

**Ministry of health of Ukraine
Higher state educational establishment of Ukraine
«Ukrainian medical stomatological academy»**



«Approved

At the sitting of the chair of oncology
The minutes №1 from September 2, 2018
y. Manager of chair of oncology
MD, professor V.P.Bashtan

**METHODICAL POINTING
FOR INDEPENDENT WORK OF STUDENTS
DURING PREPARATION TO PRACTICAL EMPLOYMENT**

<i>Educational discipline</i>	<i>Oncology</i>
<i>Module №</i>	<i>I</i>
<i>Rich in content module №</i>	<i>I</i>
<i>Theme of employment</i>	Organization of oncologic help
<i>Course</i>	<i>V</i>
<i>Faculty</i>	<i>Medical №1, №2</i>

Poltava - 2018

THEME: “Organization of oncologic help”

Amount of hours – 2 educational hours.

1. Actuality of theme.

Malignant new formations remain the issue of the day of health protection Ukraine. From refined data of National cancer-register in 2010 152705 new cases of malignant new formations are registered in Ukraine - 324,5 per 100 mils of population (347,7 at men and 304,3 at women). The index standardized on a world standard at men was 258,3 %, and at women - 180,6 %.

In the structure of morbidity of masculine population the first grades places occupy a cancer lungs, stomach, skin, prostate gland urinary bladder, malignant new formations of lymphatic system, which are 50 % all tumors. At women most specific gravity in the structure of morbidity have the cancer of breast cancer, stomach, skin, body and neck of uterus, - 55,0 % from all tumors.

It should be noted that comparatively with 2014 year the general level of oncologic morbidity went down on 1,07 %, in that number on 2,3 % at men and on 0,16 % at women, however such vibrations of indexes there is and can be taken both due to the level of diagnostics and plenitude of account. Statistical for certain the indexes of morbidity grow on the cancer of skin, kidneys and thyroid at women. The reliable decline of indexes of morbidity at men is marked at malignant new formations of lip, stomach, bowel, and at women - stomach, rectum, urinary bladder cerebrum.

The amount of dying from malignant new formations in 2014 made 89 893 persons, or 191,0 per 100000 of population (232,9 at men and 154,7 at women). Standardized (world standard) index of death rate 171,8 is 80% for the masculine population and 85,2 % for the womanish population.

Most specific gravity in the structure of death rate at men have a cancer lung, stomach, mouth cavity rectum bowel and – 64,0 % all cases of deaths. At women leading places in the structure of death rate occupy the cancer of breast cancer, stomach, bowel, neck of uterus, ovary, – 50 % all cases of deaths.

The analysis of basic indexes of the state of organization of oncologic help from on-line data in 2014 shows that among all patients in 2014 did not live about 39,5 % patients, thus this index hesitated from 30,0 % in Kiev to 44,6%. If to compare this index to specific gravity of the IV stage of illness, obviously, that the last index is almost in 2-3 times below, that testifies to the artificial understating of stage.

Thus, by basic problems in organization of oncologic help to the population of Ukraine in 2009-2014 there is late diagnostics, insufficient level of morphological verification, insufficient scope by the patients special treatment and failings, in the account of oncologic patients.

2. Educational aims of employment.

General purpose: to give commons information on organization of oncologic help, underlining the value of preventive examinations and centre systems of oncologic patients health on the concrete examples of work in the Poltava region.

1. To learn the structure of oncologic service on Ukraine and on Poltava, in word.
2. To familiarize with organization of preventive examinations (necessary document).
3. To learn clinical classification of distribution of tumor process.
4. To learn clinical groups in oncology.
5. To learn a document which is filled on an oncologic patient.
6. To have a concept about the groups of enhanceable risk in oncology on the cancer of separate localizations.
7. To learn classification of TNM.

To know (and – II):

1. Structure of oncologic service in Ukraine and on Poltava, in word.
2. To make examples of survey of rural population of Poltava, in word.
3. Principles and method of leadthrough of prophylactic reviews of population with application of modern methods of diagnostics.
4. Obligatory methods of research at an oncologic review.
5. Basic document which is led on oncologic patients.
6. Groups of risk on the cancer of separate localizations, concept about screening.

