Ministry of Education and Science of Ukraine
V. N. Karazin Kharkiv National University

MEDICAL EXAMINATION. ORGANIZATION OF EXAMINATION OF PERMANENT DISABILITY, ITS LEGAL BASIS. MEDICAL AND SOCIAL ASPECTS OF DISABILITY. INTERNATIONAL CLASSIFICATION OF FUNCTIONING, LIMITATIONS OF VITAL ACTIVITIES AND HEALTH

Methodical recommendations
to the self-preparation on practical classes for 4th year students
for the discipline of "Social medicine, public health"

Electronic resource

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Medical examination. Organization of examination of permanent disability, its legal
M 46 basis. Medical and social aspects of disability. International classification of functioning, limitations of vital activities and health : methodical recommendations to the self-preparation on practical classes for 4th year students for the discipline of "Social medicine, public health" [Electronic resource] / compilers O. V. Bobrova, N. H. Tsukor. – Kharkiv : V. N. Karazin KhNU, 2024. – (PDF 32 p.)

The methodical recommendations set out the main aspects of the medical examination. Organization of examination of permanent disability, its legal basis. Medical and social aspects of disability. International classification of functioning, limitations of vital activities and health. To the self-preparation on practical classes for 4th year students for the discipline of "Social medicine, public health". Methodical recommendations contain a list of tasks for performing situational tasks, test questions, a list of recommended and additional literature from the main sections of the course.

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CONTENT

1. INTRODUCTION

The curriculum of the discipline “Social medicine, public health” is developed in accordance with the Educational Professional Program of specialists’ training at the Master degree for 222 "Medicine" Specialty in the field of knowledge 22 “Healthcare”.

Characteristics of the academic discipline
"Social medicine, public health"

<table>
<tr><td>Name
indicators</td><td>Field of knowledge, direction of training, educational and qualification level</td><td>Characteristics of the academic discipline
full-time education</td></tr>
<tr><td rowspan="4">4th</td><td></td><td>Normative</td></tr>
<tr><td rowspan="5">Specialty:
222
"Medicine"</td><td>A year of training</td></tr>
<tr><td>4th</td></tr>
<tr><td>Semester</td></tr>
<tr><td rowspan="2">The total number of hours is 120</td><td>4th</td></tr>
<tr><td>Lectures</td></tr>
<tr><td rowspan="8"></td><td rowspan="8">Educational and qualification level: master's degree
Qualification: doctor</td><td>20 hours</td></tr>
<tr><td>Practical training</td></tr>
<tr><td>50 hours</td></tr>
<tr><td>Independent work</td></tr>
<tr><td>50 hours</td></tr>
<tr><td>Type of control</td></tr>
<tr><td>Differentiated scoring</td></tr>
</table>

The purpose of teaching the discipline

The purpose of the "Social Medicine, Public Health" discipline is to provide sufficient knowledge of research, analysis and evaluation of public health indicators, the health care system and to improve the organization of medical care and public health structure for medical students.

2. RECOMMENDATIONS FOR STUDYING THE TOPIC

Goal: To learn the basics of the organization of permanent medical expertise.

Methodical support:

1. Work program on the social medicine, organization of health care
2. Calendar-thematic plan on the social medicine, organization of health care, section 2.
3. Visual material on the topic of practical training (diagrams, tables, videos, etc.).

As a result of self-training, the student must know:

- Tasks of attending physicians, medical advisory commissions for the examination of persistent disability.
- Medical and social expert commissions (MSEC), their types (by administrative and territorial characteristics, by profiles).
- MSEC functions.
- Definition and assessment of disability indicators.
- Organization of medical-social expertise of permanent disability;
- Procedure and criteria for determining degrees of permanent disability.
- Organization of the expertise of permanent disability
- Medical-social expert commission: types, structure, functions.
- Types and following reasons of permanent disability.

As a result of studying the subject, the student should be able to:

Determine the tactics of the various responsible persons of medical-preventive establishments and MSEC to specific types and occurrences of permanent disability.

Questions for self-preparation of students for practical training:

- The content, purpose and procedure for filling out the main documents that are used in the examination of permanent disability.

