u>duodenum</u> , and	some (to store)
	in the gall	<u>bladder</u> .		
	<ul> <li>The liver (to per</li> </ul>	rform) severa	al roles in <u>carbohydrate</u> <u>metabolism</u>	
•	The liver also (to perform	n) several roles in	n <u>lipid</u> metabolism:	
•	The liver (to produce)	coagulation	n factors.	
•	The liver (to break)	down hemoglob	in, toxic substances and most medic	cinal products.
•	The liver (to convert)	ammonia to ur	rea.	•
•			stances, including glucose in the for	m of glycogen, vitamin
	B12, iron, and copper.		, 28	<i>z; z ,</i>

#### Home work:

#### 1. Practise reading the words.

alimentary canal [,æli'mentəri kə'næl], gut [gΛt], digest [di'd3est], extract [iks'trækt], expel [iks'pel], abdomen ['æbdəmen], abdominal [æb'dəminl], gastrointestinal tract [,gæstrəuin'testinl 'trækt], lower gastrointestinal tract ['louə ,gæstrəuin'testinl 'trækt], mouth [mauθ], cavity ['kæviti], salivary ['sælivəri], mucosa [mju'kousə], tongue [tΛη], pharynx ['færiŋks], esophagus [i:'sə:fəgəs], stomach ['stΛmək], digestion [di'd3estən], environment [in'vaiərənmənt], secrete [si'kri:t], intestine [in'testin], duodenum [,djuo'di:nəm], jejunum [d3i'd3u:nəm], ileum ['iliəm], caecum ['si:kəm], colon ['koulən], ascending colon [ə'sendin 'koulən], transverse colon ['trænzvə:s 'koulən], descending colon [di'sendin 'koulən], sigmoid flexure ['sigmoid 'flekə], rectum ['rektəm], anus ['einəs], esophagitis [i,səfə'd3aitis], cancer ['kænsə], gastritis [gæs'traitis], ulcer disease ['Alsə 'di'zi:z], proctitis [prək'taitis]

2. Read and translate the text, learn Active Vocabulary.

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

Optional literature: http://www.wikipedia.org; http://www.bbcnews.com.

Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы

Тема 2.30: Анатомия печени

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topics.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, basic Anatomy and Physiology vocabulary.

**Practical skills and knowledge after the lesson**: the students should ask and answer questions on the above topic and speak about causes, risk factors and risk groups, common symptoms, evaluation, treatment and prevention for the disease.

Ex. 6, 7, 8, 11, pp. 190-191.

**Home work**: Make up a story and/or a dialogue on the topic «The Liver».

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕЛИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

Optional literature: http://www.wikipedia.org; http://www.bbcnews.com.

Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы

Тема 2.31: Заболевания печени: гепатит

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topics.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, basic Anatomy and Physiology vocabulary.

**Practical skills and knowledge after the lesson**: the students should ask and answer questions on the above topic and speak about causes, risk factors and risk groups, common symptoms, evaluation, treatment and prevention for the disease.

## 1. Phonetic drills. Practise reading the words.

alimentary canal [,æli'mentəri kə'næl], gut [gΛt], digest [di'd3est], extract [iks'trækt], expel [iks'pel], abdomen ['æbdəmen], abdominal [æb'dəminl], gastrointestinal tract [,gæstrəuin'testinl 'trækt], lower gastrointestinal tract ['louə ,gæstrəuin'testinl 'trækt], mouth [mauθ], cavity ['kæviti], salivary ['sælivəri], mucosa [mju'kousə], tongue [tΛη], pharynx ['færiŋks], esophagus [i:'sə:fəgəs], stomach ['stΛmək], digestion [di'd3est]ən], environment [in'vaiərənmənt], secrete [si'kri:t], intestine [in'testin], duodenum [,djuo'di:nəm], jejunum [d3i'd3u:nəm], ileum ['iliəm], caecum ['si:kəm], colon ['koulən], ascending colon [ə'sendiŋ 'koulən], transverse colon ['trænzvə:s 'koulən], descending colon [di'sendiŋ 'koulən], sigmoid flexure ['sigmoid 'flek]ə], rectum ['rektəm], anus ['einəs], esophagitis [i,səfə'd3aitis], cancer ['kænsə], gastritis [gæs'traitis], ulcer disease ['Alsə 'di'zi:z], proctitis [prək'taitis]

#### 2. Self-Improvement Test

(to cause)

immune system (to make) \_

2. Sen-improvement Test
Hepatitis (to be)inflammation of the liver. The clinical signs, prognosis, and treatment (to depend) on
the cause.
Symptoms (to include) malaise, joint aches, abdominal pain, vomiting 2-3 times per day for the first 5 days,
defecation, loss of appetite, dark urine, fever, hepatomegaly (enlarged liver) and jaundice (yellowing of the eyes and skin). Some
chronic forms of hepatitis (to show) very few of these signs and (to be) only present when the longstanding
inflammation (to lead) to the replacement of liver cells by connective tissue; this disease
process (to refer)to as <u>cirrhosis</u> of the liver. Certain <u>liver function tests</u> can also indicate hepatitis.
Most cases of acute hepatitis (to be) due to viral infections:
• <u>Hepatitis A</u>
• Hepatitis B
• Hepatitis C
• Hepatitis B with D
Hepatitis E
Hepatitis F
Hepatitis G
• In addition to the hepatitis viruses (please note that the hepatitis viruses are not all related) other viruses can also (to
cause) hepatitis, including cytomegalovirus, Epstein-Barr virus, yellow fever, etc.
Hepatitis A or infectious jaundice (to cause) by a picornavirus. It (to transmit)
by the <u>orofecal</u> route. It (to transmit) to humans through methods such as contaminated food. It

against future infection. People with hepatitis A (to advise) \_\_\_\_\_\_\_ to rest, stay hydrated and avoid

antibodies against hepatitis A that (to confer) \_\_\_\_\_ immunity

\_\_\_\_\_ a chronic stage. The patient's

\_ an acute form of hepatitis and (not to have) \_\_\_

alcohol. A <u>vaccine</u> (to be) available that (to prevent) infection from hepatitis A for life. Hepatitis A can (to spread) through personal contact, consumption of raw sea food or drinking contaminated water. This (to occur) primarily in third world countries. Strict personal hygiene and the avoidance of raw and unpeeled foods can (to help) prevent an infection. Infected persons already (to begin) excreting the hepatitis A virus with their stool two weeks after the appearance of the first symptoms. The time between the infection and the start of the illness can (to run) from 15 to 45 days, and approximately 15% of sufferers may (to experience) relapsing symptoms from six months to a year following initial diagnosis.
<b>Home work</b> : study the text «The Liver», learn the new words and phrases.
Basic literature: Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская М.: «ГЭОТАР-МЕДИА», 2015. Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.
Optional literature: <a href="http://www.wikipedia.org">http://www.bbcnews.com</a> .
Optional Interacture: <a href="https://www.wikipedia.org">http://www.bocnews.com</a> .
Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы
<b>Тема 2.32:</b> Заболевания печени: гепатит <b>Aim of the lesson:</b> development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topics.
<b>Educational importance of the topic:</b> Cultural development and moral education of students in doctor's
training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.
Practical skills before the lesson: the students should know basic tense- and voice forms, basic Anatomy
and Physiology vocabulary.
Practical skills and knowledge after the lesson: the students should ask and answer questions on the
above topic and speak about causes, risk factors and risk groups, common symptoms, evaluation, treatment
and prevention for the disease.
1. Practise reading the words.
alimentary canal [,æli'mentəri kə'næl], gut [gAt], digest [di'd3est], extract [iks'trækt], expel [iks'pel],
abdomen ['æbdəmen], abdominal [æb'dəminl], gastrointestinal tract [,gæstrəuin'testinl 'trækt], lower
gastrointestinal tract ['louə ,gæstrəuin'testinl 'trækt], mouth [mauθ], cavity ['kæviti], salivary ['sælivəri],
mucosa [mju'kousə], tongue [tΛη], pharynx ['færiŋks], esophagus [i:'sϽ:fəgəs], stomach ['stΛmək],
digestion [di'd3est]on], environment [in'vaioronment], secrete [si'kri:t], intestine [in'testin], duodenum
[,djuo'di:nəm], jejunum [d3i'd3u:nəm], ileum ['iliəm], caecum ['si:kəm], colon ['koulən], ascending colon
[ə'sendin 'koulən], <u>transverse colon</u> ['trænzvə:s 'koulən], <u>descending colon</u> [di'sendin 'koulən], <u>sigmoid</u>
flexure ['sigmoid 'flek]ə], rectum ['rektəm], anus ['einəs], esophagitis [i,səfə'd3aitis], cancer ['kænsə],
gastritis [gæs'traitis], ulcer disease ['Λlsə 'di'zi:z], proctitis [prϽk'taitis]  2. Self-Improvement Test
Hepatitis B (to cause) by a hepadnavirus, which can (to cause) both acute and chronic
hepatitis. Identified methods of transmission (to include) <u>blood</u> ( <u>blood transfusion</u> , now rare), <u>tattoos</u> (both
amateur and professionally done), sexually (through sexual intercourse or through contact with blood or bodily fluids), or in
utero (from mother to her unborn child, as the virus can (to cross) the placenta). However, in about half of cases the source of infection can (not determine) Blood contact can (to occur)
by sharing syringes in intravenous drug use, shaving accessories such as razor blades, or touching wounds on
infected persons. Needle-exchange programs (to create) in many countries as a form of prevention. Hepatitis B infections (to result) in 500,000 to 1,200,000 deaths per year worldwide due
of prevention. Hepatitis B infections (to result) in 500,000 to 1,200,000 deaths per year worldwide due to the complications of chronic hepatitis, <u>cirrhosis</u> , and <u>hepatocellular carcinoma</u> . Hepatitis B (to be) endemic in a number
of (mainly <u>South-East Asian</u> ) countries, making cirrhosis and hepatocellular carcinoma <u>big killers</u> . There (to be) three
FDA-approved treatment options available for persons with a chronic hepatitis B infection: alpha-interferon, adefovir and
<u>lamivudine</u> . About 45% of persons on treatment (to achieve)

a sustained response.

	8. <u>Hepatitis C</u> (originally "non-A non-B hepatitis") can (to transmit) through contact
	with blood (including through sexual contact where the two parties' blood (to mix) Hepatitis C
	may (to lead) to a chronic form of hepatitis, culminating in <u>cirrhosis</u> . It can (to remain)
	<u>asymptomatic</u> for 10-20 years. No vaccine (to be) available for hepatitis C. Patients with hepatitis C (to be) prone to severe hepatitis if they (to contract) either hepatitis A or B,
	so all hepatitis C patients should (to immunize) against hepatitis A and hepatitis B if they
	(not to be) already immune. However, hepatitis C itself (to be) a very lethal virus, and it can (to
	result) in death; 10 percent of hepatitis C diagnosed patients (to die) The virus
	can (to cause) cirrhosis of the liver. The virus, if detected early on, can (to treat)
	by a combination of interferon and the antiviral drug ribavirin.
	E produces symptoms similar to hepatitis A, although it can take a fulminant course in some patients, particularly
pregnant v	women; it is more prevalent in the <u>Indian subcontinent</u> .
3. Make	e notes about the causes, risk factors and risk groups, common symptoms of the disease using
the text	•
Home w	work: speak about the disease, its definition, causes, risk factors and risk groups, common symptoms
	sease using the notes.
or the di	sease using the notes.
Rocio lit	terature:
	ский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С.
	ская М.: «ГЭОТАР-МЕДИА», 2015.
	English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.
Optiona	al literature: <a href="http://www.wikipedia.org">http://www.bbcnews.com</a> .
Воргол	2 Oovens varaning of the state
	2. Основы медицины: обучение чтению и переводу специальной литературы
	33: Анатомия почки и их заболевания (почечная недостаточность, острая и хроническая)
	the lesson: development of speaking, reading, retelling, translation, and comprehension skills,
	ence within the above topic.
	onal importance of the topic: Cultural development and moral education of students in doctor's
training.	Formation of systematic approach to the analysis of medical information, the perception of
innovati	on; the formation of ability and readiness to self-improvement and self-education, personal and
subject 1	reflection.
Practica	al skills before the lesson: the students should know basic tense- and voice forms.
	al skills and knowledge after the lesson: the students should know basic vocabulary, ask and
	questions and make up a short story on the above topic.
	1 · · · · · · · · · · · · · · · · · · ·
Algoritl	hm of the lesson:
	etic drills:
	nary system, kidneys, two ureters, the urinary bladder, two sphincter muscles, and the urethra,
	· · · · <del>- · ·</del> · <del>- · · · · · · · · · · · · · · · · · </del>
_	units, nephrons, glomerulus, capillaries, tubules, nutrients, urine, urine production, perspiration
	<u>viration</u> , fluid excreted through the kidneys, <u>electrolytes</u> , <u>sodium</u> , <u>potassium</u> , <u>calcium</u> , <u>pH</u> balance,
	nitrogenous waste product, metabolism of proteins, <u>amino acids</u> .
	ion on Grammar: p.175-176, ex.1, 2; pp.181-182, ex.1, 2.
	improvement Test: Read and translate the following text and make up your own story on the
analogy	
The <b>ur</b> i	inary system (to be)the organ system that (to produce, to store, and to eliminate)
	<u>urine</u> . In humans it (to include) two <u>kidneys</u> , two <u>ureters</u> ,
· · · · · · · · · · · · · · · · · · ·	ry bladder, two sphincter muscles, and the urethra.
The kidr	neys (to be) one of the various organs (together with the <u>lungs</u> , <u>intestine</u> and <u>skin</u> ) that (to participate)
	in the elimination of the wastes of the organism. The <u>kidneys</u> (to be) bean-shaped
	bout the size of a bar of soap. They (to be) near the middle of the spine, just below the ribcage.
	situate) retroperitoneal to the organs of digestion within the abdominal cavity.
Situated	on the superior surface of each kidney (to be)an <u>adrenal gland</u> .

A kidney (to consist) of about 1 million filtering units. They (to term) nephrons, each consisting of a glomerulus, ball -shaped network of capillaries, and a network of tubules. Blood plasma (to filter) by the glomerulus, and the resultant "prourine" (to pass) through the tubular system where water, and nutrients (to reabsorb) under the supervision of hormon activity and the autonomic nervous system.
Home work: Speak about the kidneys and their functions.
Basic literature: Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С Плебейская М.: «ГЭОТАР-МЕДИА», 2015. Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.
<b>Optional literature:</b> Grammar Practice (практическое пособие по грамматике): учебное пособие. Т.Б. Агалакова, В.А. Авдеева, И.Л. Дмитриевых, Е.Н. Шубина. Киров: Изд-во Кировской ГМА, 2013.
Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы Тема 2.34: Анатомия почки и их заболевания (почечная недостаточность, острая и хроническая) Aim of the lesson: development of speaking, reading, retelling, translation, and comprehension skills competence within the above topics.  Educational importance of the topic: Cultural development and moral education of students in doctor' training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.  Practical skills before the lesson: the students should know basic tense- and voice forms, basic Anatomy and Physiology vocabulary.  Practical skills and knowledge after the lesson: the students should ask and answer questions on the above topic and speak about causes, risk factors and risk groups, common symptoms, evaluation, treatment and prevention for the disease.
1. Practise reading the words.  urine ['juərin], urinary ['juərinri], excretory [eks'kri:təri], ureters [juə'ri:təz], urethra [juə'ri:θrə], medulla [me'dΛlə], abdomen ['æbdəmen], abdominal [æb'dϽminl], diaphragm ['daiəfræm], urination [,juə'ri'nei∫n], nephritis [ni'fraitis], pyelonephritis [,paiələni'fraitis], renal failure ['ri:nl 'feiljə], urethriti [,juəri:θ'raitis]  2. Self-Improvement Test.  Use the right prepositions if necessary.
I live Kirov. I successfully graduated high school and entered Kirov State Medical Academy. The academy was founded 2 <sup>nd</sup> April 1987. I study the Internal Medicine Faculty. We have lectures all preclinical subjects. We also have practical workshops almost all disciplines. We take credit tests and exam all main sciences. I usually get up 5 a.m breakfast I have a cup of green tea and a sandwich. I leave home the academy 7 a.m. I get the academy bus. We have classes 8 a.m 4 p.m. We have lectures many preclinical subjects. We have seminars and workshops all preclinical disciplines Januar and June we have to take credit tests and exams the most important subjects. I go bed 11 p.m.  3. Reading and Speaking: "Kidney Diseases".  PP. 196-198, ex. 4-8.

