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Federal State Budget Educational Institution
of Higher Education
Pacific State Medical University
of the Ministry of Health of the Russian Federation

APPROVED BY
Head of the Department of
Ophthalmology and Otorhinolaryngology
_____ / Fedyashev G.A./
"11th" of April 2025

COLLECTION OF ASSESSMENT TOOLS
Б1.О.25 Otorhinolaryngology
of the basic educational program
of Higher Education

Specialty	**31.05.01 General Medicine for international students (in English)** (code, name)
Degree	Specialist's degree
Profile	02 "Healthcare" (in the field of providing primary health care to the population in medical organizations: polyclinics, outpatient clinics, inpatient/outpatient facilities of the municipal health care system)
Mode of study	**Full-time**
Period of mastering the BEP	**6 years** (nominal length of study)
Department	of Ophthalmology and Otorhinolaryngology

Vladivostok, 2025

1. INTRODUCTION

1.1. Collection of Assessment Tools is a document that regulates the format, content, and types of assessment tools for continuous assessment, interim examination and final (state final) examination, and graded criteria for each type of assessment tools.

1.2. Assessment tools allows to evaluate the development of universal, general professional, and professional competencies (UCs, GPCs and PCs respectively) outlined in Federal State Educational Standard of Higher Education and defined in the basic educational program of higher education for the specialty 31.05.01 General Medicine for international students (in English), profile 02 "Healthcare" (in the field of providing primary health care to the population in medical organizations: polyclinics, outpatient clinics, inpatient/outpatient facilities of the municipal health care system).

(BEP HE for the 31.05.01 General Medicine for international students (in English) specialty, section 3 Learning Outcomes Requirements of the Basic Educational Program of Higher Education)

2. DOCUMENT BODY

2.1. Types of Assessment, Formats of Assessment Tools

No.	Types of assessment	Assessment Tools Format
1	**Continuous assessment**	**Tests**
		Interview Questions
		Mini-Case Studies
		Checklists
		Report / Slides Presentation Topics

3. The contents of assessment tools for continuous and interim examination are prepared by the teacher of the course

1. Tests for continuous and interim assessment

	Code	Competence description / name of labor function / name of work activity / text
S	31.05.01	General Medicine for international students (in English)
C	GPC-4	Is able to use medical devices included in the healthcare guidelines, as well as perform medical examination to make a diagnosis
C	PC-2	Ability and readiness to recognize urgent and life-threatening conditions in acute surgical pathology, traumatic conditions, diseases of the female genital organs and pregnancy requiring urgent and emergency medical care
F	A/01.7	Providing emergency or urgent medical care to the patient
I		**ANSWER LEVEL 1 TEST QUESTIONS (ONE CORRECT ANSWER)**
		Example: 1. Is it necessary to darken the office and use artificial lighting for ENT examination? +a) – yes, b) – no

		2. Does the state of nasal breathing matter for the normal nutrition of a newborn? +a) – yes, b) – no. 3. What is the section of the nasal septum that most often causes bleeding? +a) anterior-lower part; b) posterior-lower part; c) upper level. 4. Can diseases of the nose and paranasal sinuses cause intracranial complications? +a) – yes, b) – no. 5. Are the walls of the tympanic cavity covered with a mucous membrane? +a) – yes, b) – no.
		ANSWER LEVEL 2 TEST QUESTIONS (MULTIPLE CORRECT ANSWERS)
		1. Which lymphadenoid formations (tonsils) are located in the nasopharynx? a) palatine tonsils +b) pharyngeal (III) tonsil c) lingual tonsil +d) tubal tonsils e) side rollers of the pharynx 2. Where are anatomical narrowings of the esophagus located? +a) entrance to the esophagus +b) tracheal bifurcation level c) aortic arch level d) entrance to the stomach +e) aperture level 3. What are the receptor formations of the vestibular system? a) the Corti organ, +b) ampoule apparatus, +c) otolith apparatus
		ANSWER LEVEL 3 TEST QUESTIONS (MATCHING QUESTIONS)
		1. Match the symptoms and the disease they correspond to: 1) Acute respiratory viral infection, sublabular laryngitis 2) Diphtheria of the larynx (true croup) A. Gradual development of stenosis, (false croup) progressive dysphonia B. Edema of the mucous membrane in the form of reddish rolls in the subclavian space. Correct answer: 1-B, 2-A

