

**MINISTRY OF HEALTH OF THE REPUBLIC OF BELARUS**  
Educational Institution  
«BELARUSIAN STATE MEDICAL UNIVERSITY»

Контрольный  
экземпляр

**APPROVED**

by Rector of the Educational  
Institution «Belarusian State  
Medical University»



*[Signature]* S.P.Rubnikovich

*26.06.2025*

Reg.# UD-*0911-01-51/2526* edu.

**PEDIATRIC SURGERY**

**Curriculum of the educational institution  
in the academic discipline for the specialty**

**1-79 01 01 «General Medicine»**

Curriculum is based on the educational program «Pediatric Surgery», approved 26.06.2025, registration # УД-0911-01-51/2526/уч.; on the educational plan in the specialty 1-79 01 01 «General Medicine», approved 16.04.2025, registration # 7-07-0911-01/2526/mf.

### **COMPILERS:**

Yu.G.Degtyarev, Head of the Department of Pediatric Surgery with advanced training and retraining course of the Educational Institution «Belarusian State Medical University», D.Sc., Associate Professor;

A.N.Voronetsky, Associate Professor of the Department of Pediatric Surgery with advanced training and retraining course of the Educational Institution «Belarusian State Medical University», Ph.D., Associate Professor;

V.M.Cherevko, Associate Professor of the Department of Pediatric Surgery with advanced training and retraining course of the Educational Institution «Belarusian State Medical University», Ph.D., Associate Professor

### **RECOMMENDED FOR APPROVAL:**

by the Department of Pediatric Surgery with advanced training and retraining course of the Educational Institution «Belarusian State Medical University»  
(protocol # 19 of 19.06.2025);

by the Scientific and Methodological Council of the Educational Institution «Belarusian State Medical University»  
(protocol # 10 of 26.06.2025)

## EXPLANATORY NOTE

«Pediatric Surgery» is the academic discipline of the Pediatric Module, which contains systematized scientific knowledge about etiology, pathogenesis, clinical picture, diagnostic methods, differential diagnosis, treatment and prevention of surgical diseases and injuries in newborns, children and adolescents.

The goal of the academic discipline «Pediatric Surgery» is to develop specialized competence to solve problems of professional activity in the diagnosis, treatment and prevention of surgical diseases and injuries in newborns, children and adolescents.

The objectives of the academic discipline «Pediatric Surgery» are to develop students' scientific knowledge of clinical manifestations, methods of diagnosis, treatment and prevention of surgical diseases and injuries in children and adolescents, skills and abilities necessary for:

- examining pediatric surgical patients;
- interpreting laboratory and instrumental examination results;
- diagnosis of surgical diseases in children and adolescents;
- providing first aid in case of accidents, injuries, bleeding and other conditions threatening the patient's life and health.

### **Relations to other educational disciplines**

The knowledge, skills and abilities acquired during the study of the academic discipline «Pediatric Surgery» are necessary for successful study of the academic discipline «Pediatric Surgery» for the Sub-Residency «General Medical Practice (for foreign citizens)».

Studying the academic discipline «Pediatric Surgery» should ensure the formation of students' specialized competencies: assess clinical symptoms, apply methods of a sick child examination, laboratory and differential diagnosis, make a clinical diagnosis, master the principles of treatment, prevention and medical rehabilitation of children and adolescents.

**As a result of studying the academic discipline «Pediatric Surgery» the student should**

### **know:**

the etiology, pathogenesis, classification, clinical manifestations, diagnosis and differential diagnosis, treatment methods and prevention of common surgical diseases and injuries in newborns, children and adolescents;

diagnostic methods, treatment strategies and transportation rules for newborns with surgical diseases;

clinical manifestations, diagnosis and treatment strategies for diseases and pathological processes in children requiring emergency surgical care;

the basics of preoperative preparation for children with surgical diseases;

organization of surgical care for children in outpatient settings, follow-up groups and methods for assessing its effectiveness;

medical ethics and deontology in pediatric surgery;

