

On the approval of the rules for organizing the provision of medical care to persons with chronic diseases, the frequency and timing of observation, the mandatory minimum and frequency of diagnostic tests

Unofficial translation

Order of the Minister of Healthcare of the Republic of Kazakhstan dated October 23, 2020 No . RK MH-149/2020. Registered with the Ministry of Justice of the Republic of Kazakhstan on October 26, 2020 No. 21513.

Unofficial translation

In compliance with paragraph 3 of Article 88 of the Code of the Republic of Kazakhstan dated July 7, 2020 "On people's health and the health care system" **ORDER**:

- 1. To approve the Rules for organizing the provision of medical care to persons with chronic diseases of the frequency and timing of observation, the mandatory minimum and frequency of diagnostic tests in accordance with Appendix 1 to this order.
- 2. To recognize as invalid some orders of the Ministry of Health of the Republic of Kazakhstan in accordance with Appendix 2 to this order.
- 3. The Department of Medical Aid Organization of the Ministry of Health of the Republic of Kazakhstan, in accordance with the procedure established by the legislation of the Republic of Kazakhstan, shall ensure:
- 1) state registration of this order with the Ministry of Justice of the Republic of Kazakhstan;
- 2) posting this order on the Internet resource of the Ministry of Health of the Republic of Kazakhstan;
- 3) within ten working days after the state registration of this order with the Ministry of Justice of the Republic of Kazakhstan, submission to the Legal Department of the Ministry of Health of the Republic of Kazakhstan information on the implementation of the activities provided for in subparagraphs 1) and 2).
- 4. Control over the implementation of this order shall be entrusted to the supervising Vice-Minister of Health of the Republic of Kazakhstan.
- 5. This order shall be enforced upon the expiration of ten calendar days after the day of its first official publication.

The Minister of Healthcare of the Republic of Kazakhstan

A. Tsoy

Rules for organizing the provision of medical care to persons with chronic diseases, periodicity and duration of observation, mandatory minimum and frequency of diagnostic tests

Footnote. The rules are in the wording of the order of the Minister of Healthcare of the Republic of Kazakhstan dated 25.09.2024 № 73 (shall be enforced upon expiry of ten calendar days after the day of its first official publication).

Chapter 1. General provisions

- 1. These Rules for organizing the provision of medical care for persons with chronic diseases, periodicity and duration of observation, mandatory minimum and frequency of diagnostic tests (hereinafter the Rules) have been developed in accordance with <u>paragraph 3</u> of Article 88 of the Code of the Republic of Kazakhstan "On Public Health and the Healthcare System" (hereinafter the Code) and shall determine the procedure for organizing the provision of medical care to persons with chronic diseases.
 - 2. Basic concepts used in these Rules:
- 1) a list of medicines and medical devices for free and (or) preferential outpatient provision of certain categories of citizens of the Republic of Kazakhstan with certain diseases (conditions) a list of medicines, medical devices and specialized medical products purchased at the expense of budgetary funds and (or) assets of the social health insurance fund within the framework of the guaranteed volume of free medical care and (or) in the system of compulsory social health insurance in the provision of primary health care and specialized medical care in outpatient settings, including the names and characteristics of medicines, medical devices and specialized medical products in the context of certain categories of citizens of the Republic of Kazakhstan with certain diseases (conditions);
- 2) a specialized medical practitioner a medical worker with a higher medical education and a certificate in the field of healthcare:
- 3) physician (a specialized medical practiotioner) general practitioner, pediatrician, therapist of a primary health care (hereinafter referred to as PHC) medical organization;
- 4) dynamic observation systematic observation of the patient's health state, as well as provision of necessary medical care based on the results of this observation;
- 5) electronic register of dispensary patients an information system of the Ministry of Healthcare of the Republic of Kazakhstan, designed to automate all stages of dispensary observation, including personalized registration of patients suffering from chronic diseases;
- 6) the authorized body in the field of healthcare (hereinafter the authorized body) is the central executive body that carries out management and intersectoral coordination in the field of protecting the health of citizens of the Republic of Kazakhstan, medical and pharmaceutical science, medical and pharmaceutical education, sanitary and epidemiological well-being of the population, circulation of medicines and medical devices, quality of medical services (assistance);