Home work: Make up a story on the topic «Kidney Stones», using patterns for retelling texts on diseases.

## **Basic literature**:

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

**Optional literature:** Grammar Practice (практическое пособие по грамматике): учебное пособие. Т.Б. Агалакова, В.А. Авдеева, И.Л. Дмитриевых, Е.Н. Шубина. Киров: Изд-во Кировской ГМА, 2013.

Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы

Тема 2.35: Инфекционные заболевания

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topics.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, basic Anatomy and Physiology vocabulary.

**Practical skills and knowledge after the lesson**: the students should ask and answer questions on the above topic and speak about causes, risk factors and risk groups, common symptoms, evaluation, treatment and prevention for the disease.

#### 1. Grammar Revision.

А Найдите и подчеркните ядро каждого предложения, в котором сказуемое включает модальный глагол и смысловой глагол в активной или пассивной форме.

Б Переведите предложения.

- 1. Many of these drugs are toxic and should be given with care.
- 2. A new medicine must undergo extensive testing in the laboratory.
- 3. Blood disorders can vary greatly in their effects.
- 4. The liver, with its many complex functions, can be damaged by various disorders and diseases.
- 5. The brain contains billions of neurons and each may influence or be influenced by hundreds of other neurons
- 6. People with back trouble should not lift heavy weights.
- 7. The damage may be followed by painful spasm and inflammation.
- 8. Animals cannot manufacture their own food but must take it in from the outside in some way.
- 9. There can be no end to physicians' education they must keep up with new developments.
- 10. Aspirin should not be given to children who have viral infections.
- 11. Anemia may be caused by a decrease in red cell production, an increase in red cell destruction, or a loss of blood.
- 12. Direct physical examination may be supplemented by various laboratory examinations.
- 13. These reactions can affect almost any cell or tissue and cause a variety of disorders.
- 14. Twenty amino acids are necessary for protein synthesis. Eleven can be synthesized by the human body; nine must be obtained from the diet.

#### 2. Pp. 130-131, ex. VII, IX.

**Home work**: Make up a story on the topic «Viruses and bacteria».

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

**Optional literature:** Grammar Practice (практическое пособие по грамматике): учебное пособие. Т.Б. Агалакова, В.А. Авдеева, И.Л. Дмитриевых, Е.Н. Шубина. Киров: Изд-во Кировской ГМА, 2013.

Раздел 2. Основы медицины: обучение чтению и переводу специальной литературы

Тема 2.36: Инфекционные заболевания

Aim of the lesson: development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topics.

Educational importance of the topic: Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, basic Anatomy and Physiology vocabulary.

Practical skills and knowledge after the lesson: the students should ask and answer questions on the above topic and speak about causes, risk factors and risk groups, common symptoms, evaluation, treatment and prevention for the disease.

#### 1. Grammar Revision.

Проанализируйте предложения и вставьте необходимый по смыслу модальный глагол из приведенного ниже списка (цифра в скобках указывает, сколько раз должен быть использован глагол).

can (3), cannot (4), may (5), must (4), should (1)
1. A virus multiply hundreds of times.
2. Each side of the heart perform different work.
3. With age calcium loss be entirely prevented.
4. A wide variety of other systems be damaged by the rheumatoid process.
5. All body cells be constantly supplied with oxygen.
5. Healthy bonesbe built without calcium salts.
7. These drugs improve the course of the disease.
8. Most viruses be seen only with electron microscope.
9. The heart be called a dual pump.
10. Lifeexist in the absence of water.
11. Like any other tissue in the body, the heart muscle receive oxygen-rich t
12. Heavy physical exertion increase the rate of blood flow to the muscles.
13. The blood in the capillaries be continually replaced with fresh blood.
14. An abnormal heart valve cause malfunction.
15. Many foodscause allergic reactions.
16. In an anemic person, the blood provide the tissues with enough oxygen.

#### 2. Reading for Information: pp. 236-237, ex. V.

Home work: Make up a story on the topic «Infectious Diseases», using patterns for retelling texts on diseases.

#### **Basic literature**:

для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Английский язык Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

**Optional literature:** Grammar Practice (практическое пособие по грамматике): учебное пособие. Т.Б. Агалакова, В.А. Авдеева, И.Л. Дмитриевых, Е.Н. Шубина. Киров: Изд-во Кировской ГМА, 2013.

Раздел 3. Медицинское образование: обучение основам устного профессионального общения

Тема 3.1: Медицинское образование в России

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topics.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, basic vocabulary.

**Practical skills and knowledge after the lesson**: the students should ask and answer questions and make up a short story or a dialogue on the above topic.

#### Algorithm of the lesson:

1. Phonetic Drill.

P. 230, ex. 1, 2.

2. Reading and Translation.

PP. 231-233, ex. 4.

**Home work**: p. 234, ex. 7.

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

**Optional literature:** Grammar Practice (практическое пособие по грамматике): учебное пособие. Т.Б. Агалакова, В.А. Авдеева, И.Л. Дмитриевых, Е.Н. Шубина. Киров: Изд-во Кировской ГМА, 2013.

Раздел 3. Медицинское образование: обучение основам устного профессионального общения

Тема 3.2: Медицинское образование в России

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topics.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, basic vocabulary.

**Practical skills and knowledge after the lesson**: the students should ask and answer questions and make up a short story or a dialogue on the above topic.

#### 1. Phonetic Drill.

P. 230, ex. 2.

2. Reading and Speaking.

PP. 231-234, ex. 4, 7, 8.

**Home work**: p. 236, ex. 13.

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

Раздел 3. Медицинское образование: обучение основам устного профессионального общения

Тема 3.3: Медицинское образование за рубежом

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topics.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson**: the students should know basic tense- and voice forms, basic vocabulary. **Practical skills and knowledge after the lesson**: the students should ask and answer questions and make up a short story or a dialogue on the above topic.

#### 1. Phonetic Drill.

Pp. 246-247, ex. 1, 2.

2. Reading and Speaking.

PP. 247-250, ex. 4.

**Home work**: pp. 250, ex. 5.

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

Раздел 3. Медицинское образование: обучение основам устного профессионального общения

Тема 3.4: Медицинское образование за рубежом

**Aim of the lesson:** development of speaking, reading, retelling, translation, and comprehension skills, competence within the above topics.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, basic vocabulary.

**Practical skills and knowledge after the lesson**: the students should ask and answer questions and make up a short story or a dialogue on the above topic.

## 1. Phonetic Drill.

P. 247, ex. 2.

#### 2. Vocabulary Exercises:

I. Give Russian equivalents for the following English words and phrases:

training of doctors; course of studies; academic achievement; competition; curriculum; a ward; out-patient department (o.p.d.); obligatory; internal medicine; preventive medicine; radiology; charge; lodging; utilities.

II. Give English equivalents for the following Russian words and phrases:

лечебный факультет; закончить начальную / среднюю школу; поступать в медицинский вуз; абитуриент; интернатура; проходить практику; выпускник медицинского вуза; медицинское обслуживание; медицинское страхование; декан.

#### 3. Test Translation

**Home work**: p. 250, ex. 7.

#### **Basic literature**:

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

Раздел 3. Медицинское образование: обучение основам устного профессионального общения

Тема 3.5: Медицинское образование за рубежом

**Aim of the lesson:** control of speaking, reading, translation, and comprehension skills, competence within the above topics.

**Educational importance of the topic:** Cultural development and moral education of students in doctor's training. Formation of systematic approach to the analysis of medical information, the perception of innovation; the formation of ability and readiness to self-improvement and self-education, personal and subject reflection.

**Practical skills before the lesson:** the students should know basic tense- and voice forms, basic vocabulary.

**Practical skills and knowledge after the lesson**: the students should ask and answer questions and make up a short story or a dialogue on the above topic.

#### 1. Self-Improvement Test

P. 252, ex. 10

#### 2. Final Computer Test

#### **Basic literature:**

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

**Optional literature:** Grammar Practice (практическое пособие по грамматике): учебное пособие. Т.Б. Агалакова, В.А. Авдеева, И.Л. Дмитриевых, Е.Н. Шубина. Киров: Изд-во Кировской ГМА, 2013.

**Раздел 3.** Медицинское образование: обучение основам устного профессионального общения **Тема 3.6:** Зачетное занятие

**Цель:** Оценка знаний, умений и навыков коммуницирования на иностранном языке для решения задач профессиональной деятельности и контроль результатов освоения дисциплины.

#### Задачи:

- 1. Осуществить контроль усвоения необходимого объема продуктивного и рецептивного лексического минимума;
- 2. Выявить уровень сформированности умений и навыков чтения и перевода иноязычного текста;

3. Выявить уровень владения иностранным языком для осуществления межкультурной профессиональной коммуникации.

#### Обучающийся должен знать:

- лексический минимум в объеме 4000 учебных лексических единиц общего и терминологического характера;
- основы техники перевода научного текста по специальности;
- основы аннотирования и реферирования научного текста;
- основную медицинскую терминологию на иностранном языке.

#### Обучающийся должен уметь:

- читать оригинальный текст со словарем с полным и точным пониманием содержания;
- читать оригинальный текст без словаря с целью ознакомления с содержанием;
- устно и письменно аргументировать, вести дискуссию с использованием научной медицинской терминологии на иностранном языке.

#### Обучающийся должен владеть:

Nº5

- иностранным языком в объеме, необходимом для коммуникации и возможности получения информации из зарубежных источников;
- навыками устной и письменной речи, проведения дискуссии с использованием научной медицинской терминологии на иностранном языке.

медицинской терминологии на иностранном языке.
Самостоятельная аудиторная работа обучающихся по теме:
1) Компьютерное тестирование.
Примерные тестовые задания:
Nº1
Соотнесите слово-идентификатор и временную группу:
Past Simple
1 now
2 next week
3 ast summer
4 yesterday
5 often
Nº2
Определите значение модального глагола:
might
1 О быть в состоянии сделать что-либо
2 О совет
3 О разрешение
4 🔘 вынужденная необходимость
Nō3
Найдите глаголы в страдательном залоге (Passive Voice):
1 were having
2 are treated
3 was done
4 is speaking
Nº4
My family and I live in Kirov.
1 <b>O</b> a
2 O an
3 O the
4 O no article

We attend lectures preclinical disciplines.  1	
Aspirin coronary blood flow.  1 ○ improve 2 ○ will improve 3 ○ improves 4 ○ is improved	
Nº7	
Cootнесите вопрос и ответ:  1 When's your birthday?  2 What's the date today?  3 How old are you?	<ul><li>[1] It's on 21st March.</li><li>[2] I'm thirteen.</li><li>[3] Fine, and you?</li><li>[4] It's 19th October.</li></ul>
№8	
Cootнесите части предложений:  1 KSMA's emblem consists of  2 We take exams in  3 My hobbies are	<ul> <li>[1] different subjects</li> <li>[2] reading, dancing, singing, cooking</li> <li>[3] a medical cross, a textbook, a cup and a snake</li> <li>[4] to enter KSMA</li> </ul>
№9	
Paccтaвь слова в правильном порядке, чтобы 1 the joints 2 causes 3 the system 4 to attack 5 Rheumatoid arthritis 6 immune Ответ:	получилось предложение
Nº1	0
Madi	sino

#### Medicine

Medicine is a science and art at the same time. Its aim is to cure and prevent diseases. Medicine helps to maintain or restore human health through its study, diagnosis, and treatment. The term is derived from the Latin "arsmedicina" which means the "the art of healing". The modern practice of medicine is connected to the health sciences, biomedicine and other sciences. Today the term "medicine" refers to the fields of clinical medicine, research and surgery.

Modern medicine developed in the Western world in the early Renaissance (around 1450). Many other traditions of health care are still practiced in the world, for example, biomedicine, traditional Chinese and Tibetan medicine.

Medicine comprises many specialized sub-branches, such as cardiology, pulmonology, neurology, psychology, sports medicine, paediatrics and many others. Anatomy is the science of body structure of a living organism. Human Anatomy studies the structure of a human body. Histology is a science, which studies tissues of the body. Biology is the science of life, the study of all living organisms. Physiology is the science, which studies the functions of the living organisms. Psychology is a science which deals with the human behaviour. A person who specializes in psychology is a psychologist. "Medicine" is also often used amongst medical professionals as shorthand (сокращение) for internal medicine. Veterinary medicine is the practice of health care in animal species other than human beings.

# What is not mentioned in the text? 1 O nanomedicine 2 O Veterinary medicine 3 O Tibetan medicine 4 O Psychology

#### Соотнесите выделенное слово из текста и его значение.

1	 A field of medicinethat studies childrens' health conditions	[1]	paediatrics
2	 A scientific investigation	[2]	treatment
3	 purpose	[3]	research
4	 A field of medicine studying a living body's composition	[4]	anatomy
	Art of healing, managing a disease	[5]	aim

#### Mark the statements True (T), False (F), Not Stated (NS).

1	 The purpose of medicine is to give first aid	[1]	F
2	 Blood diseases are investigated by hematologists.	[2]	Т
3	 Pulmonology is a specialized field of medicine.	[3]	NS

#### 2. Собеседование по теме (монологическое высказывание).

Примерные темы:

- 1. О себе.
- 2. Кировский государственный медицинский университет
- 3. Заболевания сердечно-сосудистой системы: сердечный приступ (инфаркт)
- 4. Заболевания респираторной системы: рак легкого
- 5. Заболевания нервной системы: инсульт
- 6. Инфекционные заболевания
- 7. Медицинское образование в России
- 8. Медицинское образование за рубежом

#### 3. Перевод со словарем текста с английского языка на русский язык.

Примерные тексты:

#### **Bronchitis**

Bronchitis refers to inflammation of the airways (bronchi) in the lungs. This most often occurs secondary to a bacterial infection already present in the airways. Bronchitis differs from pneumonia, where the infection is deeper into the lung tissue. Bronchitis is a common infection seen in the smoking population who may also suffer simultaneously from chronic obstructive pulmonary disease. Smokers have difficulty clearing their secretions (mucus) and have diminished immunity against infection.