### **be able to:**

examine pediatric patients with surgical diseases and injuries;

form a preliminary diagnosis of surgical diseases in pediatric patients in typical cases;

develop a diagnostic examination program for specific nosological entities;

determine the timing of referrals to a pediatric surgeon for pediatric patients with various types of surgical diseases and malformations;

provide medical care in case of accidents, injuries, bleeding and other conditions threatening the patient's life and health;

administer necessary pathogenetic therapy aimed at preventing complications;

determine indications and conditions for transporting pediatric patients with surgical diseases and malformations;

prepare medical documentation;

**master:**

skills for physical examination of children and adolescents with surgical diseases and injuries;

skills in interpreting laboratory and instrumental diagnostic methods;

skills in organizing sanitary and hygienic education to promote a healthy lifestyle.

**Total number** of hours for the study of the discipline is 120 academic hours, of which 57 classroom hours and 63 hours of student independent work. Classroom hours according to the types of studies: lectures – 9 hours (including 3 hours of supervised student independent work (SSIW)), practical classes – 48 hours.

Intermediate assessment is carried out according to the syllabus of the specialty in the form of a credit (9 semester).

Form of higher education – full-time.

### ALLOCATION OF ACADEMIC TIME ACCORDING TO SEMESTERS OF STUDY

Code, name of the specialty	Semester	Total number of academic hours	Number of classroom hours				Out-of-class self-studies	Form of intermediate assessment
			Number of classroom hours	including				
				class lectures	SSIW	practicals		
1-79 01 01 «General Medicine»	9	120	57	6	3	48	63	Credit

## THEMATIC PLAN

Section (topic) name	Number of class hours	
	lectures (incl. SSIW)	practical
<b>1. Emergency Surgery</b>	<b>3</b>	<b>24</b>
1.1. Examination methods for children with surgical disease. Acute appendicitis in pediatric patients	1,5	6
1.2. Differential diagnosis of appendicitis. Peritonitis, appendicular infiltrate	1,5	6
1.3. Acquired intestinal obstruction. Intussusception. Strangulated hernias	-	6
1.4. Abdominal and chest organs injuries. Gastrointestinal bleeding	-	6
<b>2. Planned Surgery</b>	<b>1,5</b>	<b>6</b>
<b>3. Purulent Surgery</b>	<b>3</b>	<b>12</b>
3.1. Purulent-inflammatory diseases of newborns and infants	1,5	6
3.2. Acute and chronic hematogenous osteomyelitis. Complicated pneumonia	1,5	6
<b>4. Neonatal Surgery</b>	<b>1,5</b>	<b>6</b>
<b>Total hours</b>	<b>9</b>	<b>48</b>

### CONTENT OF THE EDUCATIONAL DISCIPLINE

#### 1. Emergency Surgery

##### 1.1. Examination methods for children with surgical diseases. Acute appendicitis in pediatric patients

History of pediatric surgery. Development of pediatric surgery in the Republic of Belarus. Pediatric surgery ethics in pediatric surgery.

Primary examination methods: subjective (complaints, medical and life history), objective (inspection, palpation, auscultation, percussion). Features of surgical objective examination. Purpose and objectives of the main examination methods, causes of errors in evaluating results. General understanding of modern diagnostic methods for surgical diseases. Invasive and non-invasive diagnostic methods.

The relevance of acute appendicitis in childhood. Etiology, pathogenesis, classification and clinical manifestations of acute appendicitis. Evaluation of a patient with suspected acute appendicitis, subjective and objective data. Local symptoms of acute appendicitis. Clinical, laboratory and instrumental diagnostics, diagnostic ultrasound criteria for acute appendicitis.

Age-specific characteristics of acute appendicitis in children (anatomical, physiological and inflammatory reactions, local manifestations and clinical course). Age-specific examination, diagnostic and identification methods for local signs of acute appendicitis. Rationale for preoperative preparation.

Modern treatment methods for acute appendicitis in children. Complications of

acute appendicitis preoperatively and postoperatively. Public health education to reduce complications and mortality in acute appendicitis.

