

Протокол №

Кафедрального совещания на открытое занятие проведенное ассистентом преподавателя Эндеш кызы Гулсара на тему : « Neonatal periods.Neonatal terminology.Methodology for examining a newborn baby.Physiological conditions in neonates. Signs of a full-term and premature baby. The reasons for their prematurity. Rules for caring for newborn babies. »

Повестка дня:

1. Обсуждение открытого занятия проведенного ассистентом преподавателя Эндеш кызы Гулсара. на тему: « Neonatal periods.Neonatal terminology.Methodology for examining a newborn baby.Physiological conditions in neonates.Signs of a full-term and premature baby. The reasons for their prematurity. Rules for caring for newborn babies. »
2. Разное

Присутствовали: к.м.н., доцент, заф.каф. Бугубаева М. М. к.м.н., Осмонова Г. Ж., Эралиева Ж.М., Алимова Н. А.,

Открытый урок проведен в кабинете 106 здания Димедус. В начале семинара выступила Гулсара Эндешовой ознакомив присутствующих с темой, структурой и целями занятия, дала мотивацию студентам. Далее урок проведен по хронометражу. Выбранная структура урока была рационально использована, студенты участвовали активно на всех этапах семинара и бурно обсуждали тему.

Выступила к.м.н., доцент, зав.каф. Бугубаева М. М.: «Урок соответствует теме и поставленным целям, программе и стандартам. Все поставленные задачи и РО удалось реализовать. Все этапы урока логически связаны между собой. Этапы занятия проведены по плану, был устный опрос в виде презентации, где студенты свободно участвовали в обсуждении, решали тестовый контроль и ситуационные задачи.

В целом, урок прошел успешно, были даны замечания для улучшения качества преподавания, посредством непрерывного повышения их квалификации, компетентности, профессионализма.

Секретарь:



Рецензия

На проведение открытого занятия ассистента преподавателя Гулсара Эндешовой на тему: «Neonatal periods. Neonatal terminology. Methodology for examining a newborn baby. Physiological conditions in neonates. Signs of a full-term and premature baby. The reasons for their prematurity. Rules for caring for newborn babies. »

Актуальность: При рождении ребенка врач проверяет некоторые необходимые физиологические состояния новорожденных, признаки доношенного и недоношенного ребенка, причины их преждевременности врожденным заболеваниям из-за негативного влияния окружающей среды .

Цель: Учить неонатальные периоды. Неонатальная терминология. Методика обследования новорожденного. Физиологические состояния новорожденных. Признаки доношенного и недоношенного ребенка. Причины их преждевременности. Правила ухода за новорожденными.

Задачи:

1. Знает и понимает Признаки доношенного и недоношенного ребенка. Причины их преждевременности. Правила ухода за новорожденными.
2. Рассмотреть методика обследования новорожденного. Физиологические состояния новорожденных
3. Обобщить теоретическую и практическую части, результаты изучения

Открытый урок проводился в 106 кабинете здания Димедус, применялись новые интерактивные методы, TBL. Были усовершенствованы все основные этапы занятия: изучение нового, закрепление изученного и контроль знаний студентов. На занятии преподаватель раздавал материалы для самостоятельного изучения, проводил тестирование.

Материал урока связан с темой урока, наблюдается логическое соответствие между темой урока и выбором заданий. все это позволяет увеличить плотность урока и оптимально увеличить его темп. Преподаватель рассчитала время необходимое для выполнения заданий на каждом этапе, в заключении провести выводы , объяснить задание на дом, выставить оценку студентам за работу на занятии

Занятие было интересным не только для студентов, но и для посетивших преподавателей.

Зав.каф., к. м. н., доцент



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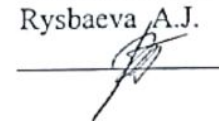
«Reviewed» -

in meeting of the department «CD 2»
prot. № 5 from 28.01 2023,
head of department,
c.m.s., assoc. prof.,
M. M. Bugubaeva



«Recommended by » -

Academic councilor in the IMF.
Rysbaeva A.J.



PLAN for PRACTICAL CLASS

Topic 12. Neonatal periods. Neonatal terminology. Methodology for examining a newborn baby. Physiological conditions in neonates. Signs of a full-term and premature baby. The reasons for their prematurity. Rules for caring for newborn babies.

Caring for a child with a disease of digestive system.

DISCIPLINE: “Child diseases (propaedeutic)”

For students, who is studying in direction : General Medicine (for foreign students)

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Type of class-practical

Plan of practical class:

1. Neonatal period
2. Method of examination of the newborn.
3. Evaluation of the physical conditions of newborns.
4. PHYSIOLOGICAL CONDITIONS OF NEWBORN.

Control question:

1. Tell us about the neonatal periods and neonatal terminology.
2. Describe the assessment of the condition of the newborn on the Apgar scale.
3. Tell us about the transitory conditions of the newborn.
4. Expand the concept of physiological jaundice and their causes.

The goal of practical class: Learn about neonatal periods, resuscitation of newborn, routine care, transitory condition after birth.

