

SYLLABUS

INTERNATIONAL EUROPEAN
UNIVERSITY



SCHOOL OF
MEDICINE

CHILDREN'S INFECTIOUS
DISEASES

2023



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Discipline



 Children's infectious diseases

Teacher(s)



 Bondarenko Anastasiia Valeriivna, Lapiy Fedir Ivanovych, Stepanovskyi Yuri Stepanovych, Hilfanova Anna Mykhailivna

Profile of the teacher(s)



Consultations

Face-to-face consultations



Online consultations

Contact phone number



E-mail



Discipline page



Form of final control

offse

differentiated credit

exam





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1 Brief summary of the discipline

In the course of studying the discipline "Paediatric Infectious Diseases" students get acquainted with the basic laws of the infectious process in children, the most common infectious diseases in childhood, the principles of their diagnosis and treatment, anti-epidemic measures, principles of active and passive immunoprophylaxis. The discipline involves the study of clinical manifestations and treatment of the most common infectious diseases in children.

2 Prerequisite for the course

"Krok-1", requires knowledge of: Latin language and medical terminology, medical biology, medical informatics, human anatomy, physiology, histology, cytology and embryology, biological and bioorganic chemistry, microbiology, virology and immunology, pathomorphology, pathophysiology, pharmacology, hygiene and ecology, propaedeutics.

3 Purpose and objectives of the discipline

Objective - to acquire skills in diagnosis, treatment and prevention of infectious diseases in children

4 ECTS Credits

3 credits / 90 academic hours

5 Learning outcomes

PLO-1	Have a thorough knowledge of the structure of professional activity. Be able to carry out professional activities that require updating and integrating knowledge. To be responsible for professional development, the ability to further professional training with a high level of autonomy.
PLO-3	Specialised conceptual knowledge that includes scientific achievements in the field of healthcare and is the basis for research, critical thinking in the field of medicine and related interdisciplinary issues.
PLO-4	Identify and identify the leading clinical symptoms and syndromes (according to list 1); using standard methods, using preliminary data from the patient's history, examination of the patient, knowledge of the person, his/her organs and systems, establish a preliminary clinical diagnosis of the disease (according to list 2).
PLO-5	Collect complaints, anamnesis of life and disease, assess the patient's psychomotor and physical development, the state of organs and body systems, and evaluate information on the diagnosis (according to List 4) based on the results of laboratory and instrumental studies, taking into account the patient's age.
PLO-6	To establish the final clinical diagnosis by making an informed decision and analysing the obtained subjective and objective data of clinical, additional examination, conducting differential diagnosis, following the relevant ethical and legal standards, under the supervision of a supervising physician in a healthcare facility (according to list 2).



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PLO-7	Prescribe and analyse additional (mandatory and optional) methods of examination (laboratory, functional and/or instrumental) (according to list 4), patients with diseases of organs and body systems for differential diagnosis of diseases (according to list 2).
PLO-8	Determine the main clinical syndrome or what causes the severity of the victim's/injured person's condition (according to list 3) by making an informed decision and assessing the person's condition in any circumstances (in a healthcare facility, outside it), including in an emergency situation and hostilities, in the field, in conditions of lack of information and limited time.
PLO- 9	Determine the nature and principles of treatment of patients (conservative, surgical) with diseases (according to list 2), taking into account the patient's age, in a health care facility, outside it and at the stages of medical evacuation, including in the field, based on a preliminary clinical diagnosis, observing the relevant ethical and legal standards, by making an informed decision according to existing algorithms and standard schemes, if necessary, expand the standard scheme, be able to justify personalised recommendations under the supervision of a medical supervisor
PLO- 10	Determine the necessary work, rest and nutrition regime based on the final clinical diagnosis, in compliance with relevant ethical and legal standards, by making an informed decision based on existing algorithms and standardised schemes.
PLO- 14	Determine the tactics and provide emergency medical care for urgent conditions (according to list 3) in a time-limited environment in accordance with existing clinical protocols and treatment standards.
PLO- 17	Perform medical manipulations (according to List 5) in a healthcare facility, at home or at work based on a preliminary clinical diagnosis and/or patient's condition indicators by making an informed decision, following the relevant ethical and legal standards.
PLO- 18	Determine the state of functioning and limitations of a person's vital activity and the duration of disability with the preparation of relevant documents, in a healthcare facility, based on data on the disease and its course, the specifics of the person's professional activity, etc. Maintain medical records for the patient and the population on the basis of regulatory documents.
PLO- 19	To plan and implement a system of anti-epidemic and preventive measures against the occurrence and spread of diseases among the population.
PLO- 20	Analyse the epidemiological situation and carry out mass and individual, general and local prevention of infectious diseases.
PLO- 21	Find the necessary information in professional literature and databases from other sources, analyse, evaluate and apply this information.
PLO- 22	Apply modern digital technologies, specialised software, statistical methods of data analysis to solve complex healthcare problems.
PLO- 23	Evaluate the impact of the environment on human health to assess the state of morbidity of the population.
PLO- 24	To organise the necessary level of individual safety (own and of persons under his/her care) in the event of typical dangerous situations in individual field of activity.
PLO- 25	Clearly and unambiguously communicate own knowledge, conclusions and arguments on healthcare and related issues to specialists and non-specialists.



