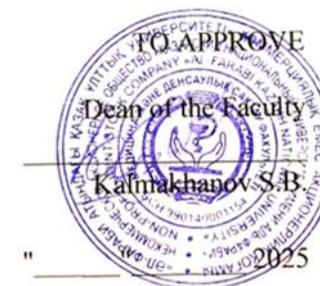


AL-FARABI KAZAKH NATIONAL UNIVERSITY
Faculty of Medicine and Public Health
Higher School of Medicine
Department of Dentistry



EDUCATIONAL AND METHODOLOGICAL COMPLEX OF THE DISCIPLINE
EDUCATIONAL PROGRAM 6B10113

SYLLABUS

КЛИНИКАЛЫҚ ОРТОДОНТИЯ НЕГІЗДЕРІ
FUNDAMENTALS OF CLINICAL ORTHODONTICS
FUNDAMENTALS OF CLINICAL ORTHODONTICS

Number of credits - 6

Almaty 2025

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| 1. General information about the discipline | | | |
| 1.1 | Faculty/School: Higher School of Medicine Department of Dentistry | 1. 6 | Credits (ECTS): 6 credits - 90 hours |
| 1.2 | Educational Program (OP): 6B10104- DENTISTRY 6B10104- DENTISTRY 6B10104- DENTISTRY | 1. 7 | <u>Prerequisites:</u> 1. Fundamentals of orthodontics <u>Post-requirements: Orthodontics in internship</u> |
| 1.3 | Agency and year of accreditation of OP NAAR 2024 | 1. 8 | SRS/SRM/SRD (qty): hours |
| 1.4 | Tolinikalyk orthodontics negizderi /Fundamentals of clinical orthodontics / Fundamentals of clinical orthodontics | 1. 9 | SRSP/SRMP/SRDP (qty): 50 hours |
| 1.5 | Discipline ID:103356 Discipline code: AMZ 1212 | 1. 1 0 | <i>Required-yes</i> |
| 2. Description of the discipline | | | |
| | The discipline develops knowledge and skills focused on the topics of classification of dental anomalies, clinical and functional diagnostics, complementary examination methods, mechanical, functional and combined orthodontic devices, anomalies of tooth development, dentition and bite in the sagittal, transversal and vertical planes, prevention of dental anomalies, retention period, pustules of relapses, etc. methods of their prevention, zonal prosthetics and its features in childhood. | | |
| 3 The purpose of the discipline | | | |
| is to develop students ' professional competencies in the field of orthodontics to help children and adolescents, taking into account the regularities of the development of the dentoalveolar system in different age periods, to study the features of examination of children and adolescents with dental anomalies, their clinical manifestations, diagnostic methods and age-related treatment features. | | | |

| 4. Results of training (RO) in the discipline (3-5) | | | |
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| | RO of the discipline | | RO for the educational program, which is associated with the RO for the discipline (RO number from the OP passport) |
| 1 | Discipline creates knowledge and skills related to the clinical examination of children and vzroslyh with anomalies of dental systems, to have the skills of basic medical diagnostic, therapeutic, and preventive measures to provide medical care for children with diseases of malocclusion dento-facial system | proficiency - 2 | Apply basic diagnostic methods abnormal dentition |
| 2 | Uses an algorithm performances dental diagnosis based on International statistical classification of anomalies of the dentition Interpretirovat radiographic images for the diagnosis and treatment of anomalies of the teeth and bite | proficiency - 2 | Formation of knowledge of clinical signs of disease , associated with anomalies of the dentition |
| 3 | Demonstrates knowledge and understanding of clinical signs of abnormalities of the teeth and bite | proficiency - 3 | differential diagnosis of anomalies of the dentition to Know systematics anomalies of the teeth and bite |
| 4 | Demonstrates the ability of the works of modern orthodontic tools and materials , orthodontic constructions in the treatment of dento-facial system anomalies | proficiency - 3 | Assigns and enforces adequate modern methods of examination |
| 5 | Evaluates the quality of care determines prognosis after orthodontic treatment | proficiency - 3 | is Able to interpret the obtained results to Analyze the data |
| 6 | Performs basic diagnostic measures to identify urgent and life-threatening disease in dentistry | proficiency - 3 | provides treatment of anomalies of the teeth and bite in the temporary and permanent dentition Formulates the effectiveness of the treatment is |
| 7 | to Run on the phantom technique of taking measurements temporary and permanent tooth and a volunteer, under the control of the teacher taking into account the knowledge of indications and contraindications and potential complications during manipulation; | Proficiency - 3 | to Interpret clinical and laboratory methods of fabrication of orthodontic appliances for the treatment of dentoalveolar anomalies |

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| 8 | Demonstrates the skills of independent work and research, the pursuit of new knowledge and the transfer of knowledge across | proficiency - 4 | Apply knowledge of the basic principles of human behavior for effective communication and diagnostic and treatment process in compliance with the principles of ethics and deontology; apply knowledge of the psychology of the patient, taking into account cultural characteristics and race; |
| 9 | Uses communication skills teamwork | proficiency - 3 | to demonstrate the skills of team work, organization and management of the diagnostic and therapeutic process; e |
| 10 | Demonstrates the ability to research and evaluation of results of treatment of dentoalveolar anomalies, assess and implement treatment guidelines evidence-based | proficiency - 3 | in order to make the dynamic relationship between doctor and patient that occur before, during, and after medical treatment; |
| 5. | Summative evaluation methods (<i>please tick (Yes – no) / specify own</i>): | | |
| 5.1 | software Testing MCQ on understanding and application | 5. 5 | Research project NIRS |
| 5.2 | Passing practical skills-Miniclinal Exam (MiniCex) | 5. 6 | 360 – degree assessment-behavior and professionalism |
| 5.3 | 3. SRS-creative task | 5. 7 | Boundary control: Stage 1-MCQ testing for understanding and application Stage 2-passing practical skills (miniclinal exam (MiniCex)) |

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| 6. | Detailed information about the discipline | | | |
| 6.1 | Academic year: 2025-2026 | 6.3 | Schedule (class days, time): From 8.00to 14.00 | |
| 6.2 | Semester: 1 semester | 6.4 | Place (academic building, office, platform and link to the meeting of training with the use of DOT): | |
| 7. | Discipline leader | | | |
| | Position | Full name | Department | Contact information (tel., e-mail) |
| | Candidate of Medical Sciences senior lecturer | Uataeva A. T. | Clinical Dentistry | Consultations before exams Before examination sessions within 60 minutes |
| 8. | Content of the discipline | | | |
| | Topic name | | Number of hours | Form of conducting |
| 1. | Methods of clinical and functional diagnostics of dental anomalies and deformities | | 6 | Formative assessment: 1. Using active методов learning methods: TBL, CBL 2. Work on phantoms 3. Work in albums 4. Mini-conference topics of SRS |
| 2. | Methods of X-ray diagnostics of dental anomalies in children. . Telerentgenography (Schwartz analysis) | | 6 | Formative assessment: 1. Using active методов learning methods: TBL, CBL 2. Work on phantoms 3. Work in albums 4. Mini-conference topics of SRS |
| 3. | Basic principles and methods of treatment of dental anomalies in children . Age-related indications for orthodontic treatment. | | 6 | Formative assessment: 1. Using active методов learning methods: TBL, CBL 2. Work on phantoms 3. Work in albums 4. Mini-conference topics SRS |

