### MINISTRY OF HEALTH OF UKRAINE

### ODESSA NATIONAL MEDICAL UNIVERSITY

Department of infectious diseases with a course of dermatovenereology

APPROVED

Vice-Rector for Scientific and Pedagogical Work

Eduard BURYACHKIVSKYI

September 1, 2025

## WORK PROGRAM OF THE ACADEMIC DISCIPLINE DERMATOLOGY, VENEREOLOGY

Level of higher education: second (master's)

Field of knowledge: 22 'Health Care'

Speciality: 222 'Medicine'

Educational and professional programme: Medicine

The work programme is based on the educational and professional programme 'Medicine' for training specialists of the second (master's) level of higher education in the specialty 222 "Medicine" in the field of knowledge 22 'Health Care', approved by the Academic Council of ONMedU (Minutes No. 10 of 27 June 2024) and the educational and professional programme 'Medicine' for training specialists of the second (master's) level of higher education in the specialty I 2 "Medicine" in the field of knowledge I 'Health Care and Social Security', approved by the Academic Council of ONMedU (Minutes No. 10 of 26 June 2025).

### Developers:

Head of the Department of the department of infectious diseases with a course of dermatolovenereology, Doctor of Medical Sciences, Professor, T.V. Chaban,

Candidate of Medical Sciences, Associate Professor L.O. Kovtun.

The work programme was approved at a meeting of the department of infectious diseases with a course of dermatolovenereology.
Minutes No. 1 dated August 29, 2025.
Head of the department Tetiana CHABAN
MAM
Agreed with the EPP GuarantorValeriia MARICHEREDA
Approved by the subject cycle methodical commission on therapeutic disciplines of ONMedU
Minutes No. 1dated 08/29/2025.
Chairman of the subject cycle methodical commission
for therapeutic disciplines of ONMedU Explanation Olena VOLOSHYNA
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### 1. DESCRIPTION OF THE EDUCATIONAL DISCIPLINE

Name of indicators	Галузь знань, спеціальність, спеціалізація, рівень вищої освіти	Характеристика навчальної дисципліни
Total number:	Field of knowledge	Full-time (day) education
Credits of ECTS: 3	22 «Health care»	
Hours: 90		Mandatory discipline
	Specialty: 222 "Medicine	Course: 5
		Semester: IX - X
	Level of higher education second	Lectures 6 hours
	(master's degree)	Seminars (0 hours)
		Practical classes (54 hours)
		Laboratories (0 hours)
		Independent work (30 hours)
		Form of final control – credit test

## 2. GOALS AND OBJECTIVES OF THE ACADEMIC DISCIPLINE COMPETENCIES, PROGRAMME LEARNING OUTCOMES

The purpose of teaching the academic discipline is to provide higher education recipients with medical knowledge about the etiology, clinic, methods of diagnosis, treatment and prevention of dermatological and venereal diseases, as well as to teach higher education recipients to evaluate the clinical signs of dermatoses and sexually transmitted diseases, to draw up a plan for examining a patient to establish a diagnosis, evaluate the diagnostic criteria of diseases, draw up a treatment plan, writeprescriptions for medicinal substances used for the treatment of dermatoses and sexually transmitted diseases.

### Tasks:

- 1. Acquisition of skills and abilities of a general examination of a dermatovenerological patient (examination, assessment of skin changes, determination of proliferative, exudative, cavity and cavity-free, congenital and acquired primary and secondary morphological elements, monomorphism and polymorphism of the rash, palpation, percussion, scraping, determination of dermatographism, implementation diascopy, Balzer's iodine test, symptoms of Nikolsky, Meshchersky, instrumental studies).
- 2. Acquisition of practical skills for diagnosis and differential diagnosis of the most common diseases of the skin, mucous membrane of the mouth and diseases transmitted mainly by sexual means;
- 3. Acquiring the skills of organizing consultations of specialist doctors to establish a final diagnosis;

- 4. Learning modern methods of therapy and prevention of skin and venereal diseases;
- 5. Acquisition of practical skills regarding the collection of the necessary biomaterial for laboratory research (scales, nails, pus, serum, blood, etc.) and the ability tocorrectly interpret them;
- 6. Acquisition of skills and abilities to provide emergency aid in case of fainting, shock, allergic reactions; referral of patients to a special medical and preventive institution;
- 7. Acquisition of skills in the use of lotions, pastes, aerosols, lotions, etc.
- 8. Acquiring skills and abilities to prepare medical documentation patient's outpatient cards;
- 9. Formation of moral, ethical and deontological qualities during professional communication with the patient.

# The process of learning the discipline by the students is directed at forming theelements of the following competencies:

### **General competencies:**

- GC1. Ability to abstract thinking, analysis and synthesis
- **GC3.** Ability to apply knowledge in practical situations
- **GC4.** Knowledge and understanding of the subject area and understanding ofprofessional activity
- GC5. Ability to adapt and act in a new situation
- **GC6**. Ability to make reasonable decisions
- GC10. Ability to use information and communication technologies
- GC11. Ability to search, process and analyze information from various sources
- GC13. Awareness of equal opportunities and gender issues
- **GC16.** Ability to make decisions and act in compliance with the principle of inadmissibility of corruption and any manifestations of dishonesty

### **Special (professional) competencies:**

- SC1. Ability to collect medical information about the patient and analyze clinical data
- SC2. Ability to determine the necessary list of laboratory and instrumental studies and evaluate their results
- SC3. Ability to establish a preliminary and clinical diagnosis of the disease
- **SC4.** Ability to determine the necessary regime of work and rest in the treatment and prevention of diseases
- SC5. The ability to determine the nature of nutrition in the treatment and prevention of diseases
- SC6. Ability to determine the principles and nature of treatment and prevention of diseases
- **SC7.** Ability to diagnose emergency conditions
- **SC8.** Ability to determine tactics and provide emergency medical care

- **SC10.** Ability to perform medical manipulations
- **SC11.** Ability to solve medical problems in new or unfamiliar environments in the presence of incomplete or limited information, taking into account aspects of social and ethical responsibility, including the system of early intervention
- **SC13.** Ability to carry out sanitary and hygienic and preventive measures
- **SC14.** Ability to plan and carry out preventive and anti-epidemic measures for infectious diseases
- SC15. Ability to conduct an examination of working capacity
- SC16. Ability to fill medical documentation, including electronic forms
- SC24. Adherence to ethical principles when working with patients and laboratory animals
- SC26. Ability to determine the management tactics of persons subject to dispensary supervision
- **SC27.** The ability to diagnose and determine the management tactics of patients with extrapulmonary and widespread forms of tuberculosis, including co-infection of TB/HIV with a chemoresistant course