- Definition and assessment of the MSEC's tactics regarding the establishment of causes and groups of disability in its individual types.

3. BASIC THEORETICAL MATERIAL FOR PREPARATION TO THE LESSON

Medical students should also be competent in matters of expertise and long-term permanent disability, be able to promptly identify the symptoms, decide on the time and manner of referring patients to MSEC, to determine the medical documents that are filled by a person who is on the examination of the expert committee. Note that the MSEC public body which is not limited to the examination of persons, health care facilities aimed to determine the degree of disability or extend the period of temporary incapacity. It is the body which, together with the health facility deals with prevention of disability, including medical rehabilitation and social and labor activities. Students should be able to identify activities that contribute to the return of sick and disabled people to community service.

4. DISABILITY

Disability - social impairment (maladjustment) due to limitations of human life, which is caused by damage to health with persistent dysfunction of the body, leading to the need for social protection and assistance.

Determining Total and Permanent Disability

To qualify for government benefits, a qualified health professional must determine and provide medical evidence that a mental or physical impairment is a disability. For example, the SSA accepts the determinations of a medical consultant, an individual's doctor, a psychological consultant, the results of a consultative examination, and medical experts who testify before administrative law judges in the Administration's Office of Hearing Operations.

Levels of Disability

According to the CDC a disability may affect an individual's ability to:

- Hear
- Learn
- Move
- Remember
- See
- Socialize
- Talk
- Think

According to the World Health Organization's International Classification of Functioning, Disability, and Health standards, disabilities can impact a person's ability to manage daily tasks such as bathing and eating. Disabilities may also diminish an individual's ability to engage in education, employment, interpersonal relationships, or social activities.

Some disabilities may slightly diminish a person's abilities, while some TPDs can lead to total dependence on other people. To determine compensation rates,

government agencies and insurance companies assign percentage levels to disabilities.

5. MEDICAL – SOCIAL EXPERT COMMISSIONS

Examination of persistent disability or disability is carried out by **medical and social expert commissions (MSEC),** which are subordinate to the Ministry of Health of Ukraine.

MSECs are organized based on 100 thousand adults according to the administrative-territorial principle and according to profile.

Medical – social expert commissions (MSEC)

- is organized at 1 commission per 100 thousand of the adult population by administrative-territorial division and type.
- According to administrative-territorial division MSEC is divided into:
  - regional,
  - central city,
  - - city,
  - district.

By type MSEC are:

- general profile
- specialized profile

The **general profile MSEC consist of:**

- 3 doctors-experts (therapist, surgeon, neurologist);
- physician-rehabilitologist;
- psychologist.

The **specialized profile MSEC** includes:

2 doctors of leading profile

- therapist or neurologist (1 spec. of general profile)

The main aim of MSEC

- to detect compensatory-adaptive opportunities for citizens who have

partially or

completely lost their health due to illnesses, injuries, defects that restrict their ability to live

The main functions of MSEC:

- identifying the causes that led to disability;
- appointment of disabled groups;
- counseling for people with disabilities on employment issues.

Types (causes) of invalidity (disability):

- Due to general disease;
- Due to occupational disease;
- Due to labor injury;
- Invalidity since childhood;
- In connection with the Chernobyl accident;
- Invalidity of ex-military men;
- Invalidity before labor activity comes.

Permanent disability due to general illness is established if:

 the disease was not associated with professional activities;

 the disability resulted household trauma.

Cause of disability due to occupational disease are:

- disease, which appeared under the influence of unfavorable factors or adverse conditions;
- disease course is complicated by the influence of occupational factors.

Disability **due to industrial injury** is established on the basis of reports of the accident, compiled in the workplace or the court to the fact of injury in the workplace.

Disability from childhood set teenagers up to **16 years** (students under 18) if the disease that led to the disability arose at this age and the beginning of employment.

Disability before labor activity comes is established in cases where the illness or injury that caused the disability arose after 16 years (and students - after 18 years), but before the start of work.

Disability due to the Chernobyl disaster

- is established when the relationship between illness, disability and death is detected from the effects of ionizing radiation and other harmful factors as a result of the Chernobyl disaster.