Common symptoms include productive cough (in smokers, it may be occasionally blood streaked), fever, and chills. Shortness of breath is seen in more severe cases. Bronchitis is almost indistinguishable from pneumonia on the basis of symptomology alone. Long time smokers develop "wheezing", where breathing out is more difficult than breathing in. The act of breathing out may be accompanied by a musical wheeze.

Evaluation will include a medical history and physical examination in addition to a chest x-ray (to rule out pneumonia), blood tests (CBC, blood chemistry) and sputum cultures. Patients with shortness of breath may have an arterial blood gas performed to make sure their lung function is normal. In most cases treatment is with oral antibiotics. Some cases with evidence for compromised lung function (long standing smokers with COPD) will require hospitalization. Those patients with "wheezing" will require bronchodilators. These are often administered as an aerosolized medication, inhaled by the patient. Inhalational treatment can be performed at home, but hospitalization will be required for patients who show a poor response to therapy.

The majority of patients with bronchitis can be treated at home with close medical follow-up. A follow-up chest x-ray (several days later) will be performed in those patients not responding to treatment. The x-ray may reveal a developing pneumonia. Acetaminophen or aspirin should be used for fever control.

#### **OSTEOPOROSIS**

Osteoporosis mainly affects women after the age of the menopause, although men can have it too. It can occur in younger people if they have other predisposing factors.

What causes it?

The condition occurs because from around the age of 35 more bone cells are lost than replaced. This causes the bone density to decrease.

The first sign is commonly when a minor bump or fall causes a bone fracture. These may result in pain, disability, loss of independence, and death. Osteoporosis may cause people to 'shrink' as they get older. It causes the characteristic 'dowager's hump'.

Who is affected?

About 3 million people in the UK have the condition, which is more common in women than men. Every year in the UK over 230,000 fractures occur because of osteoporosis. In the UK one in two women and one in five men over the age of 50 will suffer a fracture.

After the menopause bone loss speeds up making osteoporosis more likely. In women the risk is increased if they have an early menopause, have their ovaries removed before the menopause, or miss periods for six months or more as a result of over-exercising or over-dieting.

For men low levels of testosterone increase the risk. For men and women long-term use of corticosteroid medication, maternal osteoporosis, smoking, heavy drinking, sedentary lifestyle, and low body weight all increase the risk.

What happens then?

If you answer yes to two or more of these questions, you may have osteoporosis or be at risk of it. Go to see your GP who'll send you for specialist assessment.

As well as an examination and blood checks, there are a variety of tests which can give you a more definite density assessment. The commonest one is called a DEXA scan. This painless test involves a low dose of x-rays (less than a normal x-ray) usually across your wrist or hip, which gives a specific picture of how dense your bones are. The specialist will then tell you whether you have osteoporosis, or are at risk, and will suggest treatments.

Oestrogen, either naturally before the menopause or as HRT, is known to protect against bone loss. There a number of treatment options if you're diagnosed with osteoporosis.

Ways to prevent osteoporosis

You can help yourself by taking general measures such as the following:

- Increasing the calcium in your diet.
- Increasing weight-bearing exercise as this helps maintain bone density.
- Reducing both alcohol intake and cigarette smoking.

Medication may include:

- Calcium and vitamin D supplements.
- A variety of hormone-type treatments including HRT, tibolone and SERMS.
- Bisphosphonates are a group of drugs, which prevent bone breakdown and can be very effective in osteoporosis.

It's better to prevent any condition than simply to manage it when it happens. Osteoporosis assessment and management is an important factor in maintaining the health of your bone structure as you enter middle age.

#### Самостоятельная внеаудиторная работа обучающихся по теме:

Подготовиться к зачетному занятию.

#### Рекомендуемая литература:

#### Основная:

Английский язык для медицинских вузов: учебник/ А.М. Маслова, З.И. Вайнштейн, Л.С. Плебейская.- М.: «ГЭОТАР-МЕДИА», 2015.

Medical English for firstyear students. В.А. Головин. Киров: Изд-во Кировской ГМА, 2011.

# Дополнительная:

Grammar Practice (практическое пособие по грамматике): учебное пособие. Т.Б. Агалакова, В.А. Авдеева, И.Л. Дмитриевых, Е.Н. Шубина. Киров: Изд-во Кировской ГМА, 2013.

Федеральное государственное бюджетное образовательное учреждение высшего образования «Кировский государственный медицинский университет» Министерства здравоохранения Российской Федерации

#### Кафедра иностранных языков

#### Приложение Б к рабочей программе дисциплины

#### ОЦЕНОЧНЫЕ СРЕДСТВА

# для проведения текущего контроля и промежуточной аттестации обучающихся по дисциплине

«Иностранный язык» (английский язык)

Специальность 31.05.02 Педиатрия Направленность (профиль) ОПОП - Педиатрия

1. Перечень компетенций с указанием этапов их формирования в процессе освоения

образовательной программы

Код	Содержание	Резу	ультаты обучени	Я	Разделы	Номер
компете	компетенци				дисциплины,	семестр
нции	И		**	ъ .	при освоении	а, в
		Знать	Уметь	Владеть	которых	которо
					формируется	M
					компетенция	формир
						уется
						компет
						енция
ОПК-2	Готовность к	31. Лексически	У1. Использова	В1. Владеть	Раздел 1	1, 2
	коммуникации	й минимум в	ть иностранный	иностранным	Вводно-	семестр
	в устной и	объеме 4000	язык для	языком в	коррективный	ы
	письменной	учебных	получения	объеме,	курс	
	формах на	лексических	профессиональ	необходимом	<u>Раздел 2</u>	
	русском и	единиц общего	но значимой	для	Основы	
	иностранном	И	информации	коммуникаци	медицины:	
	языках для	терминологиче	(читать	И И	обучение	
	решения задач	ского	оригинальный	возможности	чтению и	
	профессионал	характера;	текст со	получения	переводу	
	ьной	основы техники	словарем с	информации	специальной	
	деятельности.	перевода	полным и	ИЗ	литературы	
		научного текста	точным	зарубежных	<u>Раздел 3</u>	
		ПО	пониманием	источников.	Медицинское	
		специальности,	содержания, а		образование:	
		основы	также без		обучение	
		аннотирования	словаря с целью		основам	
		И	ознакомления с		устного	
		реферирования	содержанием)		профессиональ	
		научного			ного общения	
		текста.				

# 2. Показатели и критерии оценивания компетенций на различных этапах их формирования, описание шкал оценивания

Показате	кал оцениват		калы оценивани	я	Оценочно	е средство
ли оценива ния	не зачтено	зачтено	зачтено	зачтено	для текущего контроля	для промежуто чной аттестации
			ПК-2			
Знать	31. Не знает лексический минимум в объеме 4000 учебных лексических единиц общего и терминологич еского характера; имеет фрагментарн ые знания основ техники перевода научного текста по специальност и, основ аннотировани я и реферировани я научного текста.	31. Не в полном объеме знает лексический минимум в объеме 4000 учебных лексических единиц общего и терминологичес кого характера; имеет общие, но не структурирован ные знания основ техники перевода научного текста по специальности, основ аннотирования и реферирования научного текста.	31. Знает лексический минимум в объеме 4000 учебных лексических единиц общего и терминологичес кого характера, но допускает ошибки; имеет сформированны е, но содержащие отдельные пробелы знания основ техники перевода научного текста по специальности, основ аннотирования и реферирования научного текста.	31. Знает лексический минимум в объеме 4000 учебных лексических единиц общего и терминологическ ого характера; имеет сформированные систематические знания основ техники перевода научного текста по специальности, основ аннотирования и реферирования научного текста.	тесты; контрольные работы; темы для собеседован ия; тексты на иностранном языке для перевода на русский язык	тестовые задания; тема для собеседова ния; текст для перевода на русский язык
Уметь	У1. Не освоено или освоено частично умение использовать иностранный язык для получения профессионально значимой информации (читать оригинальный текст со словарем с полным и точным пониманием содержания, а также без словаря с целью ознакомления	У1. В целом успешное, но не систематически осуществляемое умение использовать иностранный язык для получения профессиональн о значимой информации (читать оригинальный текст со словарем с полным и точным пониманием содержания, а также без словаря с целью ознакомления с содержанием)	У1. В целом успешное, но содержащее отдельные пробелы умение использовать иностранный язык для получения профессиональ но значимой информации (читать оригинальный текст со словарем с полным и точным пониманием содержания, а также без словаря с целью	У1. Сформированное умение использовать иностранный язык для получения профессионально значимой информации (читать оригинальный текст со словарем с полным и точным пониманием содержания, а также без словаря с целью ознакомления с содержанием)	тесты; контрольные работы; темы для собеседован ия; тексты на иностранном языке для перевода на русский язык	тестовые задания; тема для собеседова ния; текст для перевода на русский язык

	с содержанием)		ознакомления с содержанием)			
Владеть	В1. Фрагментарн ое применение навыков использовани я иностранного языка для получения профессионал ьно значимой информации (читать оригинальны й текст со словарем с полным и точным пониманием содержания, а также без словаря с целью ознакомления	В1. В целом успешное, но не систематическо е применение навыков использования иностранного языка для получения профессиональн о значимой информации (читать оригинальный текст со словарем с полным и точным пониманием содержания, а также без словаря с целью ознакомления с содержанием)	В1. В целом успешное, но содержащее отдельные пробелы применение навыков использования иностранного языка для получения профессиональ но значимой информации (читать оригинальный текст со словарем с полным и точным пониманием содержания, а также без словаря с целью ознакомления с	В1. Успешное и систематическое применение навыков использования иностранного языка для получения профессионально значимой информации (читать оригинальный текст со словарем с полным и точным пониманием содержания, а также без словаря с целью ознакомления с содержанием).	тесты; контрольные работы; темы для собеседован ия; тексты на иностранном языке для перевода на русский язык	тестовые задания; тема для собеседова ния; текст для перевода на русский язык
	с содержанием)		содержанием)			

# 3. Типовые контрольные задания и иные материалы

# 3. 1 Примерные тестовые задания (ОПК-2)

# 3.1.1 Примерные тестовые задания для проведения промежуточной аттестации, критерии оценки

<b>№</b> 1
Соотнесите слово-идентификатор и временную группу:
Past Simple
1 now
2 □ next week
3 🗆 last summer
4 pesterday
5 often
<b>№</b> 2
Соотнесите слово-идентификатор и временную группу:
Present Continuous
1 at the moment
2 now
3 □ next summer
4 last summer

5 often
№3
Определите значение модального глагола: <b>might</b>
1 О быть в состоянии сделать что-либо
2 🔾 совет
3 О разрешение
4 О вынужденная необходимость
№4
Определите значение модального глагола: should
1 О разрешение
2 О вынужденная необходимость
3 О быть в состоянии сделать что-либо
4 О совет
№5
Найдите глаголы в страдательном залоге (Passive Voice):
1 were having
2 are treated
3 was done
4 □ is speaking
№6
Определите видовременную форму глагола: operate
1 O Past Simple Passive
2 O Present Simple Passive
3 O Present Simple Active
4 O Present Perfect Active
№7
My family and I live in Kirov.
1 O a
2 O an
3 O the
4 O no article
№8
Senior medical students study a lot of clinical subjects such as Internal Medicine, Surgery, Neurology, and Obstetrics.
1 O no article
2.0

3 \( \text{the} \) 4 \( \text{o an} \)
№9
My medical school is situated Karl Marx Street.  1
<i>№</i> 10
We attend lectures preclinical disciplines.  1
<b>№</b> 11
Aspirin coronary blood flow.  1 \( \right) \text{ improve}  2 \( \right) \text{ will improve}  3 \( \right) \text{ improves}  4 \( \right) \text{ is improved}
<b>№</b> 12
<ul> <li>I here since I was born</li> <li>1 O is living</li> <li>2 O have been living</li> <li>3 O live</li> <li>4 O am living</li> </ul>
<b>№</b> 13
I think I know English very well because English is a must for a well educated doctor.  1
<b>№</b> 14
I take your blood pressure?  1

Найдите прилагательные в превосходной степени сравнения:		
1 busier		
2 more interesting		
3 □ tallest		
4 □ most popular		
2006		
№16		
Who is the student in your group?		
1 O Attentive		
2 O More attenrive		
3 Attentivest		
4 \( \) Most attentive		
<b>№</b> 17		
Give a synonym for the word "sternum":		
1 O arm		
2 O clavicle		
3 O breastbone		
4 O trunk		
<b>№</b> 18		
When we breathe in, the volume of the chest		
1 O decreases	·	
2 O increases		
3 O passes		
4 O all of the above		
1 6 an or the above		
<b>№</b> 19		
Вставьте подходящий предлог		
1 I usually get up6 o'clock	[1] with	
2 — Over 4,500 students are instructed professors and educators.	[2] at	
professors and educators.	[3] by	
	[3] 09	
<b>№</b> 20		
Соотнесите слово-идентификатор и видовремен	ную форму глагола	
1 Present Perfect	[1] last month	
2 Past Simple	[2] at the moment	
3 Present Continuous	[3] just	
4 Present Simple	[4] sometimes	
<b>№</b> 21		
Соотнесите модальный глагол с его значением		
1 should	[1] разрешение	
2 to have to	[2] совет	

$3  \underline{\hspace{1cm}} $ may	[3] быть в состоянии сделать что-либо		
4 can	[4] вынужденная необходимость		
<i>№</i> 22			
Соотнесите модальный глагол с его значением			
1 can	[1] долженствование		
2 may	[2] способность совершить действие		
3 must	[3] разрешение		
4 needn't	[4] отсутствие необходимости		
№23			
Соотнесите вопрос и ответ:			
1 When's your birthday?	[1] It's on 21st March.		
2 What's the date today?	[2] I'm thirteen.		
3 How old are you?	[3] Fine, and you?		
-	[4] It's 19th October.		
№24			
Who said it?			
1 I came, I saw, I conquered.	[1] Willim Shakespeare		
2 To be, or not to be, that is the question.	[2] Queen Victoria		
3 That's elementary, Watson.	[3] Julius Caesar		
	[4] Arthur Conan Doyle		
	·		
<i>№</i> 25			
Соотнесите части предложений:			
1 KSMA's emblem consists of	[1] different subjects		
2 We take exams in	[2] reading, dancing, singing, cooking		
2 My habbias and	[3] a medical cross, a textbook, a cup and a		
3 My hobbies are	<sup>[3]</sup> snake		
	[4] to enter KSMA		
<b>№</b> 26			
Расставь слова в правильном порядке, чтобы по	олучилось предложение		
1 the joints			
2 causes			
3 the system			
4 to attack			
5 Rheumatoid arthritis			
6 immune			
Отве			
т. — — — —			

#### Medicine

Medicine is a science and art at the same time. Its aim is to cure and prevent diseases. Medicine helps to maintain or restore human health through its study, diagnosis, and treatment. The term is derived from the Latin "arsmedicina" which means the "the art of healing". The modern practice of medicine is connected to the health sciences, biomedicine and other sciences. Today the term "medicine" refers to the fields of clinical medicine, research and surgery.

Modern medicine developed in the Western world in the early Renaissance (around 1450). Many other traditions of health care are still practiced in the world, for example, biomedicine, traditional Chinese and Tibetan medicine.