		2. Describe the sequence of actions in case of a foreign body of the respiratory tract a) x-ray examination b) direct laryngotracheobronchoscopy c) indirect laryngoscopy d) auscultation and percussion of the chest e) collection of medical history Correct answer: e – d – c – a – b

Assessment criteria

"Very good" - more than 80% correct answers of questions of every level
"Good" - 70-79% correct answers of questions of every level
"Satisfactory" - 55-69% correct answers of questions of every level
"Unsatisfactory" - less than 54% correct answers of questions of every level

Interview questions

	Code	**Competence description / name of labor function / name of work activity / text**
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C	PC-2	Ability and readiness to recognize urgent and life-threatening conditions in acute surgical pathology, traumatic conditions, diseases of the female genital organs and pregnancy requiring urgent and emergency medical care
F	A/01.7	Providing emergency or urgent medical care to the patient
I		**ANSWER THE QUESTIONS** Topics and number of questions pertaining to them: 1. Clinical anatomy, physiology, methods of examination of the nose and paranasal sinuses. (10 questions). 2. Clinical anatomy, physiology, methods of examination of the pharynx, larynx, trachea, bronchi, esophagus. (30questions). 3. Clinical anatomy, physiology, methods of examination of the auditory system (30questions). 4. Clinical anatomy, physiology, methods of examination of the vestibular system. (20 questions). 5. Acute and chronic pathology of the outer, middle, inner ear. (20 questions). 6. Otogenic intracranial complications, Ear diseases of non-inflammatory etiology. (20 questions). 7. Acute and chronic diseases of the nose and paranasal sinuses. Rhinogenic orbital and intracranial complications. (20 questions). 8. Acute and chronic pharyngeal pathology. Acute and chronic laryngeal pathology. (20 questions). 9. Foreign bodies, chemical and thermal injury of the pharynx, larynx, esophagus, physical injury to ENT organs. Bleeding from ENT organs, emergency medical aid. (10questions).

Assessment criteria

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“Good” - 70-79% correct answers of questions of every level
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Standardized case studies and checklists for the **Б1.О.25 Otorhinolaryngology**course

Case Study No.1

	Code	**Competence description / name of labor function / name of work activity / text**
S	31.05.01	General Medicine for international students (in English)
C	GPC-4	Is able to use medical devices included in the healthcare guidelines, as well as perform medical examination to make a diagnosis
C	PC-2	Ability and readiness to recognize urgent and life-threatening conditions in acute surgical pathology, traumatic conditions, diseases of the female genital organs and pregnancy requiring urgent and emergency medical care
F	A/01.7	Providing emergency or urgent medical care to the patient
I		**READ THE PROVIDED CASE DESCRIPTION AND GIVE DETAILED ANSWERS TO THE QUESTIONS** Example: The patient presents with intense, throbbing pain in the right ear, radiating in the area of the temple and crown of the head on the right, increasing with chewing, on an increase in temperature to 37.8^{o}C. ENT-status, otoscopy results: AD-auricle of the usual configuration. In the external auditory canal on its anterior wall, a cone-shaped elevation is determined, the skin on its surface is hyperemic. In the center of the formation is a purulent head. The lumen of the ear canal is sharply narrowed, and the eardrum cannot be examined. The lymph node, measuring 0.5 by 0.5 by 1 cm, located in front of the auricle, of a soft-elastic consistency, is painful on palpation. Sharp pain on palpation of the tragus area. AS - normal. Audiometry: the patient can hear a whisper at a distance of 5 m in both ears
Q	1	Question: What is the diagnosis?
Q	2	Question: What is causing the pain to increase when chewing?
Q	3	Question: What microflora is more likely to cause this disease?
Q	4	Question: What factors contribute to the occurrence of this pathology?
Q	5	Question: What are the specifics of treatment of this disease depending on its stage?