Who and when sent to MSEC?

The "Direction to MSEC" is given out by TCC (Treatment-Consultation Commission, **MAC**) of the MPE for directing patient to MSCE **after clinical examinations**, that prove temporary or permanent character of the disease, and in case of discharging a patient from the work during 4 months without break from the date of occurrence of disability or 5 months with break of temporary disability during last 12 months in connection with the same disease, at disease on tuberculosis – not later than 10 months from the date of a beginning temporary disability.

- **MSEC conducts examination of patients** by place of residence or treatment but no later than 7 days after direction.
- **If a patient because of health reasons cannot appear in MSEC**, inspection carried out at home or in hospital, where he stays for treatment.

MSEC can do 3 conclusions:

- recognized disabled (invalid) patient;
- recognized patient workable;
- allow to continue a sick-list.

6. PROCEDURE FOR DIRECTIONS ON MEDICAL SOCIAL OF THE EXPERT COMMITTEE

1. The direction of the patient to carry out inspection at MSEC health care facilities in the community or treatment of cash persistent or irreversible nature of the disease, and in the event that the patient was released from work for four months from the day of temporary disability, or within five months due to the same disease in the last twelve months, and at disease tuberculosis - during ten months of the date of disability.

2. On MSEC sent for re-examination of persons with disabilities due to changes in health status, workers with disabilities - to change the employment recommendation or amendment of the individual rehabilitation program for the disabled, etc.

3. In the event that a disabled patient medical certificate is closed on the day of receipt of the documents of the patient to MSEC, the date of determination of disability must be indicated in sick leave.

4. **Persons who are not recognized as disabled**:

- if found capable of working life time

disability ends with the date of inspection to MSEC;

- if found unfit medical certificate extended until rehabilitation or re-referral to MSEC.

5. When patients refuse referral to MSEC or untimely his arrival at the examination without good reason of the denial or absence certified by a relevant note about it in the sick leave and in the medical out-patient or in-patient.

The refusal of referral to MSEC and failure to appear without good cause to inspect MSEC is not grounds for discharge of the patient to work.

Life Activities - daily activities, which can provide a person to exist, the existence of other members of the community and society as a whole through education, communication, orientation, movement, self- control over their behavior, participation in the labor force.

Ability to live is the integration of physical, psychological and social functions of humans **Limitation of life -** the inability to perform daily activities manner and to the extent normal for a person that creates obstacles in the social environment , puts at a disadvantage compared with the healthy and shows a partial or complete loss of the ability to self-care, mobility , orientation, communication , training , monitoring behavior, as well as a significant limitation on the scope of employment, reduction in training and leads to social exclusion .

Categories (criteria) of life - the ability to self-service, mobility, orientation, monitoring their behavior, communication, training, implementation of employment.

Mobility - the ability to efficiently move around in its environment walk, run, overcome obstacles, use a personal and public transport).

Evaluation parameters - the nature walk, the pace of movement, distance, which overcomes the patient, the ability to use their own transport, the need to help others while traveling.

The ability to self-service - to efficiently perform everyday household activities and meet the needs without the help of others.

Evaluation parameters - the time interval for which there is need for help:

episodic care (at least once a month), regular (once a month), chronic care (several times a week - to regulate or several times a day - unregulated care).

The ability for orientation - the ability to orient himself in space and time, to have an idea of the surrounding objects. The main orientation of the system is the eyes and ears (assuming a normal state of mental activity , and language).

Evaluation parameters - the ability to distinguish visual images of people and objects at a distance, which increases and under different conditions (presence or absence of obstacles, familiarity with the situation), to distinguish sounds and spoken words (auditory orientation) in the absence or presence of obstacles and the degree of compensation violation hearing the perception of speech in other ways (writing, non-verbal forms) , the need to use technical means to guide and help others in various daily activities (at home, in education , in the workplace) .

Ability to communicate (communicative ability) - The ability to establish contacts with other people and maintain social relationships (socialization disorders associated with impaired mental activity are not considered here).

The primary means of communication is the spoken word, the auxiliary - reading, writing, non-verbal speech (gesture, symbolic).