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| 4. | Mechanical orthodontic devices. Indications for use, principle of operation. Bracket system | 6 | Formative assessment: 1. Using active методов learning methods: TBL, CBL 2. Working on phantoms 3. Working in albums 4. Mini-conference on SRS topics |
| 5. | . Functional orthodontic devices. Indications for use, principle of operation. | 6 | Formative assessment: 1. Using active методов learning methods: TBL, CBL 2. Work on phantoms 3. Work in albums 4. Mini-conference topics SRS |
| 6. | Orthodontic devices of combined action. Operating principle, indications | 6 | Formative assessment: 1. Using active методов learning methods: TBL, CBL 2. Work on phantoms 3. Work in albums 4. Mini-conference topics SRS |
| 7. | Boundary control 1 | Summative assessment: 2 stages: Stage 1-ТMCQ training for understanding and application - 40% %Stage 2-Practical Skills Acquisition (Dops) - 60% | |
| 8. | Dental malformations . Anomalies in the position of teeth and dental arches in the sagittal and transversal vertical directions. | 6 | Formative assessment: 1. Using active методов learning methods: TBL, CBL 2. Working on phantoms 3. Working in albums 4. Mini-conference on SRS topics |
| 9. | . Etiology, pathogenesis, clinic, diagnosis and treatment of distal bite. | 6 | Formative assessment: 1. Using active методов learning methods: TBL, CBL 2. Work on phantoms 3. Work in albums 4. Mini-conference topics of SRS |
| 10. | Etiology, pathogenesis, clinic, diagnosis and methods of treatment of mesial bite. | 6 | Formative assessment: 1. Using active методов learning methods: TBL, CBL 2. Work on phantoms 3. Work in albums 4. Mini-conference topics of SRS |

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| 11. | Etiology, pathogenesis, clinic, diagnosis and methods of treatment of deep bite. | 6 | Formative assessment: 1. Using active методов learning methods: TBL, CBL 2. Work on phantoms 3. Work in albums 4. Mini-conference topics of SRS |
| 12. | Etiology, pathogenesis, clinic, diagnosis and methods of treatment of open bite. | 6 | Formative assessment: 1. Using active методов learning methods: TBL, CBL 2. Work on phantoms 3. Work in albums 4. Mini-conference topics of SRS |
| 13. | Etiology, pathogenesis, clinic, diagnosis and treatment of crossbite. | 6 | Formative assessment: 1. Using active методов learning methods: TBL, CBL 2. Work on phantoms 3. Work in albums 4. Mini-conference on the topic of SRS |
| 14. | Prevention of dental anomalies. Causes of relapses and ways to prevent them. Dental prosthetics in childhood. Indications. Features of making dentures. | 6 | Formative assessment: 1. Using active методов learning methods: TBL, CBL 2. Working on phantoms 3. Working in albums 4. Mini-conference topics of the SRS |
| 15. | Boundary control 2 | Summative assessment: 2 stages: 1st stage-TMCQ training for understanding and application - 40% 2-2nd stage-Practical Skills Admission (Dops) - 60% | |
| Final control (exam) | | Summative evaluation: 2 stages: Stage 1 - TMCQ teasing for understanding and application-40% %Stage 2 – OCE-60% | |
| Total | | | 100 |
| 9. | Teaching methods in the discipline (briefly describe the teaching and learning approaches that will be used in teaching) Using active learning methods: TBL, CBL | | |

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| 1 | Methods of formative assessment: TBL-Team Based Learning CBL-Case Based Learning | |
| 2 | Methods of summative assessment (from point 5): 1. MCQ testing for understanding and application 2. Passing practical skills – miniclinical exam (MiniCex) 3. SRS-creative task 4. Protecting your medical history 5. R & D Research Project | |
| 10. | Summative | |
| ass ess me nt No | . of the control form | Weight in % of total % |
| 1 | Reception of practical skills | 30% (evaluated according to the checklist) |
| 2 | Border control | 70% |
| Total RC1 | | 30 + 70 = 100% |
| 1 | Oral response | 20% (estimated by checklist) |
| 2 | Klassrum | 10% (estimated by checklist) |
| 3 | R & D research project | 10% (estimated on the checklist) |
| 5 | Milestone control | 60% (Stage 1-rMCQ teasing for understanding and application-40%; 2-Stage 2-mini clinical exam (MiniCex) - 60%) |
| Total RC2 | | 20+10+10 + 60 = 100% |
| 9 | The exam | has 2 stages: 1st stage-rMCQ teasing for understanding and application - 40% 2-2nd stage-OCE with SP - 60% |

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| 10 | Final grade: | ORD 60% + Exam 40% | |
| 10. | Evaluation | | |
| Score Letter system | score Digital equivalent | Points (% content) | Description of the assessment (changes can only be made at the level of the decision of the Academic Quality Committee of the Faculty) |
| A | 4.0 | 95-100 | Great. Exceeds the highest task standards. |
| A - | 3.67 | 90-94 | Excellent. Meets the highest standards of the task. |
| At+ | 3.33 | 85-89 | Is Good. Very good. Meets the high standards of the assignment. |
| In | 3.0 | , 80-84 | Is Good. Meets most job standards. |
| B- | 2.67 | 75-79 | Good. More than enough. Shows some reasonable knowledge of the material. |
| C+ | 2.33 | 70-74 | Is Good. Acceptable. Meets the main task standards. |
| From | 2.0 | 65-69 | Satisfactory. Acceptable. Meets some of the main task standards. |
| C- | 1.67 | 60-64 | Satisfactory. Acceptable. Meets some of the main task standards. |
| D+ | 1,33 | 55-59 | Satisfactory. Minimally acceptable. |
| D | 1,0 | 50-54 | Satisfactory. Minimally acceptable. The lowest level of knowledge and task completion. |
| FX | 0,5 | 25-49 | Unsatisfactory. Minimally acceptable. |
| F | 0 | 0-24 | Unsatisfactory. Very low productivity. |
| 11. | Training resources <i>(use the full link and indicate where you can access the texts/materials)</i> | | |
| Literature | Main Literature: .Persin, L. S. Stomatology of children [Text]. 3. Orthodontics / L. S. Persin. - Moscow: GEOTAR-MEDIA, 2016. - pp. 93-105 | | |

