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Neurologists" (PA KSMSN)

PROJECT
CATALOG OF COMPETENCIES
in the specialty "Neurologist"
POSTGRADUATE LEVEL

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Catalog of Competences (postgraduate level) the specialty "Neurologist" was developed by a staff of the Department of Neurology and Medical Genetics named after A.M. Murzaliyev of the I. K. Akhunbayev Kyrgyz State Medical Academy (KSMA) composed of: Doctor of Medical Sciences, Professor Academician of NAS KR Murzaliyev A.M., Head of the Department of Doctor of Medical Sciences Mamytova E. M., Associate Professor Candidate of Medical Sciences Abitova G. K., acc. Dzhekiyshev Zh. S., acc. Ashimov Zh. M.

The materials of the state educational standard of postgraduate medical education were used in the development of the catalog of competences in the specialty "General Practitioner, as well as "Swiss Catalog of Learning Objectives for Undergraduate Medical Training"; 2- nd edition, 2008, "Cursus en chirurgie" - WB-Program/AIM/2013-Lernziele Hausarzt/LZ Chirurgie.

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EXPLANATORY NOTE

Currently, the Kyrgyz Republic is actively implementing reforms the health sector. The system of medical education is undergoing significant changes, as one of the fundamental systems that provide practical healthcare with highly professional personnel.

Postgraduate training in the specialty "Neurology" provides professional training of a specialist with deep theoretical and practical knowledge in the diagnosis, prevention and treatment of diseases of the nervous system, which gives the legal right to provide primary medical, social care in neurology.

The list of competencies is compiled taking into account the structure of diseases and medical problems that are most common in neurology in Kyrgyzstan, and meets the requirements of the educational standard of higher professional education.

The task of healthcare educational organizations within the framework of the reforms carried out in the medical education system in the Kyrgyz Republic is not only to increase the number of medical personnel, but also to improve the quality and compliance of medical personnel training with the changing needs of the population.

In this regard, a new catalog of competencies of a neurosurgeon has been revised and developed. When developing this catalog of competencies, the following documents are taken as a basis, approved by the order of the Ministry of Health of the Kyrgyz Republic No. 149 of 23.03.07:

- "Regulations on the family doctor”;
- "Regulations on the qualification characteristics of a family doctor”;
- "Directory of general practitioner competencies”;
- "Catalog of competences of a Gynecologist”;
- "Catalog of competences of a surgeon”;

When developing the document, international standards for the training of a neurologist are also taken into account.

The duration of postgraduate training is 3 years, after completing internship, a general practitioner in accordance with the Law "On Education", state requirements and other regulatory legal acts of the Kyrgyz Republic in the field of postgraduate medical education, approved in accordance with the procedure established by the Government of the Kyrgyz Republic.

CHAPTER 1. GENERAL PROVISIONS

1.1. Definition of the concept of a specialist "neurologist".

In accordance with the educational requirements for the specialty "Neurologist", a specialist who has completed training in a clinical residency must have the following competencies.

1. A neurologist should know:

- the main provisions of the organization of primary neurological care, the principles of the organization of the medical and diagnostic process in inpatient settings, issues of medical ethics and medical deontology;
- current views on the prevalence of diseases of the nervous system;
- modern methods of rehabilitation of patients with diseases of the nervous system;
- methods of performing diagnostics and differential diagnostics of the nervous system.

2. A neurologist should be able to:

- diagnose the main diseases of the nervous system and treat patients with a neurological profile;
- perform differential diagnosis of diseases of the nervous system;
- perform a patient's examination, stage-by-stage treatment and observation;
- interpret the results of modern functional methods of research of a neurological patient;
- determine the indications for inpatient and home treatment, the need for special methods of examination and treatment;
- to carry out prevention, medical examination, rehabilitation and examination of working capacity;
- carry out work to identify early and hidden forms of diseases and risk factors, to assist in reducing their effects on the patient;
- to draw up medical documentation for the management of the patient in the polyclinic and hospital.

3. The neurologist must have practical skills (see below)

1.2. Basic principles of the work of a specialist "Neurologist"

The "neurologist" uses the following principles in his work:

- Open and unrestricted access to medical care;
- Simultaneous treatment of both acute and chronic diseases of the nervous system;

- Preventive orientation of care to prevent the impact of risk factors for the development of neurological pathology by informing the population and risk groups;
- Duration and continuity of care based on the needs of each patient;
- Coordination of medical care for the patient;
- The principle of cost-effectiveness and feasibility of assistance;
- Respect for the patient's right to self-determination and take into account the views of their family members.