Evaluation parameters - the characteristic range of people, from which it is possible to maintain contact, and the need to help others in the process of study and work.

The ability to control their behavior - the ability to act in accordance with moral and ethical and legal standards of social protection.

Evaluation parameters - the ability to recognize themselves and adhere to the established social norms, identify people and objects, and to understand the relationships between them, to perceive, interpret and react to the traditional and unusual situation, stick to personal security, personal neatness.

Learning ability - the ability to perceive, learn and accumulate knowledge, develop skills and abilities (domestic, cultural, professional, etc.) in a meaningful process of learning;

ability to vocational training - the ability to master the theoretical knowledge and practical skills and abilities specific profession.

Evaluation parameters - the possibility of training in conventional or specially created conditions (special educational institution or group training in the home, etc.), size of the program, the timing and mode of training, the possibility of development of different professions qualification level or only certain types of work, the need for special tools training and enlisting the help of others (except the teacher) persons

The ability to work - a combination of physical and spiritual possibilities of man, which is determined by the state of health, which allows him to engage in all kinds of employment.

Professional capacity - is the ability to human quality work, which provides a specific profession that allows you to realize the employment situation in a

particular area of production in accordance with the requirements of the content and scope of the production load, the adjusted mode and conditions of the working environment.

Evaluation parameters - retention or loss of employability, opportunity to work in another part of the profession, which is equal to the previous qualification, evaluation of the allowable amount of work in their profession and position, the possibility of employment in regular or specially created conditions.

Violation of occupational disability - the most common cause of social failure, which may occur primarily when other categories of life is not affected, or secondarily on the basis of disabilities.

The ability to work on a specific profession in people with life limiting other criteria may be stored in whole or in part, or restored by means of vocational rehabilitation, after which people with disabilities can work in a conventional or specially created conditions with full or part-time working hours.

Degree of Disability - the deviation from the norm of human activity. Degree of Disability is characterized by one or a combination of several of its most important of these criteria.

There are three degrees: mild expression, expression, is significant.

1. Moderately severe limitations of life due to such violations functions of organs and systems of the body that lead to Abstaining learning disabilities, communication, orientation, monitoring their behavior, movement, self-service, participation in the labor forceє

2. A marked limitation of life is caused by violation of functions organs and systems of the body, which is expressed infringement of learning opportunities, communication, orientation, monitoring their behavior, movement, self-service, participation in the labor force.

3. A significant limitation of life is due to significant violations of the functions of organs or body systems, which make it impossible or substantial impairment of the ability or the possibility of learning, communication, orientation, monitoring their

behavior, movement, self-service, participation in the labor force and are accompanied by a need for additional care (outside assistance).

Self-limitation:

Grade 1 - the ability for self-care with the use of assistive devices;

2nd degree - the ability to self-service using aids and with the help of others;

3rd degree - the inability to self-service and complete dependence on others.

Restricting the ability to move independently:

Grade 1 - the ability to move independently with a greater expenditure of time, travel with stops and reduce the distance;

2nd degree - the ability to move independently with the use of aids and (or) with the help of others;

3rd degree - the inability to move, and complete dependence on others.

Restricting the ability to learn:

Grade 1 - the ability to learn in educational institutions, subject to the general type of a special regime of the educational process, and (or) using auxiliary means by other persons (other than the staff who teaches);

2nd degree - the ability to learn only in special schools or special programs at home;

3rd degree - learning disability.

Restricting the ability to work:

Grade 1 - the ability to perform work in another specialty in the absence of lower qualifications or reducing the amount of industrial activity and inability to perform work on his previous profession;

2nd degree - the ability to perform work in special conditions, using aids and (or) a specially equipped workplace, with the help of other persons;

3rd degree - the inability to work.

Restricting ability to orientation:

1 and degree - the ability to orientation provided any additional equipment;

2 and the power - the ability to orientation by others;

3rd degree - the inability to orientation (disorientation).

Restricting the ability to communicate:

Grade 1 - the ability to communicate, which is characterized by a decrease in the rate, the decline in learning, receive and impart information;

2nd degree - the ability to communicate with supporting facilities and (or) with the help of others;

3rd degree - the inability to communicate.