### **Program learning outcomes (PLO):**

- **PLO1.** Having a thorough knowledge of the structure of professional activity. Being able to carry out professional activities that require updating and integration ofknowledge. To be responsible for professional development, the ability for further professional training with a high level of autonomy.
- **PLO2.** Understanding and knowledge of basic and clinical biomedical sciences, at a level sufficient for solving professional tasks in the field of health care.
- **PLO3.** Specialized conceptual knowledge that includes scientific achievements in the field of health care and is the basis for conducting research, critical thinking of problems in the field of medicine and related interdisciplinary problems, including the system of early intervention health care and is the basis for conducting research, critical understanding of problems the field of medicine and related interdisciplinary problems.
- **PLO4.** Identifying leading clinical symptoms and syndromes (according to list 1); according to standard methods, using preliminary data of the patient's history, data of the patient's examination, knowledge about the person, his organs and systems, establish a preliminary clinical diagnosis of the disease (according to list 2).
- **PLO5.** Collecting complaints, history of life and diseases, assessing the psychomotor and physical development of the patient, the state of organs and systems of the body, based on the results of laboratory and instrumental studies, evaluation of the information regarding the diagnosis (according to list 4), taking into account the age of the patient.
- **PLO6.** Establishing the final clinical diagnosis by making a reasoned decision and analyzing the received subjective and objective data of clinical, additional examination, carrying out differential diagnosis, observing the relevant ethical and

legal norms, under the control of the managing physician in the conditions of the health care institution (according to the list 2).

- **PLO7.** Assigning and analyzing additional (mandatory and optional) examination methods (laboratory, functional and/or instrumental) (according to list 4) of patients with diseases of organs and body systems for differential diagnosis of diseases (according to list 2).
- **PLO8.** Determination of the main clinical syndrome or symptom that determines the severity of the victim's/victim's condition (according to list 3) by making a reasoned decision about the person's condition under any circumstances (in the conditions of a health care facility, outside its borders), including in conditions of emergency and hostilities, in field conditions, in conditions of lack of information and limited time.
- **PLO9.** Determination of the nature and principles of treatment (conservative, operative) of patients with diseases (according to list 2), taking into account the patient's age, in the conditions of a health care institution, outside its borders and at the stages of medical evacuation, including in field conditions, based on a preliminary clinical diagnosis, observing the relevant ethical and legal norms, by making a reasoned decision according to existing algorithms and standard schemes, in case of the need to expand
- **PLO 10.** Determine the necessary mode of work, rest and nutrition on the basis of the final clinical diagnosis, observing the relevant ethical and legal norms, by making a reasoned decision according to existing algorithms and standard schemes.
- **PLO14.** Determination of tactics and providing emergency medical care in emergencies (according to list 3) in limited time conditions according to existing clinical protocols and standards of treatment.
- **PLO17.** Performing medical manipulations (according to list 5) in the conditions of a medical institution, at home or work based on a previous clinical diagnosis and/or indicators of the patient's condition by making a reasoned decision, observing the relevant ethical and legal norms.
- **PLO18.** Determination of the state of functioning and limitations of a person's vital activities and the duration of incapacity for work with the preparation of relevant documents, in the conditions of a health care institution, based on data about the disease and its course, peculiarities of a person's professional activity, etc. Maintain medical documentation regarding the patient and the contingent of the population based on regulatory documents.
- **PLO19.** Plan and implement a system of anti-epidemic and preventive measures regarding the occurrence and spread of diseases among the population.
- **PLO20.** Analyze the epidemiological situation and carry out measures for mass and individual, general and local prevention of infectious diseases.
- **PLO21.** Searching for the necessary information in the professional literature and databases of other sources, analysing, evaluating and application of this information.

- **PLO24.** To organize the necessary level of individual safety (own and the persons he cares for) in case of typical dangerous situations in the individual field of activity.
- **PLO32.** The ability to diagnose and determine the management tactics of patients with extrapulmonary and common forms of tuberculosis, including co-infection of TB/HIV with a chemoresistant course.

**Expected learning outcomes.** As a result of studying the academic discipline, the student must:

### Know:

- 1. The structure and functions of the skin, its appendages and mucous membranes.
- 2. Skin diseases and sexually transmitted diseases based on etiological factors and pathomorphological manifestations, special dermatovenerological terminology.
- 3. Etiology, pathogenesis and pathomorphology of the most common skin diseases and sexually transmitted diseases.
- 4. Clinical signs and course of skin diseases and sexually transmitted diseases.
- 5. Principles of diagnosis and the basis of differential diagnosis of skin diseases and sexually transmitted diseases.
- 6. Standards of rational treatment of dermatovenerological diseases (topical and systemic therapy).
- 7. Basics of primary and secondary prevention of skin and venereal diseases. Principles of medical and psychological rehabilitation of patients with dermatovenerological pathology.
- 8. Methods of psychoprophylactic work with patients with skin and venereal diseases.

### Be able:

- 1. To determine the etiological and pathogenetic factors of the appearance and subsequent clinical course of the most common skin and venereal diseases in humans.
- 2. Describe pathological dermatological and venereological conditions.
- 3. Make a preliminary diagnosis of the most common dermatovenerological diseases on the basis of clinical and anamnestic data.
- 4. Describe the patient's dermatovenerological conditions.
- 5. Prescribe laboratory and/or instrumental examination, carry out differential diagnosis of dermatoses and sexually transmitted diseases
- 6. Determine the basic principles of treating patients according to their diagnosis.
- 7. Determine the tactics of managing a patient with skin diseases and sexually transmitted diseases.
- 8. Prescribe rational topical and systemic therapy.
- 9. Assess the psychological state of a patient with skin and venereal pathology.
- 10. Use methods of clinical and psychological testing of patients to determine their psychological state.
- 11. To determine the tactics of further psychological support of the patient, in thecase of a chronic long-term course of the disease.