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| | <p>Persin, L. S. Stomatology of children [Text]. 3. Orthodontics / L. S. Persin, Moscow: GEOTAR-MEDIA, 2016.</p> <p>Abolmasov N. G., Abolmasov N. N. Orthodontics [Text], textbook pos. / Abolmasov N. G., Abolmasov N. N.-M. Med. press, 2008-pp.</p> |
| | <p>53-57 Additional:</p> <p>Persin L. S. Stomatologiya [Dentistry]. Neurostomatology. Disfunctions of the dentoalveolar system : a textbook / L. S. Persin, M. N. Sharov, Moscow: GEOTAR-Media, 2013, 358 p. (in Russian).</p> |
| | <p>Khoroshilkina F. Ya. Orthodontics. Khoroshilkina F. Ya., Malygin Yu. M., Persin L. S. Lechenie zubocheľjustno-litseyvykh anomalij po metodu Frenkelya : uchebnoe posobie [Treatment of dental - facial anomalies by the Frenkel method : a textbook].</p> |
| | <p>Bazikyan E. A., Lukina G. I., Seleznev D. A. Osnovy orthodontii v sechte propaedeuticheskoj stomatologii: metodicheskaya razrabotka [Fundamentals of orthodontics in the section of propaedeutic dentistry: a methodological development]. Moscow: MGM State Medical University, 2010. - 41 p.: tsv.il.</p> |
| | <p>Abolmasov N. G., Abolmasov N. N. Orthodontics [Text], textbook pos./ Abolmasov N. G., Abolmasov N. N.-M. Med. press, 2008-pp.</p> |
| | |
| 53-56 Electronic resources | <p>Internet resources:</p> <p>e-library. kaznu</p> <ol style="list-style-type: none"> 1. . http://www.damonsystem.md/orthodontic-instruments-ormco-ru/ 2. http://rep.bsmu.by/bitstream/handle/ 3. https://malyshikarlson.ru/stati/klassifikatsiya-uzdechek-yazyka/ 4. https://familydoctor.ru/about/publications/ortodontiya/anomalii-prikusa.html 5. https://www.bsmu.by/downloads/kafedri/k_ortodont/1.pdf 6. https://spectrdent.ru/article/klassifikacija-anomalij-prikusa/ |
| Simulators in the simulation center | |

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| Special software | <ol style="list-style-type: none"> 1. Google classroom – freely available. 2. Medical calculators: Medscape, Doctor's Handbook, MD+Calc - freely available. 3. Handbook of diagnostic and treatment protocols for medical workers from RCRS, Ministry of Health of the Republic of Kazakhstan: Dariger - available in free access. |
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| 12. | Training requirements and bonus system |
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Bonus system:

For extraordinary achievements in the field of future professional activity (clinical, scientific, organizational, etc.), students can receive additional points up to 10% of the final assessment (by the decision of the department).

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| 13. | Discipline Policy <i>(please do not change the parts highlighted in green)</i> |
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The policy of the discipline is determined **by the Academic Policy of the University and the University's Academic Integrity Policy. If the links do not open, then you can find up-to-date documents in the Univer IP.**

Professional behavior rules:

1) Appearance:

- ✓ office style of clothing (shorts, short skirts, open T-shirts are not allowed to attend the university, jeans are not allowed in the clinic)
- ✓ clean ironed dressing gown
- ✓ medical mask
- ✓ medical cap (or a neat hijab without hanging ends)
- ✓ medical gloves
- ✓ change of shoes
- ✓ neat hairstyle, long hair should be gathered in a ponytail, or bun, both for girls and boys. Neatly cropped nails. Bright, dark manicure is prohibited. It is acceptable to cover your nails with clear varnish.
- ✓ badge with full name (in full)

2) Mandatory presence of a phonendoscope, tonometer, centimeter tape, (you can also have a pulse oximeter)

3) ***Properly issued sanitary (medical) book (before the start of classes and must be updated in due time)**

4) *** Availability of a vaccination passport or other document on a fully completed course of vaccination against COVID-19 and influenza**

5) **Mandatory compliance with personal hygiene and safety regulations**

6) Systematic preparation for the educational process.

7) Accurate and timely maintenance of accounting documentation.

8) Active participation in medical-diagnostic and social events of departments.
A student without a medical book and vaccination will not be allowed to see patients.
A student who does not meet the requirements of the appearance and/or who gives off a strong / pungent smell, since such a smell can provoke an undesirable reaction in the patient (obstruction, etc.)- is not allowed to see patients!
The teacher has the right to make a decision on admission to classes for students who do not meet the requirements of professional behavior, including the requirements of the clinical base!
Academic discipline:

1. You can't be late for classes or a morning conference. If you are late , the decision on admission to the lesson is made by the teacher leading the lesson. If there is a valid reason, inform the teacher about the delay and the reason by message or by phone. After the third delay, the student writes an explanatory note to the head of the department, indicating the reasons for the delay, and is sent to the dean's office for admission to the class. If you are late without a valid reason, the teacher has the right to withdraw points from the current assessment (1 point for each minute of delay).
2. Religious events, holidays, etc. are not a valid reason for skipping, being late, or distracting the teacher and group from work during classes.
3. If you are late for a valid reason – do not distract the group and the teacher from the lesson and go quietly to your seat.
4. Leaving a class earlier than the scheduled time, or being outside the workplace during school hours is considered a truancy.
5. Additional work of students during school hours (during practical classes and duties) is not allowed.
6. For students who have more than 3 passes without notifying the curator and a valid reason, a report is issued with a recommendation for expulsion.
7. Missed classes are not processed.
8. Students are fully subject to the Internal rules of the clinical bases of the department
9. To greet the teacher and any older person by getting up (in class)
10. Smoking (including the use of vapes, e-cigarettes) strictly prohibited on the territory of medical institutions (out-doors) and the university. Punishment-up to cancellation of border control, in case of repeated violation-the decision on admission to classes is made by the head of the department
11. of Respect for colleagues, regardless of gender, age, nationality, religion, sexual orientation.
12. Have a laptop / laptop / tab / tablet with you for training and passing MCQ tests on TBL, boundary and final controls.
13. Taking MCQ tests on telemobile phones and smartphones is strictly prohibited.

The student's behavior during exams is regulated by the "Rules for conducting final control", "Instructions for conducting final control of the autumn / spring semester of the current academic year" (current documents are uploaded to the Univer IC and updated before the session starts); "Regulations on checking students ' text documents for borrowing".