Restricting the ability to control their behavior:

Grade 1 - partial decrease in the ability to self-monitor their behavior;

2nd degree - the ability to partially or completely control their behavior just by unauthorized persons;

3rd degree - the inability to control their behavior.

Social failure (maladjustment) - inability of a person to perform the normal role of his position in society, which is due to the constraints of life, taking into account age, gender, residence, education, etc., which led to an inability to independent living, failure to establish social ties and the need to help others in support of economic independence, to the impossibility of training specific to the person, including professional activities.

Social protection of disabled people - a system of government-guaranteed permanent or long-term economic, social and legal measures that provide the conditions for overcoming disabilities, replacement, compensation disabilities.

Social assistance - periodic or regular events that leads to the elimination or reduction of social failure.

Types of social support: guaranteed social assistance from the government in the form of cash (pensions, financial assistance, one-time payments), provision of technical and other means: cars, wheelchairs, orthopedic products, prints with special characters, and sound reinforcement systems detectors, as well as through the provision of medical, social, vocational rehabilitation, and consumer services.

7. REHABILITATION OF THE DISABLED

Rehabilitation of the Disabled - a system of medical, psychological, social and economic, legal, professional, educational, teaching and other activities aimed at elimination and compensation Disability and social adaptation of the disabled person. Rehabilitation of disabled persons includes: medical, professional and social rehabilitation.

Medical rehabilitation - a complex of therapeutic measures aimed at

rehabilitation and development of the affected physiological functions sick person on the identification and activation of compensatory abilities of his body in order to ensure the further conditions for the return of the disabled to active independent life.

Vocational rehabilitation - a complex of public and social activities aimed at rehabilitation patient or disabled person, the return of a person or engaging in socially useful work available to him as health conditions, taking into account individual abilities and desires in order to achieve their financial independence, self-reliance and integration with society.

Social rehabilitation - a complex of public and social activities aimed at creating and providing conditions for the social integration of the disabled in society, the restoration of his social status and capacity for independent social and kinship and household activities by targeting the social environment, social adaptation, various kinds of patronage and social services.

Rehabilitation potential - a set of biological, psycho-physiological and

social and psychological characteristics of the person, as well as the factors of the social environment that allow to realize the potential for rehabilitation.

Rehabilitation forecast - foresight of the probability of rehabilitation potential and the foreseen level of integration of people with disabilities with the community. Rehabilitation prognosis is determined not only by the level and content of rehabilitation potential and real opportunities for its use of the advanced rehabilitation technologies, tools and methods.

Employment outlook - the foresight to restore the patient's ability or continue career person with disabilities in terms of the rehabilitation. It is based on a cumulative assessment of the clinical, functional, social and hygienic parameters person. For disabled children - the possibility of assimilation of labor (professional) skills in learning and implementing them on the job market.

Social adaptation - the process of adaptation to the disabled adequate and optimum implementation of the social functions that are related to employment.

Social and Labour support - help a disabled person to obtain professional advice, career guidance, training and education, the link with the labor and directly with enterprises (including specialist) for help in finding employment, the provision of home-based work.

Occupation - the type of work that needs to identify the knowledge and skills acquired through training and experience.

Qualification - the level of general and specific training an employee who

evidenced by the legislation of documents (certificate, diploma, certificate, etc.).

Post - the official status of an employee due to his responsibilities, job rights and the nature of responsibility.

Occupation - set acquired through special training and experience in knowledge, skills and abilities required to perform certain types of work within a given profession.

The main profession - work in higher professional qualifications of other professions or skilled work that is performed for a long time.

Specially created conditions - a set of measures that provide

the necessary conditions for the disabled and the mode of operation: significantly shorter working hours with the provision of the species shown, individual rates of production, the introduction of additional breaks, strict adherence to hygiene standards, regular medical follow-up, the ability to work in whole or in part a thief in the house and other features in the operating environment.

Employment of people with disabilities in specially created conditions carried out on special workplace in special workshops, special sections on specialized facilities that are designed for people with disabilities, and in home-based environment.