### 3. The content of the educational discipline

# Topic 1. Introduction to dermatology. Structure, functions of the skin and its appendages. Dermatovenerology is a scientific discipline that covers not only clinical issues, but also a number

Dermatovenerology is a scientific discipline that covers not only clinical issues, but also a number of problems of epidemiology, sociology, economics, demography, ethics, and legal aspects. The ancient history of dermatovenerology. History of formation and development of dermatovenerology in Ukraine, in the Odesa region. MKZ-10. Anatomy and histology of normal skin and its appendages. General characteristics of the skin - color, elasticity, turgor, pattern, moisture, oiliness, etc. The structure of the epidermis, dermis, subcutaneous fat. Blood and lymphatic vessels, neuroreceptor apparatus of the skin. Hair, hair follicle, sweat glands, sebaceous glands, nails - structure, functions. Physiology and biochemistry of the skin. Connection of the skin with other organs and systems. Participation of the skin in water, mineral, protein, carbohydrate, vitamin, enzyme and fat metabolism. Formation of biologically active compounds in the skin. The main functions of the skin are protective, immune, thermoregulatory, excretory, resorptive, respiratory. Skin is a sense organ.

# Topic 2. Methods of examining a dermatovenerological patient. Principles of treatment of skin diseases.

Research methods: visual observation, clinical evaluation of rashes, laboratory studies. Additional methods of examination of skin and venereal patients: diascopy or vitropressure, scraping, determining the nature of dermographism, skin tests with allergens, luminescent diagnostics, biopsy, diagnostic tests and phenomena (Balzer's test, Yadason's test, Brock's test, psoriatic triad, phenomena: Pospelova, "apple jelly", Kebner). Dental manifestations of skin diseases.

Treatment of patients with skin and venereal diseases is a rather difficult task, requiring, in addition to special knowledge of the essence of certain dermatoses and their causes, as well as thorough familiarity with the effect of the used means. General therapy. In most cases, a dermatovenerological patient, in addition to local, also needs general (systemic) drug therapy, which must be individual and correspond to the etiological, pathogenetic or symptomatic aspects of the disease. Drug therapy of dermatoses includes almost all the main methods and means of modern medicine: sedative, psychotropic, desensitizing, enteroabsorbing, immunocorrective, vitamin, antimicrobial, nonspecific anti-inflammatory, hormonal, cytostatic, enzymatic, etc. drugs External (local) therapy. The tasks pursued by local therapy are very diverse: in

some cases, it is desirable to stop wetting, reduce inflammatory phenomena, in others to achieve resorption of the pathological seal in the skin, in others - to destroy the painful focus, in the fourth - to kill the parasite, exfoliate the epidermis, etc. It is worth remembering that the effect of any medicine depends not only on its chemical composition, but also on the correct method of application. The effect of treatment is influenced by the choice of dosage form of the drug. In many ways, it is determined by the nature of the inflammatory process. For acute and subacute phenomena, surface-acting medicinal forms are used - solutions, powders, spiked suspensions, pastes. With chronic inflammatory processes - medicinal forms that act more strongly and deeply (ointments, plasters, etc.). In case of infectious skin diseases, special etiotropic agents are used. Throughout the course of the disease, constant correction of external treatment is required, depending on the change in the clinical picture (for example, cessation of bedwetting), on the tolerability of the drug, "getting used to" it, on individual susceptibility to drugs.

**Topic 3. Parasitic skin diseases.** Etiopathogenesis and epidemiological features of scabies. Clinical forms and course of scabies. Diagnosis and differential diagnosis of scabies. Principles of therapy and prevention of scabies. Etiopathogenesis and epidemiological features of pediculosis. Clinical picture of pediculosis. Diagnosis and differential diagnosis of pediculosis. Principles of therapy and prevention of pediculosis.

**Topic 4. Parasitic diseases of the skin: demodicosis, cutaneous leishmaniasis (Borovsky's disease).** Etiopathogenesis and epidemiological features of demodicosis. Clinical forms and course of demodicosis. Diagnosis and differential diagnosis of demodicosis. Principles of therapy and prevention of demodicosis. Etiopathogenesis and epidemiological features of cutaneous leishmaniasis. Clinical picture of cutaneous leishmaniasis. Diagnosis and differential diagnosis of cutaneous leishmaniasis. Principles of therapy and prevention of cutaneous leishmaniasis.

**Topic 5. Pustular skin diseases: staphyloderma.** Main clinical manifestations. General idea about pyodermas. Epidemiology. Classification. Anti-epidemic measures. Modern methods of therapy. Staphyloderma. Etiopathogenesis. Clinical picture. Diagnostics. Systemic and external therapy.

**Topic 6. Pustular skin diseases: streptoderma.** Main clinical manifestations. General classification and features, course of streptoderma. Etiopathogenesis.

Clinical picture. Diagnostics. General and local treatment.

- **Topic 7. Tuberculosis of the skin. The causative agent.** Skin lesions as one of the manifestations of general tuberculosis infection. Clinical forms of skin tuberculosis. Pathogenesis. Clinical characteristics and histopathology of the main forms of cutaneous tuberculosis. Diagnostics. Principles of treatment. Prevention.
- **Topic 8. Leprosy.** Spread. Etiology. Pathogenesis. Classification. Clinical varieties. Diagnostics. Treatment. Prevention. Organization of fight against leprosy.
- **Topic 9. Viral dermatoses.** Clinic, diagnosis, treatment. Herpetic infection. Etiopathogenesis. Classification. Clinic. Diagnostics. Differential diagnosis Treatment. Shingles. Etiopathogenesis. Classification. Clinic. Diagnostics. Differential diagnosis. Treatment. Kaposi's eczema. Etiopathogenesis. Classification. Clinic. Diagnostics. Differential diagnosis. Treatment. Molluscum contagiosum. Knots of milkmaids. Clinical picture. Treatment. Papillomavirus infection. Etiopathogenesis. Classification. Clinic. Diagnostics. Differential diagnosis. Treatment.
- **Topic 10. Keratomycoses, epidermomycoses.** Clinical manifestations, laboratory diagnosis, therapy and prevention. Superficial mycoses. Keratomycosis: lichen planus, piedra. Treatment of keratomycosis. Prevention of keratomycosis. Pseudomycosis: erythrasma, actinomycosis. Erythrasma, epidemiology, etiology, pathogenesis, clinical picture, differential diagnosis, treatment, prevention. Actinomycosis, epidemiology, etiology, pathogenesis, clinical picture, differential diagnosis, treatment, prevention. Epidermomycoses. Treatment of epidermomycoses. Prevention of epidermomycoses.
- **Topic 11. Trichomycosis: microsporia, trichophytia, scabies.** Clinical manifestations, laboratory diagnosis, therapy and prevention. Microsporia, epidemiology, etiology, pathogenesis, clinical picture, differential diagnosis, treatment, prevention. Trichophytosis, epidemiology, etiology, pathogenesis, clinical picture, differential diagnosis, treatment, prevention. Mycosis of the feet epidemiology, etiology, pathogenesis, clinical picture, differential diagnosis, treatment, prevention. Scabies, epidemiology, etiology, pathogenesis, clinical picture, differential diagnosis, treatment, prevention. Candidiasis, epidemiology, etiology, pathogenesis, clinical picture, differential diagnosis, treatment, prevention.