- 7) clinical protocol scientifically proven recommendations for prevention, diagnosis, treatment, medical rehabilitation and palliative medical care for a specific disease or patient condition;
- 8) remote medical services provision of medical services for the purposes of diagnostics , treatment, medical rehabilitation and prevention of diseases and injuries, conducting examinations and assessments using digital technologies, ensuring remote interaction of medical workers with each other, with individuals and (or) their legal representatives, identification of the said individuals, as well as documentation of the actions they perform;
- 9) medical information system an information system that ensures the management of processes of healthcare entities in electronic format (hereinafter MIS);
- 10) compulsory social health insurance (hereinafter CSHI) a set of legal, economic and organizational measures to provide medical assistance to consumers of medical services at the expense of the assets of the social health insurance fund;
- 11) multidisciplinary group a group of different specialists formed depending on the nature of the disorder of the functions and structures of the patient's body and the severity of his/her clinical condition;
- 12) guaranteed volume of free medical care (hereinafter GVFMC) the volume of medical care provided at the expense of budgetary funds;
- 13) digital healthcare subject individuals and legal entities, state bodies carrying out activities or entering into public relations in the field of digital healthcare;
- 14) electronic medical record (hereinafter the record) a set of structured personal medical data related to a specific case of medical care.
- 3. Dynamic monitoring of persons with chronic diseases shall be carried out for the purpose of preventing complications, exacerbations of diseases, their prevention and medical rehabilitation in healthcare organizations providing medical care in outpatient settings, regardless of the form of ownership at the place of attachment to healthcare entities.
- 4. Dynamic monitoring of individuals with chronic diseases shall be carried out by primary health care specialists and specialized medical practitioners within the framework of the guaranteed volume of medical care and (or) in the compulsory health insurance system in accordance with healthcare standards approved by the authorized body in accordance with subparagraph 32) of Article 7 of the Code.
- 5. Persons with chronic diseases subject to dynamic observation shall be provided with medicines within the framework of outpatient drug provision (hereinafter ODP).
- 6. Persons with chronic diseases shall be subject to registration and further dynamic monitoring by a multidisciplinary group (hereinafter MDG) in accordance with the conclusion of a primary care physician or an advisory opinion of a specialized medical practitioner (or in accordance with an extract from the medical record of an inpatient).
- 7. Specialists providing dynamic monitoring in healthcare organizations shall maintain accounting and reporting documentation in accordance with the order of the acting Minister

of Healthcare of the Republic of Kazakhstan dated October 30, 2020 № ҚР ДСМ-175/2020 " On approval of forms for accounting documentation in the field of healthcare, as well as instructions for filling them out" (registered in the Register of state registration of regulatory legal acts under № 21579), (hereinafter – the order № ҚР ДСМ-175/2020), by the order of the Minister of Healthcare of the Republic of Kazakhstan dated December 22, 2020 № ҚР ДСМ-313/2020 "On approval of forms for reporting documentation in the field of healthcare" (registered in the Register of state registration of regulatory legal acts under № 21879).

- 8. The primary care physician examines and assesses the condition of newly diagnosed individuals with chronic diseases who are subject to dynamic monitoring before being registered.
- 9. Depending on the severity and course of the disease, dynamic monitoring of individuals with chronic diseases shall be carried out by a specialized medical practitioner or a primary care physician:
- 1) by a specialized medical practitioner in the presence of complications and progression of diseases with signs of decompensation;
- 2) by a primary care physician in the presence of a compensated condition, correctable complications.
- 10. The periodicity of examinations by a primary care physician, a specialized medical practitioner, or a mid-level medical worker for individuals with chronic diseases, the duration of observation, minimum volume and frequency of diagnostic tests within the framework of dynamic observation shall be carried out:
- 1) according to the list of chronic diseases subject to dynamic monitoring in primary health care organizations in accordance with <u>Appendix 1</u> to these Rules;
- 2) according to the list of chronic diseases subject to dynamic monitoring at the level of consultative and diagnostic care (hereinafter CDC) in accordance with <u>Appendix 2</u> to these Rules;
- 3) according to the list of chronic diseases subject to observation by specialized medical practioners within the framework of the guaranteed volume of medical care and (or) in the compulsory medical insurance system in accordance with Appendix 3 to these Rules.
- 11. In healthcare organizations, at the outpatient level, dynamic monitoring groups (DMG) shall be created consisting of multidisciplinary specialists under the supervision of a primary care physician or a specialized medical practitioner to carry out dynamic monitoring.

MDG assesses the severity of the patient's chronic disease in order to determine further treatment and monitoring tactics.

12. The members of the MDG shall be approved by the top managers of healthcare organizations and includes specialists to ensure a comprehensive and individual approach to providing medical care to patients with chronic diseases:

primary care physician;

specialized medical practitioners depending on the nature of the patient's illness;

nurses (district, extended practice, general practice); psychologist; social worker.