Case Study No.1 Checklist

	Code	**Competence description / name of labor function / name of work activity / text**
S	31.05.01	General Medicine for international students (in English)

C	GPC-4	Is able to use medical devices included in the healthcare guidelines, as well as perform medical examination to make a diagnosis
C	PC-2	Ability and readiness to recognize urgent and life-threatening conditions in acute surgical pathology, traumatic conditions, diseases of the female genital organs and pregnancy requiring urgent and emergency medical care
F	A/01.7	Providing emergency or urgent medical care to the patient
I		**READ THE PROVIDED CASE DESCRIPTION AND GIVE DETAILED ANSWERS TO THE QUESTIONS** Example: The patient presents with intense, throbbing pain in the right ear, radiating in the area of the temple and crown of the head on the right, increasing with chewing, on an increase in temperature to 37.8^{o}C. ENT-status, otoscopy results: AD-auricle of the usual configuration. In the external auditory canal on its anterior wall, a cone-shaped elevation is determined, the skin on its surface is hyperemic. In the center of the formation is a purulent head. The lumen of the ear canal is sharply narrowed, and the eardrum cannot be examined. The lymph node, measuring 0.5 by 0.5 by 1 cm, located in front of the auricle, of a soft-elastic consistency, is painful on palpation. Sharp pain on palpation of the tragus area. AS - normal. Audiometry: the patient can hear a whisper at a distance of 5 m in both ears
Q	1	Question: What is the diagnosis?
A		Correct answer: Abscess forming furuncle of the right external auditory canal (localized on the anterior wall of the external auditory canal).
R2	Very good	detailed answer to the question is given; the diagnosis, localization, and stage of the process are correct; the answer comprises 100% of the correct answer
R1	Good/Satisfactory	detailed answer to the question is given; the diagnosis, localization, or stage of the process are not correct; the answer comprises 75% of the correct answer incomplete answer to the question is given; the diagnosis is correct, but the localization or stage of the process are not mentioned; the answer comprises 60% of the correct answer
R0	Fail	incorrect answer to the question is given; the diagnosis is not made or the answer comprises less than 30% of the correct answer
Q	2	Question: What is causing the pain to increase when chewing?
A		Correct answer: The anterior wall of the ear canal borders on the joint of the lower jaw; the jaws move when chewing which leads to pain
R2	Very good	the answer comprises 100% of the correct answer
R1	Good/Satisfactory	the answer comprises 75% of the correct answer the answer comprises 60% of the correct answer
R0	Fail	incorrect answer to the question is given or the answer

		comprises less than 30% of the correct answer
Q	3	Question: What microflora is more likely to cause this disease?
A		Correct answer: Pseudomonas aeruginosa is the most likely cause for this disease, however, Staphylococcus aureus, streptococci, proteus, and fungal microflora are also possible causative agents.
R2	Very good	detailed answer to the question is given; all the most likely pathogens are named; the answer comprises 100% of the correct answer
R1	Good/Satisfactory	detailed answer to the question is given; most of the likely pathogens are named; the answer comprises 75% of the correct answer incomplete answer to the question is given; the probable pathogens are named; the answer comprises 60% of the correct answer
R0	Fail	incorrect answer to the question is given; conditionally pathogenic flora and viruses are named or no answer given
Q	4	Question: What factors contribute to the occurrence of this pathology?
A		Correct answer: Exogenous factors – hypothermia, trauma to the skin of the ear canal. Endogenous causes – decreased body reactivity, diabetes mellitus, allergic dermatitis, eczema, beriberi.
R2	Very good	detailed answer to the question is given; the diagnosis, all factors are named; the answer comprises 100% of the correct answer
R1	Good/Satisfactory	detailed answer to the question is given; most of the likely factors are named; the answer comprises 75% of the correct answer incomplete answer to the question is given; the probable factors are named; the answer comprises 60% of the correct answer
R0	Fail	incorrect answer to the question is given or less than 30% of factors are named
Q	5	Question: What are the specifics of treatment of this disease depending on its stage?
A		Correct answer: Infiltration stage: systemic broad-spectrum antibiotics, depending on the severity of the disease either orally protected penicillins, third-generation cephalosporins, or fluoroquinolones; ointment turundas in the ear canal, physiotherapy-solux lamp, UHF, micro-waves, laser therapy. Stage of the necrotic tissue core formation: opening the furuncle, removing the necrotic tissue core, drainage, turundum with hypertonic solution, physiotherapy. Resolution stage: treatment is similar to the first stage of infiltration, but usually general antibacterial therapy is replaced by topical treatment.
R2	Very good	detailed answer to the question is given; general and topical treatment methods, corresponding stages, and possibility of starting pharmacotherapy at the current stage are named; the

		answer comprises 100% of the correct answer
R1	Good/Satisfactory	detailed answer to the question is given; most of treatment methods, corresponding stages, and possibility of starting pharmacotherapy at the current stage are named; the answer comprises 75% of the correct answer incomplete answer to the question is given; the answer comprises 60% of the correct answer
R0	Fail	incorrect answer to the question is given; stages of the disease are not named or the answer comprises less than 30% of the correct answer