- Topic 12. Deep mycoses, diagnosis and symptoms, endemic pathogens on the skin. Coccidiosis epidemiology, etiology, pathogenesis, clinical picture, differential diagnosis, treatment, prevention. Histoplasmosis epidemiology, etiology, pathogenesis, clinical picture, differential diagnosis, treatment, prevention. Cryptococcosis, epidemiology, etiology, pathogenesis, clinical picture, differential diagnosis, treatment, prevention. Blastomycosis, epidemiology, etiology, pathogenesis, clinical picture, differential diagnosis, treatment, prevention. Mucorosis, epidemiology, etiology, pathogenesis, clinical picture, differential diagnosis, treatment, prevention. Aspergillosis, epidemiology, etiology, pathogenesis, clinical picture, differential diagnosis, treatment, prevention. Penicilliosis, epidemiology, etiology, pathogenesis, clinical picture, differential diagnosis, treatment, prevention. Sporotrichosis, epidemiology, etiology, pathogenesis, clinical picture, treatment, prevention. differential diagnosis, Chromomycosis, epidemiology, pathogenesis, clinical picture, differential diagnosis, treatment, prevention. Rhinosporidiosis, epidemiology, etiology, pathogenesis, clinical picture, differential diagnosis, treatment, prevention. Cephalosporiosis, epidemiology, etiology, pathogenesis, clinical picture, differential diagnosis, treatment, prevention. Cladosporiosis, epidemiology, etiology, pathogenesis, clinical picture, differential diagnosis, treatment, prevention. Mycetomas, epidemiology, etiology, pathogenesis, clinical picture, differential diagnosis, treatment, prevention.
- **Topic 13. Dermatitis, toxicoderma, eczema.** Clinic, diagnosis, treatment. Simple contact or artificial dermatitis: classification, clinic and treatment. Allergic contact dermatitis, toxicoderma. Clinical picture and treatment. Dermatological tests that help identify allergens. Monopolysensitization. Comparative characteristics of simple and allergic dermatitis.
- **Topic 14. Atopic dermatitis.** Clinic and treatment. Itchy dermatoses. Pathogenesis. Treatment. Atopic dermatitis. Clinic. Diagnostics. Differential diagnosis. Treatment. Neurodermatitis. Clinic, diagnostics, modern treatment principles of working with patients suffering from common neurodermatitis Itchy skin. Clinic. Diagnostics. Differential diagnosis. Treatment.
- **Topic 15. Eczema.** Eczema and its varieties: true or idiopathic eczema; microbial eczema: paratraumatic, varicose, mitotic. dyshidrotic; seborrheic eczema, nummular eczema; professional Stages of the development of the eczematous process. Differential diagnosis. Principles of therapy. Prognosis and prevention of relapses.
- **Topic 16. Psoriasis. Parapsoriasis.** Psoriasis. Diagnosis, clinic, treatment. Psoriasis. Current issues of pathogenesis. Psoriasis: clinical manifestations, clinical forms.

Stages of the clinical course, evolution of the rash, differential diagnosis, treatment algorithm. Medical and labor examination. Parapsoriasis. Diagnosis, clinic, treatment. Etiopathogenesis. Clinical manifestations, differential diagnosis, treatment algorithm.

**Topic 17. Lichen planus. Zhiber's pink lichen.** Lichen planus: features of damage to mucous membranes and skin. The nature of itching. Principles of treatment and prevention. Zhiber's pink lichen. Clinic. Diagnostics. Differential diagnosis. Treatment.

**Topic 18. Bullous dermatoses.** Clinic, diagnosis, treatment. Acantholytic pemphigus. Etiopathogenesis, clinical manifestations on the skin and mucous membranes and its course. Features of diagnosis in the case of damage to the mucous membranes. Prognosis. Systemic and external therapy. Pemphigoids. Classification. Clinical picture. Diagnosis Differential diagnosis. Treatment. During's herpetiform dermatosis. Clinical pictures. Diagnostics. Differential diagnosis. Treatment.

**Topic 19.** Syphilis. Etiology. Pathogenesis Epidemiology and general pathology. Immunity. Ways of transmission. Primary period of syphilis. The causative agent of syphilis and its characteristics. Epidemiological analysis of morbidity and risk factors. Reinfection and superinfection in syphilis. Classification of syphilis. Sexual and other ways of transmission. Incubation period. Clinical signs of classic (erosive or ulcerative) hard chancre. Atypical forms of chancres: chancre-panaritium, chancre- tonsillitis, indurative edema. Diagnostic algorithm of the primary period of syphilis. Personal prevention.

**Topic 20. The secondary period of syphilis.** General characteristics of the secondary period of syphilis. Features of the secondary period of syphilis. Manifestations of secondary syphilis on the skin: roseolae, papules, pustules. Syphilitic alopecia. Pigmented syphilides. Damage to internal organs and mucous membranes. Differential diagnosis of secondary periods of syphilis.

Topic 21. Tertiary period of syphilis. Visceral syphilis. Syphilis of the nervous system. Congenital syphilis. Classification. Laboratory diagnosis of syphilis. Principles of syphilis treatment and prevention. General characteristics of the tertiary period of syphilis. Manifestations of tertiary syphilis on the skin. Damage to the mucous membranes. Differential diagnosis of the tertiary period of syphilis. Damage to internal organs in visceral syphilis. Pathogenesis of neurosyphilis. Classification of neurosyphilis. Clinical characteristics and diagnostic algorithms of

early and late neurosyphilis. Additional examination methods for neurosyphilis. Transplacental route of transmission. Dependence of termination of pregnancy on the duration of syphilitic infection in the mother. Features of congenital syphilis. Clinical manifestations of syphilitic infection in infants and toddlers. Manifestations of pathology in childhood. Hutchinson's typhus and probable signs of late congenital syphilis, dystrophic stigmas. Diagnostic criteria for establishing a diagnosis.

Methods of laboratory diagnosis of syphilis: microscopic and serological (methods of rapid diagnosis, standard and highly specific reactions to syphilis). Rules for taking material for laboratory detection of pale treponema. Rules for taking blood and cerebrospinal fluid for serological confirmation of the diagnosis of syphilis. Basic principles of treatment of syphilis patients. Indications and contraindications for the appointment of anti-syphilitic drugs. Reserve group antibiotics. Non-specific therapy in the treatment of syphilis. Dispensary monitoring of syphilis patients. Criteria for the cure of syphilis patients. A complex of preventive measures for syphilis.

