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Rector of RMU



SYLLABUS

Practical Training Programme

Specialty 560001 — General Medicine (5-year programme)

Type of Practice: ASSISTANT TO THE PARAMEDIC OF EMERGENCY
MEDICAL CARE

1. Course Information

Form of study	Full-time
Year / Semester	Year 3 / Semester 5
Total workload	4 credits (120 academic hours)
Duration	4 weeks (20 working days)
Type of assessment	Pass/Fail with rating score
Practice base	Stations and substations of the Emergency Medicine Centre (EMC) of Bishkek; emergency departments of private medical centres



2. Brief Description

Students of Year 3 work as assistants to the physician of an ambulance brigade after the 5th semester. The placement gives experience of pre-hospital emergency care in a real medical team.

3. Aim of the Practice

To master the duties of an emergency-medicine paramedic, learn to perform independently selected medical procedures and to provide first medical aid at the pre-hospital level, and to gain experience working in a real medical team.

4. Learning Objectives

- Become familiar with the structure and organisation of EMC stations / substations and their units.
- Study the organisation of an ambulance brigade (staff, ambulance equipment, medical bags, documentation).
- Study the functional duties of paramedics working in a line brigade and on independent calls.
- Study the tactical, legal and organisational aspects of paramedic work.
- Familiarise with the ethics and deontology of emergency work.
- Master practical skills in emergency care for various illnesses, acute poisoning, trauma and accidents; master pre-hospital resuscitation technique.

5. Competencies Formed

SPC-2 (Social-Personal)	Able to use techniques of professional communication, build interpersonal relations, work in a group, resolve conflicts constructively and tolerantly perceive cultural and social differences.
PC-30 (Professional)	Able to organise medical care in emergency situations, including medical evacuation.

6. The Student Must Know

- Structure and organisation of the EMC; performance indicators (departure time, arrival time, call duration); core EMC documentation.
- Functional capacity and equipment of all EMC units.
- Organisation of an ambulance brigade (vehicle layout, kit content, obstetric pack, etc.).
- Functional duties of an EMC paramedic.
- Paramedic tactics in providing emergency / urgent aid at the pre-hospital stage (ECG, CPR, gastric lavage, all types of injections, peripheral catheter, urinary catheterisation, desmurgy, splinting).
- Organisation of anti-epidemic measures during a call.



- Norms of sanitary-educational work; ethics and deontology.

7. The Student Must Be Able To

- Complete the documentation of an EMC paramedic correctly.
- Perform all types of injections (IV, IM, SC, peripheral catheter).
- Perform chest compressions and mouth-to-mouth ventilation.
- Operate equipment: ECG, tonometer, defibrillator, oxygenator, glucometer.
- Apply all types of splints and bandages.
- Perform gastric lavage using a probe.
- Counsel the patient on primary prevention and healthy lifestyle.

8. Required Skills (control table)

Handling of ambulance calls	30 — levels 2–3
ECG recording, BP and blood-glucose measurement	20 — level 2
Chest compressions, mouth-to-mouth ventilation	10 — level 2
All types of injections, splints, bandages	10 — levels 2–3
First aid at pre-hospital stage	syncope, bleeding, hypertensive crisis, angina, asphyxia, trauma, burns

Skill levels: 1 — has an idea / knows indications; 2 — knows, evaluates, takes part; 3 — performs independently.

9. Practice Diary and Reporting

- Daily entries describe all work performed during the shift.
- Day 1: a brief profile of the station / substation — number of medical, specialised and paramedic brigades, key performance indicators, equipment, governing orders.
- Daily report: number of calls attended; at least 3 calls per shift described in detail (patient's first initial, age, diagnosis, aid provided — drug and route of administration, peripheral catheter, splint, bandage, etc.).
- Participation in conferences and sanitary-educational work is recorded and signed by the supervisor.
- Final results are summarised in a consolidated report; each page of the diary is signed by the supervisor.



- Character reference is endorsed by the chief physician of the EMC and stamped with its seal — without this the practice is not credited.

10. Assessment

Final control — differentiated pass/fail examination by commission at the Simulation Centre immediately after the cycle. The student presents the practice diary with character reference. The final grade is set by the department supervisor considering the diary, the character reference and the assessment result.