- 13. At the recommendation of a primary care physician and/or a specialized medical practitioner, the MDG, at least once a quarter, examines patients with complicated and/or atypical course of a chronic disease to determine further observation and treatment tactics.
- 14. If there are indications (worsening of the clinical picture, negative dynamics in laboratory parameters, changes in instrumental examinations), examination of persons with chronic diseases subject to dynamic observation shall be carried out in excess of the minimum volume and frequency of diagnostic tests, specified in <u>Appendices 1</u>, <u>2</u> and <u>3</u> of these Rules in accordance with clinical protocols.
- 15. Dynamic observation of persons with chronic diseases shall be carried out on a planned basis by organizing an appointment with a specialist, primary care physician, or nurse, regardless of the course of the disease, with preliminary prepared results of laboratory diagnostic services to assess the patient's condition and carry out the necessary corrective measures (hereinafter a planned appointment).
- 16. To conduct a scheduled appointment, an extended practice nurse, a specialized nurse, and a district nurse shall perform:
 - 1) registering patients for an appointment;
 - 2) notification and calling patients via telephone, SMS messages;
- 3) preparing the patient for the scheduled appointment by prescribing laboratory diagnostic services in accordance with Appendices 1, 2 and 3 of these Rules;
- 4) monitoring the patient's progress through the prescribed laboratory diagnostic services and uploading their results;
 - 5) primary interpretation of the results of laboratory diagnostic services;
- 6) provision of the results of laboratory diagnostic services to a primary care physician or a specialized medical practitioner;
- 17. At a scheduled appointment, an extended practice nurse, a specialized nurse, and a district nurse shall conduct:
- 1) nursing examination within the scope of competence (subjective examination: collection of information about the patient's health state, complaints, life history, disease history and identification of social and psychological risks);
- 2) objective examination of the patient (measurement of pulse, blood pressure, respiratory rate, height, weight, waist circumference, examination of the skin and visible mucous membranes, including examination of the feet with determination of tactile and pain sensitivity);
- 3) establishing a nursing diagnosis and performing nursing interventions in accordance with the classifier of nursing diagnoses in accordance with Appendix 4 to these Rules;
 - 4) entering the results of the planned admission into the MIS;

- 5) assessment of the results of consultative, laboratory and diagnostic tests;
- 6) issuing prescriptions for medications to continue treatment in accordance with the doctor's note on the prescription of a course of HBV therapy;
- 7) organization and control of training of the patient and family members in general care procedures and disease management;
- 8) referral to a primary care physician or specialist if the patient has complaints or pathological changes based on the results of laboratory diagnostic services;
- 9) referral to a social worker and/or psychologist if social and psychological risks are identified.
- 18. As part of dynamic observation, an extended practice nurse, a specialized nurse, and a district nurse shall:
- 1) provide an explanation to the patient on how to keep a self-monitoring diary in accordance with an individual plan for dynamic monitoring and correction;
- 2) monitor the patient's compliance with the individual plan for dynamic observation and correction, and, if necessary, call the patient for a scheduled appointment.
 - 19. At the scheduled appointment, the primary care physician/specialist shall conduct:
- 1) interview and examination of the patient, including identification of social and psychological risks;
 - 2) assessment of the results of laboratory diagnostic tests;
 - 3) drawing up an individual plan for newly accepted patients;
 - 4) adjustment of the individual plan of non-drug and drug treatment;
 - 5) study and analysis of the patient's self-monitoring diary;
- 6) assignment of the minimum scope of examination in accordance with Appendices 1, 2 and 3 to these rules;
- 7) additional examinations in accordance with clinical protocols if indicated (in accordance with paragraph 14 of these Rules);
- 8) referral for inpatient replacement and/or inpatient treatment if signs of exacerbation or progression of the disease are detected, and there are indications for round-the-clock medical supervision and treatment in inpatient conditions;
- 9) referral for medical rehabilitation in accordance with the order of the Minister of Healthcare of the Republic of Kazakhstan dated April 7, 2023 № 65 "On approval of the standard for organizing the provision of medical rehabilitation" (registered in the Register of state registration of regulatory legal acts under № 32263);
 - 10) providing recommendations to the patient on prevention and a healthy lifestyle;
- 11) examination of temporary incapacity for work, issuance of a certificate or sheet of temporary incapacity for work in accordance with the order of the Minister of Healthcare of the Republic of Kazakhstan dated November 18, 2020 № ҚР ДСМ-198/2020 "On approval of

the rules for conducting an examination of temporary incapacity for work, as well as issuing a certificate or sheet of temporary incapacity for work" (registered in the Register of state registration of regulatory legal acts under № 21660);

