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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 Microbiology,
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_____ / Zaytseva E.A./
"1st" of April 2025

# COLLECTION OF ASSESSMENT TOOLS
## Б1.О.21 Dermatovenereology
## of the basic educational program of Higher Education

| | |
|---|---|
| **Specialty** | **31.05.03 Dentistry for international students (in English)** (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 Microbiology, Dermatovenereology and Cosmetology |

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

(BEP HE for the 31.05.03 Dentistry 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** |
| 2 | **Interim assessment** | **Tests** |
| | | **Interview Questions** |

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

Tests for continuous and interim assessment

| | Code | Competence description / name of labor function / name of work activity / text |
|---|---|---|
| S | 31.05.03 | Dentistry for international students (in English) |
| C | GPC-5 | Is able to perform a patient examination in order to make a diagnosis when working to achieve objectives of professional activity |
| C | GPC-6 | Is able to prescribe, monitor the efficacy and safety of non-pharmacological and pharmacological treatment when working to achieve objectives of professional activity |
| I | | **ANSWER LEVEL 1 TEST QUESTIONS (ONE CORRECT ANSWER)** |
| | | **1. Spongiosis is defined as**<br>+1) intercellular edema in the spinous layer (stratum spinosum) of the epidermis<br>2) edema of the papillary region<br>3) thickening of the granular layer (stratum granulosum)<br>4) atrophy of all layers of the epidermis<br><br>**2. Disconnection between the cells of the epidermis is called**<br>+1) acantholysis<br>2) anaplasia<br>3) dyskeratosis<br>4) parakeratosis |

| | | |
|---|---|---|
| | | **3. The option that lists ONLY the layers of epidermis is**<br>1) stratum corneum, reticular layer, stratum lucidum.<br>2) stratum granulosum, stratum basale, papillary layer<br>+3) stratum spinosum, stratum corneum, stratum granulosum.<br>4) stratum basale, papillary layer, stratum corneum.<br>5) reticular layer, stratum lucidum, stratum granulosum.<br><br>**4. Adnexa of skin do NOT include**<br>1) nails<br>2) hair<br>+3) skin muscles<br>4) sweat glands<br>5) sebaceous glands<br><br>**5. Skin lesions with cavities include**<br>1) papule, pustule<br>2) vesicle, wheal/welt<br>3) wheal/welt, bulla<br>4) tubercle, bulla<br>+5) bulla, vesicle<br><br>**6. The primary skin lesion that leads to development of erosions is a**<br>1) tubercle<br>2) wheal/welt<br>3) node<br>4) nodule<br>+5) vesicle<br><br>**7. Stratum basale does NOT include**<br>1) melanocytes<br>2. keratinocytes<br>+3) histiocytes<br>4) Merkel cells<br>5) Langerhans cells |
| I | | **ANSWER LEVEL 2 TEST QUESTIONS (MULTIPLE CORRECT ANSWERS)** |
| | | **1. _____ are important in the development of pyoderma**<br>+1) Streptococci<br>2) Viruses<br>3) Fungi<br>+4) Staphylococci<br><br>**2. Secondary skin lesions include**<br>+1) excoriations<br>+2) scars<br>3) wheals/welts<br>4) patches<br>+5) erosions<br><br>**3. Primary solid skin lesions do NOT include**<br>1) macule<br>+2) bulla<br>3) wheal/welt<br>4) tubercle<br>+5) fissure |