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PLO- 27	Communicate fluently in the state language and English, both orally and in writing, to discuss professional activities, research and projects.
PLO- 29	Plan, organise and implement measures for the specific prevention of infectious diseases, including in accordance with the National Vaccination Schedule, both mandatory and recommended. Manage vaccine stocks, organise additional vaccination campaigns, including immunoprophylaxis activities.

5 Learning outcomes

Topic	Total	L.	Pr.	Ind.
1	2	3	4	6
Topic 1: Main clinical symptoms and syndromes of infectious diseases in children (fever, systemic inflammatory response syndrome, toxic shock syndrome, semiotics of meningitis and encephalitis, splenomegaly, rash, vomiting and diarrhoea), principles of diagnosis and treatment of infectious diseases in children antibacterial therapy, antiviral therapy, antiparasitic therapy, antifungal therapy, infusion therapy and rehydration therapy)	11	4	3	4
Topic 2. Prevention of infectious diseases (anti-epidemic measures, immunoprophylaxis, chemoprophylaxis, antimicrobial prophylaxis)	7	2	3	2
Topic 3. Herpesvirus infections. Varicella zoster. Infectious mononucleosis	8		4	4
Topic 4. Viral hepatitis	7		3	4
Topic 5. Infections with predominantly respiratory system involvement (influenza, parainfluenza, coronavirus infection/COVID-19, rhinovirus infection, RSV infection, metapneumovirus infection, bocavirus infection, measles, rubella, mumps, adenovirus infection, pertussis, diphtheria)	10		6	4
Topic 6. Acute intestinal infections with predominant gastrointestinal tract involvement (viral diarrhoea, enterovirus infection, salmonellosis, dysentery, campylobacteriosis, escherichiosis, cholera, typhoid fever)	8		4	4
Topic 7. Parasitic diseases (nematodes, cestodosis, trematodosis; protozoan diseases - malaria, amoebiasis, giardiasis, toxoplasmosis, leishmaniasis)	9	2	3	4
Topic 8: Mycoses (dermatophytosis, candidiasis, aspergillosis, histoplasmosis, nocardiosis, pneumocystis)	4		2	2
Topic 9: HIV/AIDS, AIDS opportunistic infections	4		2	2
Topic 10. Diseases transmitted by animal bites, wound infections (rabies, tetanus, rat bite disease, cat scratch disease)	4		2	2



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Topic 11. Streptococcal and staphylococcal infections	6		2	4
Topic 12: Meningococcal and Haemophilus influenzae infections.	6	2	2	2
Differential credit	6		2	4
Total hours	90	10	38	42

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Signs of discipline

Term of Teaching	Semester	International disciplinary integration	Course (year of study)	Cycles: general training/ vocational training/ free choice
2 weeks	X	Yes	5st	Vocational training

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Types of learning activities

1. LE1 Preparation for practical training
2. IL2 Self-study
3. IL3 Preparation for Step 2.
4. IL4 Analysis of clinical cases
5. IL5 Practical work with a patient in specialised hospital departments.
6. IL6 E-learning in Google-meet systems.
7. IL7 Preparation for the exam.
8. IL8 Watching educational films.
9. IL9 Working with textbooks and relevant information sources

9

Teaching and learning methods

MN1 Interactive lectures
MH2 Case-based learning (CBL). Learning based on the analysis of a clinical case, situation MH3 Team-based learning (TBL). Team-based learning
MH4 Research-based learning (RBL). Learning through research MH5 Role play
MN6 Brainstorming
MH7 Educational discussion / debate
Teaching the discipline with the use of modern teaching methods (CBL, TBL, RBL) not only contribute to the development of professional skills, but also stimulate creative and scientific activity and are aimed at training practice-oriented specialists.