**Topic 22. Gonorrhea and its complications.** Etiopathogenesis and epidemiological features of gonorrhea. Clinical forms and course of gonorrhea. Diagnostic criteria for gonorrhea and its complications. Principles of treatment and preventive measures and dispensation of patients with gonorrhea.

**Topic 23. Non-gonorrheal diseases of the genitourinary organs.** Urogenital trichomoniasis. Etiology, pathogenesis, clinic, principles of treatment and prevention. Urogenital mycoplasmosis. Etiology, pathogenesis, clinic, principles of treatment and prevention. Urogenital ureaplasmosis. Etiology, pathogenesis, clinic, principles of treatment and prevention. Urogenital ureaplasmosis. Etiology, pathogenesis, clinic, principles of treatment and prevention. Urogenital Gardnerellosis. Etiology, pathogenesis, clinic, principles of treatment and prevention.

**Topic 24. Genital viral infection.** Genital herpes. Etiology, pathogenesis, clinic, principles of treatment and prevention. Genital warts. Etiopathogenetic features of genital warts. Clinical picture of genital warts. Diagnosis of genital warts. Principles of treatment of genital warts.

**Topic 25. Tropical trepanematoses. Soft chancre. Venereal lymphogranuloma.** Tropical trepanematoses. Etiopathogenesis and epidemiological features of tropical trepanematosis. Ways of transmission of tropical trepanematosis. Features of the clinical picture. Clinical and laboratory diagnostics. Differential diagnosis. Criteria and methods of treatment. Soft chancre. Etiopathogenesis and epidemiological features. Ways of transmission. Features of the clinical picture. Clinical and laboratory diagnostics. Differential diagnosis. Criteria and methods of treatment.

Venereal lymphogranuloma. Etiopathogenesis and epidemiological features. Ways of transmission. Features of the clinical picture. Clinical and laboratory diagnostics. Differential diagnosis. Criteria and methods of treatment.

**Topic 26. HIV infection – main dermatological aspects.** Etiology, pathogenesis, clinic, principles of treatment and prevention. Lesions of the skin and mucous membranes in AIDS. Clinical classification of HIV-AIDS symptoms. General clinical course of HIV infection and AIDS. Methods of laboratory diagnostics. Principles of treatment. Anti-epidemic measures. Individual prevention. Public prevention.

Topic 27. Credit test.

### 4. STRUCTURE OF THE EDUCATIONAL DISCIPLINE

		N	Number of ho	urs	
		including			
Names of content modules and		Aud	itorium	IWS	Individual
topics	Total	Lectures	Practical		work
			classes		
1	2	3	4	5	6
Topic 1. Introduction to	6	2	2	2	_
dermatology. History of the					
development of dermatology.					
Anatomy and histology of normal					
skin and its appendages.					
Pathomorphological changes of the					
skin and mucous membranes.					
Primary and secondary					
morphological elements.					
<b>Topic 2.</b> Methods of examining a	2		2		-
dermatovenerological patient.					
Principles of treatment of skin					
diseases.					
<b>Topic 3.</b> Parasitic skin diseases:	4		2	2	-
scabies, pediculosis.					
<b>Topic 4.</b> Parasitic diseases of the	2		2		-
skin: demodicosis, cutaneous					
leishmaniasis (Borovsky's disease).					
<b>Topic 5.</b> Pustular skin diseases:	4		2	2	-
staphyloderma.					

<b>Topic 6.</b> Pustular skin diseases:	2		2		
_	2		2		_
streptoderma, staphylostreptoderma.	2		2		
Topic 7. Tuberculosis of the skin.	2	-	2		-
Topic 8. Leprosy.				2	-
<b>Topic 9.</b> Viral dermatoses. Clinic,	6		2	2	-
diagnosis, treatment		2		2	
<b>Topic 10.</b> Keratomycosis.	4		2	2	-
Dermatomycosis. Clinical					
manifestations, laboratory					
diagnostics, therapy and prevention,					
clinic, principles of treatment and					
prevention.	_	=			
Topic 11. Trichomycosis.	2		2		-
Candidiasis. Clinical manifestations,					
laboratory diagnosis, therapy and					
prevention.					
<b>Topic 12.</b> Deep mycoses. Clinic,	2		2		-
diagnosis, treatment.					
<b>Topic 13.</b> Dermatitis. Toxicoderma.	4		2	2	-
Clinic, diagnosis, treatment.					
<b>Topic 14.</b> Atopic dermatitis. Neck	2		2		-
itch. Clinic and treatment.					
Topic 15. Eczema. Clinic and	2		2		-
treatment.					
<b>Topic 16.</b> Psoriasis. Parapsoriasis.	4		2	2	-
Diagnosis, clinic, treatment.					
Topic 17. Lichen planus. Zhiber's	2		2		-
pink lichen. Diagnosis, clinic,					
treatment.					
Topic 18. Bullous dermatoses.	4		2	2	-
Clinic, diagnosis, treatment.					
<b>Topic 19.</b> Syphilis: immunity,	6		2	2	-
reinfection, superinfection,		2			
serodiagnosis. Primary syphilis.					
Topic 20. Secondary syphilis.	2	-	2		-
<b>Topic 21.</b> Tertiary syphilis.	2	-	2		-
Congenital syphilis.					
<b>Topic 22.</b> Gonorrhea and its	4	1	2	2	-
complications.					
<b>Topic 23.</b> Non-gonorrheal diseases	4	1	2	2	-
of the genitourinary organs.					
<b>Topic 24.</b> Genital viral infection.	4	1	2	2	-
<b>Topic 25.</b> Tropical trepanematoses.	6	-	2	4	-
Soft chancre. Venereal					
lymphogranuloma.					
<b>Topic 26.</b> HIV infection – main	4	1	2	2	-
dermatological aspects.					
Topic 27. Credit test.	2		2		-
P10 - 11 - 11 - 11 - 11 - 11 - 11 -		1	_		

Total hours	90	6	54	30	-
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## 5. Topics of lectures/seminars/practical/ laboratory classes

### **5.1.** Topics of lectures

№ 3/п	Торіс	Hours
1	Introduction to dermatovenerology.	2
	Dermatozoonosis. Pyoderma.	
	Mycotic lesions of the skin and mucous membranes.	
2	Allergodermatoses.	2
	Psoriasis. Lichen planus.	
	Viral dermatoses. Bullous dermatoses.	
3	Venereal diseases: WHO classification.	2
	Syphilis.	
	Gonorrhea and other sexually transmitted infections.	
	Total	6