14 **1. Constantly preparing for classes:**
 For example, it supports statements with relevant links, makes brief summaries
 , demonstrates effective learning skills, and helps others

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| | <p>learn 2. Take responsibility for your training: For example, it manages its own training plan, actively tries to improve itself, and critically evaluates information resources</p> <p>3. Actively participate in the group's training: For example, they actively participate in discussions and are willing to take tasks</p> <p>4. Demonstrate effective group skills For example, it takes the initiative, shows respect and correctness towards others, and helps resolve misunderstandings and conflicts.</p> <p>5. Proficient communication skills with peers: For example, actively listens, and is receptive to nonverbal and emotional cues Respectful attitude</p> <p>6. Highly developed professional skills: Committed to completing assignments, looking for opportunities for more training, confident and qualified Compliance with ethics and deontology in relation to patients and medical staff Compliance with subordination.</p> <p>7. High introspection: For example, it recognizes the limitations of its knowledge or abilities without taking the defensive or rebuking others</p> <p>.8 Highly developed critical thinking: For example, the student demonstrates skills in performing key tasks, such as generating hypotheses, applying knowledge to cases from practice, critically evaluating information, making conclusions out loud, explaining the reflection process</p> <p>9. Fully complies with the rules of academic behavior with understanding, suggests improvements to improve performance. Adheres to the ethics of communication-both oral and written (in chats and messages)</p> <p>10. Fully adheres to the rules with full understanding of them, encourages other group members to adhere to the rules Strictly adheres to the principles of medical ethics and PRIMUM NON NOCER</p> |
| 15. | <p>Distance/online learning is prohibited in the clinical discipline дисциплине <i>(please do not change the parts marked in green)</i></p> |
| | <p>1. According to the Order of the Ministry of Education and Science of the Republic of Kazakhstan No. 17513 dated October 9, 2018 "On approval of the List of areas of training of personnel with higher and postgraduate education, training in which in the form of external and online training is not allowed"</p> <p>According to the above-mentioned regulatory document, specialties with the code of health care disciplines: bachelor's degree (6B101), master's degree (7M101), residency (7R101), doctoral studies, (8D101) - training in the form of external and online-training is not allowed.</p> <p>Thus, students are prohibited from distance learning in any form. It is allowed only to work out a class in the discipline due to the absence of a student for a reason beyond his control and the availability of a timely confirmation document (for example: a health problem and an application for an approval document - a medical certificate, a NSR signal sheet, an extract from a consultation appointment with a medical specialist- врачу).</p> |
| 16. | <p>Approval and review</p> |

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| Head of the Department | | |
| Committee for the Quality of Teaching and Training of the Faculty | Protocol No | . Date of approval |
| Dean | Signature | Dean of the Faculty |

Thematic plan and content of classes

| # | Topic | Contents | Literature | Form of implementation |
|---|--|---|---|--|
| 2 | 3 | 4 | 5 | |
| 1 | Methods of clinical and functional diagnostics of dental anomalies and deformities | <p>Clinical examination (static, dynamic);</p> <p>.Functional disorders, parafunction of the perioral muscles-lips, cheeks, and floor of the oral cavity;</p> <p>.Static methods for determining chewing efficiency (according to N. I. Agapov, I. M. Oxman, V. Yu. Kurlyandsky);</p> <p>.Dynamic methods for determining chewing efficiency</p> <p>. Functional chewing tests (Christiansen, S.E. Gelman, I. S. Rubinov).</p> <p>Methods of speech function research (Metody issledovaniya funktsii</p> | <p>glotaniya Persin, L. S. Stomatologiya detskogo vozrasta [Methods of swallowing function research]. 3. Orthodontics / L. S. Persin, Moscow: GEOTAR-MEDIA, 2016.</p> <p>Abolmasov N. G., Abolmasov N. N. Orthodontics [Text], textbook pos. / Abolmasov N. G., Abolmasov N. N.-M. Med. press, 2008-pp.</p> | <p>53-57 Formative assessment:</p> <p>1. Using active methods learning methods: TBL, CBL</p> <p>2. Work on phantoms</p> <p>3. Work in albums</p> <p>4. Mini-conference topics of SRS</p> |
| 2 | Methods of X-ray diagnostics of dental anomalies in children. . Telorentgenography (Schwartz analysis) | <p>. Methods and techniques of X-ray examination of teeth;</p> <p>Study of X-rays of teeth and palatine suture;; Orthopantomography (OPTG) . Tomography of the TMJ Indications and rules for conducting;</p> <p>. 3D research..</p> <p>Methods of TRG analysis.</p> <p>Decoding the TRG according to Schwartz;</p> | <p>Persin, L. S. Stomatology of childhood [Text]. 3. Orthodontics / L. S. Persin, Moscow: GEOTAR-MEDIA, 2016, pp. 93-105</p> <p>2. Abolmasov N. G., Abolmasov N. N. Orthodontics [Text], textbook pos. / Abolmasov N. G., Abolmasov N. N.-M. Med. press, 2008-pp.</p> | <p>53-56 Formative assessment:</p> <p>1. Using active methods learning methods: TBL, CBL</p> <p>2. Work on phantoms</p> <p>3. Work in albums</p> <p>4. Mini-conference topics of SRS</p> |

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| 3 | Basic principles and methods of treatment of dental anomalies in children . Age-related indications for orthodontic treatment. | Principles of treatment of anomalies in the period of temporary, removable and permanent bite.. Age-related indications for orthodontic treatment. Methods of treatment of dental anomalies(hardware.surgical. prosthetic, complex).. Anatomical and physiological structure of periodontal, periodontal, tooth, and jaw bones. Physiological structure of the TMJ during the period of replacement teeth, permanent bite; .Mechanism of tooth movement; Features of periodontal tissue rearrangement; Changes in histological preparations when teeth are moved along planes; .Changes on histological preparations of bones, palatine suture of bone joints during expansion and compression; | Khoroshilkina F. Ya. Orthodontics. Khoroshilkina F. Ya., Malygin Yu. M., Persin L. S. Lechenie zubocheľjustno-litseyvykh anomalij po metodu Frenkel': uchebnoe posobie [Treatment of dental-facial | anomalies by the Frenkel method: a textbook]. 1. Using active methods: TBL, CBL 2. Work on phantoms 3. Work in albums 4. Mini-conference topics SRS |
| 4 | Mechanical orthodontic devices. Indications for use, principle of operation. Bracket system | Age-related indications for the use of mechanical orthodontic devices; Classification of orthodontic structures according to Khoroshilkina-Malygin. ;. The principle of operation of mechanical orthodontic devices;. Technological processes used in the manufacture of orthodontic devices;. Methods of correction and activation of orthodontic devices; .Six Andrews keys to normal occlusion .The system of forces in edgewise technique.. Design of braces..Types of braces. | Persin, L. S. Stomatology of children [Text]. 3. Orthodontics / L. S. Persin. - Moscow: GEOTAR-MEDIA, 2016. - p . Abolmasov N. G., Abolmasov N. N. Orthodontics [Text], textbook pos./ Abolmasov N. G., Abolmasov N. N.-M. Med. press, 2008-pp. 137-229 | Formative assessment: 1. Using active methods: TBL, CBL 2. Working on phantoms 3. Working in albums 4. Mini-conference topics of the SRS |
| 5 | . Functional orthodontic devices. Indications for use, principle of operation. | Age-related indications for the use of functional orthodontic devices; Classification of orthodontic devices | Persin, L. S. Stomatology of children [Text]. 3. Orthodontics / L. S. Persin. - | Formative assessment: |