Class time 3 hours (135)

Form of Class: subgroup lesson

Type of class: practical class

Equipments used in class: a list of test questions, pictures.

Intrasubject communication: Lecture № 2

Learning outcomes (LO) and competencies formulated in the process of studying the discipline " Child diseases (propaedeutic)" in the process of mastering the discipline, the student will achieve the following learning outcomes (LO) and will have the appropriate competencies:

The LO Code and its wording	Competencies of GEP	Code of LO of the discipline (LOD) and its wording	Results of LOD:
<p>LO-5-Able to assess morphological, functional, physiological conditions and pathological processes and apply research Methods for sick adults and children to solve professional problems.</p> <p>LO-7- Knows how to apply basic knowledge in the field of diagnostic activities to solve problems.</p>	<p>PC-4 - is able to apply methods of asepsis and antiseptics, use medical instruments, master the technique of caring for sick adults and children;</p> <p>PC-5 is able to work with medical and technical equipment used in working with patients, own computer equipment, receive information from various sources, work with information in global computer networks, use the capabilities of modern information technologies to solve professional tasks;</p> <p>PC-6 - is able to apply up-to-date information on the health indicators of the population at the health care facility level;</p> <p>PC-15 - is able to prescribe adequate treatment to patients in accordance with the diagnosis;</p>	<p>LOD-5-Is able and ready to evaluate morpho-functional and physiological condition of the children, interpret laboratory data and clinical manifestation.</p> <p>LOD-7- Knows how to apply basic knowledge in the field of diagnostic activities to solve problems.</p>	<p>Can describe the anatomical and physiological features of the nervous system in children</p>

No	Stages	Aim of Lecture	Actions of teacher	Actions of students	Methods	Results of study	Equipments used	Time
1	Organizational moments	Greeting, identifying absentees, organizing attention, introduction to new topic,	Introduction, discussion of the topic's relevance	Writing topic & its questions	Ans-Quest	pay attention to the lesson	Board, markers	15 min
2	Survey of material on prerequisites	Generalization of students knowledge of the materials studied and establish a link with a new topic.	Asking questions and discussing with students	Selectively answer % questions one by one.	Answer the questions	Recalling materials of prerequisites, contributing to self preparation	Quest-answers Application №1	15 min
3	Motivation for new topic	Enhance students' mental activity, develop critical thinking	Showing video	Freely participate in the discussion, the ability to work in a team	unnamed pictures about today's topic	Focusing students on the issues, participating in team discussions, freely express their opinions	Pictures, Application №2	10 min
4	Foundation of new topic	determination and analysis of the assimilation of the passed material	Method 2 group			A theoretical base of knowledge and skills for use in practical exercises.	Method 2 group	30 min
5	Survey on the new topic	Checking the homework	Giving the MSQ s	Choosing the correct answers	MSQ s	Checking the homework		10 min
5	Conclusion of new topic and summing up	Definition and analysis of the material covered, making changes to its content	Questions and answers			Independently use the knowledge gained on the topic, formation of competence		20min
6	Associate	To analyze the education of students	Submit situational issues	Kahoot		supplement the acquired knowledge	Application №4	10 min
7	Homework	The main questions of the next topic	Explain how to prepare	Write down the assignment in notebooks		Prepare answers for specific questions		20 min
8	Checking the students and their knowledge	Teach students to self-esteem	Correction	Answer each other to specific questions asked	Questioning and checking each other	Getting information about how much students understood the new topic	Examples & questions	20 min

System 30	Score s (Rating)	Letter system	GPA equivalent points	Adding 30 points to electronic journals on a point scale:	Traditional valuation method
26 - 30	87 - 100	A	4.0	5	Excellent
24 - 25	80 - 86	B	3.33	4	Good
22 - 23	74 - 79	C	3.0		
20 - 21	68 - 73	D	2,33	3	Satisfactory
15 - 19	61 - 67	E	2.0		
9 - 14	31 - 60	FX	0	2	Unsatisfactory

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N	Form of control	Score	Criteria for evaluation
1	Oral questioning	7	Describes the material, completely gives the correct definition of the basis, Discovers an understanding of the material. can schematically draw and explain, can substantiate his judgments.
		5	Presents the material in full, but admits inaccuracies in the definition of concepts or formulation of the topic. Does not know how to substantiates judgments deeply and convincingly and give yis examples.
		3	Presents the material incompletely and makes gross errors in the definition of concepts or formulation of the topic. Does not know how to substantiate their judgments.
		0	Lack of knowledge and competencies within the educational standart. Refusal to answer.
2	Practice	7	Can apply knowledge in practice, correctly demonstrate on models.
		5	In practice makes some mistakes in demonstration on models.
		0	Cannot demonstrate on models.
3	Pinning the topic (test control)	6	Correct answer 70%-100%
		5	Correct answer 50%-70%
		0	Correct answers before 50 %

4	Question-answer	6	Provides specific answers to the question.
		5	Presents the material, but the answers are not accurate to question.
		0	Lack of knowledge.
5	Note	4	All the topics proposed for the note-taking were worked out, the material of the sources was read, the main and the secondary were selected.
		0	Lack of notes.