Examination of patients with acute appendicitis: collection of complaints and medical history; physical examination; preparation of an examination plan; interpretation of laboratory and instrumental examination results; diagnosis formulation; justification of indications for surgery; preparation of a surgical plan; postoperative patient management; preparation of medical documentation.

### **1.2. Differential diagnosis of appendicitis. Peritonitis, appendicular infiltrate**

Variants of anatomical localization of the appendix. Features of the clinical picture and course of appendicitis in retrocecal, pelvic, medial, subhepatic and left-sided appendix locations. Clinical and instrumental diagnostics depending on the location of the appendix. Ensuring sanitary and epidemiological well-being of the population to reduce complications and mortality in acute appendicitis.

Groups of diseases (gastroenterological, respiratory, urological, pediatric and general infectious diseases, genital tract diseases in boys and girls, systemic diseases, blood diseases, emergency surgical) requiring differential diagnosis with acute appendicitis in children. Differential diagnosis of appendicitis with pneumonia, urinary tract infection, acute respiratory viral infections, mesadenitis, acute pelvic diseases in girls and other urgent abdominal diseases.

Peritonitis in children: causes, classification, pathogenesis, stages and clinical manifestations depending on the stage of the disease.

Appendicular peritonitis: classification, clinical manifestations, preoperative preparation, effectiveness criteria, principles of surgical interventions and minimally invasive surgery. Postoperative treatment and objective indicators of its effectiveness. Early postoperative complications: classification, diagnosis and correction methods.

Appendicular infiltrate: clinical manifestations, differential diagnosis and surgical treatment strategies in children of different ages.

Examination of patients with acute appendicitis with various anatomical locations of the appendix, appendiceal peritonitis and appendiceal infiltrate: collection of complaints and disease history; physical examination; preparation of an examination plan; interpretation of laboratory and instrumental examination results; formulation of a diagnosis; justification of indications for surgery; preparation of a surgical plan; postoperative patient management, preparation of medical documentation.

### **1.3. Acquired intestinal obstruction. Intussusception. Strangulated hernias**

Acquired intestinal obstruction: definition, classification by origin, pathogenesis, anatomical location and clinical course.

Dynamic (spastic, paralytic) intestinal obstruction: etiology, pathogenesis, clinical manifestations, diagnosis and treatment.

Mechanical intestinal obstruction: etiology and pathogenesis. Adhesive intestinal obstruction in children. Mechanism of adhesion formation in the abdominal cavity. Classification of adhesive intestinal obstruction. Clinical manifestations, diagnosis and treatment principles of adhesive intestinal obstruction. Adhesive disease. Prevention of adhesions in the abdominal cavity.

Intussusception: definition, relevance of the problem and age-related morbidity.

Etiology, pathogenesis and classification of intussusception in children. Clinical manifestations, diagnosis, differential diagnosis and complications of intestinal intussusception. Modern methods of treatment (conservative and surgical) for intestinal intussusception, indications and contraindications for various treatment methods. Methodology for conservative straightening of intestinal intussusception under ultrasound guidance.

Strangulated hernia: definition. Types and mechanisms of strangulation in children (elastic, retrograde, parietal). Clinical manifestations, diagnosis, differential diagnosis and complications of strangulated hernias. Emergency surgical treatment. Tactics for spontaneous and forced reduction of strangulated hernia. False reduction. Principles of surgical interventions for strangulated hernias.

Examination of patients with acquired intestinal obstruction, intestinal intussusception and strangulated hernias: collection of complaints and medical history; physical examination; preparation of an examination plan; Interpretation of laboratory and instrumental examination results; formulation of a diagnosis; justification of indications for surgical intervention; preparation of a surgical plan; postoperative patient care, preparation of medical documentation.

#### **1.4. Abdominal and chest organs injuries. Gastrointestinal Bleeding**

Epidemiology, etiology and classification of abdominal injuries. Spleen injury: clinical manifestations, diagnostic methods, treatment approaches and treatment methods. Liver injury: clinical manifestations, diagnostic methods, treatment approaches and treatment methods. Stomach and intestinal injuries: clinical manifestations, diagnostic methods and treatment methods.