- 12) preparation of documents for referral to a medical and social examination (hereinafter the MSE), in accordance with <u>the order</u> of the Deputy Prime Minister Minister of Labor and Social Protection of the Republic of Kazakhstan dated June 29, 2023 № 260 "On approval of the Rules for conducting medical and social examination" (registered in the Register of state registration of regulatory legal acts under № 32922);
- 13) registration of medical documentation in the MIS. If technically impossible, it is issued in paper form, with subsequent entry into the MIS.
 - 20. As part of dynamic observation, the social worker shall carry out:
- 1) assessment of the patient's social status, including his/her living conditions, financial situation, access to healthcare services;
- 2) supporting patients in accessing social and healthcare services, such as home health care programs, social support;
- 3) develop a treatment and rehabilitation plan together with the patient and members of the MDG;
- 4) supporting patients in self-management of their own health, including working with relatives.
 - 21. As part of dynamic observation, the psychologist shall carry out:
 - 1) assessment of the psychological state of patients;
- 2) psychological support and counselling for patients facing difficulties related to their illness or treatment, including to increase patients' commitment to self-management;
 - 3) fostering patients' commitment to healthy behavior;
- 4) cooperation with specialists within the framework of the MDG to develop a comprehensive approach to the treatment and rehabilitation of patients.
- 22. Removal from dynamic observation of persons with chronic diseases shall be carried out in the event of:
- 1) recovery/improvement of the state according to the criteria and observation periods in accordance with Appendices 1, 2 and 3 to these Rules;
 - 2) change of place of attachment to the primary health care organization;
- 3) failure of the patient to appear for a scheduled appointment for a period of more than 2 years, with an active attraction of a primary health care specialist registered in the MIS
 - 4) death of the patient.
- 23. Dynamic monitoring of individuals with chronic diseases is carried out within the framework of the disease management program (hereinafter DMP).
- 24. Persons with chronic diseases subject to dynamic observation participate in the DMP for three nosologies: arterial hypertension, type 2 diabetes mellitus, and chronic heart failure.
 - 25. The criteria for selecting patients participating in the DMP shall be:

- 1) patients with primary arterial hypertension (uncomplicated);
- 2) patients with type 2 diabetes mellitus (glycosylated hemoglobin $\leq 7.0\%$);
- 3) patients with chronic heart failure (hereinafter referred to as CHF) of NYHA classes II–IV with an ejection fraction of less than 40% or with an ejection fraction of more than 40% and diastolic dysfunction of the left ventricle according to echocardiography data;
- 4) patients with risk factors identified during screening (body mass index over 30, smoking, alcohol abuse, adverse heredity, recorded high blood pressure).
- 26. Patients with several diseases are allowed to participate in the DMP, provided that they meet the selection criteria set out in paragraph 25 of these Rules.
- 27. The patient is registered in the DMP by the district nurse by entering data into the medical information system.
- 28. At each appointment, the primary care physician and/or district nurse fills out a checklist of patient's key data in accordance with clinical protocols, reflecting the results of an objective examination, the date and conclusions of consultations with a general practitioner, therapist, specialized medical practitioner, the results of laboratory and instrumental test methods, and data on the correction of drug therapy for the DMP (hereinafter the patients' observation card).
- 29. Information about the patient, objective examination data, and results of laboratory and instrumental test methods shall be entered into the MNE. The district nurse enters updated MNE information into the DMP register.
- 30. Based on the data from the DMP patients register, the PHC physician at least once a quarter divides patients' flows into groups according to their clinical and behavioral characteristics (hereinafter segmentation), determining the patient's status according to clinical characteristics:
- 1) optimal zone (green zone) when laboratory test results are not higher than the upper limit of the norm;
- 2) suboptimal (yellow zone) when laboratory test results exceed the upper limit of the norm by no more than 20%;
- 3) bad (red) zone when clinical laboratory test results exceed the upper limit of the norm by more than 20%;
- 31. According to segmentation, the primary care physician shall determine the frequency of dynamic observation, laboratory and instrumental tests, examinations by specialized medical practitioners in accordance with Appendix 5 to these Rules.
 - 32. Dynamic observation shall be carried out:
- 1) by a district nurse when the patient is in the optimal zone, through scheduled phone calls, control and monitoring of self-management to maintain normal health indicators;
- 2) by a primary care physician, if the patient is in a suboptimal zone, dynamic monitoring shall be carried out until the patient's health improves and clinical and laboratory indicators reach normal levels;

- 3) by a primary care physician, together with a specialized medical practitioner and other members of the MDG, if the patient is in a bad zone, dynamic observation shall be carried out until the patient's health improves and clinical and laboratory indicators reach normal levels.
- 33. During dynamic observation of individuals with chronic diseases within the framework of the DMP, the primary care physician, together with the patient, shall draw up an individual action plan for a short period (no more than 2 weeks), including the amount of physical activity, diet, lifestyle, and elimination of bad habits.
- 34. The coordinator of the DMP within the primary health care organization area is the primary health care physician.
- 35. Within the framework of the DMP, the primary health care physician, specialized medical practitioner, an extended practice nurse, district nurse, and a nurse of a specialized medical practitioner shall conduct scheduled appointments in accordance with paragraph 16 of these Rules.
- 36. An extended practice nurse, a specialized nurse and a district nurse within the framework of a health care institution according to segmentation, shall carry out:
 - 1) organization of the planned appointment of patients participating in the DMP;
- 2) calling and notification of the date and time of the scheduled appointment via telephone or SMS message;
- 3) preparing the patient for the scheduled appointment in accordance with Appendices 1, 2 and 3 of these Rules;
- 4) monitoring the patient's progress through the prescribed laboratory diagnostic services and uploading their results;
- 5) collection of information about the patient's health state, complaints, life history and disease history;
- 6) examination of the patient (measurement of pulse, blood pressure, respiratory rate, height, weight, waist circumference, examination of the skin and visible mucous membranes, including);
- 7) examination of the feet with determination of tactile and pain sensitivity in patients with diabetes;
 - 8) conducting a 6-minute walk test in patients with chronic heart failure;
- 9) establishing a nursing diagnosis in accordance with the classifier of nursing examinations;
- 10) implementation of nursing interventions in accordance with the established nursing diagnosis;
 - 11) motivational counseling;
 - 12) maintaining feedback with patients;
- 13) filling in the results of appointment to the register of healthcare institutions and medical information systems.