1.3. Purpose of the document

This Catalog of competencies should become part of the regulations for postgraduate training of a "Neurologist". Based on this catalog the following are **determined:**

- the purpose and content of postgraduate training of a neurologist
- level of professional competence, knowledge and practical skills a neurologist.

developed by:

- neurologist training programs;
- criteria for assessing the quality of training of a neurologist;
- standard requirements for the attestation of a neurologist;
- standards for the examination, treatment, rehabilitation and observation of patients;

organized by:

- learning process;
- professional orientation of medical graduates;

conducted by:

- attestation of "Neurologists"

1.4. Users of the document

According to the purpose of the document, the users are:

- * Ministry of Health
- * Educational organizations
- * Health organizations
- * Professional associations

- Medical practitioners
- * Clinical residents
- Other stakeholders

CHAPTER 2. GENERAL TASKS

This chapter lists the general competencies that a neurologist should have. The general competencies presented in the Catalog are consistent with international recommendations and approaches. According to them, a neurologist should be not only a professional in his field, but also a manager, a specialist in communication skills, a promoter of a healthy lifestyle, a research scientist.

2.1. Neurologist as a medical specialist/expert

A neurologist is a doctor who has received special training to provide medical care to the adult population for adults. As a specialist, he provides care to patients within the limits of his professional competence, observing the principles of evidence-based medicine. A neurologist, as an expert, conducts an examination of temporary working capacity, as well as fitness for professional activity and military service, participates in the MSE.

As a specialist, a neurologist is able to:

- take care of the health of patients and society (assess health risks patients, give advice on maintaining and strengthening health, maintaining a healthy lifestyle, both physically and mentally);
- to advise, accompany and care for patients in cooperation with representatives of other specialties, while respecting their right to self-determination;
- collect complaints and anamnesis;
- conduct an examination (clinical examination) of the patient;
- interpret the information obtained during the collection of anamnesis and clinical examination, establish a preliminary diagnosis and differential diagnosis, as well as develop a patient management plan using the results of an objective examination;
- perform the usual tests and additional procedures adopted in this specialty;
- prescribe appropriate diagnostic and therapeutic measures, explain their essence to the patient and interpret the results;
- take proper and long-term care of patients with chronic neurological diseases, incurable, progressive diseases;
- to advise patients and their families on the formation of a healthy lifestyle and the prevention of diseases;

- perform all diagnostic and therapeutic measures, taking into account the cost/reasonable utility ratio and guarantee the safety of patients, applying the principles of efficiency, expediency and cost-effectiveness;
- store and protect medical information properly;
- maintain and expand their professional competence.

2.2. Communication skills

The "Neurologist" manages relationships with patients, families, contact persons, and other specialists involved in the treatment effectively and in accordance with the situation. He bases his decisions and communication of information on mutual understanding and trust.

The competence of the "Neurologist" is able to:

- build a trusting relationship with patients,
- receive important information from patients and their environment, discuss it and pass on elements of the knowledge gained, taking into account the patient's situation;
- communicate in a form that is understandable to the patient the risks and benefits of diagnostic and medical measures and get informed consent;
- make a decision about diagnostic and therapeutic procedures for severe patients by discussing these procedures with the appropriate representatives of this patient group;
- document the information received during consultations / home visits and transmit it in the required time;
- specifically notify the bad news and inform about complications and errors.

2.3. Skills of working in collaboration (in a team)

"Neurologist" cooperates with patients, contact persons and other participants of treatment from a wide variety of professional groups, taking into account their experience and opinions.

The competence of the "Neurologist" is able to:

- collaborate with other specialists and experts of other professional organizations, groups, with nurses, especially, to provide long-term care to patients with chronic non-communicable diseases;
- recognize differences of interest, accept other opinions, and avoid conflicts and resolve them through cooperation.

2.4. Managerial skills (manager)

The "Neurologist" becomes a member of the healthcare system and contributes to the optimization of the work of the healthcare organization in which he works. It carries out its management tasks within the framework of its inherent functions, sets priorities and consciously decides how to use limited health resources.