**Assessment criteria**

"Very good" – 80-100% 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 55% 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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| I | | **ANSWER THE QUESTIONS** |
| | | 1. Skin structure, blood supply, receptor apparatus. Functions of the skin.<br>2. Adnexa of skin, structure, functions.<br>3. Classification of skin lesions. Characteristics of primary and secondary skin lesions.<br>4. Pathohistological changes in the epidermis, dermis, and hypodermis.<br>5. Exogenous and endogenous causes of skin diseases.<br>6. Principles of internal therapy in dermatology, medications.<br>7. External therapy medications in dermatology, characteristics.<br>8. Pyoderma. Characteristics of conditions and predisposing factors. Classification. Characteristics of pathogens. Development of pyoderma in the workplace.<br>9. Clinical forms of staphylococcal pyodermas. Ostiofolliculitis, folliculitis, sycosis, furuncle, carbuncle, hydradenitis.<br>10. Streptoderma. Etiology, classification, clinical manifestation, treatment, prevention.<br>11. Scabies. Etiology, modes of transmission, clinical manifestation, treatment. Aspects of progression of scabies in newborns and the elderly.<br>12. Pediculosis (lice infestation). Etiology, modes of transmission, clinical manifestation, treatment.<br>13. Characteristics of fungi, prevalence in nature, conditions and routes of infection. Classification of mycoses.<br>14. Keratomycosis. Etiology, classification, clinical manifestation, treatment, prevention.<br>15. Dermatomycosis. Etiology, classification, clinical manifestation, treatment, prevention.<br>16. Candidiasis. Etiology, classification, clinical manifestation, treatment, prevention.<br>17. Deep mycoses. Etiology, classification, clinical manifestation, treatment, prevention.<br>18. Pseudomycosis: actinomycosis.<br>19. Mycoses in the workplace. Clinical manifestation, treatment, prevention.<br>20. Viral dermatoses. Incidence rate, classification.<br>21. Herpes simplex. Etiology, pathogenesis, clinical manifestation, treatment, atypical forms. Features of the progression in HIV-infected people. |

| | | |
|---|---|---|
| | | 22. Herpes zoster. Etiology, pathogenesis, clinical manifestation, treatment. Features of the progression in HIV-infected people.<br>23. Warts. Etiology, pathogenesis, classification. Features of the progression in HIV-infected people.<br>24. Anogenital warts (pointed condylomata). Clinical manifestation, pathogenesis, treatment.<br>25. Molluscum contagiosum. Clinical manifestation, pathogenesis, treatment.<br>26. Characteristics of STIs.<br>27. Syphilis. The history of syphilis in Europe. Etiology, structure and properties of Treponema pallidum, conditions and routes of transmission. Periods of syphilis and its general progression. Immunity in syphilis.<br>28. First period of syphilis. Characteristics, clinical manifestation (characteristics, complications and differential diagnosis of a typical solid chancre), atypical solid chancres, principles of diagnosis.<br>29. Second period of syphilis. Characteristics, clinical manifestations of fresh and recurrent syphilis, principles of diagnosis. 30. Differential diagnosis of roseolous rash, papular syphilis, pustular syphilis.<br>31. Internal organs and nervous system damage in patients with secondary syphilis<br>32. Latent syphilis. Classification, principles of diagnostics.<br>33. Tertiary period of syphilis. Characteristics, main manifestations on the skin, lesions of the mucosa, internal organs damage. Clinical manifestation of late neurosyphilis.<br>34. Principles of diagnosis of tertiary syphilis. Differential diagnosis with tuberculosis, leishmaniasis, leprosy<br>35. Congenital syphilis. Classification, fetal and placental lesions, clinical manifestation.<br>36. Principles of serological reactions and interpretation of the results. Principles of syphilis treatment, periodic examination.<br>37. Characteristics of STIs.<br>38. Gonorrhea. Structure and properties of gonococcus, incubation period, routes and conditions of transmission. Classification, clinical manifestation, complications. Diagnosis, treatment, periodic examination.<br>39. Trichomoniasis. Etiology, clinical manifestation, diagnosis, treatment, periodic examination.<br>40. Chlamydia infection. Etiology, pathogenesis, clinical manifestation, treatment.<br>41. Genital herpes. Etiology, pathogenesis, clinical manifestation, treatment.<br>42. Ureaplasma infection. Etiology, pathogenesis, clinical manifestation, treatment.<br>43. Candidiasis. Etiology, pathogenesis, clinical manifestation, treatment<br>44. Bacterial vaginosis. Etiology, pathogenesis, clinical manifestation, treatment.<br>45. HIV-associated skin diseases. |

**Assessment criteria**

***"Very good"*** grade is given to a student who possesses knowledge of the subject in full scope outlined in the curriculum, has a sufficiently deep insight into the subject; is able to answer all questions clearly, exhaustively, and with no outside help; structures their answers logically, with emphasis on the most important information; is able to analyze, compare, classify, summarize, refine, and structure the course content, giving particular attention to cause-and-effect relationships.