To be able (and – III):

1. To define the stage of tumor process by system of TNM.
2. To define the stage of tumor process at four by phasic classification from 1958 year.
3. To set a clinical group.
4. To fill notification on a patient with the first set diagnosis of cancer or other malignant new formation of Ф.№ 090/4.
5. To fill on a patient by malignant new formation check card of clinical supervision of Ф.№ 027-2/У.
6. To conduct oncologic reviews.

3. Materials before auditorium independent work.

3.1. Practical skills on a theme:

1. Leadthrough of oncologic review:
 - Collection of complaints and anamnesis.
 - Review of skin and visible mucous shells.
 - Palpation of peripheral lymphatic nodes.
 - Review and palpation of thyroid, breast.
 - Dactylar research of rectum.
 - Gynaecological inspection:
 - a) bimanual research;
 - b) review of neck of uterus in mirrors;
 - c) stroke from the neck of uterus on cytological research.
2. Filling of notification on a patient with first in life by the set diagnosis of cancer or other malignant new formation.
3. Filling of card of clinical supervision.
4. Filling of protocol in case of establishment at the patient of malignant tumor in a late stage.
5. Filling of ambulatory card .
6. Filling of hospital chart.

4. Interdisciplinary integration (base knowledges, abilities, skills necessary for the study of theme)

Disciplines	To know
Oncology	Question of clinical oncology and organization of oncologic service.
Surgery Pathoanatomy Physiopathology	Question of theoretical and general oncology.

TERMINOLOGY

English	Russian	Latin
Tumor	Опухоль	Tumor
Stage	Стадия	Gradus
First	Первая	Prima
Second	Вторая	Secunda
Third	Третья	Tertio
Fourth	Четвертая	Quarta
Verification	Верификация	Verificatio
Suspicion	Подозрение	Suspensio

5. Table of contents of theme of employment.

Acquaintance and independent work in structural subdivision of oncodispensary. To learn and realize the task of every subsection. Order of direction of patients with suspicion on malignant new formation in oncologic establishment. Role of account of oncologic diseases for the high-quality analysis of morbidity and death rate from malignant new formations. Early diagnostics of malignant new formations as condition for successful and effective treatment, role of prophylactic reviews for early diagnostics. Review of patients in a polyclinic and permanent establishment, with establishment of necessary primary document: ambulatory card of Ф.025-у, notification about a patient in which the first set diagnosis cancer or other malignant new formation of Ф.090-В, protocol in case of establishment at the patient of malignant tumour in the late stage of Ф-027-2У, check card of clinical supervision of Ф-030-У, hospital chart, extract from a hospital chart on a patient with malignant new formation of Ф-027-І-У. Establishment to the patients of diagnosis on the system of TNM and four to phasic classification.

Clinical groups.

Tactic of doctor at different clinical groups. Centre system of oncologic patients health, and periodicity of reviews, volume of the special inspections. Analysis of protocols in case of ill-timed diagnostics of malignant new formations reason of late diagnostics. Participation in the leadthrough of prophylactic reviews in a polyclinic, forming of “groups of enhanceable risk”, organization of the special inspections of these patients

Organization and leadthrough of prophylactic reviews.

Prophylactic reviews are conducted on territorial and production principle 1 – 2 times per a year.

Obligatory methods of research during the leadthrough of prophylactic examination:

1. Collection of complaints.
2. Collection of anamnesis of disease and life.
3. Review of skin and visible mucuses shells.
4. Palpation of peripheral lymphatic knots.
5. Palpation of thyroid.
6. Palpation of milk glands.
7. Gynaecological review:
 - a. manual inspection;
 - b. review in mirrors;
 - c. brush from the neck of uterus.
8. Dactylar research of rectum.
9. Roentgenophotography.

Clinical classification groups

- Ia Patients with suspicion in the presence of malignant new formation.
- Ib Patients with pre-cancerous diseases.
- II Patients with a cancer, with a certain diagnosis, that need the special treatment.
- IIa Patients treatment of which must be radical, with application of surgical method.
- III Practically healthy people which came radical treatment and does not have the presence bits of tumour.
- IV Patients which are not subject to the special methods of treatment, and only to symptomatic treatment.

Clinical stages of malignant new formations

From 1956 year the general is accepted malignant tumours four stages of development.

I-a stage is the limited tumour process without the defeat of lymphatic knots and germination of surrounding tissue.