Chest injuries: classification and etiology. Clinical manifestations of injuries to the lung, heart, esophagus, trachea, bronchi and major vessels, as well as rib fractures. Types of pneumothorax. Treatment approaches depending on the type of chest injury. Indications for pleural puncture and drainage. Pleural drainage methods. Medical instrumentation for pleural puncture and drainage.

Types and causes of gastrointestinal (GI) bleeding. GI bleeding requiring surgical treatment. Clinical manifestations of GI bleeding depending on the severity, source, volume and rate of blood loss. Diagnosis of GI bleeding. Clinical and laboratory criteria and calculation of blood loss volume. Degrees of blood loss. Treatment of GI bleeding, indications for conservative and surgical treatment.

Examination of patients with abdominal and chest injuries and GI bleeding: collection of complaints and medical history; physical examination; preparation of an examination plan; interpretation of laboratory and instrumental examination results; diagnosis formulation; justification of indications for surgery; preparation of a surgical plan; postoperative patient management, preparation of medical documentation.

### **2. Planned Surgery**

Anterior abdominal wall hernias: etiology, pathogenesis, clinical manifestations, diagnostic methods, treatment and prevention. Elements of anterior abdominal wall hernias, anatomical features in children. Classification of hernias by origin, location and course. Principles of surgical interventions, minimally invasive surgeries for anterior abdominal wall hernias and contraindications to surgical treatment.

Follow-up care for children with anterior abdominal wall hernias. Organizing

medical examinations, identifying hernias and timing of surgical treatment.

Megacolon: classification, epidemiology, etiology and pathogenesis. Clinical manifestations, diagnostic methods, differential diagnosis and treatment of megacolon. Acquired megacolon. Functional megacolon. Follow-up care for children with megacolon.

Hirschsprung's disease: classification, etiology, pathogenesis, clinical manifestations (acute, subacute, chronic forms), diagnostic methods (radiological, sphincteromanometry, morphological, histochemical), treatment methods (conservative, surgical), principles and timing of surgical interventions. Outpatient monitoring of children with Hirschsprung's disease.

Characteristics and classification of benign neoplasms in children. Hemangiomas, lymphangiomas, pigment spots, teratomas: clinical manifestations, diagnosis, differential diagnosis, treatment methods. Outpatient monitoring of children with benign neoplasms, timing of surgical interventions.

Examination of patients with anterior abdominal wall hernias, megacolon, Hirschsprung's disease, hemangiomas, lymphangiomas, teratomas, atheromas: collection of complaints and medical history; physical examination; preparation of an examination plan; Interpretation of laboratory and instrumental examination results; formulation of a diagnosis; justification of indications for surgical intervention; preparation of a surgical plan; postoperative patient care, preparation of medical documentation.

### **3. Purulent Surgery**

#### **3.1. Purulent-inflammatory diseases of newborns and infants**

Necrotic phlegmon of the newborn: etiology, clinical manifestations, diagnosis, complications, treatment. Mastitis of the newborn: etiology, clinical manifestations, differential diagnosis, complications, treatment. Omphalitis: etiology, clinical manifestations, complications, treatment methods. Soft tissue abscesses: etiology, clinical manifestations, complications, treatment. Cellulitis: etiology, clinical manifestations, complications, treatment. Paronychia: etiology, clinical manifestations, complications. Acute paraproctitis: etiology, clinical manifestations, diagnosis, complications. Infected birth injuries (wounds, cephalohematoma, calcification): etiology, clinical manifestations, complications.

Principles of local and general treatment of purulent-inflammatory diseases of newborns and infants. Empirical and rational antibiotic therapy of purulent-inflammatory diseases.

Examination of newborns and infants with purulent-inflammatory diseases: collection of complaints and disease history; physical examination; preparation of an examination plan; interpretation of laboratory and instrumental examination results; formulation of a diagnosis; justification of indications for surgical intervention; preparation of a surgical plan; postoperative patient management, preparation of medical documentation.