Medicine comprises many specialized sub-branches, such as cardiology, pulmonology, neurology, psychology, sports medicine, paediatrics and many others. Anatomy is the science of body structure of a living organism. Human Anatomy studies the structure of a human body. Histology is a science, which studies tissues of the body. Biology is the science of life, the study of all living organisms. Physiology is the science, which studies the functions of the living organisms. Psychology is a science which deals with the human behaviour. A person who specializes in psychology is a psychologist. "Medicine" is also often used amongst medical professionals as shorthand (сокращение) for internal medicine. Veterinary medicine is the practice of health care in animal species other than human beings.

What is not mentioned in the text?

- 1 ∩ nanomedicine
- 2 O Veterinary medicine
- 3 O Tibetan medicine
- 4 O Psychology

Соотнесите выделенное слово из текста и его значение.

1	 A field of medicinethat studies childrens' health conditions	[1] paediatrics
2	 A scientific investigation	[2] treatment
3	 purpose	[3] research
4	 A field of medicine studying a living body's composition	[4] anatomy
5	 Art of healing, managing a disease	[5] aim

Mark the statements True (T), False (F), Not Stated (NS).

1	 The purpose of medicine is to give first aid	[1] F
2	 Blood diseases are investigated by hematologists.	[2] T
3	 Pulmonology is a specialized field of medicine.	[3] NS

#### Критерии оценки:

«зачтено» - не менее 71% правильных ответов; «не зачтено» - 70% и менее правильных ответов.

# 3.1.2 Примерные тестовые задания для проведения текущего контроля, критерии оценки

# Раздел 1 Вводно-коррективный курс

Тест для входного контроля

Вариант 1 (Раскройте скобки, употребив глагол в подходящем времени)
What 1 your name (to be)? My (first, middle, last) name (to be) 2 When and where
3 you (to bear, bore, born)? I (to bear, bore, born) 4 in the city of Kirov
on the 1 <sup>st</sup> of August 1990. Where 5 you (to live) ? I (to live) 6 in the city
of Kirov. What 7 your home address (to be)? My home address (to be) 8 apartment 5, building
of flats 25, Karl Marx Street. What 9 your phone number? My phone number (to be) 10 What
11 your mobile phone number? My mobile phone number (to be) 12 What 13 your parents
(to be)? What 14 your parents (to do) ? What 15 your parents' occupation? My father (to
be) 1 a doctor. What 2 your mother (to be)?
Вариант 2 (Раскройте скобки, употребив глагол в подходящем времени)
What school 3 you (to graduate) from? I (to graduate) 4 from
school 37 (school specializing in Biology and Chemistry (natural Sciences). How 5 you (to finish)
school? I (to complete) 6 school with honors ['onez] (with good and
excellent marks). Why 7 you (to decide) to enter Kirov State Medical Academy. I (to
make up) 8 my mind to enter the Internal Medicine Department of Kirov State Medical
Academy because I (to want) 9 to be a doctor (because I (to want)10 to treat and cure
patients, because Kirov State Medical Academy is one of the best medical schools of Russia). What Unified
State Exams 11 you (to take)? I (to take) 12 Unified State Exams in three
subjects (in Biology, Chemistry and Russian). How many points 13 you (to get) for the
exams? I (to get) 14 211 points. What subjects (what discipline) 15 you (to study)
· · · · · · · · · · · · · · · · · · ·
Вариант 3 (Раскройте скобки, употребив глагол в подходящем времени)
We (to study) 1 English, Latin, Histology, History of Russia, History of Medicine,
General Chemistry, Biochemistry, Normal Anatomy, Pathological Anatomy, Physics, Mathematics, Data
Processing, Biology, Normal Physiology, Pathological Physiology, Microbiology, Pharmacology, and
General Hygiene. What subjects 2 you (to take) tests in? We (to take) 3 tests in
What subjects 4 you (to take) exams in? We (to take)5 exams in What
subjects 6 you (to have) lectures <b>on</b> ? We (to have)7 lectures <b>on</b> How many
and what examination sessions 8 you (to have) ? We (to have) 9 two
examination sessions <b>in</b> winter and <b>in</b> summer (in January and in June). When 12 you usually (to get up) ? I usually (to get up) 13 <b>at</b> 6 a.m. (at 6 o'clock in the morning). How many
lessons 14 you usually (to have) ? We usually (to have) 5 or 6 lessons every day.
When 15 vour lessons (to begin) ? My lessons usually (to begin) 1 at 8.30
When 15 your lessons (to begin) ? My lessons usually (to begin) 1 at 8.30 (half past 8). When 2 your lessons (to be) over? My lessons (to be)3 over at 4 or 5 p.m.
When 4 your medical school (to found, to establish, to organize)?
Вариант 4 (Раскройте скобки, употребив глагол в подходящем времени)
The medical school (to found, to establish, to organize) 5 on the 2 <sup>nd</sup> of April
1987. Who(m)6 the academy (to found, to establish, to organize) by. It (to
found, to establish, to organize) 7 by Professor Zhuravlev, the famous Russian
surgeon. How many students (to study) 8 at Kirov State Medical Academy. Over 4,500
students (to study)9 at my medical school. How many professors and instructors (to work) 10 at (for) the academy. Over 300 professors, associate professors, assistant
work) 10 at (for) the academy. Over 300 professors, associate professors, assistant
namessars and connear instructors on work for the surface of medical school. How many facilities ( )

the medical school (to consist of, to	include, to have)	? The academy (to consist <b>of</b> , to
include, to have) 13	7 faculties. What 14	the main faculties (to be)? The
main faculties (to be)15 the Interna	l Medicine Faculty, the Pediat	trics Faculty, the Dentistry Faculty,
the Economics and Food Expertise Fac	culty, the Nursing Faculty, the	he Social Work Faculty, and the
Professional Postgraduate Education Facu	ılty.	

#### Tecm no meме «Skeleton/Muscles»

Вариант 1

Бари	іант 1	1	
1.	Which bone in the body does not meet another bone	11.	What is in the middle of your bones?
in th	e body?	a.	red blood cells
a.	sternum	b.	cartilage
b.	hyoid	c.	bone marrow
c.	anvil	d.	none of the above
d.	hammer	12.	How many clavicle bones are there in a human
2.	How many bones are in your hand?	body?	
a.	23	a.	3
b.	25	b.	6
c.	27	c.	8
d.	30	d.	5
3.	What is the smallest bone in your body	13.	How many facial bones?
a.	Stapes	a.	16
b.	femur	b.	20
c.	pelvis	c.	25
d.	metatarsals	d.	14
4.	What is the longest bone in your body?	14.	What is the purpose of the bones in the skeletal
a.	humerus	system	)
b.	femur	a.	to move
c.	spine	b.	to support the body
d.	none of the above	c.	help the red blood cells
5.	What joint is in your hips	d.	to make u have strength
a.	ball and Socket	15.	What is the mature bone cells called?
b.	Hinge Joint	a.	dense regular ct
c.	Gliding joint	b.	sweat gland
d.	Pivotal Joint	c.	osteocytes
6.	How many bone are there in the arm	d.	collagen
a.	3	16.	What is the bone used for
b.	5	a.	hold up the body
c.	6	b.	give the body shape
d.	10	c.	and is jiont by ligament
7.	Skeletal system consists of	d.	all of the above
a.	bone	17.	What is the skeleton made up of
b.	muscle	a.	bones
c.	fiber	b.	hands
d.	bone and muscle	c.	face
8.	How many bones are there in skeleton system	d.	apple
a.	204	18.	What is the name of the knee cap
b.	320	a.	phalanges
c.	209	b.	patella

d.	206	c. clavicle
9.	What is the scientific name of the shoulder blade?	d. scupula
a.	clavicle	19. THE ONLY BONE THAT DOES NO
b.	tibia	ARTICULATE WITH OTHER BONE
c.	scapula	a. PATELLA
d.	cranium	b. SCAPULA
10.	What is red marrow and where can it be located?	c. VOMER
a.	A layer that produces blood cells	d. HYOID
b.	A joint	20. Wich bone grows in the childhood together?
c.	A muscle	a. The Patella
d.	A organ	b. The Cranium
	-	c. The Clavicle
		d. The Pelvic Girdle

#### Вариант 2

1.	What is the largest bone in the body?	11. How many bones has the human body got?	
a.	humerus	a. 112	
b.	scapula	b. 206	ļ
c.	cranium	c. 288	
d.	femur	d. 344	
2. D	it is a bone disease caused by deficiency of vitamin	12. Approximately how many muscles has the body got?	human
a.	scoliosis	a. Over 100	
b.	osteoporosis	b. Over 200	
c.	rickets	c. Over 400	
d.	arthritis	d. Over 600	
3.	it is a disease of joints and affects mostly elderly	13. Which of these are part of the Axial Skeleton	1?
people		a. Skull and Ribs	ļ
a.	scoliosis	b. Arms and Legs	ļ
b.	osteoporosis	c. Shoulders	
c.	rickets	d. Hips	
d.	arthritis	14. The Skull is made up of the Cranium and Jav	v. How
4.	it is a disease of the bones common to women as they	many bones is it made up of?	ļ
grow ol		a. 20	
a.	scoliosis	b. 22	ļ
b.	osteoporosis	c. 24	ļ
c.	rickets	d. 26	
d.	arthritis	15. How many bones has the Vertebral Column §	got?
5.	Why is a contortionist can bend freely his/her body	a. 22	ļ
easily?	December 11a/Cha 11aa amainad an bis/ban	b. 33	ļ
a. knee	Because He/She Has sprained on his/her	c. 50	ļ
b.	Because He/She Is So Thin	d. 60	
c.	Because He/She has very loose ligaments	16. The Sternum is more commonly known as w	hat?
d.	Because He/She's Bones Is Displaced	a. Pelvis	
6.	How Many Bones Are in the Human Adults	b. Back	
a.	543	c. Breastbone	
		d. Funny Bone	

b.	206	17.	What is the clavicle better known as?
	768		Tail Bone
C.		a.	
d.	none of the above	b.	Jaw
7.	What lubricates the joints and enables the bones to	c.	Collar Bone
	moothly?	d.	Kneecap
a.	Cartilage	18.	Which bone is in the arm?
b.	Synovial Fluid	a.	Humerus
c.	Ligaments	b.	Femur
d.	none of the above	c.	Patella
8.	which bone floats in our body?	d.	Scapula
a.	femur	19.	Where are phalanges located?
b.	scapula	a.	Hips
c.	sternum	b.	Knees
d.	none of these	c.	Shoulders
9.	A surface of a bone is covered with a thin membrane	d.	Hands and Feet
called?		20.	Which pair of bones are in the arms?
a.	bone marrow	a.	Fibula and Tibia
b.	collagen	b.	Radius and Ulna
c.	periosteum	0.	Radius and Onla
d.	spongy bone		
10.	There are over how many bones?		
a.	200		
b.	206		
c.	660		
d.	600		
		1	