10

Evaluation system and requirements

The maximum number of points for a discipline is 200 points. The ratio between the results of the assessment of current learning activities and the final control of knowledge is 60% and 40%.

The discipline ends with the final control in the form of a differential test.

Only those students who have no academic debt (all missed classes have been completed) and whose average grade for the current academic activity in the discipline is at least "3" are allowed to take the differential test.

The maximum number of points that a student can gain for current academic activities to be admitted to the exam is 120 points and is determined as the sum of the arithmetic mean of all grades obtained in the semester.

The minimum number of points that a student must score for current academic activities to be admitted to the exam is 72 points. Recalculation of the average grade for current academic performance (on a 120-point scale).

List of theoretical questions to prepare students for the final control

1. Concepts of "infection", "infectious process", "infectious disease". Features of infectious diseases in children.
2. Classification of infectious diseases.
3. Principles of diagnosis of infectious diseases in children, differences from adults.
4. Methods of specific diagnosis of infectious diseases.
5. Preventive measures, principles of immunoprophylaxis of infectious diseases.
6. Principles of treatment of infectious diseases.
7. Structure and mode of operation of an infectious diseases hospital. Indications for hospitalisation, rules for examination and discharge of patients from an infectious diseases hospital. Features of medical records.
8. General characteristics of infectious diseases with faecal-oral mechanism of transmission.
9. General characteristics of infectious diseases of the respiratory tract.
10. Influenza: etiology, epidemiology, pathogenesis, clinical course, laboratory diagnosis, differential diagnosis, complications, treatment, anti-epidemic measures, principles of immunoprophylaxis. Indications for hospitalisation.
11. Parainfluenza: etiology, epidemiology, pathogenesis, clinical course, laboratory diagnosis, differential diagnosis, complications, treatment, prevention. Indications for hospitalisation.
12. Adenovirus disease: etiology, epidemiology, pathogenesis, clinical course, laboratory diagnosis, differential diagnosis, complications, treatment, prevention. Indications for hospitalisation.
13. MS-infection: etiology, epidemiology, pathogenesis, clinical course, laboratory diagnosis, differential diagnosis, complications, treatment, prevention. Indications for hospitalisation.
14. Rhinovirus infection: etiology, epidemiology, pathogenesis, clinical course, laboratory diagnosis, differential diagnosis, complications, treatment, prevention. Indications for hospitalisation.
15. Classification of human herpes viruses. General characteristics of herpesvirus diseases.
16. Herpes infection: etiology, epidemiology, pathogenesis, classification, clinical course, laboratory diagnosis, differential diagnosis, complications, treatment, prevention. Indications for hospitalisation.
17. Varicella zoster. Herpes zoster. Etiology, epidemiology, pathogenesis, clinical course, laboratory diagnosis, differential diagnosis, complications, treatment, prevention. Indications for hospitalisation, rules for discharge of patients from the hospital.
18. Infectious mononucleosis: etiology, epidemiology, pathogenesis, classification, clinical course, laboratory diagnosis, differential diagnosis, complications, treatment, prevention. Indications for hospitalisation.
19. Features of the course of herpesvirus infections in patients with HIV/AIDS.
20. Measles: etiology, epidemiology, pathogenesis, classification, clinic, features of the course in adults, laboratory diagnosis, differential diagnosis, complications, treatment, anti-epidemic measures, principles of immunoprophylaxis. Indications for hospitalisation, rules for discharge of patients from an infectious hospital.
21. Rubella: etiology, epidemiology, pathogenesis, classification, clinic, features of the course in adults, laboratory diagnosis, differential diagnosis, complications, treatment, anti-epidemic measures, principles of immunoprophylaxis. Indications for hospitalisation, rules for discharge of patients from an infectious diseases hospital.
22. Viral mumps disease: etiology, epidemiology, pathogenesis, classification, clinic, features of the course in adults, laboratory diagnosis, differential diagnosis, complications, treatment, anti-epidemic measures, principles of immunoprophylaxis. Indications for hospitalisation, rules for discharge of patients from an infectious hospital.
23. Diphtheria: etiology, epidemiology, pathogenesis, classification, clinical course, laboratory diagnosis, differential diagnosis, complications, treatment, principles of immunoprophylaxis. Hospitalisation procedure, rules of discharge from an infectious hospital.
24. Meningococcal infection: etiology, epidemiology, pathogenesis, classification, clinical course, laboratory diagnosis, differential diagnosis, complications, principles of treatment of various clinical forms, emergency care at the pre-hospital stage, prevention. The procedure for hospitalisation, rules for discharge of patients from an infectious hospital.