II stage it is comparative small tumour (diameter over 2 cm) in combination with single mobile metastases in the lymphatic knots.

A III stage is the tumour of considerably anymore sizes (diameter over 5 cm), which germinates in surrounding fissue, limits mobile of organs. Metastases in regional lymphatic knots as a mobile conglomerate.

IV stage is tumour of any scope with remote metastases or deep germination in neighbouring organs and fissue with exhaustion of organism.

System of TNM is built on three components:

T(tumor), N (nodulus), M (metastasis)

T (tumor) is a primary tumour. A size undertakes to attention tumours and degree of invasion.

N (nodulus) is innidiation in lymphatic knots.

M (metastasis) is remote metastases.

P is pathological research.

G is Degree of differentiation.

COUNT OF LOGICAL STRUCTURE
ON THEME: “Organization of oncologic help to the population of Ukraine”

1. Specialized oncologic help (look addition №1,2)

2. Prophylactic

- Collection of complaints
- Collection of anamnesis of disease and life
- Review of skin and visible mucous membraus.
- palpation of peripheral lymphatic knots
- palpation of thyroid
- palpation of mammary glands
- Gynaecological review
- Brusck from the neck of uterus.
- Research of rectum it is Roentgenophotography.

3. Current oncologic document

- Ф № 090/O
- Ф № 027/O
- Ф № 066/O
- Ф № OH – 30 – 6.

4. Clinical groups in oncology

- I "A"
- I "B"
- II "A"
- II
- III
- IV

5. Clinical classification on to the stages

6. Classification on the system of TNM

7. Groups of risk in oncology

8. Social and labour rehabilitation of oncologic patients

6. Plan and organizational structure of employment.

№ п/п	Basic stages of employment their functions and maintenance	Educational aims in the levels of mastering	Methods of control and studies	Materials methodical providing: control, evidentness and instinctiveness.	Division time in minutes
1. 2. 3.	<p style="text-align: center;">PREPARATORY STAGE</p> <p>Organizational measures. Educational goals setting and motivation. Control of initial level of knowledges of skills and abilities:</p> <ol style="list-style-type: none"> 1. Structure of oncologic service in Ukraine. 2. Principles and method of leadthrough of prophylactic reviews of population from application of modern methods of diagnostics. 3. Organization of онкопрофоглядів. 4. Obligatory methods of research at an oncologic review. 5. Basic document which is led on oncologic patients. 6. Groups of enhanceable risk on the cancer of separate localizations, concept about скринінг. 	<p>Control of presence Actuality of theme</p> <p>(I)</p> <p>(II)</p> <p>(II)</p> <p>(II)</p> <p>(II)</p> <p>(II)</p>	<p>Individual verbal questioning.</p> <p>Testing of initial level of theoretical knowledges.</p>	<p>II.2 “Educational aims”.</p> <p>II.1 actuality of theme.</p> <p>Tables, pictures, plaster casts, preparations.</p> <p>Tests of initial level of knowledges.</p> <p>Methodical developments for students.</p> <p>Reference card.</p> <p>Structurally are logical charts.</p> <p>Tool.</p>	<p>5 min.</p> <p>20 min.</p>
4	<p style="text-align: center;">BASIC STAGE</p> <ol style="list-style-type: none"> 1. To define the stage of tumour process on the system of TNM. 2. To define the stage of tumour process at four by phasic classification from 1958 year. 3. To set a clinical group. 4. To fill notification on a patient with first in life by the set diagnosis of cancer or other malignant new formation of Ф.№ 090/4. 5. To fill on a patient by malignant new formation check card of clinical supervision of Ф.№027-2/Y. 6. To conduct oncologic reviews. 	<p>(III)</p> <p>(III)</p> <p>(III)</p> <p>(III)</p> <p>(III)</p> <p>(III)</p>	<p>Methods of forming of skills: practical training.</p> <p>Methods of forming of abilities: professional training in the decision of offtype clinical situations.</p>	<p>Algorithms for forming of practical skills.</p> <p>Equipment.</p> <p>Algorithms for forming of professional abilities.</p> <p>Patients.</p> <p>Hospital charts.</p> <p>Texts situational offtype tasks.</p> <p>Imitations games.</p> <p>Equipment.</p>	50 min.
5.	<p style="text-align: center;">FINAL STAGE</p> <p>Control and correction of level of professional abilities and skills. Working out the totals of employment. Home task.</p>	(III)	Methods of control of abilities: the analysis and estimation of results is clinical works, laboratory researches, untiing of offtype tasks, test control of a III level.	<p>Clinical job performances + hospital charts.</p> <p>Tasks of a III level.</p> <p>Results of laboratory research.</p> <p>Reference card for work with literature.</p>	15 min.