Special workplace - a workplace that requires more effort on the organization of work, which include the adaptation of the basic and auxiliary equipment, technical and organizational equipment, additional equipment and providing technical adaptation to the individual people with disabilities.

Disability in adults who are determined by expert examination of medical and social expert commissions.

The decision on disability based on the assessment of the complex clinical and functional, social, educational, social, consumer and professional factors. This takes into account the nature of the disease, the degree of level affected body functions , including significantly affecting the profession , the effectiveness of treatment and rehabilitation , the state of the compensatory - adaptive capabilities of the organism, the clinical and employment outlook, the capacity for social adaptation, the need for different types of rehabilitation and social assistance, personal settings , the specific conditions and the content of jobs, education and training, age, need and opportunity for employment.

According to the " Regulations on the medical and social expertise", approved by Resolution of the Cabinet of Ministers of Ukraine dated 22 February 1992 number 83, medical and social assessment should be carried out after a full and complete medical examination, the necessary research , definitions of clinical and functional diagnosis, socio-psychological, vocational and employment forecast the results of rehabilitation, and social and vocational rehabilitation and other data that support the permanent or irreversible disease.

A patient who goes to social health expert survey, is the chairman of Leda doctor or health care facilities WCC. To address social issues administration official’s enterprise, institution, organization where the patient or his agent and the trade union committee.

The documents, which are used to determine the causal disability must be originals or notarized. Documents of foreign citizens in the MSEC be submitted in Ukrainian language and notarized. In order to objectively assess the health status and degree of Disability at examination to MSEC in each case, a comprehensive examination of the patient: a survey study of the necessary documents, all members of the examination commission MSEC and assessment of all body systems, the study of all the necessary laboratory data and functional studies.

After the adoption of the expert group on solutions disability determination of rehabilitation potential and prognosis of rehabilitation the individual program of rehabilitation, where there are specific measures for the rehabilitation of the disabled, they are to be coherent, integrated and timing of expected results and performance measures of rehabilitation.

8. DEGREE OF DISABILITY

Depending on the degree of Disability set I, II, III of disability, as well as the cause of disability:

- common disease disability from childhood;
- employment injury, occupational disease;
- wound, contusion, trauma, injury, illness related to the protection of the motherland;
- wound, contusion, trauma, injury, disease associated with being in partisan
- injury, concussion or injury associated with the fighting in the Great Patriotic War (or as a result of hostilities);
- wound, contusion, trauma, injury, disease, resulting in the performance of duty of military service;
- disease, resulting in a period of military service;
- wound, contusion, trauma, injury, disease, resulting in the performance international duty;

- wound, contusion, trauma, injury, disease, resulting in the performance of duty of military service during the liquidation of the accident at the Chernobyl nuclear power plant and other nuclear facilities and nuclear weapons tests;
- disease, trauma, injury - related work during the liquidation of the accident at the Chernobyl nuclear power plant and other nuclear facilities;
- disease associated with the effect of the accident at the Chernobyl nuclear power plant.

The criteria for the disability:

The first group of disability

The basis for the establishment of the first group of disability are persistent, severe functional impairment severity in the body caused by disease, trauma or congenital defects that lead to a significant limitation of life person, inability to self-service and cause the need for ongoing uncontrolled extraneous control, care or support.

Go to the I group includes persons with a serious health condition that is completely incapable of self-care, need to be fully continuous home care,

care or control, is dependent on others or partially capable of performing self-service individual elements that need constant home care, care or control, dependent on others to ensure that vital social and living functions.

Criteria for the I group disability: the inability to self-service

or complete dependence on others, inability of independent travel or complete dependence on others, inability to orientation (disorientation), inability to communicate, inability to control his behavior.

The second group of disability

The basis for the establishment of a second group of disability are persistent, specific gravity of functional disorders in the body caused by disease, trauma or congenital defects that lead to a significant restriction of human life while maintaining the ability to self-service, but does not cause the need for constant outside the control, care or support.