# Раздел 2 Основы медицины: обучение чтению и переводу специальной литературы Вариант 1

1. I am sure the work tomorrow.  a) is finished b) finished c) will finished d) will be finished c) will finished c) will finished c) will be finished c) will be finished c) ware invited  2. The rule at the last lesson. a) was not explained b) not was explained c) didn't explain d) not explained c) didn't explain d) not explained c) are being built d) are built 3. Our hotel room before we got there. a) was cleaned b) had been cleaned c) is cleaned d) will be cleaned d) will be cleaned 4. When to our head office? a) will be the letters sent b) will the letters sent c) the letters will be sent d) will the letters be sent  11. Last year my friends and I to take part in a TV programme. a) invited b) invite b) invite c) were invited c) will be built d) are built list translated d) will be translating c) have been translated d) will translate d) will the letters sent b) will the letters sent b) had damaged c) had damaged d) have been damaged d) have been damaged			рариант 1			
b) finished c) will finished d) will be finished b) invite c) were invited d) are invited  2. The rule at the last lesson. a) was not explained b) not was explained c) didn't explain d) not explained c) didn't explain d) not explained c) are being built d) are built 3. Our hotel room before we got there. a) was cleaned b) had been cleaned c) is cleaned d) will be cleaned d) will be cleaned d) will be cleaned 4. When to our head office? a) will be the letters sent b) will the letters sent c) the letters will be sent d) will the letters be sent c) the letters will be sent d) will the letters be sent c) had damaged	1.		I am sure the work tomorrow.	11.	Last year my friends and I to take part in a TV	
c) will finished d) will be finished c) will be finished c) were invited d) are invited  2. The rule at the last lesson. a) was not explained b) not was explained c) didn't explain d) not explained c) didn't explain d) not explained c) are building c) are being built d) are built  3. Our hotel room before we got there. a) was cleaned b) had been cleaned c) is cleaned d) will be cleaned d) will be cleaned 4. When to our head office? a) will be the letters sent b) will the letters sent c) the letters will be sent d) will the letters be sent b) had been damaged d) will the letters be sent c) had damaged c) had damaged c) had damaged c) had damaged		a)	is finished	progran	programme.	
d) will be finished  c) were invited d) are invited  2. The rule at the last lesson. a) was not explained b) not was explained c) didn't explain d) not explained b) are building c) are being built d) are built  3. Our hotel room before we got there. a) was cleaned b) had been cleaned c) is cleaned d) will be cleaned 4. When to our head office? a) will be the letters sent b) will the letters sent c) the letters will be sent d) will the letters be sent  c) were invited d) are invited c) are being built d) are building c) are being built d) are built evening. a) will be translated b) will be translated d) will translate d) will translate d) will translate d) will translate d) will the letters sent b) will the letters sent b) had been damaged c) had damaged c) had damaged		b)	finished	a)	invited	
d) are invited  2. The rule at the last lesson. a) was not explained b) not was explained c) didn't explain d) not explained c) didn't explain d) not explained c) are building d) not explained c) are being built d) are built 3. Our hotel room before we got there. a) was cleaned b) had been cleaned c) is cleaned d) will be cleaned d) will be cleaned 4. When to our head office? a) will be the letters sent b) will the letters sent b) will the letters sent c) the letters will be sent d) will the letters be sent d) are invited  12. Some new metro stations in Moscow now. a) will be built b) are building c) are being built d) are built d) are built l13. I think the article tomorrow in the evening. a) will be translated b) will be translating c) have been translated d) will translate l4. How many cars in the accidents on this road so far? a) have damaged b) had been damaged c) had damaged		c)	will finished	b)	invite	
2. The rule at the last lesson. a) was not explained b) not was explained c) didn't explain d) not explained  3. Our hotel room before we got there. a) was cleaned b) had been cleaned c) is cleaned d) will be cleaned 4. When to our head office? a) will be the letters sent b) will the letters sent c) the letters will be sent d) will the letters be sent  12. Some new metro stations in Moscow now. a) will be built b) are building c) are being built d) are built 13. I think the article tomorrow in the evening. a) will be translated b) will be translated d) will translate 14. How many cars in the accidents on this road so far? a) have damaged b) had been damaged c) had damaged c) had damaged		d)	will be finished	c)	were invited	
a) was not explained b) not was explained c) didn't explain d) not explained c) our hotel room before we got there. a) was cleaned b) had been cleaned c) is cleaned d) will be cleaned 4. When to our head office? a) will be the letters sent b) will the letters sent c) the letters will be sent d) will the letters be sent  12. Some new metro stations in Moscow now. a) will be built b) are building c) are being built d) are built 13. I think the article tomorrow in the evening. a) will be translated b) will be translating c) have been translated d) will translate  14. How many cars in the accidents on this road so far? a) have damaged b) had been damaged c) had damaged c) had damaged				d)	are invited	
b) not was explained c) didn't explain d) not explained c) are building c) are being built d) are built  3. Our hotel room before we got there. a) was cleaned b) had been cleaned c) is cleaned d) will be cleaned 4. When to our head office? a) will be the letters sent b) will the letters sent c) the letters will be sent d) will the letters be sent  a) will be built b) are building c) are being built d) are built 13. I think the article tomorrow in the evening. a) will be translated b) will be translating c) have been translated d) will translate  4. How many cars in the accidents on this road so far? a) have damaged b) had been damaged c) had damaged	2.		The rule at the last lesson.			
c) didn't explain d) not explained  3. Our hotel room before we got there. a) was cleaned b) had been cleaned c) is cleaned d) will be cleaned 4. When to our head office? a) will be the letters sent b) will the letters sent c) the letters will be sent d) will the letters be sent  b) are building c) are being built d) are built 13. I think the article tomorrow in the evening. a) will be translated b) will be translating c) have been translated d) will translate  14. How many cars in the accidents on this road so far? a) have damaged b) had been damaged c) had damaged c) had damaged		a)	was not explained	12.	Some new metro stations in Moscow now.	
d) not explained  c) are being built d) are built  3. Our hotel room before we got there. a) was cleaned b) had been cleaned c) is cleaned d) will be cleaned  4. When to our head office? a) will be the letters sent b) will the letters sent c) the letters will be sent d) will the letters be sent  c) are being built d) are built  13. I think the article tomorrow in the evening. a) will be translated b) will be translating c) have been translated d) will translate  14. How many cars in the accidents on this road so far? a) have damaged b) had been damaged c) had damaged c) had damaged		b)	not was explained	a)	will be built	
d) are built  3. Our hotel room before we got there.  a) was cleaned b) had been cleaned c) is cleaned d) will be cleaned d) will be cleaned  4. When to our head office? a) will be the letters sent b) will the letters sent c) the letters will be sent d) will the letters be sent  d) are built  13. I think the article tomorrow in the evening. a) will be translated b) will be translating c) have been translated d) will translate  14. How many cars in the accidents on this road so far? a) have damaged b) had been damaged c) had damaged c) had damaged		c)	didn't explain	b)	are building	
3. Our hotel room before we got there.  a) was cleaned b) had been cleaned c) is cleaned d) will be cleaned 4. When to our head office? a) will be the letters sent b) will the letters sent c) the letters will be sent d) will the letters be sent  13. I think the article tomorrow in the evening. a) will be translated b) will be translating c) have been translated d) will translate  14. How many cars in the accidents on this road so far? a) have damaged b) had been damaged c) had damaged c) had damaged		d)	not explained	c)	are being built	
a) was cleaned b) had been cleaned c) is cleaned d) will be cleaned 4. When to our head office? a) will be the letters sent b) will the letters sent c) the letters will be sent d) will the letters be sent  a) will be translated d) will translate  4. How many cars in the accidents on this road so far? a) have damaged b) had been damaged c) had damaged				d)	are built	
a) was cleaned b) had been cleaned c) is cleaned d) will be cleaned c) have been translated d) will be cleaned d) will be cleaned d) will translate  4. When to our head office? a) will be the letters sent b) will the letters sent c) the letters will be sent d) will the letters be sent  a) will be translated d) will translate  14. How many cars in the accidents on this road so far? a) have damaged b) had been damaged c) had damaged	3.		Our hotel room before we got there.	13.	I think the article tomorrow in the evening.	
c) is cleaned d) will be cleaned c) have been translated d) will translate d) will translate d. When to our head office? a) will be the letters sent b) will the letters sent c) the letters will be sent d) will the letters be sent c) had damaged c) had damaged c) had damaged		a)		a)	will be translated	
d) will be cleaned d) will translate 4. When to our head office? a) will be the letters sent b) will the letters sent c) the letters will be sent d) will translate  14. How many cars in the accidents on this road so far? a) have damaged b) had been damaged c) had damaged c) had damaged		b)	had been cleaned	b)	will be translating	
4. When to our head office?  a) will be the letters sent b) will the letters sent c) the letters will be sent d) will the letters be sent  b) had been damaged c) had damaged c) had damaged		c)	is cleaned	c)	have been translated	
a) will be the letters sent b) will the letters sent c) the letters will be sent d) will the letters be sent  far?  a) have damaged b) had been damaged c) had damaged c) had damaged		d)	will be cleaned	d)	will translate	
b) will the letters sent c) the letters will be sent d) will the letters be sent a) have damaged b) had been damaged c) had damaged c) had damaged	4.		When to our head office?	14.	How many cars in the accidents on this road so	
c) the letters will be sent d) will the letters be sent b) had been damaged c) had damaged		a)	will be the letters sent	far?		
d) will the letters be sent c) had damaged		b)	will the letters sent	a)	have damaged	
a) will the letters se sent		c)	the letters will be sent	b)	had been damaged	
d) have been damaged		d)	will the letters be sent	c)	had damaged	
		,		d)	have been damaged	

5. They ... of everything before going on a trip. a) had been thought 15. John ... his ankle while he was playing football. b) had thought has sprained a) c) thought sprained b) d) were thought has been sprained c) d) was sprained 6. When you come tomorrow you ... everything you need. a) will be given 16. This man ... five people before the building b) were given exploded. will give c) saved a) d) given b) has saved had been saved 7. The door ... yellow a few days ago. d) had saved painted a) b) had been painted 17. This phenomenon ... for five years and now they was painted c) publish their book. d) had painted a) has been studied b) has been studying The show ... before we got to the theatre. c) was being studied a) had started d) was studied b) started c) had been started 18. When we entered the wall ... bright yellow. d) was started a) was painted b) was been painted 9. Some new schools ... next year. was painting will build was being painted a) b) will be built 19. The scull consists of ... bones. c) are built a) 26 b) 24 d) will built 3) 36 4) 48 10. My favourite book ... a great poet. 20. Women are ... high risk for the disease. a) wrote by b) was written from 1) in 2) about wrote from 3) of 4) at d) was written by

#### B

Вариант 2	
<ol> <li>Erythrocyte sedimentation rate is a type of</li> <li>physical examination 2) instrumental evaluation</li> <li>symptoms 4) treatment</li> </ol>	12. The heart to the left of the thorax.  1) is situated 2) be situated  3) situated 4) situates
<ul> <li>2. Anemia is a decrease in number of</li> <li>1) white blood cells 2) red blood cells</li> <li>3) thrombocytes 4) plasma</li> </ul>	13. Last year my friends and I to take part in a TV programme.  invited invite were invited are invited
<ol> <li>Rheumatoid arthritis affects more often.</li> <li>males 2) children</li> <li>females 4) all of the above</li> <li>The main function of blood vessels is to</li> </ol>	14. This recipe for several centuries.  was known has been known had been known is known
1) transport blood 2) remove waste products 3) supply nutrients 4) pump blood	15. 1,000 children every year in this city. are born will be born

were born 5. ... is a small bone formed be the arch and the body. born 1) vertebra 2) rib 3) chest 4) segment 16. In severe cases ... is necessary. 1) surgical 2) surgeon 3) surgically 4) surgery 6. Upper extremities are connected with the trunk by ....1) clavicle 2) shoulder girdle 17. The show ... before we got to the theatre. 3) pelvis 4) scapular 1) had started 2) started 3) had been started 7. Bones ... structural support. 4) was started 1) prevent 2) preventive 3) provide 4) provides 18. Some new schools ... next year. 1) will build 8. Bones of foot are .... 2) will be built 3) are built 1) tarsal, metatarsal 2) phalanges 4) will built 3) calcaneum 4) all of the above 19. My favourite book ... a great poet. 1) wrote by 9. ... muscles can be red and white. 2) was written from 1) cardiac 2) smooth 3) wrote from 3) skeletal 4) all of the above 4) was written by Our hotel room ... before we got there. 20. 10. Morning stiffness is a symptom of .... 1) was cleaned 1) polymiositis 2) atherosclerosis 2) had been cleaned 3) rheumatoid arthritis 4) arrhythmia 3) is cleaned 4) will be cleaned 11. Give a synonym for the word "sternum": 1) clavicle 2) septum 3) breastbone 4) trunk

#### Критерии оценки:

«отлично» - 91% и более правильных ответов; «хорошо» - 81%-90% правильных ответов; «удовлетворительно» - 71%-80% правильных ответов; «неудовлетворительно» - 70% и менее правильных ответов.

#### 3.2 Перечень тем для собеседования (ОПК-2)

### 3.2.1 Перечень тем для собеседования для проведения промежуточной аттестации, критерии оценки

- 1. О себе.
- 2. Кировский государственный медицинский университет
- 3. Организм человека: скелет
- 4. Организм человека: мышцы
- 5. Болезни опорно-мышечной системы. Ревматоидный артрит
- 6. Сердечно-сосудистая система: анатомия и физиология сердца
- 7. Сердечно-сосудистая система: кровь
- 8. Заболевания крови: анемия (лейкемия)
- 9. Заболевания сердечно-сосудистой системы: сердечный приступ (инфаркт)
- 10. Заболевания респираторной системы: пневмония
- 11. Заболевания респираторной системы: рак легкого
- 12. Нервная система
- 13. Заболевания нервной системы: инсульт

- 14. Желудочно-кишечный тракт и заболевание: гастрит
- 15. Анатомия: печень и ее заболевания (гепатит)
- 16. Мочевыделительная система
- 17. Анатомия почки и их заболевания (почечная недостаточность, острая и хроническая)
- 18. Инфекционные заболевания
- 19. Медицинское образование в России
- 20. Медицинское образование за рубежом

#### Критерии оценки:

Оценка «зачтено» выставляется студенту, если он обладает достаточным словарным запасом, владеет навыками использования иностранного языка для осуществления устной коммуникации; смог построить связное высказывание в рамках предложенной тематики в достаточном объеме (10-15 фраз), допущенные лексические и грамматические ошибки не нарушали коммуникацию.

Оценка «**не зачтено**» выставляется студенту, если он не знает лексический минимум, не смог построить связное высказывание в рамках предложенной тематики в достаточном объеме (10-15 фраз), допустил большое количество грубых грамматических ошибок, нарушающих коммуникацию, не смог ответить на вопросы преподавателя.

#### 3.2.2 Перечень тем для собеседования для проведения текущего контроля, критерии оценки

- О себе
- 2. Кировский государственный медицинский университет
- 3. Организм человека: скелет
- 4. Организм человека: мышцы
- 5. Болезни опорно-мышечной системы. Ревматоидный артрит
- 6. Сердечно-сосудистая система: анатомия и физиология сердца
- 7. Сердечно-сосудистая система: кровь
- 8. Заболевания крови: анемия (лейкемия)
- 9. Заболевания сердечно-сосудистой системы: сердечный приступ (инфаркт)
- 10. Заболевания респираторной системы: пневмония
- 11. Заболевания респираторной системы: рак легкого
- 12. Нервная система
- 13. Заболевания нервной системы: инсульт
- 14. Желудочно-кишечный тракт и заболевание: гастрит
- 15. Анатомия: печень и ее заболевания (гепатит)
- 16. Мочевыделительная система
- 17. Анатомия почки и их заболевания (почечная недостаточность, острая и хроническая)
- 18. Инфекционные заболевания
- 19. Медицинское образование в России
- 20. Медицинское образование за рубежом

#### Критерии оценки:

**Оценка «отпично»** выставляется студенту, если он обладает достаточным словарным запасом, понимает вопросы преподавателя и правильно реагирует на его реплики, используя широкий спектр языковых средств. Речь звучит в естественном темпе; отсутствуют ошибки, нарушающие коммуникацию.

**Оценка** «хорошо» выставляется студенту, если он обладает достаточным словарным запасом, понимает вопросы преподавателя и правильно реагирует на них, но демонстрирует колебания при отборе выражений или языковых конструкций, допускает незначительное количество ошибок, не нарушающих коммуникацию.

*Оценка «удовлетворительно»* выставляется студенту, если он использует ограниченный диапазон языковых средств, некоторые вопросы преподавателя вызывают у него затруднение понимания, он

систематически допускает грамматические ошибки, поставленная перед ним коммуникативная задача решена не полностью.

**Оценка «неудовлетворительно»** выставляется студенту, если он обладает очень ограниченным запасом слов и словосочетаний, допускает большое количество грубых грамматических ошибок, не справляется с решением речевой задачи, затрудняясь ответить на вопросы преподавателя. Коммуникация не состоялась.

#### 3.3 Тексты для перевода с иностранного языка на русский язык (ОПК-2)

# 3.3.1 Тексты для перевода с иностранного языка на русский язык для проведения промежуточной аттестации, критерии оценки

#### Текст 1 Bronchitis

Bronchitis refers to inflammation of the airways (bronchi) in the lungs. This most often occurs secondary to a bacterial infection already present in the airways. Bronchitis differs from pneumonia, where the infection is deeper into the lung tissue. Bronchitis is a common infection seen in the smoking population who may also suffer simultaneously from chronic obstructive pulmonary disease. Smokers have difficulty clearing their secretions (mucus) and have diminished immunity against infection.

Common symptoms include productive cough (in smokers, it may be occasionally blood streaked), fever, and chills. Shortness of breath is seen in more severe cases. Bronchitis is almost indistinguishable from pneumonia on the basis of symptomology alone. Long time smokers develop "wheezing", where breathing out is more difficult than breathing in. The act of breathing out may be accompanied by a musical wheeze.

Evaluation will include a medical history and physical examination in addition to a chest x-ray (to rule out pneumonia), blood tests (CBC, blood chemistry) and sputum cultures. Patients with shortness of breath may have an arterial blood gas performed to make sure their lung function is normal.

In most cases treatment is with oral antibiotics. Some cases with evidence for compromised lung function (long standing smokers with COPD) will require hospitalization. Those patients with "wheezing" will require bronchodilators. These are often administered as an aerosolized medication, inhaled by the patient. Inhalational treatment can be performed at home, but hospitalization will be required for patients who show a poor response to therapy.

The majority of patients with bronchitis can be treated at home with close medical follow-up. A follow-up chest x-ray (several days later) will be performed in those patients not responding to treatment. The x-ray may reveal a developing pneumonia. Acetaminophen or aspirin should be used for fever control.

#### Текст 2 High blood pressure

Most people with high blood pressure have no signs or symptoms, even if blood pressure becomes dangerously high. That's why high blood pressure is known as the silent killer. The only way to know if you have high blood pressure is to have your blood pressure checked.

The risk of high blood pressure increases as you get older, but high blood pressure can develop at any age. Even children can have high blood pressure. Lifestyle changes — such as eating healthy foods, increasing physical activity, maintaining a healthy weight and stopping smoking — can help you prevent or control high blood pressure.

Although stressful situations can cause temporary increases in blood pressure, you aren't necessarily destined to develop high blood pressure if you're stressed, competitive and impatient. Similarly, you aren't immune from high blood pressure if you're calm, easygoing and relaxed. Lifestyle factors such as diet and exercise are more likely to influence your blood pressure than is your personality.

Lifestyle factors — such as excess weight, inactivity and smoking — can contribute to high blood pressure. But for most people, the specific cause is unknown. In fact, in 90 percent to 95 percent of high blood pressure cases, the American Heart Association says there's no identifiable cause. This type of high blood pressure, called essential hypertension or primary hypertension, tends to develop gradually over many years.