#### **3.2. Acute and chronic hematogenous osteomyelitis. Complicated pneumonia**

Hematogenous osteomyelitis: definition, classification, etiology. Pathogenesis of acute hematogenous osteomyelitis. Clinical manifestations of acute metaphyseal and

epiphyseal osteomyelitis, characteristics of the modern course of the disease, complications, diagnostic methods, differential diagnosis and treatment methods. Follow-up care of children who have had acute hematogenous osteomyelitis.

Primary-chronic hematogenous osteomyelitis: forms, clinical manifestations, diagnostic methods, differential diagnosis and treatment. Causes of secondary chronic hematogenous osteomyelitis, classification, clinical manifestations, complications, diagnostic methods, differential diagnosis and treatment. Follow-up care for children with chronic hematogenous osteomyelitis.

Pleural and pulmonary complications of pneumonia in children: classification, etiology, clinical manifestations, diagnosis and treatment methods.

Examination of patients with acute and chronic hematogenous osteomyelitis complicated by pneumonia: collection of complaints and medical history; physical examination; preparation of an examination plan; interpretation of laboratory and instrumental examination results; diagnosis formulation; justification of indications for surgery; preparation of a surgical plan; postoperative patient management; preparation of medical documentation.

#### **4. Neonatal Surgery**

Esophageal and gastric malformations. Esophageal atresia: clinical manifestations, diagnosis and treatment. Tracheoesophageal fistula: clinical manifestations, diagnosis and treatment. Short esophagus: clinical manifestations, diagnosis and treatment. Pyloric stenosis: clinical manifestations, diagnosis, differential diagnosis and treatment. Gastric membrane: clinical manifestations, diagnosis and treatment.

Anterior abdominal wall malformations. Vitelline and urachus duct anomalies: clinical manifestations, diagnosis, differential diagnosis and treatment.

Omphalocele: clinical manifestations, diagnosis, differential diagnosis and treatment depending on size.

Gastroschisis: clinical manifestations, diagnosis, differential diagnosis and transportation and treatment. Anorectal defects: classification, clinical manifestations depending on the type of defect, diagnosis, differential diagnosis, timing of surgical interventions and principles of surgical correction.

Diaphragmatic hernias: classification, clinical manifestations, diagnosis, differential diagnosis, transportation rules, timing of surgical treatment.

Congenital intestinal obstruction. High congenital intestinal obstruction: anatomical variants, clinical manifestations, radiographic examination, principles of surgical treatment.

Congenital low intestinal obstruction: anatomical variants, clinical manifestations, radiographic examination, principles of surgical treatment.

Examination of patients with malformations of the esophagus and stomach, anterior abdominal wall, anorectal defects, diaphragmatic hernias, congenital intestinal obstruction: collection of complaints and medical history; physical examination; preparation of an examination plan; interpretation of laboratory and instrumental examination results; formulation of a diagnosis; preparation of a surgical plan. postoperative patient care, preparation of medical documentation.

**EDUCATIONAL DISCIPLINE «PEDIATRIC SURGERY» CURRICULAR CHART**

Section, topic #	Section (topic) name	Number of class hours		Supervised student independent work	Literature	Practical skills	Form of control	
		lectures	practical				of practical skills	of current / intermediate assessment
	<b>Lectures</b>	<b>6</b>	<b>-</b>	<b>3</b>				
1.	Acute appendicitis in pediatric patients. Peritonitis, appendiceal infiltrate	1,5	-	1,5	1-3			Abstract defense
2.	Planned surgery. Megacolon, Hirschsprung's disease	-	-	1,5	1-3			Presentation defense
3.	Purulent-inflammatory diseases of newborns and infants	1,5	-	-	1-3			
4.	Neonatal surgery. Esophageal and gastric malformations	1,5	-	-	1-3			
5.	Diaphragmatic hernias. Congenital intestinal obstruction	1,5	-	-	1-3			
	<b>Practical lessons</b>	<b>-</b>	<b>48</b>	<b>-</b>				
1.	Methods of examination of children with surgical diseases. Acute appendicitis in pediatric patients	-	6	-	1-3	1. Physical examination of a pediatric patient with a surgical condition. 2. Palpation of the abdominal cavity. 3. Performing hygienic and surgical hand hygiene according to EN-1500	Performing a practical skill at the patient's bedside.  Visual assessment of skill performance	Survey, testing, solving situational problems
2.	Differential diagnosis of appendicitis. Peritonitis, appendicular infiltrate	-	6	-	1-3	1. Physical examination of a pediatric patient with a	Performing a practical skill at	Survey, testing, solving