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- 25.UTI: definition, pathogenesis, classification, clinical and laboratory diagnosis, principles of treatment, emergency care at the pre-hospital stage.
- 26.Cerebral oedema (COedema): definition, pathogenesis, classification, clinical and laboratory diagnosis, principles of treatment, emergency care at the pre-hospital stage.
- 27.Respiratory mycoplasmosis: etiology, epidemiology, pathogenesis, classification, clinical course, laboratory diagnosis, differential diagnosis, complications, principles of treatment of various clinical forms, prevention. Indications for hospitalisation.
- 28.Ornithosis: etiology, epidemiology, pathogenesis, classification, clinical course, laboratory diagnosis, differential diagnosis, complications, principles of treatment of various clinical forms, prevention. Indications for hospitalisation.
- 29.Legionellosis: etiology, epidemiology, pathogenesis, classification, clinical course, laboratory diagnostics, differential diagnosis, complications, principles of treatment of various clinical forms, prevention. Indications for hospitalisation.
- 30.Acute respiratory failure: definition, classification, pathogenesis, clinical and laboratory diagnosis, principles of treatment, emergency care at the pre-hospital stage.
- 31.General characteristics of blood-borne infectious diseases.
- 32.HAE: etiology, epidemiology, pathogenesis, classification, clinical course, laboratory diagnosis, differential diagnosis, complications, principles of treatment, immunoprophylaxis. Indications for hospitalisation, rules for discharge of patients from the hospital.
- 33.HAE: etiology, epidemiology, pathogenesis, classification, clinical course, laboratory diagnosis, differential diagnosis, complications, principles of treatment, prevention. Indications for hospitalisation, rules for discharge of patients from an infectious hospital.
- 34.HBV: etiology, epidemiology, pathogenesis, classification, clinical course, laboratory diagnosis, differential diagnosis, complications, principles of treatment, anti-epidemic measures, principles of immunoprophylaxis, prognosis. Indications for hospitalisation, rules for discharge of patients from an infectious hospital.
- 35.HCV: etiology, epidemiology, pathogenesis, classification, clinical course, laboratory diagnosis, differential diagnosis, complications, principles of treatment, prevention, prognosis. Indications for hospitalisation, rules for discharge of patients from an infectious hospital.
- 36.IOP: etiology, epidemiology, pathogenesis, classification, clinical course, laboratory diagnosis, differential diagnosis, complications, principles of treatment, prevention, prognosis. Indications for hospitalisation, rules for discharge of patients from an infectious hospital.
- 37.Differential diagnosis of jaundice.
- 38.Fulminant viral hepatitis: pathogenesis, clinical and laboratory diagnosis, principles of treatment.
- 39.Chronic viral hepatitis: etiology, epidemiology, pathogenesis, classification, clinical course, laboratory diagnosis, differential diagnosis, principles of treatment, prognosis.
- 40.HIV-infection: etiology, epidemiology, pathogenesis, classification, clinical course, laboratory diagnostics, differential diagnosis, complications, principles of treatment, prevention, prognosis. Procedure for hospitalisation, examination, follow-up.
- 41.AIDS-associated protozoan infections: cryptosporidiosis, isosporosis, cerebral toxoplasmosis. Clinical and laboratory diagnosis. Principles of treatment and prevention. Indications for hospitalisation.
- 42.AIDS-associated mycoses: candidiasis, pneumocystis pneumonia, cryptococcosis. Clinical and laboratory diagnosis. Principles of treatment and prevention. Indications for hospitalisation.
- 43.Feline scratch disease: etiology, epidemiology, pathogenesis, classification, clinical course, laboratory diagnosis, differential diagnosis, complications, principles of treatment, prevention, prognosis.
- 44.Giardiasis: etiology, epidemiology, pathogenesis, classification, clinical course, laboratory diagnostics, differential diagnosis, complications, principles of treatment, prevention, prognosis.
- 45.Toxoplasmosis: etiology, epidemiology, pathogenesis, classification, clinical course, laboratory diagnosis, differential diagnosis, complications, principles of treatment, prevention, prognosis.
- 46.Nematodosis in children: etiology, epidemiology, pathogenesis, classification, clinical course, laboratory diagnostics, differential diagnosis, complications, principles of treatment, prophylaxis, prognosis.
- 47.Echinococcosis: etiology, epidemiology, pathogenesis, classification, clinical course, laboratory diagnosis, differential diagnosis, complications, principles of treatment, prevention, prognosis.