Competencies

As a manager, a neurologist is able to:

- successfully manage their professional activities and take on management tasks that correspond to their professional position;
- find a balance between your professional and private activities;
- effectively use limited health resources in the best interests of the patient, taking into account efficiency, adequacy and cost-effectiveness;
- evaluate and use relevant information for patient care;
- ensure and improve the quality of medical care and patient safety.

2.5. Skills in the field of health promotion and promotion of a healthy lifestyle.

A "neurologist" can promote a healthy lifestyle among patients and the public. It can help patients navigate the healthcare system and get appropriate care in a timely manner.

The competence of the "Neurologist" is able to:

- describe the factors that affect human and social health and promote the preservation and promotion of health;
- describe the factors that negatively affect human health.
- recognize problems that affect the patient's health and take the necessary measures.

2.6. Research Scientist

During his professional activity, a neurologist strives to acquire significant knowledge in his specialty, monitors their development and promotes them.

Competencies

As a research scientist, a neurologist is able to:

- constantly improve the skills aimed at his professional activity;
- critically comprehend specialized medical information and its sources and take it into account when making decisions;

- inform patients, clinical residents, other doctors, representatives of the authorities and other people who actively care about their health, and support them in their actions aimed at learning;
- promote the development, dissemination and implementation of new knowledge and methods.

2.7. Knowledge in the field of professional ethics

The neurologist conducts his / her practical activities in accordance with ethical norms and principles, quality standards of medical care and regulatory legal acts in the field of healthcare.

Competencies

As a professional, a neurologist is able to:

- carry out their professional activities in accordance with the highest standards, quality standards, demonstrating a responsible and caring attitude to patients,
- practice ethically and responsibly, observing the legal aspects of the activities of medical professionals.

CHAPTER 3. SPECIAL TASKS (PROFESSIONAL COMPETENCIES)

Types of activities of the "neurologist".

"Neurologist" is obliged to master the following types of activities and their corresponding personal tasks to provide neurological care to the population, in accordance with the legal documents of the Kyrgyz Republic:

- diagnosis, treatment, prevention and rehabilitation of the most common diseases of the nervous system;
- provision of emergency and emergency medical care;
- performing medical manipulations;
- compliance with infection safety measures in the provision of medical care and performing medical manipulations;

The professional competencies of the "Neurologist" are characterized:

in diagnostic activities:

- Ability and readiness to make a diagnosis based on a diagnostic study in the field of neurology.
- Ability and readiness for differential diagnosis of diseases on the basis of diagnostic research in the field of neurology;
- Ability and willingness to analyze patterns use the knowledge of anatomophysiological bases, the main methods of clinical and immunological examination and assessment of the functional state of the body of patients for the timely diagnosis of a group of diseases and pathological processes in neurology;

- The ability and willingness to identify the main pathological symptoms and syndromes of neurological diseases in patients, using knowledge of the basics of medical and clinical disciplines, taking into account the laws of the course of pathology in organs, systems and the body as a whole; to analyze patterns functioning of organs and systems in neurological diseases and pathological processes;
- Use an algorithm for making a diagnosis (main, concomitant, or complication), taking into account the International Statistical Classification of Diseases and Health-Related Problems (ICD);
- Perform basic diagnostic measures to identify urgent and life-threatening conditions in neurological diseases;

in medical activities:

- Ability and willingness to perform basic therapeutic measures in patients with neurological diseases of a particular group of nosological forms that can cause severe complications and (or) death;
- Timely identify life-threatening diseases of the nervous system, use methods of their immediate elimination, and implement anti-shock measures;
- The ability and willingness to prescribe adequate treatment to neurological patients in accordance with the diagnosis, to implement an algorithm for choosing drug and non-drug therapy for specialized patients; in rehabilitation activities:
- The ability and willingness to apply medical rehabilitation measures (neurological, psychological) for the most common pathological conditions and injuries of the body.
- The ability and willingness to make recommendations on the choice of the optimal during the rehabilitation of neurological patients (motor activity depending on the morphofunctional status), determine the indications and contraindications to the appointment of physical therapy, physiotherapy, reflexology, herbal medicine; in preventive activities:
- Ability and willingness to use methods of assessing natural and medical - social factors contributing to the development of nervous diseases, to carry out their correction, to carry out preventive measures to prevent infectious, parasitic and non-communicable diseases, conduct sanitary and educational work on hygiene issues;

in psychological and pedagogical activity:

- The ability and willingness to use the methodology applied to the formation of the population, patients and their families motivation aimed at preserving and strengthening their health and the health of others;

in organizational and managerial activities:

- Ability and willingness to use the regulatory documentation adopted in healthcare (laws of the Kyrgyz Republic, technical regulations, etc. regulations, international and national

standards, orders, recommendations, the international system of units (SU), the current international classifications), as well as documentation for assessing the quality and effectiveness of the work of medical organizations of the neurological profile.