***"Good"*** is given to a student whose knowledge of the subject is almost in full scope outlined in the curriculum (gaps are only present in the knowledge of some especially complex aspects); is able to answer questions exhaustively with little to no outside help; does not always put emphasis on the most important information, but does not make significant mistakes.

***"Satisfactory"*** is given to a student who possesses the bulk of knowledge on the subject; has difficulties answering questions with no outside help, uses imprecise wording; makes mistakes in substantial number of their answers.

***"Unsatisfactory"*** is given to a student who does not have the mandatory minimum of knowledge on the subject, is not able to give an answer even with additional guiding questions.

Standardized case studies and checklists for **Б1.О.21 Dermatovenereology** course

Case Study No. 1

| | **Code** | **Competence description / name of labor function / name of work activity / text** |
|---|---|---|
| S | 31.05.03 | Dentistry for international students (in English) |
| C | GPC-5 | Is able to perform a patient examination in order to make a diagnosis when working to achieve objectives of professional activity |
| C | GPC-6 | Is able to prescribe, monitor the efficacy and safety of non-pharmacological and pharmacological treatment when working to achieve objectives of professional activity |
| I | | **READ THE PROVIDED CASE DESCRIPTION AND GIVE DETAILED ANSWERS TO THE QUESTIONS**<br><br>Male patient Y., 29 years old. Presents with: rash on the skin of the torso without subjective sensations.<br>Anamnesis morbi: the rash first appeared 1 week prior. The last sexual intercourse was with an unfamiliar woman three months prior.<br><br>Status localis: the process is widespread, inflammatory, symmetrical, localized on the skin of the torso, represented by abundant spots 0.5 cm in diameter, rounded outlines with unclear borders; these spots do not merge, the color is pink-red, do not cause the skin to flake, disappear when pressed. The available for palpation lymph nodes are enlarged to 2 cm by 1.5 cm, painless, tightly elastic in consistency, not fused with the surrounding tissues, the skin above them is not changed. |
| Q | 1 | Question: What diagnosis can be assumed? Name the diseases with which it is necessary to carry out a differential diagnosis. |
| Q | 2 | Question: What is the plan of patient examination? |
| Q | 3 | Question: What additional tests are needed to make a definitive diagnosis? |
| Q | 4 | Question: What is the doctor's tactic? |
| | 5 | Question: What preventive measures against this disease are there? |

Case Study No.1 Checklist

| | Code | Competence description / name of labor function / name of work activity / text |
|---|---|---|
| S | 31.05.03 | Dentistry for international students (in English) |
| C | GPC-5 | Is able to perform a patient examination in order to make a diagnosis when working to achieve objectives of professional activity |
| C | GPC-6 | Is able to prescribe, monitor the efficacy and safety of non-pharmacological and pharmacological treatment when working to achieve objectives of professional activity |
| I | | **READ THE PROVIDED CASE DESCRIPTION AND GIVE DETAILED ANSWERS TO THE QUESTIONS**<br><br>Male patient Y., 29 years old. Presents with: rash on the skin of the torso without subjective sensations.<br>Anamnesis morbi: the rash first appeared 1 week prior. The last sexual intercourse was with an unfamiliar woman three months prior.<br>Status localis: the process is widespread, inflammatory, symmetrical, localized on the skin of the torso, represented by abundant spots 0.5 cm in diameter, rounded outlines with unclear borders; these spots do not merge, the color is pink-red, do not cause the skin to flake, disappear when pressed. The available for palpation lymph nodes are enlarged to 2 cm by 1.5 cm, painless, tightly elastic in consistency, not fused with the surrounding tissues, the skin above them is not changed. |
| Q | 1 | Question: What diagnosis can be assumed? Name the diseases with which it is necessary to carry out a differential diagnosis. |
| A | | Correct answer:<br>1. Secondary syphilis, fresh.<br>2. Toxicoderma<br>3. Pityriasis versicolor<br>4. Pityriasis rosea |
| R2 | Very good | all correct points are mentioned |
| R1 | Good/Satisfactory | 3 correct points are mentioned<br><br>2 correct points are mentioned |
| R0 | Fail | incorrect answer is given / no correct points are mentioned |
| Q | 2 | Question: What is the plan of patient examination? |
| A | | Correct answer:<br>1. Microprecipitation blood test<br>2. Iodine test<br>3. Diascopy (vitropression) |
| R2 | Very good | all correct points are mentioned |
| R1 | Good/Satisfactory | 2 correct points are mentioned<br><br>1 correct point is mentioned |
| R0 | Fail | incorrect answer is given / no correct points are mentioned |
| Q | 3 | Question: What additional tests are needed to make a definitive diagnosis? |