# **5.2.** Topics of seminar classes "Seminar classes are not provided."

## **5.3.** Topics of practical classes

No॒	Торіс	Hou
		rs
	<b>Topic 1.</b> Anatomy, histology and physiology of human skin.	2
1.	Pathomorphological changes of the skin and mucous membranes. Primary and	
	secondary morphological elements.	
2.	<b>Topic 2.</b> Methods of examining a dermatovenerological patient. Principles of	2
	treatment of skin diseases.	
3.	<b>Topic 3.</b> Parasitic skin diseases: scabies, pediculosis.	2
4.	<b>Topic 4.</b> Parasitic diseases of the skin: demodicosis, cutaneous leishmaniasis	2
••	(Borovsky's disease).	
5.	Topic 5. Pustular skin diseases: staphyloderma.	2
6.	<b>Topic 6.</b> Pustular skin diseases: streptoderma, staphylostreptoderma.	2
7.	<b>Topic 7.</b> Tuberculosis of the skin	2
8.	Topic 8. Leprosy	2
9.	<b>Topic 9.</b> Viral dermatoses	2
10.	Topic 10. Keratomycosis. Dermatomycosis.	2
11.	Topic 11. Trichomycosis. Candidiasis.	2
12.	Topic 12. Deep mycoses.	2
13.	Topic 13. Dermatitis. Toxicoderma.	2
14.	Topic 14. Atopic dermatitis. Itchy skin	2
15.	Topic 15. Eczema.	2

16.	Topic 16. Psoriasis. Parapsoriasis.	2
17.	Topic 17. Lichen planus. Zhiber's pink lichen.	2
18.	Topic 18. Bullous dermatoses	2
19.	<b>Topic 19.</b> Syphilis: immunity, reinfection, superinfection, serodiagnosis. Primary syphilis.	2
20.	Topic 20. Secondary syphilis.	2
21.	<b>Topic 21.</b> Tertiary syphilis. Congenital syphilis.	2
22.	<b>Topic 22</b> . Gonorrhea and its complications.	2
23.	<b>Topic 23.</b> Non-gonorrheal diseases of the genitourinary organs.	2
24.	<b>Topic 24.</b> Genital viral infection.	2
25.	<b>Topic 25.</b> Tropical trepanematoses. Soft chancre. Venereal lymphogranuloma.	2
26.	<b>Topic 26.</b> HIV infection – main dermatological aspects.	2
27.	Topic 26. Credit test	2
	Total hours	54

# **5.4.** Topics of laboratory classes "Laboratory classes are not provided."

## 6. Independent work

№	Торіс	Hour
		S
1	The main historical stages of the development of dermatovenerology. Anatomy,	2
	histology and physiology of human skin.	
2	Parasitic skin diseases.	2
3	Bacterial skin diseases.	2
4	Mycoses. Deep mycoses.	2
5	Allergodermatoses.	2
6	Viral dermatoses	2
7	Bullous dermatoses.	2
8	Lichens.	2
9	Syphilitic infection	2
10	Gonorrhoeal infection.	2
11	Genital viral infection.	2
12	Non-gonorrheal diseases of the genitourinary organs.	2
13	Tropical trepanematoses.	2
14	Soft chancre. Venereal lymphogranuloma.	2
15	HIV infection – main dermatological aspects.	2
	Total	30

### 7. Forms and methods of teaching

### Forms of teaching:

The discipline is taught in the form of practical classes; organizing independent work of the student.

### *Methods of teaching:*

Lectures: address the problematic issues of the relevant sections of infectious diseases. The lecture course maximally utilizes didactic tools (multimedia presentations, slides, educational films, demonstration of thematic patients). The lecture and practical stages of students' education are structured mainly so that lectures precede the corresponding practical classes.

### Practical classes:

- 1. verbal methods: instructional storytelling, discussions, educational discourse (these allow clarifying key issues of the practical/clinical session topic and integrating the theoretical breakdown process with student questioning), briefings, working with methodological developments, methodological manuals, textbooks;
- 2. visual methods: demonstrating multimedia materials using an LCD screen on the topics of the clinical session, as well as working at the patient's bedside (analyzing clinical cases during department visits or using an electronic database);
- 3. practical methods: exercises (solving situational clinical tasks with diagnosis formulation, justification, and responses to questions; practical work at the patient's bedside with clinical analysis and open discussion)

*Independent work:* independent study with recommended primary and additional literature, electronic information resources, and self-mastering communication algorithms with the patient. Tasks for independent work in the form of questions from the list of topics for independent study are included in the oral interview and written work (during the clinical session).

### 8. Forms of control and criteria for assessing learning outcomes

**Forms of ongoing control:** oral questioning, testing, assessment of practical skills performance, evaluation of communication skills during role-playing, solving situational clinical problems, assessment of activity in class.

Form of final control: credit test

### **Current evaluation criteria in practical training**

	current evaluation effection in practical training			
Grade	Evaluation criteria			
Excellent «5»	The acquirer has a fluent command of the material, takes an active part in discuss:			
	and solving a situational clinical problem, confidently demonstrates practical skills			
	during the examination of a patient and the interpretation of clinical, laboratory and			
	instrumental research data, expresses his opinion on the topic of the lesson,			
	demonstrates clinical thinking.			
Good «4»	The acquirer has a good command of the material, participates in the discussion and			
	solution of a situational clinical problem, demonstrates practical skills during the			
	examination of a patient and the interpretation of clinical, laboratory and			
	instrumental research data with some errors, expresses his opinion on the subject of			
	the lesson, demonstrates clinical thinking.			
Satisfactory	The acquirer does not have sufficient knowledge of the material, is unsure of			
«3»	participating in the discussion and solving of the situational clinical problem,			
	demonstrates practical skills during the examination of the patient and the			
	interpretation of clinical, laboratory and instrumental research data with significant			

	errors.
Unsatisfactory	The acquirer does not possess the material, does not participate in the discussion and
«2»	solution of the situational clinical problem, does not demonstrate practical skills
	during the examination of the patient and the interpretation of clinical, laboratory
	and instrumental research data.

Only those students who have fulfilled the requirements of the curriculum for the discipline, have no academic debt, and whose average grade for current academic activity in the discipline is at least 3.00 are admitted to the final assessment in the form of a differentiated test.

Differentiated credit is carried out: at the last class (the class is designated as a separate assessment measure) after the end of classes and before the start of the exam session – in the case of a linear education system, at the last class of the educational component – in the case of a cyclical education system.