3.5. Materials for self-control.

A. Questions for self-control.

1. Structure of oncologic service.
2. Concept about an oncologic watchfulness.
3. Concept about the groups of risk.
4. Principles and method of leadthrough of prophylactic reviews of population.
5. Obligatory methods of inspection at an oncologic review.
6. Description of clinical group and stage of new formation.
7. Basic document which is led on oncologic patients.
8. Concept about the labour and social rehabilitation of oncologic patients.

Б. TEST initial level of knowledges on a theme.

1. On to the age-dependent groups of cancer of thyroid have following lances of morbidity:
 - a) in 7 – 20 y.;
 - б) in 21 – 30 y.;
 - в) in 40 – 65 y.

2. More 60% all cases of cancer of thyroid makes:
 - a) papilliferous;
 - б) follicle;
 - в) undifferentiated;
 - г) squamous.

3. People belong to the group of oncologic risk:
 - a) which have the contact with oncologic patients;
 - б) with the pre-cancerous diseases;
 - в) with violation of carbohydrate exchange;
 - г) healthy, in which are ill the cancer of my folks;
 - д) with the immunodeficiency states.

4. Primary diagnosis of cancer at the level of medical link, provides for:
 - a) establishment of malignant new formation;
 - б) morphological верифікацію;
 - в) estimation of stage of disease;
 - г) estimation of distribution of process;
 - д) set diagnosis.

5. To principles of oncologic carefulness of doctor:
 - a) careful research of every patient;
 - б) setting of medications in the first day of appeal;
 - в) habit to think about a cancer with the hidden flowing;
 - г) knowledge of symptoms of malignant tumours;
 - д) knowledge of organizational principles of oncolody help.

6. The sick acted to the clinic with new formation in mmamary gland (clinical group of Ia). however during urgent histological research (an express is a biopsy) remote education appeared by a fibroadenoma. What clinical group does it follow to set?
IIa; III; And; IV; II.

B. tasks for self-control.

Task № 1 (№ 1).

In 3 months after the delete of sarcoma of soft tissue after radial therapy there was the relapse on the area of scar.

Question: What clinical group does it follow to propose?

Task № 2 (№ 2).

The sick got the course of the controlled from distance radial therapy (medical dose) on an occasion the cancer of mmamary gland of a III stage. A tumour disappeared almost fully after it, in this connection surgeons decided to conduct a radical mastectomy (before did not plan). Does it follow in this connection to change a stage?

Question: Does it follow in this connection to change a stage?

Task № 3 (№ 3).

During prophylactic reviews at a man 54 years it is found out malignant new formation of left pectoral gland of a III stage. What documents does it follow to process on found out a patient?

Question: What documents does it follow to process on found out a patient?

Task № 4 (№ 4).

Thirty years ago the sick treated oneself on an occasion the cancer of skin of cheek. It was not discovered during the review of relapse and innidiation.

Question: Does it follow sick to hold on an account in oncologi dispensary?

Task № 5 (№ 5).

At sick proof remisson after radical treatment of cancer of left mammary gland. I stage. However in 5 years found out cancer of body uterus a II stage.

Question: How is it needed to write down a diagnosis and clinical group?

Task № 6 (№ 6).

At patients found out the malignant tumours of polyneoplasium with localization of tumours process on a skin, and mammary gland and neck of uterus.

Question: What does it follow to put a clinical group and stage?

Task № 7 (№ 7).

In 10 years after treatment of melanoma of eye at sick information is absent about the relapse and innidiation.

Question: What clinical group does it follow to set? Is it possible to take off from an account such sick?

Task № 8 (№ 8).

In 25 years after treatment of patient with the cancer of skin of overhead lip (histological is basalcell cancer) a review sets proof remission of tumour process.

Question: What clinical group does it follow to propose? Is it possible to take off such sick from an account?

Manager of chair of oncology, professor

V.P.Bashtan