Документ подписан простой электронной подписью
Информация о владельце:
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Должность: И.о. ректора
Дата подписания: 02.11.2026 16:08:29
Уникальный программный ключ:
d59234ba928aea5c04c54eb9013e367220b6b2ae

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
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_____ / Fedyashev G.A./
"18th" of June 2026

COLLECTION OF ASSESSMENT TOOLS
B1.C.23 Otorhinolaryngology
of the basic educational program
of Higher Education

Specialty	**31.05.03 Dentistry for foreign students (English-language program)** (code, name)
Degree	Specialist's degree
Profile	02 "Healthcare" (in the field of providing health care in patients with dental pathology)
Mode of study	**Full-time**
Period of mastering the BEP	**5 years** (nominal length of study)
Department	of Ophthalmology and Otorhinolaryngology

Vladivostok, 2026

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 31.05.03 Dentistry for foreign students (English-language program), profile 02 "Healthcare" (in the field of providing health care in patients with dental pathology).

(BEP HE for the 31.05.03 Dentistry for foreign students (English-language program) 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	31.05.03	Dentistry for foreign students (English-language program)
C	GPC-5	Able to examine a patient and make a diagnosis
C	GPC-6	Able to administer and control the effectiveness and safety of non-pharmacological and pharmacological therapies
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 narrowing 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. Establish 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
S	31.05.03	Dentistry for foreign students (English-language program)
C	GPC-5	Able to examine a patient and make a diagnosis
C	GPC-6	Able to administer and control the effectiveness and safety of non-pharmacological and pharmacological therapies
I		**ANSWER THE QUESTIONS** Topics and number of questions pertaining to them: 1. Clinical anatomy, physiology, methods of examination, and functions of the auditory and vestibular systems. (10 questions). 2. Clinical anatomy, physiology, methods of examination of the nose, paranasal sinuses, pharynx, larynx, trachea, bronchi, esophagus. (5 questions). 3. Acute and chronic pharyngeal pathology. Acute and chronic laryngeal pathology. (8 questions). 4. Acute and chronic pathology of the outer, middle, inner ear. Otogenic intracranial complications, ear diseases of non-inflammatory etiology (8 questions). 5. Acute and chronic diseases of the nose and paranasal sinuses: odontogenic maxillary rhinosinusitis. Rhinogenic orbital and intracranial complications. (7 questions).

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

Standardized case studies and checklists for the **B1.C.23 Otorhinolaryngology** course

Case Study No.1

	Code	Competence description / name of labor function / name of work activity / text
S	31.05.03	Dentistry for foreign students (English-language program)
C	GPC-5	Able to examine a patient and make a diagnosis
C	GPC-6	Able to administer and control the effectiveness and safety of non-pharmacological and pharmacological therapies
I		**READ THE PROVIDED CASE DESCRIPTION AND GIVE DETAILED ANSWERS TO THE QUESTIONS** Example: A 14-year-old patient presents with headaches localized mainly in the right half of the forehead, feeling of "heaviness" in the head, runny nose, difficulty in nasal breathing, fever up to 38 degrees C, and general malaise. The patient first noted these symptoms 5 days prior, a week after recovering from a respiratory illness. Patient examination results: the skin is somewhat moist. The pulse is rhythmic; heart rate is 84 beats per minute. Changes in internal organs are not detected. ENT organs status: anterior rhinoscopy showed clearly hyperemic and moderately infiltrated nasal mucosa. Mucopurulent discharge in the middle

		and lower nasal passages on the right. Palpation of the paranasal sinuses revealed soreness in the brow area on the right and in the area of the projection of the maxillary sinus on the right. On the X-ray of the paranasal sinuses, there is a parietal veil of the right frontal sinus and intense darkening of the area of the ethmoid labyrinth and maxillary sinus on the right.
Q	1	Question: What factors of protection against viral and bacterial components are present in the nasal cavity and paranasal sinuses?
Q	2	Question: What is the pathogenesis of purulent complications from the paranasal sinuses?
Q	3	Question: What additional methods of paranasal sinus examination can be performed?
Q	4	Question: What is the diagnosis in this case?
Q	5	Question: What are the principles of treatment of purulent diseases of the paranasal sinuses, and what is the basis of treatment of purulent sinusitis with a sinus catheter?