3.1 Common symptoms and syndromes

(List 1)

The following gradation is used to indicate the level of competence that must be achieved by the end of the course in this discipline:

Level 1 - indicates that the resident should know: the primary organization neurological care and treatment and diagnostic process in inpatient settings, methods of rehabilitation of patients with diseases of the nervous system, diagnosis and differential diagnosis of diseases of the nervous system.

Level 2 - indicates that the resident should be able to: diagnose major diseases of the nervous system and treat patients with a neurological profile; determine the indications for inpatient treatment; prevention, medical examination, rehabilitation and examination of working capacity.

The letter "H " - means that the condition or disease is urgent and indicates the need for emergency diagnosis and / or treatment. The resident is able to assess the patient's condition and begin to provide emergency care and organize urgent hospitalization.

3.1 Common symptoms and syndromes

(List 1)

Common symptoms in Neurology
Agnosia
Adiadochokinesis
Alalia
Alloheiria
Amblyopia or amaurosis
Apraxia
Areflexia
Asthenia
Athetosis
Muscle atrophy or hypotension
Aphasia
Ballism
Bottle feet
Bella symptom
Pain in the extremities, neck, back, chest, abdomen and lower back
Rapid fatigue
Hemianopsia
Hyperacusis
Hyperhidrosis
Hyperreflexia
Hyposmia
Gnosis

Headaches (GBN, migraine, etc.)
Dizziness
Dysarthria
Dysesthesia
Diplopia
Dysmetry
Dystonia
Dysphagia
Trembling of individual parts of the body
Excessive salivation
Lagophthalmos
Mydriasis
Myoclonia
Mutism
Violation of accommodation
Violation of breathing and swallowing process
Impaired vision and attention
Impaired coordination of movements
Memory impairment
Speech disorder
Sleep disturbance
Sensitivity disorder
Coordination disorders
Fecal and urinary incontinence
Nystagmus
Tension (Laseg, Wasserman, Matzkiewicz, Dejerine)
Numbness of different parts of the body
Brain edema
Floating eyeballs
Increased muscle tone
Increased level of anxiety
Polyesthesia
Loss of taste and dry mouth
Praxis
Psychoemotional lability
Ptosis
Divergent and convergent strabismus
Weakness
Hearing loss
Spastic torticollis
Convulsions
Nervous Tick
Tremor
Frequent fainting spells
Tinnitus
Exophthalmos
Yanyshevsky (grasping)
Syndromes in neurology
Alternating syndromes (peduncular, pontine, bulbar)
Asthenic syndrome

Atactic syndrome
Acromegalic syndrome
Akinetic syndrome
Amnesic (Korsakovsky) syndrome
Apoplexy syndrome
Astazii-Abazii
Hepatocerebral syndrome
Hydrocephalic-hypertensive syndrome
Hypothalamic syndrome
Glasalgia
Gormetonichexy syndrome
Vertebro-basilar syndrome
Dementia'
Depressive syndrome
Compression syndrome
Catotonichexy syndrome
Radicular syndrome
Meningeal syndrome
Narcoleptic syndrome
Post-functional syndrome
Pseudobulbar and bulbar syndromes
Reflex syndrome
Argyle-Robertson Syndrome
Brown-Secar syndrome
Guillain-Barre syndrome
ALS syndrome
Wernicke-Manne syndrome
Wobbly legs, restless legs syndrome
Autonomic disorder syndrome
Upper orbital fissure syndrome
Wedging syndrome
Intracranial hypertension syndrome
Down Syndrome
Motor disorders syndrome
Bell's Symptom
Claude-Bernard-G Orner syndrome
Korsakov's syndrome
Crocodile Eye Syndrome
Mann's Syndrome
Mosto-cerebellar angle syndrome
Meniere's syndrome
Hunt Syndrome
Foster-Kennedy Syndrome
Charcot syndrome
Syndrome of violation of higher cortical functions
Parkinsonism syndrome
Cranial nerve pathology syndrome
Reticular formation lesion syndrome
"Folding knife" syndrome, "gear wheel" Depression syndrome