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| | | <p>according to Khoroshilkina-Malygin; Constructive bite, occludator, articulator, facial arch, indications for definition and use, work, plaster models; Support and fixation of functional orthodontic devices; Methods of correction and activation of functional orthodontic devices;. Complications when using functional orthodontic devices; .</p> | <p>Moscow: GEOTAR-MEDIA, 2016. - p . Abolmasov N. G., Abolmasov N. N. Orthodontics [Text], textbook pos./ Abolmasov N. G., Abolmasov N. N.-M. Med. press, 2008-pp. 137-229</p> | <ol style="list-style-type: none"> 1. Using active методов learning methods: TBL, CBL 2. Working on phantoms 3. Working in albums 4. Mini-conference on SRS topics |
| 6 | <p>Combined-action orthodontic devices. Principle of operation, indications</p> | <p>Classification of orthodontic devices according to Khoroshilkina-Malygin;. Design of monoblock orthodontic devices of combined action.. Structural elements of the Russian Federation Frenkel 1,2,3 types.. Fixation of monoblock orthodontic devices of combined action.. Complications in the use of orthodontic single-jawed, monoblock devices of combined action, RF Frenkelya</p> | <p>Persin, L. S. Stomatology of children [Text]. 3. Orthodontics / L. S. Persin. - Moscow: GEOTAR-MEDIA, 2016. - p . Abolmasov N. G., Abolmasov N. N. Orthodontics [Text], textbook pos./ Abolmasov N. G., Abolmasov N. N.-M. Med. press, 2008-pp. 137-229</p> | <p>Formative assessment:</p> <ol style="list-style-type: none"> 1. Using active методов learning methods: TBL, CBL 2. Work on phantoms 3. Work in albums 4. Mini-conference topics of SRS |
| 7 | <p>Border control -1</p> | <p>Reception of practical skills</p> | | |
| 8 | <p>Anomalies of tooth development . Anomalies in the position of teeth and dental arches in the sagittal, transversal vertical directions</p> | <p>Diseases of hard tooth tissues Timing of laying, mineralization and eruption of temporary and permanent teeth .Witzel, Ustimenko, and Baume tables .Etiology, pathogenesis, clinic and methods of diagnosis and treatment of dental position anomalies .Etiology, pathogenesis, clinic and methods of diagnosis and treatment of anomalies of the dental arches in the sagittal, transversal, vertical direction</p> | <p>Khoroshilkina F. Ya. Orthodontics. Khoroshilkina F. Ya., Malygin Yu. M., Persin L. S. Lechenie zubochelestno-litseyvykh anomalii po metodu Frenkelya : uchebnoe posobie [Treatment of dental - facial anomalies by the Frenkel method : a textbook].</p> | <p>Formative assessment:</p> <ol style="list-style-type: none"> 1. Using active методов learning methods: TBL, CBL 2. Working on phantoms 3. Working in albums |

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|----|---|---|---|---|
| | | Relationship of the size of the dental arches with the parameters of the apical basis (Snagina N. G.) Three degrees of its narrowing.. | 3. Bazikyan E. A., Lukina G. I., Seleznev D. A. Osnovy orthodontii v sechte propaedeuticheskoi stomatologii: metodicheskaya razrabotka [Fundamentals of orthodontics in the section of propaedeutic dentistry: a methodological development]. | 4. Mini-conference topics of the SRS |
| 9 | . Etiology, pathogenesis, clinic, diagnosis and methods of treatment of distal bite | Anatomical and physiological features of the structure of the dentoalveolar system depending on the age of the child; Pathological bite and its morphological, functional signs; .Methods of diagnosis of distal bite (Ilina-Markosyan test); Methods of treatment of distal bite in the period of temporary, removable and permanent bite; Orthodontic devices for the treatment of distal bite; . Myohymnastics. used for the treatment of distal bite; Early signs of distal bite, preventive measures to eliminate them.. | Persin L. S. Stomatologiya [Dentistry]. Neurostomatology. Disfunctions of the dentoalveolar system : a textbook / L. S. Persin, M. N. Sharov, Moscow: GEOTAR-Media, 2013, 358 p.: tsv. il. 2. Khoroshilkina F. Ya. Orthodontics. Treatment of dentoalveolar-facial anomalies by the Frenkel method: a textbook / F. Ya | . Formative assessment: 1. Using active методов learning methods: TBL, CBL 2. Work on phantoms 3. Work in albums 4. Mini-conference topics of SRS |
| 10 | Etiology, pathogenesis, clinic, diagnosis and methods of treatment of mesial bite. | Anatomical and physiological features of the structure of the dentoalveolar system depending on the age of the child; Pathological bite and its morphological, functional signs; | treatment Persin L. S. Stomatology. Neurostomatology. Disfunctions of the dentoalveolar system : a | . Formative assessment: 1. Using active методов learning |

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|----|--|---|--|--|
| | | <p>. Methods of diagnosis of mesial bite (Ilina-Markosyan test).</p> <p>Methods of treatment of mesial occlusion in the period of temporary, replaceable and permanent occlusion;</p> <p>Orthodontic devices for the treatment of mesial occlusion;</p> <p>. Myohymnastics. used for the treatment of mesial bite;</p> <p>. Early signs of mesial bite, preventive measures for their</p> | <p>textbook / L. S. Persin, M. N. Sharov, Moscow: GEOTAR-Media, 2013, 358 p.: tsv. il.</p> <p>2. Khoroshilkina F. Ya. Orthodontics. Treatment of dentoalveolar-facial anomalies by the Frenkel method: a textbook / F. Ya</p> | <p>methods: TBL, CBL</p> <p>2. Work on phantoms</p> <p>3. Work in albums</p> <p>4. Mini-conference topics of SRS</p> |
| 11 | Etiology, pathogenesis, clinic, diagnosis and methods of treatment of deep bite. | <p>Anatomical and physiological features of the structure of the dentoalveolar system depending on the age of the child;</p> <p>Pathological bite and its morphological, functional signs;</p> <p>. Methods for diagnosing deep bite;</p> <p>. Methods of treatment of deep bite in the period of temporary, removable and permanent bite;</p> <p>. Orthodontic devices for the treatment of deep bite;</p> <p>. Myohymnastics. used for the treatment of deep bite;</p> <p>. Early signs of deep bite, preventive measures for their elimination</p> | <p>Persin L. S. Dentistry. Neurostomatology. Disfunctions of the dentoalveolar system : a textbook / L. S. Persin, M. N. Sharov, Moscow: GEOTAR-Media, 2013, 358 p.: tsv. il.</p> <p>2. Khoroshilkina F. Ya. Orthodontics. Treatment of dentoalveolar-facial anomalies by the Frenkel method: a textbook / F. Ya</p> | <p>. Formative assessment:</p> <p>1. Using active методов learning methods: TBL, CBL</p> <p>2. Work on phantoms</p> <p>3. Work in albums</p> <p>4. Mini-conference topics of SRS</p> |
| 12 | Etiology, pathogenesis, clinic, diagnosis and methods of treatment of open bite. | <p>Anatomical and physiological features of the structure of the dentoalveolar system depending on the age of the child;</p> <p>Pathological bite and its morphological, functional signs;</p> <p>. Methods of diagnosis of open bite;</p> <p>. Methods of treatment in the period of temporary, removable and permanent bite</p> <p>Orthodontic devices for the treatment of open bite;</p> | <p>Khoroshilkina F. Ya. Orthodontics. Khoroshilkina F. Ya., Malygin Yu. M., Persin L. S. Lechenie zubochelejstno-litseyvykh anomalij po metodu Frenkelya : uchebnoe posobie [Treatment of dental - facial anomalies by</p> | <p>Formative assessment:</p> <p>1. Using active методов learning methods: TBL, CBL</p> <p>2. Work on phantoms</p> <p>3. Work in albums</p> |