Report / Slides Presentation Topics

Approximate topics:

1. Laryngeal cancer
2. Nasopharyngeal angiofibroma
3. Syphilis of the nose and the paranasal sinuses
4. Upper airways scleroma
5. Tuberculosis of the larynx
6. Pharyngeal syphilis

Supervising patient management and writing a training medical record on ENT pathology:
Example: Patient K. 20 y.o., Ds: Paratonsillar abscess on the left.

4. Assessment criteria for learning outcomes

"Pass" is given to a student who has shown a sufficiently strong knowledge of the basic concepts of the subject; is able to complete specific practical tasks outlined in the program with no outside help, use recommended reference material, and correctly evaluate the results.

"Fail" is given to a student who has significant gaps in knowledge of the basic concepts of the subject, is not able reach the correct solution to a specific practical task outlined in the curriculum even with outside help.

Appendix 1

Practical Skills Assessment Checklist

Practical Skill Name: Indirect laryngoscopy (adults and children over 12)

C	GPC-4	Is able to use medical devices included in the healthcare guidelines, as well as perform medical examination to make a diagnosis		
C	PC-2	Ability and readiness to recognize urgent and life-threatening conditions in acute surgical pathology, traumatic conditions, diseases of the female genital organs and pregnancy requiring urgent and emergency medical care		
F	A/01.7	Providing emergency or urgent medical care to the patient		
WA	Work activities as part of the function: CI.PC-2_1- has a grasp of life-threatening conditions in acute surgical pathology, traumatic conditions, pregnancy and childbirth, that require urgent and emergency medical care; CI.PC-2_2- demonstrates skills and selects the tactics of patient management in infectious and noninfectious diseases requiring emergency and urgent medical care; CI.PC-2_3- diagnoses life-threatening and emergency conditions in diseases of the organs of visual system and ENT organs, determines the tactics of patient management and providing emergency medical care			
	Action		Performed	Not Performed
1.	The doctor sits down the patient in the location for endoscopic examination. The table lamp is placed on the table to the right of the patient. The doctor sits opposite the patient, putting a frontal reflector on his head and lowering his mirror to the left eye, the opening of the mirror of the frontal reflector is located opposite the pupil of the left eye. The mirror surface of the reflector is directed towards the patient. The distance from the reflector to the mirror for indirect laryngoscopy is 20-25 cm (this is the focal length to the object being examined, it does not change when other objects are examined, if it is reduced, the light will be focused and only part of the object being examined will be visible, if it is increased, the light will be scattered and the image of the object will not be clear). The faces of the patient and the doctor are located on the same level.		1 point	-1 point
2.	Before the examination the mirror for indirect laryngoscopy is heated to body temperature so that it does not fog up (37-39^{o}C, this is done before any mirror technique) on an alcohol lamp (near the lamp, etc., depending on the availability of heating devices)		1 point	-1 point
3.	Then the mirror for indirect laryngoscopy is taken in the right hand, like a pen for writing with the mirror surface down, and the patient is asked to open their mouth and stick out the tongue, the doctor with the left hand using a gauze cloth, fixes the tongue between 1 and 3 fingers, the 2nd lies on the upper jaw so that the patient does not close his mouth. A mirror for indirect laryngoscopy is inserted first into the oral cavity, and then into the pharyngeal cavity up to the uvula, which is raised with a mirror up to the edge of the nasopharynx, the patient is		1 point	-1 point

	asked to make the [iː] (“ee”) vowel sound (when phonation occurs, the larynx rises up and it is more visible) and at the same time direct the light of the frontal reflector to the mirror. Examination is carried out with phonation and free breathing		
4.	When evaluating the laryngeal picture, it is necessary to remember that the resulting image is projected "upside down" (as with any mirror technique). However, the side of the process corresponds to the same side: right to right; left to left. Evaluate changes and define the topic of the process	1 point	-1 point
5.	Determine the nature of changes (norm, pathology)	1 point	-1 point
	Total	5 points	

Assessment criteria:
"Pass" - at least 75% of required actions performed
"Fail" - 74% of required actions or less performed