Neonatal terminology

- ❖ **Live-born** - is a child who is breathing or has other signs of life such as palpitations, pulsation of the umbilical vessels, or spontaneous muscle movements
- ❖ **Neonatal period** - the period of adaptation to the conditions of extrauterine life from birth to the 28th day
- ❖ **A full-term baby** is a baby who was born at a gestational age of 37 to 42 weeks
- ❖ **Over-carried newborn** - from the 42nd week or more
- ❖ **Prematurely born** - from the 22nd to the 37th week
- ❖ **The maturity of the fetus** is a state that is characterized by the readiness of organs and systems to ensure its external existence. A healthy full-term baby is considered mature, in which the morphological and functional state of organs and systems corresponds to his gestational age
- ❖ **A functionally mature child** has sufficient motor activity, physiological hypertonicity of the flexors, active sucking, a loud cry, sufficient thermoregulation, the correct breathing rhythm, the absence of apnea and cyanosis attacks, the correct heart rate, the absence of microcirculation disorders, as well as the normal functioning of other organs and systems.
- ❖ **SGA (small for gestational age) newborn**
 - weight below the 10th percentile
 - weight below the average by 2 SD
- ❖ **LGA (large for gestational age) newborn**
 - weight above the 90th percentile
 - weight above the average by 2 SD
- Methodology for examining a newborn baby**
 - ❖ visual therapeutic examination
 - ❖ assessment of the state of the newborn according to the Apgar scale at 1 and 5 minutes of life

- ❖ Virginia Apgar (June 7, 1909 – August 7, 1974)
- ❖ was an American physician of Armenian ethnic background
- ❖ obstetrical anesthesiologist
- ❖ and medical researcher, best known as the inventor of the Apgar Score, a way to quickly assess the health of a newborn child immediately after birth in order to combat infant mortality
- ❖ In 1952, she developed the 10-point Apgar score to assist physicians and nurses in assessing the status of newborns. Given at one minute and five minutes after birth, the Apgar test measures a child's breathing, skin color, reflexes, motion, and heart rate.

Apgar is not an acronym!

❖ Since the Apgar Scale was included in textbooks and in the curriculum of physicians, in 1962 pediatrician D. Butterfield, using the letters of the Apgar surname as an acronym, created a mnemonic rule for his students

- ❖ A - appearance - skin color
- ❖ P - pulse
- ❖ G - grimace - reflexes
- ❖ A - activity - muscle activity
- ❖ R - respiration - breathing

Visual examination

- ❖ inspection time (hours and minutes)
- ❖ The child's condition: satisfactory, moderate, severe, extremely severe
- ❖ Description of the appearance of the newborn (Habitus), the presence of dysembryogenesis stigmata, visible malformations

❖ **Body weight and length of the child**

When examining a child, the following should be noted

Defects in the spine:

fistulous course

Open spinal hernia

❖ To determine anthropometric data for a newborn child, it is recommended to measure

▪ body weight

▪ body length

▪ head circumference

▪ chest circumference

▪ shoulder circumference

❖ Anthropometric data are evaluated by a neonatologist based on the percentile tables

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❖ The first measurement of the anthropometric data of the child is recommended to be carried out in the delivery room.

Anthropometric data

Neurological status of the newborn:

❖ Response to examination: adequate - corresponds to gestational age, pathological - reduced or increased

❖ The level of spontaneous motor activity: compliance with gestational age, symmetry of movements, participation of all limbs.

❖ The nature of the cry in a newborn: emotional, irritated, weak, monotonous, nasal.

❖ Posture: physiological flexor or embryonic, pathological or forced postures

❖ Muscle tone: activity, symmetry, the presence of hypo- or hypertonicity of muscles

❖ Physiological reflexes of the newborn (oral and spinal automatism): Moro reflex, upper and lower grasping reflex, search and sucking reflex, automatic walking reflex, Babinsky reflex, Babkin reflex, Bauer crawling reflex. The presence of pathological neurological symptoms.

Bone-articular system

❖ Assess the shape of the skull, the size of the fontanelles, the presence of craniosynostoses, the

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presence or divergence of the bones of the skull, the presence of a birth tumor, cephalohematoma, fractures of the bones of the facial and brain skull.

❖ Mandatory palpation of the clavicles, tubular bones in a newborn to determine their integrity.

❖ Inspection of the joints, their mobility.

Literature:

Main:

1. Pediatrics 9th edition Ghai
2. Textbook of pediatrics Nelson 20th edition
3. Basis of pediatrics 10th edition by Pervez Akbar Khan
4. Pediatrics Examination and Board Review by Anrew Peterson, Kelly Wood
5. Practical Pediatric Hematology 2nd edition by Anupam Sachdeva

Additional:

1. Protocol of treatment India and Kyrgyzstan
2. Atlas of pediatric emergency medicine
3. Pediatric Nutrition 8th edition
4. Cases in pediatric acute care

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