12 Conditions for admission to the final control

Students who have completed all types of work and assignments provided for in the curriculum for the semester in accordance with the discipline, attended all classes provided for in the curriculum, written and submitted a medical history and have an average score for current academic activities of at least "3" (72 points on a 120-point scale) are admitted to the final control. <https://ieu.edu.ua/docs/pol-ornzvoems.pdf>

13 Discipline policy

The policy of the discipline is determined by the requirements that scientific and practical workers impose on students in the study of clinical discipline. The condition for successful educational process is personal compliance of each student of higher education institution with the rules of behaviour adopted both at the university and in society. The future doctor must have a high level of behavioural culture, behave with dignity, tact, and self-control.

The student must be on time for classes and wear academic medical uniform (white coat or surgical suit). The student must adhere to the schedule of the educational process, come to class prepared on the topic of the class. During the class, the student must not leave the classroom without the permission of the teacher; use a mobile phone and other means of communication and information without the permission of the teacher, engage in outside activities, distract other students. When writing different types of papers, the student must adhere to the rules of academic integrity.

The teacher must adhere to the curriculum, objectively assess students' knowledge and skills. During the educational process, the teacher must be aware of anti-corruption measures and not engage in corrupt activities.

14 Policy on absences and late assignments

A student who, for valid reasons, confirmed by documentary evidence, was not subject to current control has the right to pass the current control within two weeks after returning to study. A student who was absent from classes without valid reasons, did not participate in the current control activities, did not eliminate academic debt, is not allowed to take the final semester control of knowledge in this discipline, and on the day of the exam, the academic staff member gives the grade "not admitted" in the examination record. Retaking the differentiated test in the discipline is assigned subject to the completion of all types of educational, independent (individual) work provided for in the working curriculum of the discipline and is carried out in accordance with the schedule of liquidation of academic debt approved by the directorate.

<https://ieu.edu.ua/docs/pol-ornzvoems.pdf>

15 Academic integrity policy

Participants in the educational process are guided by the principles of academic integrity

<https://ieu.edu.ua/images/AndreyContent/docs/16.pdf>

16 Recommended sources of information

Main literature:

1. Atlas of paediatric infectious diseases. Red Book = Red Book Atlas of Pediatric Infectious Diseases / Carol J. Baker; translation of the 3rd English edition (edited by Prof. S.O. Kramariev) - Two languages. - 2019. - 744 c.
2. Immunoprophylaxis of infectious diseases: a study guide / L.I. Chernysheva, F.I. Lapiy, A.P. Volokha et al. 2nd edition. - 2019. - 320 c.
3. Infectious Diseases in Children: Textbook / S.O. Kramariev, O.B. Nadrage, L.V. Pipa et al. eds. + 14 p. colour.
4. Infectious Diseases in Children: Textbook (IV year of study) / L.I. Chernysheva, A.P. Volokha, A.V. Bondarenko et al. - 2017. - 1022 c.