Using less salt is an important part of keeping blood pressure in check. Most people should aim for less than 2,400 milligrams of sodium — about 1 teaspoon of table salt — a day. That includes all the sodium in canned foods and other processed foods, not just the salt you add to your food. Read labels carefully to find out how much sodium you're consuming. You might be surprised.

You may be experiencing what's known as white-coat hypertension — a temporary increase in blood pressure that may be triggered by anxiety during medical visits. But it's still important to determine if you do in fact have high blood pressure. Your doctor may ask you to measure and record your blood pressure at home more often or use a device that records your blood pressure for a 24-hour period outside the medical environment.

Ask your doctor for a blood pressure reading at least every two years. He or she may recommend more frequent readings if you have prehypertension, high blood pressure or other risk factors for cardiovascular disease.

Blacks have the highest risk of developing high blood pressure. Blacks tend to develop high blood pressure earlier than do people from other racial groups, and their average blood pressure tends to be higher. But effective treatment is available. Regardless of race, you can take steps to prevent and control high blood pressure.

High blood pressure tends to run in families — but it's not inevitable. To reduce your risk:

- Maintain a healthy weight.
- Increase physical activity.
- Eat plenty of fruits and vegetables.
- Reduce the amount of sodium in your diet.
- Quit smoking, if you smoke.
- Drink alcohol in moderation, if at all.

Blood pressure below 140/90 was once considered acceptable. But in 2003, new blood pressure guidelines dropped the normal range to below 120/80. If your blood pressure is between 120/80 and 139/89, you have hypertension — and your blood pressure could become a problem if you don't take steps to lower it.

#### **Tekct 3 LUNG CANCER**

Lung cancer isn't infectious and can't be passed on to other people.

This article deals with primary lung cancer - when the cancer has started in the lung. It shouldn't be confused with secondary lung cancer, when cancer in another part of the body spreads to the lung.

#### **Causes**

Cigarette smoking is the cause of nearly all lung cancers. The risk increases with the number and type of cigarettes smoked.

One in ten lung cancers occur in non-smokers. But in a number if cases, exposure to passive smoke (inhalation of other people's cigarette smoke) may be a cause.

Pipe and cigar smokers have a lower risk than cigarette smokers, but it's still a far greater risk than that of non-smokers.

Some rare types of lung cancer are not related to smoking. Other causes include exposure to certain chemicals and substances, such as asbestos, uranium, chromium and nickel. These have all been linked to lung cancer but are very rare. Contact your local environmental health officer if you're concerned.

For help and advice on giving up smoking, see Addictions.

#### **Symptoms**

If you have the following, or any other symptoms, you must have them checked by your doctor. But remember, all occur in many conditions other than cancer.

- a persistent cough or change in the nature of a longstanding cough
- shortness of breath
- coughing up blood-stained phlegm (sputum): blood is a warning sign that always needs urgent investigation
- chest discomfort a dull ache or sharp pain when you cough or take a deep breath
- loss of appetite and weight

#### **Diagnosis**

At present there's no effective screening test for lung cancer. If you suspect you have any of the symptoms mentioned, see a GP immediately. Initial tests will include a chest x-ray. You may also be asked to bring samples of phlegm for examination.

There are several tests that can be done to diagnose lung cancer and these include:

- **Bronchoscopy** a thin flexible tube is passed gently through your nose or mouth and into the lung airways. Photographs and cell samples are then taken.
- **Mediastinoscopy** a small cut is made through the skin at the base of the neck under general anaesthetic. A tube is then passed into the chest, allowing the doctor to examine the area at the centre of the chest and local lymph nodes.
- Lung biopsy a needle is passed through the skin into the lung and a sample of cells is taken for examination.

Llung cancer patients may be referred to special clinics.

#### **Tekct 4 RHEUMATOID ARTHRITIS**

How does it develop?

In rheumatoid arthritis the affected joints are stiff (particularly in the morning), painful, tender and swollen. Usually, more than one joint is affected and they're affected in a symmetrical distribution. Although all joints can be affected, those most commonly affected are those of the wrist, hands and fingers - and also of the toes, ankles and knees. The elbows and shoulders are often affected too.

Joint damage causes deformities to develop, which means many people also suffer disability, embarrassment and depression. Weight loss, fatigue and anaemia may also be experienced.

Who gets rheumatoid arthritis?

About one in 100 people are affected by rheumatoid arthritis, with women being affected two to three times more often than men. It can occur at any age but commonly affects younger women between the ages of 20 to 50 years of age. Some people are genetically susceptible to rheumatoid arthritis and in these cases, it's believed stress, infection or trauma may trigger its development.

Medication may relieve symptoms

It's not possible to prevent rheumatoid arthritis from developing or to cure it - but painkillers and anti-inflammatory medication are often used to relieve the symptoms. Disease-modifying drugs, for example, gold, penicillamine and most recently TNF (tumour necrosis factor) blockers are also used. Using these drugs early on can be beneficial in preventing rheumatoid arthritis from progressing so quickly. Sometimes steroids will be recommended.

Joint replacement is often needed. Physiotherapy, home aids and emotional and financial support are very important.

Treat yourself!

To treat your rheumatism try the following techniques.

Local heat to relax muscle tension and mental tension. Heat lamps, heated pads and hot water bottles can all help specific pains. You may need to wear extra clothes when outdoors to avoid the cold.

Warm baths also relax muscles. Add a few drops of an aromatherapy oil, such as lavender, to help your mind relax, too.

Local massage is wonderful for muscle tension, and can be a very relaxing experience. If a joint is particularly tender, go slowly.

Apply anti-inflammatory creams to the achy parts and add another gentle massage to rub it in. Eat a good balanced diet, adding in supplements such as zinc to aid healing, and drinking plenty of water.

Sort out your sleeping habits - sleep problems will cause muscle aches! Moving to a warmer climate may seem extreme but it works for some. But, you may find that what you gain in good weather is offset by the stress of living in a foreign country

#### **Tekct 5 OSTEOPOROSIS**

Osteoporosis mainly affects women after the age of the menopause, although men can have it too. It can occur in younger people if they have other predisposing factors.

What causes it?

The condition occurs because from around the age of 35 more bone cells are lost than replaced. This

causes the bone density to decrease.

The first sign is commonly when a minor bump or fall causes a bone fracture. These may result in pain, disability, loss of independence, and death. Osteoporosis may cause people to 'shrink' as they get older. It causes the characteristic 'dowager's hump'.

Who is affected?

About 3 million people in the UK have the condition, which is more common in women than men. Every year in the UK over 230,000 fractures occur because of osteoporosis. In the UK one in two women and one in five men over the age of 50 will suffer a fracture.

After the menopause bone loss speeds up making osteoporosis more likely. In women the risk is increased if they have an early menopause, have their ovaries removed before the menopause, or miss periods for six months or more as a result of over-exercising or over-dieting.

For men low levels of testosterone increase the risk. For men and women long-term use of corticosteroid medication, maternal osteoporosis, smoking, heavy drinking, sedentary lifestyle, and low body weight all increase the risk.

What happens then?

If you answer yes to two or more of these questions, you may have osteoporosis or be at risk of it. Go to see your GP who'll send you for specialist assessment.

As well as an examination and blood checks, there are a variety of tests which can give you a more definite density assessment. The commonest one is called a DEXA scan. This painless test involves a low dose of x-rays (less than a normal x-ray) usually across your wrist or hip, which gives a specific picture of how dense your bones are. The specialist will then tell you whether you have osteoporosis, or are at risk, and will suggest treatments.

Oestrogen, either naturally before the menopause or as HRT, is known to protect against bone loss. There a number of treatment options if you're diagnosed with osteoporosis.

Ways to prevent osteoporosis

You can help yourself by taking general measures such as the following:

- Increasing the calcium in your diet.
- Increasing weight-bearing exercise as this helps maintain bone density.
- Reducing both alcohol intake and cigarette smoking.

Medication may include:

- Calcium and vitamin D supplements.
- A variety of hormone-type treatments including HRT, tibolone and SERMS.
- Bisphosphonates are a group of drugs, which prevent bone breakdown and can be very effective in osteoporosis.

It's better to prevent any condition than simply to manage it when it happens. Osteoporosis assessment and management is an important factor in maintaining the health of your bone structure as you enter middle age.

#### Критерии оценки:

Оценка «зачтено» выставляется студенту, если он имеет сформированные навыки использования иностранного языка для получения профессионально значимой информации; извлек не менее 2/3 заданной в тексте информации за контрольное время (40 мин.); допустил лексические или грамматические ошибки в языке перевода, не исказившие коммуникативно-прагматический потенциал текста.

Оценка «**не зачтено**» выставляется студенту, если он имеет фрагментарные знания основ техники перевода научного текста по специальности; не понял текст или исказил коммуникативно-прагматический потенциал текста при переводе на русский язык; извлек менее 1/3 заданной в тексте информации.

### 3.3.2 Тексты для перевода с иностранного языка на русский язык для проведения текущего контроля, критерии оценки

#### Текст 1 The Human Body

The human body is the structure of a human being. It is composed of many different types of cells that together create tissues and subsequently organ systems. They ensure homeostasis and the viability of the human body.

It comprises a head, neck, trunk (which includes the thorax and abdomen), arms and hands, legs and feet. The study of the human body involves anatomy, physiology, histology and embryology. The body varies anatomically in known ways. Physiology focuses on the systems and organs of the human body and their functions. Many systems and mechanisms interact in order to maintain homeostasis, with safe levels of substances such as sugar and oxygen in the blood.

The body is studied by health professionals, physiologists, anatomists, and by artists to assist them in their work.

The human body is composed of elements including hydrogen, oxygen, carbon, calcium and phosphorus. These elements reside in trillions of cells and non-cellular components of the body.

The adult male body is about 60% water for a total water content of some 42 litres. This is made up of about 19 litres of extracellular fluid including about 3.2 litres of blood plasma and about 8.4 litres of interstitial fluid, and about 23 litres of fluid inside cells. The content, acidity and composition of the water inside and outside cells is carefully maintained. The main electrolytes in body water outside cells are sodium and chloride, whereas within cells it is potassium and other phosphates

The body contains trillions of cells, the fundamental unit of life. At maturity, there are roughly 30–37 trillion cells in the body, an estimate arrived at by totalling the cell numbers of all the organs of the body and cell types. The body is also host to about the same number of non-human cells as well as multicellular organisms which reside in the gastrointestinal tract and on the skin. Not all parts of the body are made from cells. Cells sit in an extracellular matrix that consists of proteins such as collagen, surrounded by extracellular fluids. Of the 70 kg weight of an average human body, nearly 25 kg is non-human cells or non-cellular material such as bone and connective tissue.

Cells in the body function because of DNA. DNA sits within the nucleus of a cell. Here, parts of DNA are copied and sent to the body of the cell via RNA. [8] The RNA is then used to create proteins which form the basis for cells, their activity, and their products. Proteins dictate cell function and gene expression, a cell is able to self-regulate by the amount of proteins produced. [9] However, not all cells have DNA – some cells such as mature red blood cells lose their nucleus as they mature.

#### Текст 2 Skeletal and Smooth Muscles

Muscles are the active part of the motor apparatus: their contractions are producing various movements, when they are active. Functionally we divide all muscles into two groups: voluntary and involuntary muscles.

Voluntary muscles consist of striated muscle tissue and contract by the will of the man. This group includes all the muscles of the head.

trunk and extremities, i.e., the skeletal muscles, as well as those of some internal organs (tongue, larynx, etc.). The skeletal muscles are the organs of the muscular system. There are more than 400 skeletal muscles in the human organism: in adults they make up about two-fifths of the total body weight. Each skeletal muscle has an arterial, venous, lymphatic and nervous supply. Muscles must always act in groups.

Skeletal muscles are complex in structure. They consist of muscle fibres of different length (up to 12 cm); the fibres are usually parallel to each other and are united (соединены) in bundles. Each muscle contains many such bundles. There are tendons at the ends of muscles by means of which they are bound (связаны) to bones.

Smooth muscles form the muscular coat of internal organs such as esophagus, stomach and intestines, bladder, uterus and so on. They also form the part of the capsule and the trabeculae of the spleen; they are present as single cells or as little cylindrical bundles of cells in the skin. They also form the walls of arteries, veins and some of the larger lymphatics. Smooth muscles are not rich in blood vessels, as are striated muscles. A smooth muscle is capable of spontaneous contraction and can contract in two ways. Firstly, individual cells may contract completely and secondly, a wave of contractions may pass from one end of

the muscle to the other. Smooth muscle cells are usually elongated cells. In the skin and intestines they are long and thin, but in the arteries they are short and thick. They vary in length from 12-15 mm in small blood vessels to 0.5 mm in the human uterus but their average length in an organ such as the intestine is about 200 mm. These cells have an oval nucleus that encloses nucleoli, and when the cell is contracting the nucleus may become folded or twisted.

Muscles have both motor and sensory nerve fibres. Impulses (signals) about the state of the muscle reach the brain along the sensory fibres. The nerve impulses which cause the muscle to contract come from the brain along the motor fibres. Injury to the nerves which innervate muscles causes disturbances in voluntary movements (muscular paralysis).

#### Текст 3 Schizophrenia

Schizophrenia is a challenging disorder that often makes it difficult to distinguish between what is real and unreal, to think clearly, manage emotions, relate to others, and function normally. Suspecting that you or someone you love has schizophrenia can be a stressful and emotional experience. But that doesn't mean there isn't hope. Schizophrenia can be successfully managed. The first step is to recognize the signs and symptoms. The second step is to seek help without delay. With the right self-help, treatment, and support, you can learn to manage the disorder and lead a satisfying and fulfilling life.

Schizophrenia is a brain disorder that affects the way a person behaves, thinks, and sees the world. The most common form is paranoid schizophrenia, or schizophrenia with paranoia as it's often called. People with paranoid schizophrenia have an altered perception of reality. They may see or hear things that don't exist, speak in strange or confusing ways, believe that others are trying to harm them, or feel like they're being constantly watched. This can cause relationship problems, disrupt normal daily activities like bathing, eating, or running errands, and lead to alcohol and drug abuse in an attempt to self-medicate. Many people with schizophrenia withdraw from the outside world, act out in confusion and fear, and are at an increased risk of attempting suicide, especially during psychotic episodes, periods of depression, and in the first six months after starting treatment.

While schizophrenia is a chronic disorder, many fears about the disorder are not based on reality. Most people with schizophrenia get better over time, not worse. Treatment options are improving all the time and there are plenty of things you can do to help yourself manage the disorder. Schizophrenia is often episodic, so periods of remission are ideal times to employ self-help strategies to limit the length and frequency of any future episodes. Along with the right support, medication, and therapy, many people with schizophrenia are able to manage their symptoms, function independently, and enjoy full, rewarding lives.

#### Текст 4 Апетіа

Anemia is a decrease in the total amount of red blood cells (RBCs) or hemoglobin in the blood, or a lowered ability of the blood to carry oxygen. When anemia comes on slowly, the symptoms are often vague and may include feeling tired, weakness, shortness of breath or a poor ability to exercise. Anemia that comes on quickly often has greater symptoms, which may include confusion, feeling like one is going to pass out, loss of consciousness, or increased thirst. Anemia must be significant before a person becomes noticeably pale. Additional symptoms may occur depending on the underlying cause.