| | | |
|---|---|---|
| A | | Correct answer:<br>1. ELISA<br>2. Treponema pallidum hemagglutionation assay<br>3. Direct immunofluorescence blood test<br>4. Lymph node puncturing |
| R2 | Very good | all correct points are mentioned |
| R1 | Good/Satisfactory | 3 correct points are mentioned<br><br>2 correct points are mentioned |
| R0 | Fail | incorrect answer is given / no correct points are mentioned |
| Q | 4 | Question: What is the doctor's tactic? |
| A | | Correct answer:<br>1. Examination of persons who were in sexual and close household contact with a patient with syphilis.<br>2. Consultation with an ophthalmologist (for all patients with acquired syphilis)<br>3. Consultation with a neurologist (for all patients with acquired syphilis) |
| R2 | Very good | all correct points are mentioned |
| R1 | Good/Satisfactory | 2 correct points are mentioned<br><br>1 correct point is mentioned |
| R0 | Fail | incorrect answer is given / no correct points are mentioned |
| Q | 5 | Question: What preventive measures against this disease are there? |
| A | | Correct answer:<br>1. Health and hygiene education<br>2. Screening of certain populations at increased risk of infection<br>3. Examination of persons who, if afflicted, can cause dangerous social and medical consequences<br>4. Conducting a compehensive specific treatment followed by clinical and serological observation<br>5. Individual prevention by using barrier methods of contraception (condoms).<br>6. After accidental unprotected sexual intercourse, prevntive measures can be carried out independently with the help of individual prophylactic agents (chlorhexidine bigluconate). |
| R2 | Very good | all correct points are mentioned |
| R1 | Good/Satisfactory | 5 correct points are mentioned<br><br>4 correct points are mentioned |
| R0 | Fail | incorrect answer is given / no correct points are mentioned |

**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: Iodine test. Procedure and assessment of results

| | | | | |
|---|---|---|---|---|
| C | GPC-5 | Is able to perform a patient examination in order to make a diagnosis when working to achieve objectives of professional activity | | |
| C | GPC-6 | Is able to prescribe, monitor the efficacy and safety of non-pharmacological and pharmacological treatment when working to achieve objectives of professional activity | | |
| | Action | | Performed | Not Performed |
| 1. | Examine the skin the patient in a warm, well-lit room under diffuse daylight and determine the localization of lesions. | | 1 point | -1 point |
| 2. | Examine the mucous membranes of the oral cavity, nose, pharynx, and vermilion surface (lips) and determine the localization of lesions. | | 1 point | -1 point |
| 3. | Identify lesions on the skin and mucous membranes. | | 1 point | -1 point |
| 4. | Perform the iodine test - apply 5% iodine alcohol tincture on the skin lesions and surrounding unaffected skin. | | 1 point | -1 point |
| 5. | Evaluate the color of the lesions. | | 1 point | -1 point |
| 6. | Give a conclusion. Assess the results of the test. | | 1 point | -1 point |
| | Total | | 6 points | |

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