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|----|--|--|--|--|
| | | <p>. Myohymnastics. used for the treatment of open bite; Early signs of open bite, preventive measures to eliminate them</p> | <p>the Frenkel method : a textbook].</p> <p>3. Bazikyan E. A., Lukina G. I., Seleznev D. A. Osnovy orthodontii v sechte propaedeuticheskoi stomatologii: metodicheskaya razrabotka [Fundamentals of orthodontics in the section of propaedeutic dentistry: a methodological development].</p> | <p>4. Mini-conference topics of SRS</p> |
| 13 | <p>Etiology, pathogenesis, clinic, diagnosis and treatment of crossbite.</p> | <p>Anatomical and physiological features of the structure of the dentoalveolar system depending on the age of the child; Pathological bite and its morphological, functional signs; . Methods for diagnosing crossbite; . Methods of treatment in the period of temporary, removable and permanent bite; . Orthodontic devices for the treatment of crossbite; . Myohymnastics used to treat crossbite. Early signs of crossbite, preventive measures to eliminate them.</p> | <p>Khoroshilkina F. Ya. Orthodontics. Khoroshilkina F. Ya., Malygin Yu. M., Persin L. S. Lechenie zubochelejstno-litseyvkh anomalij po metodu Frenkelya : uchebnoe posobie [Treatment of dental - facial anomalies by the Frenkel method : a textbook].</p> <p>3. Bazikyan E. A., Lukina G. I., Seleznev D. A. Osnovy orthodontii v sechte propaedeuticheskoi stomatologii: metodicheskaya razrabotka [Fundamentals of orthodontics in the section</p> | <p>Formative assessment: 1. Using active methods: TBL, CBL 2. Work on phantoms 3. Work in albums 4. Mini-conference topics SRS</p> |

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|----|--|--|---|---|
| | | | of propaedeutic dentistry: a methodological development]. | |
| 14 | Prevention of dental anomalies. Causes of relapses and ways to prevent them. Dental prosthetics in childhood. Indications. Features of making dentures | . Hereditary factors of dental anomalies .Preventive measures for intrauterine development of the fetus and in the period of bite formation .Preventive measures in the period of temporary, removable and permanent bite . Preventive devices: indications, operating principle ..Retention period, its values for fixing the results of orthodontic treatment; .Types of retention structures (devices) for fixing the results of orthodontic treatment. Indications for dental prosthetics in childhood; . . Features of prosthetics in the complete absence of teeth in children. | Persin L. S. Stomatologiya [Dentistry]. Neurostomatology. Disfunctions of the dentoalveolar system : a textbook / L. S. Persin, M. N. Sharov, Moscow: GEOTAR-Media, 2013, 358 p.: tsv. il. 2. Khoroshilkina F. Ya. Orthodontics. Treatment of dentoalveolar-facial anomalies by the Frenkel method: a textbook / F. Ya | . Formative assessment: 1. Using active methods Using active методов Training options: TBL, CBL 2. Work on phantoms 3. Work in albums 4. Mini-conference topics SRS |
| 15 | Boundary control -2 | Practical skills reception | | |

Independent work of students

| n / | a SRS topics | Type of SRS | Delivery dates |
|-----|--|------------------------------------|-------------------------------|
| 1. | Etiopathogenetic factors in the formation of dental anomalies and deformities | Presentation | Boundary control No. 1 |
| 2. | The role of environmental factors in the formation of dental pathologies | Presentation | |
| 3. | Myofunctional devices for the treatment of malocclusion | Presentation on the project | |

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|-----------|--|--|-----------------------------------|
| 4. | Prevention of dental anomalies | Presentation | |
| 5. | Modern methods for the diagnosis of dental anomalies | Summary / presentation | Boundary control No. 2 |
| 6. | Morphological changes in parotid tissues in orthodontic treatment | Literature | |
| 7. | review Myohymnastics in the treatment of dental anomalies | Algorithm of actions in the diagnosis and management of the patient | |
| 8. | Modern methods of treatment of dental and occlusal anomalies | Clinical analysis | |

Правила оформления СРС

Оформление реферата:

Реферат должен быть оформлен в печатном виде, объемом не менее 68 страниц, включая рисунки, схемы (шрифт Times New Roman, кегль 14, через 1 интервал)

- Титульный лист (организация, название реферата прописными буквами, ФИО исполнителя, курс, группа, ФИО преподавателя)
- Содержание (разделы реферата).
- Введение (цель и задачи реферата, актуальность).
- Основная часть (раскрытие каждой изучаемой проблемы по данным литературы с указанием в квадратных скобках источника литературы); в данной части реферата могут быть таблицы, схемы, графики, рисунки
- Заключение (информация реферата суммируется, делаются выводы)
- Список литературы с указанием ФИО авторов, полного названия источника, года издания, количества страниц

Структура мультимедийной презентации:

Презентация по творческой работе должна быть представлена в программе PowerPoint (не менее 25 слайдов, текстовые слайды не должны содержать более 8-10 строк, шрифт Verdana)

- Титульный лист (организация, тема презентации, ФИО исполнителя, курс, группа, ФИО преподавателя)
- Введение (обобщенная актуальность темы, цели и задачи презентации)
- Основная часть: в данную часть презентации включаются все таблицы, схемы, графики, рисунки, отражающие суть проблемы. Приветствуется включение видеобзоров, видеозаписей, сделанных самостоятельно
- Заключение (суммируются данные презентации и делаются выводы, которые соответствуют цели и задачам презентации)
- Список использованной литературы с указанием ФИО автора, полного названия источника, год издания, количество страниц (не менее 8-10 источников)