Sensitive disorder syndrome
Eye disorders syndromes
Syndromes of damage to individual nerve trunks (tension symptoms)
Spinal syndromes
Convulsive syndrome
Edi syndrome

3.2 Common diseases and conditions

(List 2)

Name of nosology	level	H
Vascular diseases of the brain	1,2	
Initial manifestations of insufficient blood supply to the brain	1	
Transient cerebral circulatory disorders	1	H
Ischemic stroke	1	H
Hemorrhagic stroke	1	H
Subarachnoid hemorrhage	1.2	H
Chronic insufficiency of blood supply to the brain	1.2	
Spinal stroke	1	H
Diseases of the peripheral nervous system		
Polyneuropathy	1	
Acute inflammatory demyelinating polyneuropathy	1.2	H
Trigeminal neuralgia	1	
Facial neuropathy	1.2	
Sciatica	1	
Epilepsy	1	H
Convulsive syndrome	1	H
Infectious diseases of the nervous system. Meningitis.		
Primary meningococcal meningitis	1	H
Secondary meningitis: viral, tuberculous	2	
Encephalitis	1	
Primary encephalitis: tick-borne	1	
Secondary encephalitis: postvaccinal, rheumatic	1	
Epidemic encephalitis	1	
Inflammatory diseases of the nervous system.		
Arachnoidites	2	
Neurorheumatism	1.2	
Neurobrucellosis	1.2	
Neurosyphilis	1.2	
Neuro AIDS	1.2	
Degenerative diseases of the nervous system.		
Amyotrophic lateral sclerosis	2	H
Syringomyelia	1	
Myasthenia gravis	1	H
Diseases of the autonomic nervous system.		
Migraine	1	
Raynaud's disease	1	
Vegetative-vascular dystonia	1	
Hypothalamic syndrome	1.2	

Demyelinating diseases.		
Multiple sclerosis	2	
Leukoencephalitis	2	
Damage to the nervous system in internal diseases, neurological syndromes in diseases of the heart and aorta, lungs, digestive organs, kidneys, and some endocrine diseases of the blood.	1.2	
Perinatal injuries of the nervous system.	1.2	
Perinatal encephalopathy.	2	
Infantile cerebral palsy.	1	
Hereditary diseases of the nervous and neuromuscular system	1.2	
Myopathies	1.2	
Friedreich's familial ataxia	1.2	
Marie's Family ataxia	1.2	
Hepatocerebral dystrophy	1.2	
Deforming muscular dystonia	1.2	
Huntington's chorea	1.2	
Neuroses	1	
Traumatic lesions of the nervous system.		
Concussion of the brain	1	H
Brain injury	1	H
Compression of the brain	1.2	H
Spinal cord injuries	1.2	H
Acute neurological pathology in poisoning	1.2	H
Tumors of the brain and spinal cord.	2	
The nervous system under the influence of extreme factors		
Total cooling	1	H
Heat stroke	1	H
Burn disease	1.2	H
Caisson disease	1.2	H
Exposure to an ultra-high-frequency electromagnetic field of	1.2	H
Radiation damage	1.2	H
Oxygen starvation	1	H

3.3 General patient problems

(List 3)

	Level
Difficult patient/Aggressive patient	1
Domestic violence, cohabitation issues	1
Child abuse	1
Disability / disability	1
Suicide	2
Assault / sexual assault	1
Bad news message	1
Crisis (loss of loved ones, divorce, job loss, life changes, stressful situations)	1
Cluster problems	1
Problems of adolescence	1
Post-transplant conditions	2

3.4 Medical manipulations and practical skills (List 4)

A neurologist must have practical skills:

Catalog of requirements for the skills of a resident "neurologist"