The methodology for conducting the final (semester) assessment of the educational component in the form of a differentiated assessment is unified and involves the use of standardized forms.

Criteria for evaluating the learning outcomes of higher education applicants during final assessment

Grade	Evaluation criteria
Excellent «5»	The acquirer correctly, accurately, and completely completed all tasks for the
	differentiated exam, answering the questions clearly and logically. They have a
	thorough and comprehensive knowledge of theoretical issues and are fluent in
	professional and scientific terminology. Thinks logically and constructs answers,
	freely uses acquired theoretical knowledge in the analysis of practical tasks.
	When solving a clinical problem, correctly interpreted the data of the medical
	history, the results of clinical, laboratory, and instrumental studies, correctly
	answered all the questions asked, and convincingly justified his point of view,
	was able to propose and justify an alternative solution to individual issues.
Good «4»	The acquirer has sufficiently completed all tasks for the differentiated credit,
	clearly and logically answered the questions asked. He/she has a sufficiently
	deep and comprehensive knowledge of theoretical issues and is proficient in
	professional and scientific terminology. Thinks logically and constructs answers,
	uses acquired theoretical knowledge in the analysis of practical tasks. However,
	when presenting some questions, lacks sufficient depth and argumentation,
	makes minor mistakes, which are corrected by the student when pointed out by
	the teacher. When solving a clinical problem, made minor mistakes or
	inaccuracies in interpreting medical history data, clinical, laboratory, and
	instrumental examination results, answered all questions without significant
	errors, fully justified their point of view, but had difficulty proposing an
	alternative option.
Satisfactory «3»	The acquirer has not fully completed all the tasks for the differentiated credit,
	and their answers to additional and leading questions are vague and unclear.
	They have a basic level of theoretical knowledge but use professional and
	scientific terminology inaccurately. They experience significant difficulties in
	constructing independent logical answers and in applying theoretical knowledge
	to the analysis of practical tasks. Their answers contain significant errors. When
	solving a clinical problem, they misinterpreted the medical history data, the
	results of clinical, laboratory, and instrumental studies, did not know certain

	details, made inaccuracies in their answers to questions, did not sufficiently		
	justify their answers and interpretations, and had difficulty performing tasks and		
	proposing alternative options.		
Unsatisfactory «2»	The acquirer did not complete the tasks for the differentiated test and, in mos		
	cases, did not answer additional and leading questions. They did not master the		
	basic theoretical knowledge and demonstrated a low level of proficiency in		
	professional and scientific terminology. Their answers to questions are		
	fragmentary, inconsistent, illogical, and they cannot apply theoretical knowledge		
	when analyzing practical tasks. Their answers contain a significant number of		
	gross errors. When solving a clinical problem, was unable to interpret the data obtained from the medical history, the results of clinical, laboratory, and		
	instrumental studies, answer the questions asked, or made significant errors in		
	their answers; was unable to justify their decisions or did so unconvincingly. Did		
	not offer alternative options.		

### 9. Distribution of points received by acquirers of higher education

The grades from the subject for students who have successfully completed the program are converted into a traditional four-point scale based on the absolute criteria listed in the table:

- more or control or crementarian Branco - more beauty source		
National assessment	The sum of points for the discipline	
for discipline		
Excellent («5»)	185-200	
Good («4»)	151-184	
Satisfactory («3»)	120-150	
Unsatisfactory («2»)	Lower then 120	

Table of conversion of traditional grade into a multi-point scale

The multi-point scale (200-point scale) characterizes the actual success of each student in mastering the educational discipline. The conversion of the traditional grade to the 200-point scale is carried out by the information and technical department of the University using the program 'Contingent' according to the appropriate formula: Average success score (current success in the discipline) x 40.

The ECTS grading scale assesses the achievements of students in the educational discipline who study in the same course of the same specialty according to the scores they have received, through ranking, namely:

ECTS mark	Statistic index
"A"	Next 10% of acquirers
"B"	Next 25% of acquirers
"C"	Next 30% of acquirers
"D"	Next 25% of acquirers
"E"	Next 10% of acquirers

The ECTS grading scale establishes the student's ranking among the best or the worst within the reference group of peers (faculty, specialty), meaning their rating. When converting from a multi-point scale, the boundaries of grades 'A', 'B', 'C', 'D', 'E' do not usually correspond with the boundaries of grades '5', '4', '3' on the traditional scale. The grade 'A' on the ECTS scale cannot equal the grade 'excellent', and the grade 'B' cannot equal the grade 'good', and so forth. Students who receive the grades 'FX' and 'F' ('2') are not included in the ranked list of students. Such students

automatically receive a grade 'E' after retaking the exam. The grade 'FX' is awarded to students who have scored the minimum points for current academic activity, but who have not passed the final assessment. The grade 'F' is awarded to students who have attended all classroom sessions for the course but have not achieved an average score (3.00) for current academic activity and are not allowed to take the final assessment.

### 10. Methodological support

- 1. Working program of the academic discipline
- 2. Syllabus
- 3. Methodical developments for lecture classes
- 4. Methodical developments for practical classes
- 5. Methodological recommendations for independent work of higher education applicants
- 6. Multimedia presentations
- 7. Illustrative materials
- 8. Situational clinical tasks
- 9. Situational results of laboratory examinations
- 10. Scenarios of role-playing games (if necessary)
- 11. Electronic bank of test tasks KROK-2

### 11. Questions for preparation for final control

- 1. Anatomy and histology of the skin. Skin appendages.
- 2. Functions of shkfira: protective, thermoregulatory, secretory, absorbent, etc.
- 3. Histopathological changes in inflammatory processes in the skin
- 4. Morphological elements of skin rashes (primary, secondary)
- 5. Histology of primary morphological elements of skin rashes
- 6. Persistent secondary elements of skin rashes
- 7. Diagnostic value of morphological elements of skin rashes
- 8. Polymorphism of rash
- 9. Methods of examination of patients with skin diseases
- 10. Special dermatological studies: palpation, scraping, diascopy, dermographism, skin tests, biopsy.
- 11. Methods of laboratory examinations in dermatology (general and special)
- 12. The main methods of treatment used in dermatology
- 13. Diet therapy for skin diseases
- 14. Medicinal forms for external use