- 37. A primary health care physician within the framework of DMP, in accordance with segmentation, shall carry out:
 - 1) examination and interviewing of the patient;
 - 2) evaluation of the results of diagnostic tests;
 - 3) teaching self-management to the patient;
- 4) formulation, correction and assessment of the implementation of a short individual action plan;
 - 5) motivational counseling;
- 6) conducting an assessment of the effectiveness of activities carried out as part of the MDG.
- 38. A specialized medical practitioner shall adjust the individual examination and treatment plan.
 - 39. Within the framework of the DMP, the social worker shall carry out:
- 1) assessment of the patient's social status, including his/her living conditions, financial situation, access to health services;
- 2) supporting patients in accessing social and health services, such as home health care programs, social support;
- 3) develop a treatment and rehabilitation plan together with the patient and members of the MDG;
 - 4) organizing a telephone call with an invitation to an appointment;
- 5) supporting patients in self-management of their own health, including working with relatives.
 - 40. Within the framework of the DMP, the psychologist shall carry out:
 - 1) assessment of the psychological state of patients;
- 2) psychological support and counselling for patients facing difficulties related to their illness or treatment, including to increase patients' commitment to self-management;
 - 3) fostering patients' commitment to participation in the Health school activities;
- 4) cooperation with specialists within the framework of the MDG to develop a comprehensive approach to the treatment and rehabilitation of patients.
- 41. The patient's participation in the DMP shall be terminated if complications develop that do not allow the disease to be managed (to achieve target values according to the DMP register) using self-management, motivational counseling, including if the patient refuses.

Appendix 1
to the Rules for the provision
of medical care to persons with
chronic diseases,
periodicity and duration
of observation,
mandatory minimum and
frequency of diagnostic tests

List of chronic diseases subject to dynamic monitoring in primary health care organizations

		Periodicity of examina	ations		Minimum diagnostic tests	laboratory s	Ol
№	Nosology ICD code	examination of CSF (cerebrospinal fluid)	examination by a primary c a r e physician	examination by specialized medical practitioners	tests	frequency	Obser vation period s
1	2	3	4	5	6	7	8
Infec	tious and parasiti	c diseases					
					determination of alanine aminotransfer ase (ALA) in blood serum	Once a year	
					Determinatio n of aspartate aminotransfer ase (AST) in blood serum	Once a year	
					determination of total bilirubin by fractions in blood serum	Once a year	
					determination of creatinine in blood serum	Once a year	
					determination of AFP in blood serum	Once a year	lifelon g for
					International Normalized Ratio (INR) in serum	Once a year	chroni c viral hepati tis B,
	Chronic viral hepatitis B (Twice a year	For viral hepatitis B: Polymerase chain reaction for viral hepatitis B (HBV-DNA) quantitative	Once a year	C (fibrosi s stage F2) and D; remov a l
1	B 1 8 , including B18.0, B18.1, B18.2, B18.8)		Once a year	gastroenterolo gist and/or infectious disease	Hbs Ag ELISA	Once a year	from registr ation
				specialist	For viral hepatitis B:		after elimin

	, C and D, without liver				ELISA for hepatitis D	Once a year	ation of the
	cirrhosis				For viral hepatitis D: PCR for hepatitis D is qualitative	Once a year	virus for chroni c viral hepati
					For viral hepatitis C: PCR for hepatitis C is qualitative	Qualitative PCR: 1) before AVT 2) after AVT; Quantitative PCR: 3) 6 months after A V T (decision on deregistration); If AVT fails, monitoring once every 12 months	tis C (fibrosi s stage less than F1)
					For viral hepatitis C, PCR for genotype	Before antiviral therapy	
					Ultrasound of abdominal organs	Once a year	
					Indirect elastography (Fibroscan) of the liver	Once a year	
seas	ses of the circula	tory system		ı			
	Arterial hypertension: 2.1. Essential (primary) hypertension, I10;				Determination of low density lipoproteins in blood serum	Once a year	
	2 . 2 . Hypertensive heart disease (hypertension		Once every 6 months - for		Determination of creatinine in urine	Once a year	
	with predominant heart disease), I11; 2.3.	- for patients with medium and low risk,			Determinatio n o f microalbumin in urine	Once a year	
2	Hypertensive disease with predominant	once a month - for patients with high and very high risk, and for individuals	months - for patients with high and very high risk, and	Once a year a cardiologist	Electrocardio graphy in 12	Once a year	for life