The criteria for the disability group II : the ability to self-sufficiency with the use of aids and (or) with the help of others, the ability of independent travel with the use of aids and (or) with the help of others, inability to work or ability to perform work in special conditions, using aids and (or) specially equipped workplace with the help of other persons; learning disabilities or learning ability only in special educational institutions or in special programs at home and the ability to orient in time and space with the help of others, the ability to communicate with aids, and (or) with the help of other persons, and the ability completely or partially control their behavior only by unauthorized persons.

II disability group can also belong to people who have two or more diseases that lead to disability, the effects of injury or congenital defects and their combinations, which combine functional abnormalities lead to a significant restriction of human life and its ability to work.

The second group is determined by the disabled since childhood (pupils, students) for the period training and after graduation institution submits a certificate of fitness to work as a result of their professional chances.

People with disabilities II group can perform one or the other work in special conditions: in special workshops for the disabled, where the organization is provided by a special operation (reduction of working hours, the individual production quotas, additional breaks, strict observance of hygiene, medical monitoring and systematic medical care, etc.), especially on jobs created, in terms of home-based work with individual rhythm without mandatory performance standards , with delivery of raw materials , where necessary, home and taking home the finished product.

People with disabilities II group to perform the types of work are not contraindicated including highly skilled in all institutions and enterprises of different ownership forms, where the administration provides special conditions (for example, long working hours, a small amount of work needed breaks, diet, separate room, etc.).

The third group of disability

The basis for the establishment of a third group of disability are persistent, moderately severe functional disturbances in the body caused by disease, injury or consequences of birth defects that resulted in moderately limitation of life, including disability who need social assistance and social protection.

The criteria for the disability group III: the ability to self-service with the use of aids and the ability of independent travel with a large expenditure of time , partial mobility and distances, and the ability to learn in educational establishments of the general type of subject special mode of the learning process , and (or) using auxiliary means by other persons (other than the staff , which teaches) , and the ability to orient in time, in space provided any additional equipment , and the ability to communicate, characterized by reduced speed , reduced learning , receive and impart information.

Moderately severe limitations of life is determined by the partial loss of capacity to full employment (loss of trade, a significant reduction in training volume or decrease in employment and a significant difficulty in finding a profession or employment): significant reduction in (greater than 25 %) of employment, loss of a profession or a significant reducing training and a significant difficulty in finding a profession or employment for persons who have never worked and have no profession.

9. TEST QUESTIONS FOR SELF-CONTROL

1. The doctor examined the patient's ability to work to determine the degree and duration of his disability. What type of expert activity did this doctor carry out?

A) Conducted a forensic examination

B) Conducted a medical and labor examination

C) Conducted a social examination

D) Defined health group

E) Identified the dispensary group

2. The main purpose of conducting a medical examination of disability at the initial stage is:

A) Establishment of the fact and causes of temporary disability

B) Evaluation of the quality of therapy

C) Accurate diagnosis

D) Development of preventive measures

E) Preparation of documentation for submission to the MAC

3. The leading criterion for distinguishing temporary disability from a stable one is:

A) Duration of incapacity for work

B) Frequent stay on the disability certificate

C) Degree of functional impairment

D) A favorable prognosis for labor

E) Favorable clinical prognosis

4. A 36-year-old man, a loader, suffers from cirrhosis of the liver of alcoholic etiology, decompensation stage, and ascites. Please, determine his ability to work.

A) Disabled, disability group 1

B) Disabled, disability 2 group

C) Disabled, disability 3 group

D) Able to work

E) Temporarily disabled for the period of exacerbation

5. The medical commission verifies compliance with the procedure for registering cases of temporary disability in the clinic. What commission documents should be checked?

A) Outpatient medical records

B) Statistical charts of an outpatient

C) Statistical Disease Registration Card

D) F.025 / o, temporary disability registration journal, vouchers

E) Temporary Disability Journal

6. How many disability groups are there:

A) One group

B) Two groups

C) Four groups

D) Five groups

E) Three groups

7. Worker N was temporarily incapacitated for 17 days as a result of the disease. He was treated on an outpatient basis under the supervision of a local doctor. For how many days in this case, the attending physician will personally issue a certificate of incapacity for work?