Case Study No.1 Checklist

	Code	**Competence description / name of labor function / name of work activity / text**
S	31.05.03	Dentistry for foreign students (English-language program)
C	GPC-5	Able to examine a patient and make a diagnosis
C	GPC-6	Able to administer and control the effectiveness and safety of non-pharmacological and pharmacological therapies
I		**READ THE PROVIDED CASE DESCRIPTION AND GIVE DETAILED ANSWERS TO THE QUESTIONS** Example: A 14-year-old patient presents with headaches localized mainly in the right half of the forehead, feeling of “heaviness” in the head, runny nose, difficulty in nasal breathing, fever up to 38 degrees C, and general malaise. The patient first noted these symptoms 5 days prior, a week after recovering from a respiratory illness. Patient examination results: the skin is somewhat moist. The pulse is rhythmic; heart rate is 84 beats per minute. Changes in internal organs are not detected. ENT organs status: anterior rhinoscopy showed clearly hyperemic and moderately infiltrated nasal mucosa. Mucopurulent discharge in the middle and lower nasal passages on the right. Palpation of the paranasal sinuses revealed soreness in the brow area on the right and in the area of the projection of the maxillary sinus on the right. On the X-ray of the paranasal sinuses, there is a parietal veil of the right frontal sinus and intense darkening of the area of the ethmoid labyrinth and maxillary sinus on the right.
Q	1	Question: What factors of protection against viral and bacterial components are present in the nasal cavity and paranasal sinuses?
A		Correct answer: Immune defense: macrophage defense, mucociliary defense.
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	2	Question: What is the pathogenesis of purulent complications from the paranasal sinuses?
A		Correct answer: Acute viral or bacterial rhinitis causes pronounced edema of the nasal mucosa, mainly of the nasal concha, which leads to obstruction of physiological fistula of paranasal sinuses, a significant violation of mucociliary protection contributes to the activation of conditionally pathogenic microflora of the nasal cavity, which causes bacterial colonization of the mucosa and contributes to the development of purulent sinusitis.
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 additional methods of paranasal sinus examination can be performed?
A		Correct answer: 1 X-ray examination of the paranasal sinuses, CT of the paranasal sinuses, MRI of the paranasal sinuses, 2 Diaphanoscopy, ultrasound, diagnostic puncture, 3 Bacteriological culture from the nasal cavity for microflora, olfactory function study
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	4	Question: What is the diagnosis in this case?
A		Correct answer: Acute purulent hemirinosinusitis on the right
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	5	Question: What are the principles of treatment of purulent diseases of the paranasal sinuses, and what is the basis of treatment of purulent sinusitis with a sinus catheter?
A		Correct answer: Etiopathogenetic therapy: broad-spectrum antibiotics (protected penicillins), depending on the severity (oral/intravenous) In case of severe intoxication: intravenous drip administration of crystalloid solutions. Ensuring the free outflow of discharge: vasoconstrictor medications endonasally (drops, sprays). Paranasal sinus drainage with a sinus

		catheter, sinus puncture, physiotherapy. With the help of a sinus catheter, negative pressure is created in the middle and upper nasal passages, which contributes to the active outflow of purulent contents from the paranasal sinuses
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

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-5	Able to examine a patient and make a diagnosis		
C	GPC-6	Able to administer and control the effectiveness and safety of non-pharmacological and pharmacological therapies		
F	A/01.7	Examination of the patient in order to make a diagnosis		
	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 asked to make the [i:] (“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		1 point	-1 point
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