№	Name of the manipulation\procedure	Number of assists	Number of self-performed procedures
1.	Clinical examination of the patient: Reception of neurological patients with the collection of complaints and anamnesis, external examination and a complete clinical examination of all organs and systems with the establishment of a topical and clinical diagnosis	200	20
2.	Drawing up a genealogy table or family tree	50	10
3.	Evaluation of peripheral blood parameters, data from biochemical blood tests (total cholesterol, creatinine, blood sugar, liver tests and transaminases) and general urinalysis and Nechiporenko tests. Interpretation and clinical interpretation of laboratory results. Evaluation of hormonal and immunological studies	100	10
4.	Performing a lumbar puncture. Be able to evaluate and know the practical significance of CSF analysis	50	1
5.	Examination of the fundus and visual fields, etc.	50	1
6.	Psychometric testing (interpretation of MMSE, Tsung, scale Rankin)	100	2
7.	Conducting a step test of Fukuda	10	20
8.	Analysis and decoding of EEG, M-echo, EMG, ENMG	100	10
9.	Analysis of the results of craniography, spondylography	100	10
10.	Analysis of CT and MRI results.	100	15
11.	Analysis of vascular angiography with contrast on RCT.	15	1

12.	Application of the basics of physical therapy (DDT, electrophoresis, electronic ultrasound, laser, etc.)	50	10
13.	Basic reflexology	50	3
14.	Physical therapy instructor, basic knowledge	50	5
15.	Knowledge of the basics of therapeutic massage and manual therapy	50	10
16.	Conducting a proserine test	10	5
17.	Conducting liquorodynamic tests.	10	5
18.	Neurologopedic Program Instructor	50	5
19.	Mastering new technologies (methods of diagnosis, treatment and prevention) with application in neurological practice	10	5

All medical interventions should be documented in an individual report in detail (no. of medical documentation, date, time, diagnosis, name of manipulation and procedure, signature of the trainer's doctor) with a copy of the main sheets of the patient's medical card. It is necessary to implement a registration log to record and verify the acquired competencies and manipulations performed.

3.5 Emergency conditions

(List 5)

A "neurologist" should be able to independently diagnose and provide emergency (urgent) care at the pre-hospital stage, as well as determine the tactics of providing further medical care in the following emergency conditions:

1. Violation of consciousness
2. Transient disorders of cerebral circulation, hypertensive crisis, etc.
3. Strokes (hemorrhagic, ischemic)
4. Spinal stroke, acute myeloradiculohemia
5. Vegetative-vascular paroxysms
6. Intracranial hypertension syndrome. Edema of the brain
7. Epilepsy (epistatus), convulsive syndrome
8. Paroxysmal myoplegia

9. Meningitis
10. Encephalitis
11. Guillain-Barre and Landry syndrome
12. Injuries of the brain and spinal cord.
13. Acute neurological symptoms of poisoning
14. Acute neurological symptoms in metabolic disorders
15. Myasthenia gravis and myasthenic crisis
16. Botulism, tetanus, rabies
17. Migraine status
18. Myelitis
19. Deep vein thrombosis of the lower extremities, pulmonary embolism
20. Panic attack
21. Acute allergic reactions
22. Acute urinary retention
23. Psychomotor agitation of various origins
24. Depressive status
25. Acute pain syndrome
26. Coma of unclear etiology
27. Shocks of various etiologies
28. Acute heart failure
29. Acute respiratory failure
30. Pulmonary edema

General medical issues

1. Clinical death
2. Electric trauma
3. Lightning strike
4. Hyperthermia

5. Poisoning and intoxication.
6. Drowning
7. Collapse
8. Fainting
9. Bites of animals, snakes and insects

CHAPTER 4. Recognition criteria and classification of postgraduate education institutions

Categories of post-graduate education institutions

Category A (2 years): Departments of neurology of national centers, research institutes and other republican institutions.

Category B (2 years): Departments of neurology of city, regional clinics and regional hospitals.

Category C (1 year): Therapeutic and other departments specializing in the care of patients with neurological diseases, medical offices specializing in the field of neurology.

Characteristics of educational institutions for the provision of postgraduate education

	Category		
Category	A	B	C
Characteristics of the clinic			
Departments of neurology of national centers, research institutes and other republican institutions.	+	-	-
Neurology departments of city, regional clinics and regional hospitals.	-	+	+
Medical institutions with outpatient / polyclinic departments	+	+	+
Medical Team			
Doctor-supervisor-specialist in the field of neurology	+	+	+
- university teacher	+	-	-
- full-time (at least 80%)	+	+	+
- taking part in the training of residents	+	+	-