A) Up to 6 calendar days

B) Up to 10 calendar days

C) Up to 30 calendar days

D) Up to 14 calendar days

E) Up to 20 calendar days

8. The employee G. was under the supervision of an obstetrician-gynecologist of the antenatal clinic for pregnancy, which ended in physiological birth. How long should a woman be given a disability certificate at the place of observation for?

A) For 140 calendar days

B) For 70 calendar days

C) For 126 calendar days

D) For 56 calendar days

E) For 180 calendar days

9. The machine operator was treated in a rural medical dispensary where only one doctor works. How long can this doctor issue a disability certificate in person for?

A) Up to a maximum of 14 days with the next direction to the MAC

B) Maximum up to 10 days with the next direction to the MAC

C) Up to a maximum of 6 days with the next direction to the MAC

D) For the entire period of temporary disability

E) Up to a maximum of 30 days with the next direction to the MAC

10. The employee has been sick continuously for 4 months and needs further treatment. How to apply for incapacity for work?

A) Is extended by disability certificate through MAC

B) MAC establishes a temporary disability group

C) Prolonged disability certificate by the attending physician

D) Nothing

E) The patient is sent to MSEC to establish a disability group

11. A healthy woman underwent abortion surgery. There was no medical indication for the operation. How to apply for incapacity for work?

A) Disability certificate of the established form is issued

B) Incapacity for work is not formalized

C) Issued by disability certificate from 6 day

D) Issued by disability certificate by the attending physician for 3 days at a time

E) Inefficiency of out-patient treatment

12. How to register a disability for carrying out prosthetics in hospital treatment?

A) A certificate of the established form is issued for the period of treatment

B) issued by the DC for the period of inpatient treatment

C) a certificate of an unidentified form is issued

D) DC is issued for 7 days

E) A certificate is issued for 7 days, then LN

Keys: 1 – B, 2 – A, 3 – C, 4 – B, 5 – D, 6 – E, 7 – B, 8 – C, 9 – A, 10 – E, 11 – D, 12 - B

10. SITUATIONAL TASK

Analyze the situation from the point of view of the examination of disability. Determine the type of disability (by time and degree of disability), its cause and the future tactics of the doctor.

- Citizen Ivanova R.P., born in 1978, fell ill on October 15, she called home a doctor from the city polyclinic No. 5. Diagnosis - SARS. She was disabled from October 15 to October 21.
- The clerk, Solovyov P.N., born in 1962, fell ill on February 18, called home a doctor from the local clinic. The diagnosis is left-sided pneumonia, acute course. He was treated at home. He was disabled from February 18 to March 19**.**
- Citizen Mikhailova's M.M., born in 1989, child of 4 years fell ill on November, 5 . Diagnosis - SARS. The child recovered on November 13.
- Worker Petrenko I.I., born in 1959, fell on the street and broke his leg. He asked for help from a trauma clinic. He was disabled from January 9 to March 15.
- Citizen Lopatin V.T., born in 1951, suffered an ischemic stroke with right-sided hemiparesis and loss of speech on August 8. The sick person was issued a certificate of incapacity for work, MAC extended the certificate of incapacity for work up to 4 months. After treatment and rehabilitation, the functions are partially restored.

11. RECOMMENDED LITERATURE

1. Obligatory literature:

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Електронне навчальне видання комбінованого використання
Можна використовувати в локальному та мережному режимі

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МЕДИЧНИЙ ОГЛЯД. ОРГАНІЗАЦІЯ ЕКСПЕРТИЗИ СТІЙКОЇ ВТРАТИ ПРАЦЕЗДАТНОСТІ, ЇЇ ПРАВОВА ОСНОВА. МЕДИКО-СОЦІАЛЬНІ АСПЕКТИ ІНВАЛІДНОСТІ. МІЖНАРОДНА КЛАСИФІКАЦІЯ ФУНКЦІОНУВАННЯ, ОБМЕЖЕНЬ ЖИТТЄДІЯЛЬНОСТІ ТА ЗДОРОВ'Я

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до самопідготовки на практичних заняттях
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з дисципліни «Соціальна медицина, громадське здоров'я»

(Англ. мовою)

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