						surgical condition. 2. Preoperative preparation for peritonitis	the patient's bedside. Visual assessment of skill performance	situational problems
3.	Acquired intestinal obstruction. Intussusception. Strangulated hernias	-	6	-	1-3	1. Physical examination of a pediatric patient with a surgical condition. 2. Interpretation of abdominal ultrasound for intussusception	Performing practical skills at the patient's bedside. Situational problem solving	Survey, testing, defense of the abstract (report)
4.	Abdominal and chest organs. Gastrointestinal bleeding	-	6	-	1-3	1. Physical examination of a pediatric patient with a surgical condition. 2. Preparation of medical documentation	Performing practical skills at the patient's bedside. Completing outpatient/inpatient medical records	Survey, testing, solving situational problems, defending an abstract (report)
5.	Planned surgery. Hernias of the anterior abdominal wall. Hemangiomas, lymphangiomas, teratomas. Megacolon. Hirschsprung's disease	-	6	-	1-3	1. Physical examination of a pediatric patient with a surgical condition. 2. Preparation of medical documentation	Performing practical skills at the patient's bedside. Completing outpatient/inpatient medical records	Survey, testing, solving situational problems*
6.	Purulent-inflammatory diseases of newborns and infants	-	6	-	1-3	1. Physical examination of newborns and infants.	Performing practical skills at the patient's bedside.	Survey, testing*, situational solutions*

						2. Preparation of medical documentation	Completing an outpatient/inpatient medical record	
7.	Acute and chronic hematogenous osteomyelitis. Complicated pneumonia	-	6	-	1-3	1. Physical examination of a pediatric patient with a surgical condition. 2. Preparation of medical documentation	Performing practical skills at the patient's bedside. Completing an outpatient/inpatient medical record	Survey, testing, solving situational problems, defending an abstract (report)
8.	Neonatal surgery. Malformations of the esophagus and stomach, anterior abdominal wall. Malformations of the anorectal region. Congenital intestinal obstruction. Diaphragmatic hernias	-	6	-	1-3	1. Physical examination of newborns and infants. 2. Demonstration of basic surgical instruments and their intended purpose	Performing a practical skill at the patient's bedside. Visual assessment of skill performance	Survey, testing, solving situational problems. Credit
	<b>Total hours</b>	<b>6</b>	<b>48</b>	<b>3</b>				

\*This is a mandatory form of current certification.

## INFORMATION AND INSTRUCTIONAL UNIT

### LITERATURE

#### **Basic (relevant):**

1. Pediatric Surgery : textbook for foreign students of higher medical education establishments / V. A. Dihtiar [et al.], ed. by V. A. Dihtiar, V. I. Sushko, D. Yu. Kryvchenia. – Kiev : AUS Medicine Publishing, 2019. – 366 p.

#### **Additional:**

2. Pediatric Surgery Digest / ed. by Z. Zachariou. – Springer, 2022. – 698 p.

**Electronic courseware for the academic discipline «Pediatric Surgery»**

3. <https://etest.bsmu.by/course/view.php?id=353>.