5. Order of the Ministry of Health of Ukraine dated 23.04.2019 No. 958 "On Amendments to the Calendar of Preventive vaccinations in Ukraine"
6. Emergency infectious diseases: a textbook (higher education institutions of III-IV years of study) / V.M. Kozko, A.V. Bondarenko, G.O. Solomennyyk et al. - 2018. - 120 c.
7. Protocol for the treatment of meningococemia in children: Order of the Ministry of Health of Ukraine No. 737 of 12 October 2009 / Ministry of Health of Ukraine. - Kyiv: Ministry of Health of Ukraine, 2009. - 17 p.
8. Feigin and Cherry's Textbook of Pediatric Infectious Diseases 7th Edition. SAUNDERS. - 2013. - 3904 p.
9. Nelson textbook 21st Edition by Robert M. Kliegman, MD, Richard E. Behrman, MD, Hal B. Jenson, MD and Bonita F. Stanton, MD. Publisher: SAUNDERS. 2019. - 4264 p.

Auxiliary:

1. Atlas of infectious diseases. Second edition. Andreychyn M.A., Kopcha V.S., Kramarev S.O. et al. / Ternopil: TSMU, 2017. - 248 c.
2. Differential diagnosis of infectious diseases in children. - Donetsk - 2013. - 712c.
3. Duda O.K. Herpetic and herpesvirus infection. Study guide for doctors // Duda O.K., Krasnov M.I., Kozko V.M. - Kyiv: NMAPE, 2015. 96 p.
4. Clinical guideline "Medical care for children with HIV infection" (adopted by the meeting of paediatric infectious disease doctors / paediatricians of the regional AIDS centres on 19 March 2013).
5. Kotsiubailo L.P. Diagnostic significance of clinical symptoms in patients with salmonellosis / L.P. Kotsiubailo, O.K. Duda, V.O. Boyko, A.R. Vega, K.O. Bogdanova // Public health, No. 1-2, 2017, 123-124 pp.
6. Duda O.K.. Immunocorrection of patients with coronavirus infection and its effectiveness / O.K. Duda, V.O. Boyko, L.P. Kotsyubailo // Public Health, No. 1-2, 2017, 75-79 pp.
7. Duda O.K.. Pertussis and parapertussis: Modern approaches to diagnostics and treatment (clinical lecture) / O.K. Duda, A.R. Vega // Art of treatment, No. 3-4 (129-130), 2016, 42-49 pp.
8. Fedorchenko S.V. Chronic HCV infection: a monograph. - K.: VSI "Medicine", 2010. - 272 p.
9. Yakobysiak M. Immunology / Translated from Polish under the editorship of professor V.V. Chopiak - Vinnytsia: Nova Knyha, 2014. - 672 p.
10. Altaweel YA, Abdelaziz S, Fathy HA, AbdelBadea S. Correlative study between C-reactive protein, clinical severity, and nerve conduction studies in Guillain-Barré syndrome. Egypt J Neurol Psychiatr Neurosurg. 2018;54(1):4.
11. de Jong EP, Vossen AC, Walther FJ, Lopriore E. How to use... neonatal TORCH testing. Arch Dis Child Educ Pract Ed. 2013;98:93-98
12. Dos Santos AMP, Ferrari RG, Conte-Junior CA. Virulence Factors in Salmonella Typhi- murium: The Sagacity of a Bacterium. Curr. Microbiol. 2018 May 21;
13. Evidence-Based Pediatric Infectious Diseases. Elizabeth Elliott, Ruth Gilbert, Virginia Moyer, Michael Pichichero. - BMJ Books. - 2008. - 344 p.
14. Guarino A., Ashkenazi S., Gendrel D. et al. European Society for Pediatric Gastroenterology, Hepatology and Nutrition/European Society for Pediatric Infectious Diseases Evidence- Based Guidelines for the Management of Acute Gastroenteritis in Children in Europe: Up- date 2014. JPGN 2014; 59: e 132-152.
15. Hiyoshi H, Tiffany CR, Bronner DN, Bäumlér AJ. Typhoidal Salmonella serovars: ecological opportunity and the evolution of a new pathovar. FEMS Microbiol. Rev. 2018 Jul 01;42(4):527-541.
16. Kim ID, Chang HS, Hwang KJ. Herpes simplex virus 2 infection rate and necessity of screening during pregnancy: a clinical and seroepidemiological study. Yonsei Med J. 2012;53:401-407.
17. Mainville, G. N., Marsh, W. L. & Allen, C. M. Oral ulceration associated with concurrent her- pes simplex virus, cytomegalovirus, and Epstein-Barr virus infection in an immunocompro- mised patient. Oral