kidney damage, I12; 2 . 4 . Hypertensive disease with predominant	with low adherence to treatment	f o r individuals with low adherence to treatment		leads with decoding hour blood pressure monitoring	Once every 2 years	
damage to the heart and kidneys, I13; 2.5. Secondary hypertension, I15				Echocardiogr aphy	Once a year	
Coronary heart disease:				Determination of low-density lipoproteins in blood serum	Once every 6 months	
3.1. Unstable angina, I20.0**;3.2. Other				Determination of creatinine in urine	Once a year	
forms of angina pectoris, I20.8;	Twice a year	Twice a year	Once a year a cardiologist	Determination of microalbumin in urine	Once a year	for life
3.3. Chronic ischemic heart disease,				Echocardiogr aphy	Once a year	
I25				Holter ECG monitoring (24 hours)	Once every 2 years	
				Treadmill test	Once every 2 years	
				International Normalized Ratio (INR) in serum	Once a week until the target is reached, then once a month;	
				determination of creatinine in blood serum	the first 3 months - monthly, then once every 3 months;	
				Determination of LDL in blood serum	the first 3 months - monthly, then once every 3 months;	
				Complete blood count 6		

3.4. Heart failure, I 50;	Once every 3 months	Once every 3 months	monthly, a cardiologist	parameters with platelet count, bleeding time, blood clotting	Twice a year	for life
				Determination of creatinine in urine	Once a year	
				Determination of microalbumin in urine	Once a year	
				Echocardiogr aphy	the first 3 months - monthly, then once every 6 months;	
				Electrocardio graphy in 12 leads with decoding	Twice a year the first year, after that, once a year	
				Chest X-ray	Once a year in the first year	
				International Normalized Ratio (INR) in serum	1 time per week until the target is reached, then 1 time per month;	
				Blood biochemistry: determination of creatinine in blood serum	the first 3 months - monthly, then once every 3 months;	
				Determination of LDL in blood serum	the first 3 months - monthly, then once every 3 months;	
3.5. Heart failure, I 50 Condition after implantation of a	Once every 3 months	Once every 3 months	monthly, a cardiologist	Complete blood count 6 parameters with platelet count, bleeding time, blood clotting	Twice a year	for life
mechanical					the first 3	

]	Echocardiography Electrocardiography in 12 leads with decoding	once er months Twice the firs after the a year Once is	a year t year, at once
					Chest X-ray Ultrasound	first y then decisio the MD	by on of OC
				1	Doppler of the brachiocephal ic trunk	in the year, the decision the MD	nen by on of
Extracranial diseases of the ebrachiocephal ic arteries: 4.1. Cerebrovascular diseases, I65-I69*** 4.2. Occlusion and stenosis of precerebral arteries not resulting in cerebral infarction, I65 4.3. Occlusion and stenosis of cerebral arteries not resulting in cerebral infarction, I65 4.3. Occlusion and stenosis of cerebral arteries not resulting in cerebral infarction, I66 4.4. Other cerebrovascular diseases, I67 4.5. Disorders of cerebral vessels in diseases classified elsewhere, I68	- Twice	a year	Once a year, a n angiosurgeon, a neurologist	ultrasou doppler h y brachio ic trunk	ograp		for life

4	4.6.				Twice a year	
	Consequences o f cerebrovascul ar diseases, I69 4 . 7 . Embolism a n d thrombosis of the artery of the upper extremities, I74.2 4.8. Aoritis in diseases classified elsewhere,					
	I79.1 4 . 9 Subarachnoid hemorrhage, I			General blood test 6 parameters	Twice a year	
	6 0 Intracerebral hemorrhage, I			International Normalized Ratio (INR)	Twice a year	-
	61 Other nontraumatic intracranial hemorrhage, I 62 Ischemic stroke, I 63 Stroke, not specified as hemorrhage or infarction, I 64	Twice a year	Once a year a neurosurgeon, a neurologist	Blood biochemistry: determination o f low-density lipoproteins in blood serum	Once a year	for life
	Heart valve lesions: 5.1. Chronic rheumatic heart diseases , I05-I09 Rheumatic diseases of the mitral valve, I05 Rheumatic diseases of the aortic valve, I06 Rheumatic diseases of					

	mitral valve disease, I34 Non-rheumatic clesions of the aortic valve, I35 Nonrheumatic lesions of the tricuspid valve, I36 Pulmonary valve disease, I37 Endocarditis, valve unspecified, I38 Endocarditis and valvular disorders in diseases classified elsewhere, I39 Arrhythmias				Electrocardio graphy in 12 leads with decoding	Once a year	
6	Arrhythmias I47, Atrial fibrillation and flutter, I48	Twice a year	Twice a year	Once a year, a cardiologist	Ultrasound Doppler of t h e brachiocephal ic trunk Holter ECG monitoring (24 hours)	Once a year	for life