CRITERIA FOR EVALUATING A STUDENT'S ORAL RESPONSE

| Characteristics of the answer | Points in the BRS | Level of competence formation in the discipline | ESTS assessment |
|---|-------------------|---|-----------------|
| A complete, detailed answer to the question is given, a set of conscious knowledge about the object is shown, which manifests itself in the free operation of concepts, | of 96-100 | High | A+ |

| | | | |
|---|----------|---------------|-------|
| the ability to identify its essential and non-essential features, cause-and-effect relationships. Knowledge about an object is demonstrated against the background of its understanding in the system of this science and interdisciplinary connections. The answer is formulated in terms of science, presented in literary language, logical, evidence-based, and demonstrates the author's position of the student. Fully mastered the competencies | | | |
| , a complete, detailed answer to the question is given, a set of conscious knowledge about the object is shown, which manifests itself in the free operation of concepts, the ability to identify its essential and non-essential features, cause-and-effect relationships. Knowledge about an object is demonstrated against the background of its understanding in the system of this science and interdisciplinary connections. Appropriate terminology is used in the answer, it is presented in literary language, is logical, evidential, and demonstrates the author's position of the student. He has fully mastered the competencies | of 90-95 | Tall | , And |
| a complete, detailed answer to the question is given, the main provisions of the topic are revealed in evidence; the answer traces a clear structure, logical sequence that reflects the essence of the concepts, theories, and phenomena being revealed. The answer is presented in literary language using terminology. There were some errors in the response that were corrected by the student with the help of the teacher. | 76-89 | Average | B |
| Gives an insufficiently complete and consistent answer to the question posed, but at the same time shows the ability to identify essential and non-essential features and cause-and-effect relationships. The answer is logical, stated using the terminology of the topic. There may be 1-2 errors in the definition of basic concepts that the student finds difficult to correct on their own. Poorly mastered the competencies. | 66-74 | Low | . C |
| An incomplete answer is given, and the logic and sequence of presentation are significantly violated. Gross errors were made in determining the essence of the disclosed concepts, theories, and phenomena, due to the student's | 60-65 | Extremely low | C |

| | | | |
|--|------|------------|---|
| misunderstanding of their essential and non-essential features and connections. There are no conclusions in the response. Poorly mastered the competencies. | | | |
| An incomplete answer is given, representing scattered knowledge on the topic of the question with significant errors in definitions. There is fragmentary, illogical presentation. The student is not aware of the connection of this concept, theory, phenomenon with other objects of the discipline. There are no conclusions, concretization, or evidence-based presentation. Speech is illiterate. Additional and clarifying questions from the teacher do not lead to correction of the student's answer not only to the question posed, but also to other questions of the discipline. Competencies are not formed. | 0-59 | Not formed | F |

EVALUATION SHEET
oral survey of a student with communication skills

| № n / | a Evaluation criteria | Level | | | |
|----------|--|---|--|---|--|
| | | Excellent-18 points | Good-14 points | Acceptable - 10 points | Bad-5 points |
| 1. | Content. Demonstrated detailed and accurate content of the topic | Demonstrates an understanding of the topic, the answer is always supported by facts. | Demonstrates an understanding of the topic content. Almost all answers are supported by facts. | Demonstrated a basic understanding of the topic. The answers were not supported by facts. | A few facts related to the topic. Most of the information is opinion. |
| 2. | Knowledge. Demonstrated knowledge of the subject | Demonstrates a deep knowledge of the topic. Answers all the questions of the teacher, the answers differ in the depth and completeness of the topic disclosure. | Demonstrates working knowledge of the topic. He answered the teacher's questions satisfactorily. | Demonstrates basic knowledge of the topic. Answers the teacher's questions by repeating the answers - without providing any additional information. | Demonstrates little or no knowledge of the topic. Can't answer the teacher's questions or comment on any part of the presentation. |

| | | | | | |
|----|---|---|---|---|---|
| 3. | Relationship. Demonstrated an understanding of the essence of processes | Demonstrates a solid knowledge of the main processes, has a terminological apparatus, is able to explain, draw conclusions, and give reasoned answers in full. | Demonstrates knowledge of basic processes, has a terminological apparatus, is able to explain, draw conclusions, give reasoned answers, and allow inaccuracies. | Demonstrates basic knowledge of processes, does not have enough knowledge of terminology, explains it difficult, and draws conclusions with difficulty. | Demonstrates little or no knowledge of basic processes. Does not know the terminology apparatus, can not draw conclusions. |
| 4. | Comments. Demonstrated proficiency in additional information on the topic | Demonstrates deep knowledge of the topic. Has additional information on the topic, answers differ in the depth and completeness of the topic disclosure. Applies examples. Maintains eye contact with everyone. | Demonstrates working knowledge of the topic. Has additional information on the topic, answers differ in the depth and completeness of the topic disclosure. Applies examples. I made eye contact several times during the presentation. | Demonstrates basic knowledge of the topic. Does not have additional information on the topic, and the answers do not differ in the depth and completeness of the topic disclosure. Doesn't apply examples. Occasionally making eye contact with one or two audience members | Demonstrates little or no knowledge of the topic. Doesn't have any additional information on the topic. Doesn't apply examples. He barely looks the audience in the eye. Looks down at record |
| 5. | Audience: Demonstrated the ability to interact with the audience | Demonstrates an excellent rhythm and style of speech based on audience feedback. Calmly and eloquently responds to questions and comments from the audience. Engages the audience throughout the entire presentation. | Demonstrates a good rhythm and style of performance. Adjusted the volume, tempo, and enthusiasm several times. Answered questions from the audience. | Demonstrates satisfactory rhythm and style of performance. Speaks louder at the request of the audience. The speaker felt uncomfortable. The speaker tried to change the enthusiasm or tempo to keep the audience's attention. | I didn't adjust my speech style based on the audience's reaction. I couldn't answer the audience's questions. The speaker made no visible effort to keep the audience interested. |
| | Total | 90 | 70 | 50 | 30 |