### METHODOLOGICAL RECOMMENDATIONS FOR THE ORGANIZATION AND PERFORMANCE OF STUDENT INDEPENDENT WORK IN THE ACADEMIC DISCIPLINE

The time allocated for independent work can be used by students for:

- preparing for lectures and practical classes;
- preparing for credit in the academic discipline;
- studying the topics (issues) designed for independent work;
- performing research and creative tasks;
- preparing thematic reports, abstracts, presentations;
- taking notes of educational literature;
- preparing reports;
- compilation of a thematic selection of literature sources, Internet sources.

### METHODOLOGICAL RECOMMENDATIONS FOR THE ORGANIZATION AND PERFORMANCE OF SUPERVISED STUDENT INDEPENDENT WORK IN THE ACADEMIC DISCIPLINE

#### **APPROXIMATE LIST OF TASKS FOR SUPERVISED STUDENT INDEPENDENT WORK:**

Students may use the time allocated for independent work to:

- prepare thematic reports and presentations;
- take notes from academic literature;
- preparation of tests by students for the organization of mutual knowledge assessment.

#### **FORMS OF CONTROL OF SUPERVISED STUDENT INDEPENDENT WORK:**

- abstract defense;
- presentation defense.

#### **LIST OF AVAILABLE DIAGNOSTIC TOOLS**

The following forms of current certification are used to diagnose competencies:

- survey;
- testing;
- abstract defense;
- situational problem solving.

**LIST OF AVAILABLE TEACHING METHODS**

Traditional method;

active (interactive) methods:

training based on simulation technologies;

Problem-Based Learning (PBL);

Case-Based Learning (CBL);

Research-Based Learning (RBL).

**LIST OF PRACTICAL SKILLS**


Name of practical skills	Form of practical skills control
1. Physical examination of a pediatric patient with a surgical condition	Performing a practical skill at the patient's bedside
2. Physical examination of newborns and infants	Performing a practical skill at the patient's bedside
3. Palpation of the abdominal cavity	Performing a practical skill at the patient's bedside
4. Preoperative preparation for peritonitis	Visual assessment of skill performance
5. Interpretation of abdominal ultrasound for intussusception	Solving situational problems
6. Preparation of medical documentation	Completing an outpatient/inpatient medical record
7. Demonstration of basic surgical instruments and their intended purpose	Visual assessment of skill performance
8. Performing hygienic and surgical hand hygiene according to EN-1500	Visual assessment of skill performance

**PROTOCOL OF THE CURRICULUM APPROVAL  
BY OTHER DEPARTMENTS**

Title of the discipline requiring approval	Department	Amendments to the curriculum in the academic discipline	Decision of the department, which designed the curriculum (date, protocol #)
1.Surgical Diseases	Surgery and Transplantology with a course of advanced training and retraining	No	Protocol # 19 dated 19.06.2025
2.Surgical Diseases	Surgical Diseases with a course of advanced training and retraining	No	Protocol # 19 dated 19.06.2025

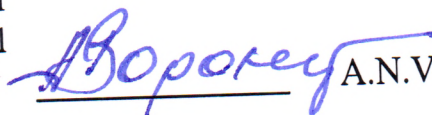
## COMPILERS/AUTHORS:

Head of the Department of Pediatric Surgery with advanced training and retraining course of the Educational Institution «Belarusian State Medical University», D.Sc., Associate Professor



Yu.G. Degtyarev

Associate Professor of the Department of Pediatric Surgery with advanced training and retraining course of the Educational Institution «Belarusian State Medical University», Ph.D., Associate Professor



A.N. Voronetsky

Associate Professor of the Department of Pediatric Surgery with advanced training and retraining course of the Educational Institution «Belarusian State Medical University», Ph.D., Associate Professor



V.M. Cherevko

Curriculum content, composition and the accompanying documents comply with the established requirements.

Head of the Office of Educational Activities of the Educational Institution «Belarusian State Medical University»

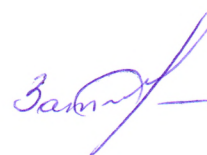
24.06.2025



I.L. Kotovich

Methodologist of the Educational and Methodological Department of the Office of Educational Activities of the Educational Institution «Belarusian State Medical University»

24.06.2025



S.V. Zaturanova