7	Hereditary factor VIII deficiency (D66); Hereditary factor IX deficiency, (D67) V o n Willebrand disease (D68.0) Hereditary deficiency of other coagulation factors (D68.2)	Twice a year	Once a year	Once a year, a hematologist	General blood test 34 parameters	Once a year	for life
Respirator	ry diseases	Once			Spirography	Once a year	
	Chronic lower respiratory tract diseases: 8.1 Other chronic obstructive pulmonary disease, J44	every 6 month s (type A, B, mild, moder ate), once every 3 month s (type C , D, severe and extre mely severe)	Once a year (type A, B, mild, moderate); once every 6 months (type C, D, severe and extremely severe)	Pulmonologis t once a year (type A, B, mild, moderate); once every 6 months (type C, D, severe and extremely severe)	Pulse oximetry	At each reception	for life
	8.2. Asthma, J45	Once a year (mild) , once every 6 month s (moder ate), once	1 1	Once a year, a pulmonologis t	Spirography		for life

8		3 month s (severe)	months (moderate and severe)			Twice a year	
Diseases of the	Diseases of the upper gastrointestin al tract:	em					
	9.1. Gastroesopha geal reflux with esophagitis, K21.0		Once a year		esophagogastr oduodenosco py		
	9.2. Gastric			I .			
	and duodenal ulcer, K25- K27		Once a year				deregistration
	and duodenal ulcer, K25-		Once a year Twice a year				deregistration in the absence of clinical and
9	and duodenal ulcer, K25- K27 Gastric ulcer,	4		Once a year, a	histological examination		in the absence of clinical and instrumental signs of the
9	and duodenal ulcer, K25- K27 Gastric ulcer, K25 Duodenal	4 times	Twice a year Twice a year	Once a year, a gastroenterolo gist	examination	Once a year	in the absence of clinical and instrumental

	9.4. Polyps (polyposis) of the stomach, K31.7 9.5. Other diseases of the esophagus, K22		Once a year		category of complexity		
10	Non-infectiou s enteritis and colitis: 10.1. Crohn's disease (regional enteritis), K50	Twice	Once a year	Once a year gastroenterolo	esophagogastr oduodenosco py with histological examination of 1 block of surgical biopsy material of 3rd category of complexity	Once a year	for life
	Ulcerative colitis, K51 10.3. Other noninfectious gastroenteritis and colitis, K52	a year		gist	colonoscopy with histological examination of 1 block of surgical biopsy material of 3rd category of complexity	Once a year	
					General blood test 34 parameters with platelets determination of alanine aminotransfer ase (ALA) in blood serum Determination of aspartate aminotransfer ase (AST) in blood serum Determination of bilirubin in blood serum Determination of creatinine in blood serum	Child-Pugh Class A. Liver cirrhosis — once every 6 months Child-Pugh Class B and C — once every 3 months	

liver cirrhosis w i t h unspecified formations, dysplastic nodes: Computed tomography of the abdominal cavity with contrast		Liver cirrhosis, K70 -K76 Toxic liver injury, K71 Liver failure, not elsewhere classified, K72 Chronic hepatitis, not elsewhere classified, K73 Fibrosis and cirrhosis of the liver, K74 Other inflammatory diseases of the liver, K75 Other liver diseases, K76	Once in 3 month s	Once a year	Once a year a gastroenterolo gist or infectious disease specialist	alpha-fetoprot ein (AFP) in blood serum International Normalized Ratio (INR) in serum Blood test for GGT Ultrasound of abdominal organs Esophagogast roduodenosco py (in the absence of contraindications) Indirect pulse elastometry of the liver In case of liver cirrhosis with unspecified formations, dysplastic nodes: Computed tomography of the abdominal cavity with	Once a year Once in 6 months for PBC, biliary cirrhosis Once a year Once a year	for life
---	--	--	-------------------	-------------	--	---	--	----------

					the liver		
Diseases o	of the musculoskelet	al syste	m and connect	ive tissue			
	Arthropathy, dorsopathies: 12.1 Reactive				General blood test 6 parameters	Once a year	
	arthropathies (M02) 12.2. Rheumatoid arthritis, M 05; M 06	Twice		Once a year rheumatologis	Determination of "C" reactive protein (CRP) in blood serum	Once a year	
12	Psoriatic arthropathy, M 07.3 12.4. Ankylosing spondylitis, M45 12.5. Juvenile arthritis, M08	a year	Once a year	t , ophthalmolog ist	Determination of creatinine in blood serum	Once a year	for life
	Systemic connective tissue disorders:				Determinatio n o f creatinine in blood serum	Once a year	
	13.1. Polyarteritis nodosa, M30				General blood test 6 parameters	Once a year	
	13.2. Other necrotizing vasculopathy, M 31				General clinical urine test (General urine analysis)	Once a year	
	Systemic lupus erythematosu s, M32- M32.9 13.4. Dermatopoly myositis , M33-M33.9 13.5. Systemic sclerosis (systemic scleroderma), M.34-M34.9 13.6. Other systemic connective				Determination of "C" reactive protein (CRP) semi-quantitatively /	Once a year	