Assistant Manager-a specialist in the field of neurology, who is an employee of the Faculty of postgraduate education	+	++	+
At least 1 full-time doctor including the head of the department	+	+	+
Postgraduate education			
Structured postgraduate training Program	+	+	+
Interdisciplinary training (hours / week)	+	+	+
Participation in scientific research with publication in peer-reviewed journals	+	-	-
Analysis of clinical cases in a multidisciplinary team	+	-	-
Basic medical services in the field of neurology			
Radiography of the skull, spine, digital radiography	+	+	+
Fundus, visual fields	+	+	+
Ultrasound Dopplerography (USDG)	+	+	+
EEG, M-ECHO	+	+	+
ENMG, electromyogram	+	+	+
CT, MRI	-	-	-
Vascular angiography with contrast on RCT	-	-	-
EEG-video monitoring	-	-	-

Recognized medical institutions are clinical bases for postgraduate training of a neurologist and must meet the requirements according to state educational standards.

CHAPTER 5. Regulations on the examination/attestation.

Duration and structure of training

The duration of training is 3 years. The first year of training includes the general practitioner program, the second and third years of training include -1 basic course in neurology and 11 clinical course blocks (see the table). During this period, there will be a 4-month internship in outpatient medical offices.

№	Name of course blocks	Duration
I.	General Neurology	
1.	Topical diagnostics of the motor sphere	1 month
2.	Topical diagnostics of the sensitive sphere	1 month
3.	Topical diagnosis of cranial nerves	1 month
4.	Topical diagnosis of higher brain functions	1 month
5.	Topical diagnosis of the autonomic nervous	1 month
6.	Symptoms and syndromes in neurology	1 month
7.	Physical therapy in neurology	1 month
8.	Functional diagnostics and neuroimaging research methods in neurology	
II.	Private neurology	
1.	Angioedema	2 month
2.	Inflammatory and infectious diseases of the nervous system	2 month
3.	Diseases of the peripheral nervous system	1 month
4.	Somatoneurology	1 month
5.	Demyelinating and degenerative diseases of the nervous system	1 month
6.	Diseases of the autonomic nervous system and paroxysmal diseases	1 month
7.	Tumors and tumour-like diseases of the brain and spinal cord	1 month
8.	Traumatic and toxic lesions of the nervous system	1 month
9.	Hereditary diseases of the nervous system	1 month
10.	Perinatal injuries of the nervous system and their early diagnosis	1 month
11.	Neuropharmacology	1 month
12.	Emergency neurology (Neuro-resuscitation)	1 month
	Total:	22 months

The purpose of the exam / attestation is to determine the level of knowledge and practical skills of clinical residents who have been trained in the specialty of neurologist in accordance with the catalog of competencies.

Composition of the examination committee:

- 2 representatives of clinics of group "A"
- 1 representative of clinics of group "B" or "C"
- 2 representatives of PGMEF
- 2 representatives of the PMA (professional medical association).

Tasks of the exam board/attestation commission:

1. organization and conduct of the exam / attestation;

2. conducting the exam and reporting the result;
3. review and correct exam questions as needed;
4. conducting examination questions no later than 1 month before the exam.

Filing an appeal. The appeal must be submitted immediately after the exam.

Exam Structure: Part

Part 1: Test Exam

Part 2: practical part (at the patient's bedside)

Part 3: a structured oral exam based on a discussion of clinical cases with minimal criteria for results determined in advance (the examiner uses case descriptions, examination results, and X-rays, functional examinations and other illustrations (60 to 90 minutes).

Admission to the exam.

A graduate of a postgraduate educational program in neurology and neurologists specialists who have passed a specialization to confirm their qualifications

For the final exam, residents must submit a diary of the resident and a list of manipulations and procedures with an indication of the number of manipulations performed, certified by the signature of the responsible clinical supervisor and mentor

Assessment criteria for the exam/attestation: The assessment of each part of the exam, as well as the final assessment, is given with the mark "passed" or "failed". The exam was successful if both parts of the exam were passed.

Literature

1. Layout of the State Educational Standard of Higher Professional Education Kyrgyz Republic in the specialty.
2. Federal State Educational Standard of Higher Education in Specialties in Residency, Russian Federation.
3. International Standards of the World Organization of Family Doctors for postgraduate Medical Education in the specialty "Family Medicine" (WONCA, 2013).
4. International Standards of the World Federation of Medical Education (WFME) for improving the quality of Postgraduate Medical Education (WFME, 2015).
5. Competence Catalog (postgraduate level) by specialty "Family doctor"