- 15. Psoriasis: etiology, clinic, differential diagnosis and treatment.
- 16. Lichen planus: etiology, clinic, differential diagnosis and treatment.
- 17. Parasitic skin diseases. Scabies: clinic, diagnosis, treatment and prevention. Pediculosis. Etiology, pathogenesis, clinic, principles of treatment and prevention.
- 18. Eczema: classification, clinical course, differential diagnosis andtreatment of eczema according to stages.
- 19. Simple contact or artificial dermatitis: classification, clinic andtreatment.
- 20. Allergic contact dermatitis, toxicoderma. Clinical picture and treatment.
- 21. Atopic dermatitis. Clinical picture and treatment.
- 22. Pyoderma: classification, clinical picture, diagnosis and treatment.
- 23. Fungal skin diseases. Classification, etiology, clinic, diagnosis, treatment and prevention.
- 24. Bullous dermatoses. Classification, clinic and treatment.
- 25. Viral skin diseases. Clinic, differential diagnosis.
- 26. Tuberculosis of the skin. Clinic, diagnosis, treatment.
- 27. Leprosy. Clinic, diagnosis, treatment.
- 28. Syphilis. Etiology. Pathogenesis Epidemiology and general pathology. Immunity. Ways of transmission.
- 29. Primary period of syphilis. Clinical picture. Differential diagnosis.
- 30. Secondary periods of syphilis. Clinical picture. Differential diagnosis.
- 31. Tertiary period of syphilis. Clinical picture. Differential diagnosis.
- 32. Visceral syphilis. Clinical picture. Differential diagnosis.
- 33. Syphilis of the nervous system. Clinical picture. Differential diagnosis.
- 34. Congenital syphilis. Clinical picture. Differential diagnosis.
- 35. Laboratory diagnosis of syphilis. Principles of syphilis treatment and prevention.
- 36. Gonorrhea. Etiology, pathogenesis, clinic, principles of treatment and prevention.
- 37. Chancroid (soft chancre). Etiology, pathogenesis, clinical picture, differentialdiagnosis, principles of treatment and prevention.
- 38. Venereal lymphogranuloma. Etiology, pathogenesis, clinical picture, differentialdiagnosis, principles of treatment and prevention.
- 39. Donovanosis (inguinal granuloma). Etiology, pathogenesis, clinical picture.differential diagnosis, principles of treatment and prevention.
- 40. Urogenital trichomoniasis. Etiology, pathogenesis, clinic, principles of treatmentand prevention.
- 41. Urogenital chlamydia. Etiology, pathogenesis, clinic, principles of treatment and prevention.
- 42. Urogenital mycoplasmosis. Etiology, pathogenesis, clinic, principles of treatmentand prevention.

- 43. Urogenital ureaplasmosis. Etiology, pathogenesis, clinic, principles of treatmentand prevention.
- 44. Urogenital Gardnerellosis. Etiology, pathogenesis, clinic, principles of treatmentand prevention.
- 45. Genital herpes. Etiology, pathogenesis, clinic, principles of treatment and prevention.
- 46. Genital warts. Etiology, pathogenesis, clinic, principles of treatment and prevention.
- 47. Dermatological aspects of HIV infection, AIDS.

### 12. Recommended literature

### Main:

- 1. Dermatology and venereology: Textbook for students institutions of vocational preuniversity and higher education. 2nd ed., pp. Approved by the Ministry of Health / V.I. Stepanenko, A.I. Chobotar, S.O. Bondar et al. K., 2020.
- 2. Dermatology. Venereology. T.V. Svyatenko, I.V Svystunov. Publisher: New book, 2021, p. 656.
- 3. Dermatology and venereology: a study guide for the preparation of students of higher medical education institutions in the specialty "Medicine" on the topics presented for independent work / O.I. Denisenko, M.P. Perepichka, M.Yu. Gaevska [and others]. Chernivtsi, 2019.
- 4. Workshop on dermatology and venereology / V. I. Stepanenko, A. I. Chobotar, S. O. Bondar. Kyiv: Medicine, 2018.
- 5. Dermatology, venereology / According to the general edition of O.O. The season Guide for students, masters of higher educational institutions. Lviv: DrukZahid LLC,2017.
- 6. Dermatology, venereology in questions and answers / Edited by O.O. The season Guide for students, masters of higher educational institutions. Lviv: DrukZahid LLC,2017.

### **Additional:**

- 1. Dermatology, Venereology. Textbook / [Stepanenko V.I, Shupenko M.M., Mikheiev O.G. et al.]; under edit. of V.I. Stepenenko. Kyiv.: KIM, 2013.
  - 2. Skin Disease: Diagnosis and Treatment. Thomas P. Habif. Publisher: Elsevier, 2017, p. 688.
- 2. Dermatology. Venereology: tutorial. for students higher honey. education closing III-IV levels of accreditation / V.I. Stepanenko, M.M. Shupenko, P.M. Nedoboi, S.G. Svyrid, V.G. Kolyadenko [and others]; under the editorship V.I. Stepanenko; National honey. University named after O.O. Bogomolets K.: KIM, 2012.
- 3. Dudyun A.D. and sang Sexually transmitted infections (study guide). Kyiv. Polygraph Plus, 2012. 133 p.
- 4. Svyatenko T. V. [etc.]; edited by: T. V. Svyatenko, I. V. Svistunova; rec.: O. I.Denysenko, L. A. Bolotna Dermatology. Venereology: an atlas for senior university students, intern doctors, post-graduate students, clinics. residents, doctors of various specialties /— Vinnytsia: Nova Kniga, 2020. —424 p.

- 5. Rook's Textbook of Dermatology Eds.: T. Burns, S. Breathnach, N. Cox, C.Griffiths. 9th ed. 4 Volume Set Wiley-Blackwell, 2016. 4696 p.
- 6. Andrews' Diseases of the Skin: Clinical Dermatology Odom R.B., James W.D., Berger T.G. 12th ed. Saunders, 2015. 968 p.
- 7. Fitzpatrick's Dermatology in General Medicine. 8th ed. Eds.: L. A. Goldsmith etal. N.Y.: McGraw-Hill medical, 2012. XXX. 3076 p. (Two volumes).

### 13. Electronic information resources

University website <a href="https://onmedu.edu.ua/">https://onmedu.edu.ua/</a> Departments E-mail <a href="https://onmedu.edu.ua/">kdvrem@onmedu.edu.ua/</a> Departments E-mail <a href="https://onmedu.edu.ua/">kdvrem@onmedu.edu.ua/</a> Departments E-mail <a href="https://onmedu.edu.ua/">https://onmedu.edu.ua/</a> Departments Selection <a href="https://onmedu.edu.ua/">https://onmedu.edu.ua/</a> Departments Selection <a href="https://onmedu.edu.ua/">https://onmedu.