The three main types of anemia are due to blood loss, decreased red blood cell production, and increased red blood cell breakdown. Causes of blood loss include trauma and gastrointestinal bleeding, among others. Causes of decreased production include iron deficiency, a lack of vitamin B12, thalassemia, and a number of neoplasms of the bone marrow. Causes of increased breakdown include a number of genetic conditions such as sickle cell anemia, infections like malaria, and certain autoimmune diseases. It can also be classified based on the size of red blood cells and amount of hemoglobin in each cell. If the cells are small, it is microcytic anemia. If they are large, it is macrocytic anemia while if they are normal sized, it is normocytic anemia. Diagnosis in men is based on a hemoglobin of less than 130 to 140 g/L (13 to

14 g/dL), while in women, it must be less than 120 to 130 g/L (12 to 13 g/dL). Further testing is then required to determine the cause.

Certain groups of individuals, such as pregnant women, benefit from the use of iron pills for prevention. Dietary supplementation, without determining the specific cause, is not recommended. [1] The use of blood transfusions is typically based on a person's signs and symptoms. In those without symptoms, they are not recommended unless hemoglobin levels are less than 60 to 80 g/L (6 to 8 g/dL). These recommendations may also apply to some people with acute bleeding. [1] Erythropoiesis-stimulating medications are only recommended in those with severe anemia.

Anemia is the most common blood disorder, affecting about a third of the global population. Iron-deficiency anemia affects nearly 1 billion people. In 2013, anemia due to iron deficiency resulted in about 183,000 deaths — down from 213,000 deaths in 1990. It is more common in women than men, during pregnancy, and in children and the elderly. Anemia increases costs of medical care and lowers a person's productivity through a decreased ability to work. The name is derived from Ancient Greek: ἀναιμία anaimia, meaning "lack of blood", from ἀν- an-, "not" and αἷμα haima, "blood".

#### Текст 5 Myocardial infarction (MI)

Myocardial infarction (MI), commonly known as a heart attack, occurs when blood flow decreases or stops to a part of the heart, causing damage to the heart muscle. The most common symptom is chest pain or discomfort which may travel into the shoulder, arm, back, neck, or jaw. Often it occurs in the center or left side of the chest and lasts for more than a few minutes. The discomfort may occasionally feel like heartburn. Other symptoms may include shortness of breath, nausea, feeling faint, a cold sweat, or feeling tired. About 30% of people have atypical symptoms. Women more often present without chest pain and instead have neck pain, arm pain, or feel tired. Among those over 75 years old, about 5% have had an MI with little or no history of symptoms. An MI may cause heart failure, an irregular heartbeat, cardiogenic shock, or cardiac arrest.

MIs due to coronary artery disease. Risk factors Most occur include high blood pressure, smoking, diabetes, lack of exercise, obesity, high blood cholesterol, poor diet, excessive alcohol intake, among others. The complete blockage of a coronary artery caused by a rupture of an atherosclerotic plaque is usually the underlying mechanism of an MI. MIs are less commonly caused by coronary artery spasms, which may be due to cocaine, significant emotional stress, and extreme cold, among others. A number of tests are useful to help with diagnosis, including electrocardiograms (ECGs), blood tests, and coronary angiography. An ECG, which is a recording of the heart's electrical activity, may confirm an ST elevation MI (STEMI) if ST elevation is present. Commonly used blood tests include troponin and less often creatine kinase MB.

Treatment of an MI is time-critical. Aspirin is an appropriate immediate treatment for a suspected MI. Nitroglycerin or opioids may be used to help with chest pain; however, they do not improve overall outcomes. Supplemental oxygen is recommended in those with low oxygen levels or shortness of breath. In a STEMI, treatments attempt to restore blood flow to the heart, and include percutaneous coronary intervention (PCI), where the arteries are pushed open and may be stented, or thrombolysis, where the blockage is removed using medications. People who have a non-ST elevation myocardial infarction (NSTEMI) are often managed with the blood thinner heparin, with the additional use of PCI in those at high risk. In people with blockages of multiple coronary arteries and diabetes, coronary artery bypass surgery (CABG) may be recommended rather than angioplasty. After an MI, lifestyle modifications, along with long term treatment with aspirin, beta blockers, and statins, are typically recommended.

#### Критерии оценки:

**Оценка** «отлично» выставляется студенту, если он имеет сформированные знания основ техники перевода научного текста по специальности, читает оригинальный текст со словарем с полным и точным пониманием содержания, допускает 1-2 неточности, не искажающие информационную суть текста.

**Оценка** «хорошо» выставляется студенту, если он имеет сформированные, но содержащие отдельные пробелы знания основ техники перевода научного текста по специальности, читает оригинальный текст со словарем с полным пониманием содержания, но допускает неточности в переводе, не искажающие информационную суть текста.

**Оценка «удовлетворительно»** выставляется студенту, если он имеет сформированные, но содержащие пробелы знания основ техники перевода научного текста по специальности; сумел извлечь не менее 2/3 заданной в тексте информации; допустил ошибки в языке перевода, не исказившие коммуникативно-прагматический потенциал текста.

**Оценка** «неудовлетворительно» выставляется студенту, если он имеет фрагментарные знания основ техники перевода научного текста по специальности; не понял текст или исказил коммуникативно-прагматический потенциал текста при переводе его на русский язык; извлек менее 1/3 заданной в тексте информации.

#### 3.4 Примерные контрольные работы, критерии оценки (ОПК-2)

# Раздел 2 Основы медицины: обучение чтению и переводу специальной литературы Вариант 1

- 1. Make up the scheme of Present Simple tense, write markers of this tense.
- 1. positive sentence
- 2. negative sentence
- 3. general question
- 4. special question
- 5. question to the subject
- 6. tag question
- 7. alternative question
- 2. Make sentences negative, make general, special question, and question to the subject
- 1. The patients are in the hospital. 2. My sister will be a good pharmacist. 3. Doctors operated 5 patients yesterday. 4. We translate English texts.
  - 3. Translate from Russian into English
- 1. Вы работаете? Нет, я не работаю. Я учусь в КГМА. 2. Где живет твой брат? Он живет в Москве. 3. Кто закончил школу №2 в прошлом году? 4. Мы завтра пойдем к стоматологу? Нет, мы завтра будем учить латинский.

#### Вариант 2

- 1. Make up the scheme of Past Simple tense, write markers of this tense.
- 1. positive sentence
- 2. negative sentence
- 3. general question
- 4. special question
- 5. question to the subject
- 6. tag question
- 7. alternative question
- 2. Make sentences negative, make general, special question, and question to the subject
- 1. The patients were in the hospital. 2. Doctor operates 5 patients every day. 3. We translated English texts yesterday. 4. Peter will go to Germany.

#### 3. Translate from Russian into English

1. Вы учитесь? – Нет, я не учусь. Я работаю в своей частной стоматологической клинике. 2. Где живет твой брат? – Он живет в Москве. 3. Кто закончил школу №2 в прошлом году? 4. Мы завтра пойдем к стоматологу? – Нет, мы завтра будем учить латинский.

#### Вариант 3

#### I. Complete the sentences. Translate into Russian.

- 1. Bronchitis is an (воспаление) of the lining of the bronchial tubes, or bronchi.
- 2. Acute bronchitis is usually a short illness that commonly develops from a severe cold or following other (вирусные инфекции) and is characterized by (кашель) with green (мокрота) and a soreness in the centre of the chest and perhaps (высокая температура) and some (одышка).
- 3. If one starts coughing (мокрота с прожилками крови), one should see a doctor. In rare cases, doctors may conduct tests to see if the (причина) is a serious condition such as tuberculosis or (рак легких).
- 4. In those at risk for bronchitis, (вакцинация) with pneumococcal polysaccharide vaccine (PPV) may (снизить риск) of acute bronchitis.
  - 5. (Антибиотики) have no effect on (вирусную инфекцию).
- 6. History, physical examination, (рентген грудной клетки, общий анализ крови, анализ мокроты, анализ газов артериальной крови) can aid in the (диагностика пневмонии).
- 7. When the (злокачественная опухоль) is away from the center of the chest and there's little or no spread, (операция) is often used.

#### II. Open the brackets.

- 1. Acute bronchitis almost always (cause) by viruses that (get) into the bronchi and (cause) infection. Sometimes bacteria (cause) acute bronchitis, especially after viral infections like colds.
- 2. As the body's immune system (fight) against these viruses, more swelling (occur) and more mucus (produce).
- 3. Chronic bronchitis may (result) from a series of attacks of acute bronchitis. Other causes (include) air pollution and industrial dusts and fumes.
  - 4. Chronic bronchitis can (treat) more effectively if diagnosed in the early stages of the disease.
- 5. In the late 20<sup>th</sup> century lung cancer (be) the leading cause of cancer-related death among men in some 28 developed countries, including the United States.
- 6. Rapid increase in the incidence of lung cancer (be) due mostly to the increased use of cigarettes that (begin) after World WR I.
  - 7. Lung cancer (occur) primarily in persons between 45 and 75 years of age.
- 8. The main treatments for lung cancer (be) surgery, chemotherapy and radiation. The choice of treatment (depends) on the patient's general health, the stage of extent of the disease, and the type of cancer.

### Раздел 3 Медицинское образование: обучение основам устного профессионального общения

#### Вариант 1

#### 1. Translate

1. сгусток крови 2. высокое давление 3. кровоснабжение 4. онемение 5. мышечная слабость 6. нарушение обоняния 7. головокружение 8. прерывать

#### 2. Match the 2 parts of the sentences

1. TIA	occurs in 75% of stroke survivors
2. Ischemic stroke	is to control thoughts
3. Hemorrhagic stroke	is integration of sensory information
4. Disability	occurs when a blood vessel in the brain ruptures
5. The function of the temporal lobe of the brain	is to control sense of sight
6. The function of the occipital lobe of the brain	occurs when symptoms disappear within 24 hours
7. The function of the frontal lobe of the brain	occurs when a blood vessel in the brain is blocked
8. The function of the parietal lobe of the brain	is to control behaviour

#### 3. Define the part of speech

- 1. inflame, inflammation, inflammatory 2. hemorrhagic, hemorrhage 3. surgery, surgical, surgeon 4. bleed, blood, bleeding
- **4.** What is the definition of stroke? What are the types of stroke? How is stroke prevented? What are the risk factors and causes of stroke?

#### Вариант 2

I. Give English equivalents to the following words and phrases: воспаление, ослабить, кашель с кровью, выдыхать, отличаться от, уменьшить, лихорадка, исключить пневмонию, курящие люди, одышка, вдыхать, хрип

#### II. Choose the right answers.

- 1) Evaluation of bronchitis includes...
- a) taking temperature b) taking pulse
- c) chest x-ray
- 2) Patients with ... require bronchodilators
- a) wheezing b) headache c) stomachache
- 3) Inhalational treatment can be performed ...
- a) at home b) in the bath-house c) in the theatre
- 4) ... or ... can be used for fever control
- a) acetaminophen
- b) aspirin
- c) paracetamol

#### III. Put questions to every word of the sentences.

1) Hospitalization is necessary for people with serious bronchitis. 2) Common symptom of bronchitis include productive cough, fever and chills.

#### IV. Translate from Russian into English.

1) Этот пожилой человек плохо поддается терапии. 2) Курильщики с кашлем кровью должны быть госпитализированы. 3) – Когда твоего брата положили в больницу? – Его положили в больницу 3 дня тому назад. 4) – Сколько времени ты принимаешь это лекарство? – Я принимаю его уже неделю. – Оно помогает тебе? – Да. 5) У меня сниженный иммунитет к инфекциям.

#### Вариант 3

I. Give English equivalents to the following words and phrases.

a) antibiotics; b) surgery; c) surgery and antibiotics;

	пищевод	воспаление
	фермент	желчный пузырь
	выводить	способный
	пищеварение	наследственный
	расщеплять	проток
	основной	в следствии
	острый	закупорка
II.	Choose the right answer.	
1)	Gallbladder simply store	es bile from the until food is:
	a) liver/transferred; b) st	omach/transferred; c) liver/consumed;
2)	The small intestine produc	es that further the nutrients:
	a) enzymes/to break dow	n; b) enzymes and hydrochloric acid/chemically changing; c)
enzy	enzymes and hydrochloric acid/ to break down;	
3)	What is the most common	treatment for gallstones:

- 4) The liver is supplied by two major blood vessels on its \_\_\_\_\_ lobe. These two vessels are \_\_\_\_ and \_\_\_\_\_.a) right/hepatic artery/portal vein; b) left/hepatic artery/cystic vein; c) right/cystic artery/cystic vein.
- 5) How does food pass through the organism?
- a) oral cavity/throat/esophagus/stomach/s.intestine/l.intestine/anus; b) mouth/ esophagus/ throat/l.intestine/s.intestine; c) oral cavity/esophagus/stomach/liver/s.intestine/l.intestine/anus

#### III. Make up and write down correct sentences.

- 1) Stomach, on the right, of, liver, the, to lie.
- 2) The large, by, to be, intestine, capillaries, lined, through, to, water, the blood, is, which, transferred.
- 3) Teeth, to be used, permanent, food, bits, small, to chop, into.
- 4) Capable, lost, the, to be, the, natural, organ, its, of, liver, regeneration, only, of, tissue.
- 5) Pain, chronic, or, inflammation, of, to cause, abdominal, acute, of, gallbladder, the.

#### Вариант 4

#### I. Define the tense and voice. Make negative.

Some ice has been found on the Moon recently. 2. I had passed the unified state examination before II was admitted to KSMA. 3. The summer exams will have been completed before July. 4. We have celebrated the Day of the Academy recently. 5/ The Day of the ac the Academy has been recently celebrated. 6. After the brain has analyzed the stimuli it sends the orders to the organs of the body. 7. Blood circulation had been described by the 17th century. 8. The lecture on the exchange of gases has been delivered already. 9. blood transfusion has been used to treat many medical cases. 10. My cat will have had kittens by the beginning of May.

#### II. Give the Russian equivalent.

complicated. 2. to recognize. 3. billion. 4. to move. 5. to control. 6. stimulus. 7. order. 8. sense organs. 9. nerve fibers. 10.. Ear.

#### III. Give the English equivalent..

1. Зависимый 2. количество крови 3. постоянный поток. 4. присутствующий. 5. критиковать. 6. узнавать. 7. холод. 8. чрезвычайная ситуация. 9. дефицит. 10. упорство.

#### IV. Give synonyms.

1. to generalize. 2. to specialize in. 3. far. 4. significant. 5. urgency. 6. sense. 7. difficult. 8. different. 9. to find out. 10. investigator.

#### Критерии оценки

**Оценка «отлично»** выставляется обучающемуся, если все задания выполнены правильно, работа аккуратно оформлена согласно требованиям оформления письменных работ, допущена 1 лексическая или грамматическая ошибка или 1-2 неточности.

**Оценка** «хорошо» выставляется обучающемуся, выполнившему правильно не менее 80% заданий или допустившему 2-3 лексические и/или грамматические ошибки и незначительные погрешности в оформлении работы.

**Оценка** «удовлетворительно» выставляется обучающемуся, выполнившему правильно не менее 70% заданий или допустившему 4-5 лексических и/или грамматических ошибки.