- surgery, oral medicine, oral pathology and oral radiology 119, e306–e314, <https://doi.org/10.1016/j.oooo.2014.10.019> (2015).
18. Martin RJ, Fanaroff AA, Walsh MC. Neonatal-perinatal medicine. 10th ed. Philadelphia (PA): Elsevier/Saunders; 2015
19. Memish, Z. A. et al. Seroprevalence of herpes simplex virus type 1 and type 2 and coinfection with HIV and syphilis: the first national seroprevalence survey in Saudi Arabia. *Sex. Transm. Dis.* 42, 526–532, <https://doi.org/10.1097/OLQ.0000000000000336>(2015).
20. Menta PLR, Andrade MER, Leocádio PCL, Fraga JR, Dias MTS, Cara DC, Cardoso VN, Borges LF, Capettini LSA, Aguilar EC, Alvarez-Leite JI. Wheat gluten intake increases the severity of experimental colitis and bacterial translocation by weakening of the proteins of the junctional complex. *Br. J. Nutr.* 2019 Feb;121(4):361–373.
21. Mulders, M. N. et al. Global Measles and rubella laboratory network support for elimination goals, 2010–2015. *MMWR. Morbidity and mortality weekly report* 65, 438–442, <https://doi.org/10.15585/mmwr.mm6517a3> (2016).
22. Neu N, Duchon J, Zachariah P. TORCH infections. *Clin Perinatol.* 2015;42:77–103.
23. Ovsyannikova I.G., Reid K.C., Jacobson R.M., Oberg A.L., Klee G.G., Poland G.A. Cytokine production patterns and antibody response to measles vaccine // *Vaccine*. – 2013. – № 21. – P. 3946–3953.
24. Pinninti SG, Ross SA, Shimamura M, Novak Z, Palmer AL, Ahmed A, et al. Comparison of saliva PCR assay versus rapid culture for detection of congenital cytomegalovirus infection. *Pediatr Infect Dis J.* 2015;34:536–537.
25. Principles and Practice of Pediatric Infectious Diseases. Sara S. Long, Larry K. Pickering et spp. - SAUNDERS. - 2012. - 1547 p.
26. Royal College of Obstetricians and Gynecologists. The investigation and management of the small-for-gestational-age fetus (guideline no.31) 2nd ed. London: Royal College of Obstetricians and Gynecologists; 2014.
27. Tate JE, Burton AH, Boschi-Pinto C, et al. Global, regional, and National Estimates of rotavirus mortality in children less than 5 years of age, 2000–2013. *Clin Infect Dis.* 2016;62(2):S96–S105.
28. Trojnar E, Sachsenröder J, Twardziok S, Reetz J, Otto PH, John R. Identification of an avian group A rotavirus containing a novel VP4 gene with a close relationship to those of mammalian rotaviruses. *J Gen Virol.* 2013; <https://doi.org/10.1099/vir.0.047381-0>
29. Wei D, Sardesai SR, Barton L. The C in TORCH: a cost-effective alternative to screening small-for-gestational-age infants. *Neonatology.* 2014;106:24–29
30. WHO Measles virus nomenclature update: 2012. *Releve epidemiologique hebdomadaire* 87, 73–81 (2012).

Information resources:

1. Medscape Pediatrics: <https://www.medscape.com/pediatrics>
2. Pubmed portal: <https://pubmed.ncbi.nlm.nih.gov/>
3. UpToDate: <https://www.uptodate.com/home>
4. British Medical Journal Learning: <https://new-learning.bmj.com/>
5. Центр контролю захворювань: <https://www.cdc.gov/>
6. The European Academy of Paediatrics: <https://www.eapaediatrics.eu/>
7. The American Academy of Pediatrics: <https://www.aappublications.org/>
8. European Paediatric Association/Union of National European Paediatric Societies and Associations: <http://www.epa-unepsa.org/>



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Tips for successful studying on the course

If you want to be successful in this discipline, you need to:

1. Be active, persistent, inquisitive, consistent
2. Be tidy and polite
2. Systematically prepare for practical classes
3. Perform tasks for independent work and defend them in class.
3. To be present at the class in a medical gown
4. To solve tests and tasks independently, to work actively in class.
5. Prepare presentations and crosswords on the discipline. Participate in student scientific conferences and engage in research work in the department's scientific circles.

I wish you perseverance, dedication and motivation to learn. And then success will come to you! See you in class!

Don't forget your medical gowns!