**SCORE-RATING ASSESSMENT OF THE SRS-CREATIVE TASK
(maximum of 90 points) + bonuses for English language and time management**

| | | | | | |
|--|--|-----------|-----------|-----------|----------|
| | | 20 | 15 | 10 | 5 |
|--|--|-----------|-----------|-----------|----------|

| | | | | | |
|---|---|---|---|--|--|
| 1 | Problem focus | Organized focused, highlights all questions related to the main identified problem with an understanding of the specific clinical situation | Organized, focused, highlights all questions related to the main identified problem, but there is no understanding of the specific clinical situation | Unfocused, Distraction to questions not related to the main identified problem | Inaccurate, misses the point, inappropriate data. |
| 2 | 2 Informative and effective presentation | All the necessary information on the topic is fully conveyed in a free, consistent, logical manner The product form is adequately chosen | All the necessary information is conveyed in a logical manner, but with minor inaccuracies | All the necessary information on the topic is presented chaotically, with minor errors | Important information on the topic is not reflected, gross errors |
| 3 | Reliability | of the material selected based on well-established facts. Display of understanding by the level or quality of evidence | Some conclusions and conclusions are formulated based on assumptions or incorrect facts. There is no complete understanding of the level or quality of evidence | There is insufficient understanding of the problem, some conclusions and conclusions are based on incomplete and unproven data-questionable resources are used | Conclusions and conclusions are not justified or incorrect |
| 4 | Logic and consistency | The presentation is logical and consistent, has internal unity, the provisions in the product follow from each other and are logically interrelated | internal unity, product positions follow from one another, but there are inaccuracies | There is no consistency and logic in the presentation, but it is possible to track the main idea | Jumps from one to another, it is difficult to grasp the main idea |
| 5 | Literature analysis | Literary data are presented in a logical relationship, demonstrate a deep study of the main and additional information resources | Literary data demonstrate the study of the main literature | Literary data show the study of the main literature data is not always in place, does not support the consistency and evidence of statements | Inconsistency and randomness in the presentation of data, inconsistency No knowledge of the main textbook |
| 6 | Practical significance | High | Significant | Not enough | Not acceptable |
| 7 | Patient-oriented | High | Focused | Not enough | Not acceptable |

| | | | | | |
|---|--|---|--|---|---|
| 8 | Applicability in future practice | High | Applicable | Not enough | Not acceptable |
| 9 | Presentation clarity, report quality (speaker's assessment) | Correctly, all the features of Power Point or other e-gadgets are used to the point, fluency in the material, confident manner of presentation | Is overloaded or insufficiently used visual materials, incomplete knowledge of the material | Visual materials are not informative does not confidently report | Does not own the material, does not know how to present |
| it bonus | English/Russian/Kazakh* | The product is fully delivered in English/Russian/Kazakh (checked by the head of the department) + 10-20 points depending on the quality | of the product prepared in English, submitted in Russian / kaz + 5-10 points depending on the quality (or vice versa) | When preparing the product, we used English-language sources + 2-5 points depending on the quality | |
| of the bonus | Time management** | Product delivered ahead of time 10 points | are awarded Product delivered on time – no points are awarded | Postponement of delivery that does not affect quality Minus 2 points | Delivered late Minus 10 points |
| Bo nus | Rating** * | Additional points (up to 10 points) | Outstanding work, for example: Best work in a group Creative approach Innovative approach to completing tasks At the suggestion of the group | | |
| <p>* - for Kaz/Rus groups-English; for groups studying in English - completing tasks in Russian or Kazakh *The deadline is determined by the teacher, as a rule - the day of border control ** so, you can get the maximum 90 points, to get above 90-you need to show a result higher than expected</p> | | | | | |

EVALUATION SHEET

Making a diagnosis based on orthodontic models and choosing a treatment method

| | | |
|--|--|-------------------------------|
| | | Level, score in points |
|--|--|-------------------------------|

| n / | a Evaluation criteria | Excessive | Acceptable | Requires correction | Unacceptable |
|------------|---|------------------|-------------------|----------------------------|---------------------|
| 1. | Correctly determined the ratio of jaws | 10 | 7,5 | 5 | 0 |
| 2. | Conducted bimetric measurements of the jaws | 10 | 7,5 | 5 | 0 |
| 3. | I set a preliminary forecast | of 10 | 7.5 | 5 | 0 |
| 4. | Assigned a survey plan | 10 | 7,5 | 5 | 0 |
| 5. | Interpretation of survey results | 10 | 7.5 | 5 | 0 |
| 6. | Conducted a differential diagnosis | of 10 | 7,5 | 5 | 0 |
| 7. | I made a final diagnosis and justified | it 10 | 7,5 | 5 | 0 |
| 8. | I chose the correct treatment method | 10 | 7,5 | 5 | 0 |
| 9. | Had an idea of the mechanism of action of the assigned constructs | 10 | 7,5 | 5 | 0 |
| 10. | Determination of prognosis and prevention | 10 | 7.5 | 5 | 0 |
| | TOTAL | 100 | 75 | 50 | 0 |

EVALUATION SHEET
Removing an anatomical impression from the jaws

| № n / | Criteria a Evaluation criteria | Level | | | |
|------------------|---|------------------|-------------------|----------------------------|---------------------|
| | | Excellent | Acceptable | Requires correction | Unacceptable |
| | | | | | |

| | | | | | |
|-----|---|-----|----|----|---|
| 1. | Correctly selected impression mass | 10 | 7 | 5 | 0 |
| 2. | Correctly selected impression spoon | 15 | 8 | 7 | 0 |
| 3. | Correctly mixed impression mass | 10 | 7 | 5 | 0 |
| 4. | Correct distribution of impression mass on the upper jaw spoon | 10 | 7 | 5 | 0 |
| 5. | Correct distribution of impression mass on the lower jaw spoon | 10 | 8 | 5 | 0 |
| 6. | Correct introduction of the impression mass to the upper jaw | 10 | 8 | 5 | 0 |
| 7. | Correct introduction of the impression mass to the lower jaw | 10 | 8 | 5 | 0 |
| 8. | Correct extraction from the upper jaw | 10 | 8 | 5 | 0 |
| 9. | Correct extraction from the lower jaw | 10 | 7 | 5 | 0 |
| 10. | Ability to describe the resulting impression according to anatomical criteria | 5 | 7 | 3 | 0 |
| 11. | TOTAL | 100 | 75 | 50 | 0 |

EVALUATION SHEET
Border control No. 1 and 2

| № n / | Criteria a Evaluation Criteria | Level | | | |
|----------|---|-----------|------|------------------------|--------------|
| | | Excellent | Good | Requires correction | Unacceptable |
| 1. | After reviewing the clinical situation, I identified the leading symptoms | 10 | 7 | 5 | 0 |
| 2. | Justified the choice of additional diagnostic methods | 10 | 7 | 5 | 0 |

| | | | | | |
|-----|---|------------|-----------|-----------|----------|
| 3. | Interpreted the received (expected) or available results of the physical examination. | 10 | 8 | 5 | 0 |
| 4. | Interpreted data from additional survey methods | 10 | 7 | 5 | 0 |
| 5. | Identified diseases that are similar in clinical presentation | 10 | 7 | 5 | 0 |
| 6. | Logically, I made a differential diagnosis and reasonably excluded similar diseases | 10 | 8 | 5 | 0 |
| 7. | Made a reasonable clinical diagnosis | 10 | 8 | 5 | 0 |
| 8. | Argued for indications to consult related specialists | 10 | 7 | 5 | 0 |
| 9. | Justified the choice of treatment method, necessary pharmaceutical preparations, physiotherapy | 10 | 8 | 5 | 0 |
| 10. | Demonstrated the ability to answer the teacher's questions in the course of completing the task | 10 | 8 | 5 | 0 |
| | TOTAL | 100 | 75 | 50 | 0 |