**Оценка «неудовлетворительно»** выставляется обучающемуся, выполнившему правильно менее 70% заданий или допустившему 6 и более лексических и/или грамматических ошибок.

# 4. Методические материалы, определяющие процедуры оценивания знаний, умений, навыков и (или) опыта профессиональной деятельности, характеризующих этапы формирования компетенций

#### 4.1. Методика проведения тестирования

#### 4.1.1 Методика проведения тестирования для осуществления промежуточной аттестации

**Целью этапа** промежуточной аттестации по дисциплине, проводимой в форме тестирования, является оценка уровня усвоения обучающимися знаний, приобретения умений, навыков и сформированности компетенций в результате изучения учебной дисциплины.

#### Локальные нормативные акты, регламентирующие проведение процедуры:

Проведение промежуточной аттестации обучающихся регламентируется Положением о текущем контроле успеваемости и промежуточной аттестации обучающихся, введенным в действие приказом от 08.02.2018 № 61-ОД.

#### Субъекты, на которых направлена процедура:

Процедура оценивания должна охватывать всех обучающихся, осваивающих дисциплину. В случае, если обучающийся не проходил процедуру без уважительных причин, то он считается имеющим академическую задолженность.

#### Период проведения процедуры:

Процедура оценивания проводится по окончании изучения дисциплины на последнем занятии. В случае проведения тестирования на компьютерах время и место проведения тестирования преподаватели кафедры согласуют с информационно-вычислительным центром и доводят до сведения обучающихся.

# Требования к помещениям и материально-техническим средствам для проведения процедуры:

Требования к аудитории для проведения процедуры и необходимость применения специализированных материально-технических средств определяются преподавателем.

#### Требования к кадровому обеспечению проведения процедуры:

Процедуру проводит преподаватель, ведущий дисциплину.

#### Требования к банку оценочных средств:

До начала проведения процедуры преподавателем подготавливается необходимый банк тестовых заданий. Преподаватели кафедры разрабатывают задания для тестового этапа зачёта, утверждают их на заседании кафедры и передают в информационно-вычислительный центр в электронном виде вместе с копией рецензии. Минимальное количество тестов, составляющих фонд тестовых заданий, рассчитывают по формуле: трудоемкость дисциплины в з.е. умножить на 50.

Тесты включают в себя задания 3-х уровней:

- ТЗ 1 уровня (выбрать все правильные ответы)
- ТЗ 2 уровня (соответствие, последовательность)
- ТЗ 3 уровня (ситуационная задача)

Соотношение заланий разных уровней и присуждаемые баллы

Соотношение задании разных уровнеи и	присуждаемые чаллы
	Вид промежуточной аттестации
	зачет
Количество ТЗ 1 уровня (выбрать все правильные ответы)	18
Кол-во баллов за правильный ответ	2
Всего баллов	36
Количество ТЗ 2 уровня (соответствие, последовательность)	8
Кол-во баллов за правильный ответ	4
Всего баллов	32
Количество ТЗ 3 уровня (ситуационная задача)	4
Кол-во баллов за правильный ответ	8
Всего баллов	32
Всего тестовых заданий	30
Итого баллов	100
Мин. количество баллов для аттестации	70

#### Описание проведения процедуры:

Тестирование является обязательным этапом зачёта независимо от результатов текущего контроля успеваемости. Тестирование может проводиться на компьютере или на бумажном носителе.

#### Тестирование на бумажном носителе:

Каждому обучающемуся, принимающему участие в процедуре, преподавателем выдается бланк индивидуального задания. После получения бланка индивидуального задания обучающийся должен выбрать правильные ответы на тестовые задания в установленное преподавателем время.

Обучающемуся предлагается выполнить 30 тестовых заданий разного уровня сложности. Время, отводимое на тестирование, составляет не более одного академического часа.

#### Тестирование на компьютерах:

Для проведения тестирования используется программа INDIGO. Обучающемуся предлагается выполнить 30 тестовых заданий разного уровня сложности. Время, отводимое на тестирование, составляет не более одного академического часа.

#### Результаты процедуры:

Результаты тестирования на компьютере или бумажном носителе имеют качественную оценку «зачтено» — «не зачтено». Оценки «зачтено» по результатам тестирования являются основанием для допуска обучающихся к собеседованию. При получении оценки «не зачтено» за тестирование обучающийся к собеседованию не допускается и по результатам промежуточной аттестации по дисциплине выставляется оценка «не зачтено».

Результаты проведения процедуры в обязательном порядке проставляются преподавателем в зачётные ведомости в соответствующую графу.

#### 4.1.2 Методика проведения тестирования для осуществления текущего контроля

**Целью** текущего контроля по дисциплине, проводимого в форме тестирования, является оценка уровня усвоения обучающимися знаний, приобретения умений, навыков и сформированности компетенций на определенном этапе изучения учебной дисциплины.

Процедура оценивания должна охватывать всех обучающихся, осваивающих дисциплину. В случае, если обучающийся не проходил процедуру без уважительных причин, он считается имеющим текущую академическую задолженность.

Процедура оценивания проводится по окончании изучения определенной темы раздела или на последнем занятии по разделу. О проведении текущего контроля в форме тестирования обучающимся сообщается заранее.

До начала проведения процедуры преподавателем подготавливается необходимый банк тестовых заданий. Количество тестовых заданий и соотношение заданий разных уровней может отличаться в зависимости от содержания разделов дисциплины. Тестирование проводится на Каждому обучающемуся, принимающему бумажном носителе. участие в После выдается бланк индивидуального задания. получения индивидуального задания обучающийся должен выбрать правильные ответы на тестовые задания в установленное преподавателем время: 25 – 30 мин. в зависимости от количества тестовых заданий.

Результаты тестирования имеют качественную оценку «отлично», «хорошо», «удовлетворительно», «неудовлетворительно». При получении оценки «неудовлетворительно» за тестирование обучающийся считается имеющим академическую задолженность по дисциплине. В аттестационном листе за текущий месяц обучающемуся ставится отметка «не аттестован».

#### 4.2. Методика проведения собеседования по теме

### 4.2.1 Методика проведения собеседования по теме для осуществления промежуточной аттестации

**Целью процедуры** промежуточной аттестации по дисциплине, проводимой в форме устного собеседования по теме (монологическое высказывание), является оценка уровня усвоения обучающимися знаний, приобретения умений, навыков и сформированности компетенций в результате изучения учебной дисциплины.

Локальные нормативные акты, регламентирующие проведение процедуры:

Проведение промежуточной аттестации обучающихся регламентируется Положением о текущем контроле успеваемости и промежуточной аттестации обучающихся, введенным в действие приказом от 08.02.2018 № 61-ОД.

#### Субъекты, на которые направлена процедура:

Процедура оценивания должна охватывать всех обучающихся, осваивающих дисциплину. В случае, если обучающийся не проходил процедуру без уважительных причин, то он считается имеющим академическую задолженность.

#### Период проведения процедуры:

Процедура оценивания проводится по окончании изучения дисциплины на последнем занятии по лисциплине.

### Требования к помещениям и материально-техническим средствам для проведения процедуры:

Требования к аудитории для проведения процедуры и необходимость применения специализированных материально-технических средств определяются преподавателем.

#### Требования к кадровому обеспечению проведения процедуры:

Процедуру проводит преподаватель, ведущий дисциплину.

#### Требования к банку оценочных средств:

До начала проведения процедуры преподавателем подготавливается необходимый банк оценочных материалов для оценки умений и навыков. Банк оценочных материалов включает перечень тем для собеседования (монологического высказывания).

#### Описание проведения процедуры:

Каждому обучающемуся, принимающему участие в процедуре, преподавателем выдается тема для собеседования. После получения темы и подготовки в установленное преподавателем время обучающийся должен в меру имеющихся знаний, умений, навыков, сформированности компетенции дать устное развернутое сообщение по теме. Продолжительность проведения процедуры определяется преподавателем самостоятельно.

Оценка уровня освоения практических умений и навыков, выявляемого в процессе устного собеседования по теме (монологического высказывания), может осуществляться на основании положительных результатов текущего контроля при условии обязательного посещения всех практических занятий.

#### Результаты процедуры:

Результаты проверки уровня владения иностранным языком на этапе «собеседование по теме (монологическое высказывание» имеют качественную оценку «зачтено» — «не зачтено». Оценка «зачтено» по результатам проверки уровня владения иностранным языком на данном этапе промежуточной аттестации является основанием для допуска обучающихся к переводу текста с иностранного языка на русский язык. При получении оценки «не зачтено» за собеседование по теме (монологическое высказывание) обучающийся к переводу текста не допускается и по результатам промежуточной аттестации по дисциплине выставляется оценка «не зачтено».

#### 4.2.2 Методика проведения собеседования по теме для осуществления текущего контроля

**Целью** процедуры промежуточной аттестации по дисциплине, проводимой в форме устного собеседования по теме (монологическое высказывание), является оценка уровня усвоения обучающимися знаний, приобретения умений, навыков и сформированности компетенций на определенном этапе изучения учебной дисциплины.

Процедура оценивания должна охватывать всех обучающихся, осваивающих дисциплину. В случае, если обучающийся не проходил процедуру без уважительных причин, он считается имеющим текущую академическую задолженность.

Процедура оценивания проводится по окончании изучения определенной темы раздела. Дата проведения текущего контроля в форме собеседования и тема собеседования сообщаются заранее. Собеседование проводится на практическом занятии. Обучающийся должен в меру имеющихся на данном этапе изучения дисциплины знаний, умений, навыков, сформированности компетенции осуществить монологическое высказывание по теме (10-15 предложений) и/или ответить на вопросы преподавателя по теме собеседования.

Результаты собеседования имеют качественную оценку «отлично», «хорошо», «удовлетворительно», «неудовлетворительно». При получении оценки «неудовлетворительно» по итогам собеседования обучающийся считается имеющим академическую задолженность по дисциплине. В аттестационном листе за текущий месяц ставится отметка «не аттестован».

### 4.3. Методика проведения контрольного перевода текста с иностранного языка на русский язык

### 4.3.1 Методика проведения промежуточной аттестации в форме контрольного перевода текста с иностранного языка на русский язык

Целью процедуры проведения этапа промежуточной аттестации по дисциплине, проводимого в форме перевода текста с иностранного языка на русский язык, является оценка уровня усвоения обучающимися знаний, приобретения умений, навыков и сформированности компетенций в результате изучения учебной дисциплины, оценка способности обучающегося к чтению оригинального текста со словарем с полным и точным пониманием содержания.

#### Локальные нормативные акты, регламентирующие проведение процедуры:

Проведение промежуточной аттестации обучающихся регламентируется Положением о текущем контроле успеваемости и промежуточной аттестации обучающихся, введенным в действие приказом от 08.02.2018 № 61-ОД.

#### Субъекты, на которые направлена процедура:

Процедура оценивания должна охватывать всех обучающихся, осваивающих дисциплину. В случае, если обучающийся не проходил процедуру без уважительных причин, то он считается имеющим академическую задолженность.

#### Период проведения процедуры:

Процедура оценивания проводится по окончании изучения дисциплины в соответствии с расписанием учебных занятий (на последнем занятии).

### Требования к помещениям и материально-техническим средствам для проведения процедуры:

Требования к аудитории для проведения процедуры и необходимость применения специализированных материально-технических средств определяются преподавателем.

#### Требования к кадровому обеспечению проведения процедуры:

Процедуру проводит преподаватель, ведущий дисциплину.

#### Требования к банку оценочных средств:

До начала проведения процедуры преподавателем подготавливается необходимый банк оценочных материалов для оценки знаний, умений, навыков. Банк оценочных материалов включает в себя комплект текстов для перевода с иностранного языка на русский язык.

#### Описание проведения процедуры:

Каждому обучающемуся, принимающему участие в процедуре, преподавателем выдается текст для перевода с иностранного языка на русский язык.

После получения текста и перевода его со словарем в установленное преподавателем время (40 мин.) обучающийся должен в меру имеющихся знаний, умений, навыков, сформированности компетенции дать возможно полный и точный перевод текста.

#### Результаты процедуры:

Результат процедуры оценивается «зачтено», «не зачтено».

По результатам проведения процедуры оценивания этапа промежуточной аттестации по дисциплине, проводимого в форме перевода текста с иностранного языка на русский язык, преподавателем делается вывод о результатах промежуточной аттестации по дисциплине. Результаты проведения процедуры в обязательном порядке проставляются преподавателем в зачётные ведомости в соответствующую графу.

### 4.3.2 Методика проведения текущего контроля в форме перевода текста с иностранного языка на русский язык

Целью процедуры проведения текущего контроля по дисциплине, проводимого в форме

перевода текста с иностранного языка на русский язык, является оценка поэтапного усвоения обучающимися основ техники перевода научного текста по специальности, их способности к чтению оригинального текста со словарем с полным и точным пониманием содержания.

Процедура оценивания должна охватывать всех обучающихся, осваивающих дисциплину. В случае, если обучающийся не проходил процедуру без уважительных причин, он считается имеющим текущую академическую задолженность.

До начала проведения процедуры преподавателем подготавливается банк текстов, информационно связанных с изучаемой на данном этапе темой.

Перед проведением процедуры каждому обучающемуся выдается двуязычный словарь и иноязычный текст. Время, отводимое на перевод, устанавливается преподавателем (30-40 мин.).

Результаты процедуры имеют качественную оценку «отлично», «хорошо», «удовлетворительно», «неудовлетворительно». При получении оценки «неудовлетворительно» за перевод текста с иностранного языка на русский язык обучающийся считается имеющим академическую задолженность по дисциплине. В аттестационном листе за текущий месяц обучающемуся ставится отметка «не аттестован».

#### 4.4 Методика проведения контрольной работы

**Целью** текущего контроля по дисциплине, проводимого в форме письменной контрольной работы, является оценка уровня усвоения обучающимися знаний, приобретения умений, навыков и сформированности компетенций на определенном этапе изучения учебной дисциплины.

Процедура оценивания должна охватывать всех обучающихся, осваивающих дисциплину. В случае, если обучающийся не проходил процедуру без уважительных причин, он считается имеющим текущую академическую задолженность.

Процедура оценивания проводится по окончании изучения определенной темы раздела и/или на последнем занятии по разделу. О проведении текущего контроля в форме письменной контрольной работы и тематике заданий обучающимся сообщается заранее.

Банк оценочных материалов включает письменные контрольные задания по темам поэтапно изучаемых разделов дисциплины.

Количество заданий в контрольной работе и их соотношение (лексические и грамматические задания) могут быть разными в зависимости от конкретной цели оценивания на данном этапе изучения дисциплины. Контрольная работа выполняется в тетради для контрольных работ. Каждому обучающемуся, принимающему участие в процедуре, преподавателем выдается вариант контрольной работы. Обучающийся должен выполнить все задания в установленное преподавателем время: 30-45 мин. в зависимости от количества контрольных заданий.

После проверки контрольной работы преподавателем обучающийся должен при наличии ошибок своевременно провести работу над ошибками.

Результаты текущего контроля, проводимого в форме письменной контрольной работы, имеют качественную оценку «отлично», «хорошо», «удовлетворительно», «неудовлетворительно». При получении оценки «неудовлетворительно» обучающийся считается имеющим академическую задолженность по дисциплине. В аттестационном листе за текущий месяц обучающемуся ставится отметка «не аттестован».