13 Diseases	tissue disorders. M35 of the endocrine syst		Twice a year	Twice a year rheumatologis t	in blood serum		for life
Diseases	of the endocrine syst	em, nut	Intolial disorde	is and metabon	Blood biochemistry: determination of glycated hemoglobin in blood serum	Twice a year	
	Diabetes mellitus type 1 in children		Once a year	Once a year, a n endocrinologi	determination of blood creatinine with calculation of glomerular filtration rate (GFR) in blood serum	Twice a year	for life
	E 10	n of LDI blood serv Determin	Determinatio n of LDL in blood serum	Twice a year	_		
					Determination of creatinine in urine	Once a year	
					Determinatio n o f microalbumin in urine	Once a year	
					Ophthalmosc opy	Once a year	
					Blood biochemistry: determination of glycated hemoglobin in blood serum	Twice a year	
14	Diabetes mellitus type	is type Once	Omac	Once a year	determination of blood creatinine with calculation of glomerular filtration rate (GFR) in blood serum	Twice a year	for life
	1 in adults E 10	a year	()nce a year				for life

					Determination of LDL in blood serum Determination of creatinine in urine Determination	Twice a year Once a year	
					n o f microalbumin in urine Ophthalmosc	Once a year	-
	Diabetes mellitus E11- E11.9	Once a year	Once a year	Once a year a n endocrinologi st	opy Blood biochemistry: determination of glycated hemoglobin in the blood, blood creatinine with calculation of glomerular filtration rate (GFR), LDL	Once a year Once a year	for life
					Determinatio n o f microalbumin in urine Ophthalmosc opy	Once a year	_
	Thyroid diseases:				Determination of thyroid stimulating hormone (TSH) in blood serum by ELISA method	Once a year	
5	15.1. Diffuse toxic goiter. Thyrotoxicosi s, E05-E05.9	Twice a year	Once a year	Once a year a n endocrinologi st	Determinatio n of free triiodothyroni ne (T3) in blood serum	Once a year	for life

	15.2. Hypothyroidi sm, E02				by ELISA method Determinatio		_
					n of free thyroxine (T4) in blood serum by ELISA method	Once a year	
Diseases o	of the nervous syster	n					
16	Epilepsy, G 40 (except G40.4)		Once a year	Once a year neurologist	Electroenceph alography	Once a year	for life
161	Other generalized epilepsies and		Once a year	Twice a year	General blood test 34 parameters	Twice a year	for life
101	epileptic syndromes (G40.4)		Once a year	neurologist	Electroenceph alography	Once a year	
17	Cerebral palsy, G 80	4 times a year	Twice a year	Once a year neurologist	GMFCS scale - determination of motor ability in children with cerebral palsy	Twice a year	for life
		J			Barthel Activity of Daily Living Index	Twice a year	
Diseases o	of the genitourinary	system					
					Determination of SCF in blood serum	Once a year	
	Glomerular diseases: 18.1. Chronic nephritic syndrome, N03	Twice a year	Twice a year	Once a year nephrologist	determination of creatinine with determination of SCF, total protein in blood serum	Twice a year	for life
	18.2. Nephrotic syndrome, N04	a year		nephrologist	determination of total protein in blood serum	Twice a year	
					Determinatio n o f		

18					creatinine in urine	Twice a year	
					Determinatio n o f microalbumin in urine	Twice a year	
	Chronic renal				General blood test 6 parameters	Twice a year	
	failure (N18), Terminal stage renal disease (General clinical urine test (GCT)	Twice a year	
	N18.0), Other manifestation	Twice a year	Once a year	Twice a year nephrologist	Blood biochemistry: determination of serum		for life
	s of chronic renal failure (N18.8)				creatinine with determination of SCF	Twice a year	
19	Chronic interstitial nephritis, N11	4 times a year	Twice a year	Once a year nephrologist	General clinical urine test (general urine analysis)	Once a year	no recurrence for 3 years
20	Prostatic hyperplasia, N40	Twice a year	Once a year		Determination of total prostate-specific antigen (PSA) in blood serum by immunochem iluminescence method	Once a year	no recurrence for 3 years
	Benign				Mammograph y (4 images),	Once a year	
21	mammary dysplasia, N60	Twice a year	Once a year		Ultrasound examination of mammary glands	Once a year	no recurrence for 3 years
	Non-inflamm atory diseases of the female genital organs				taking a smear for oncocytology	Once a year	
	22.1. Endometriosi s, N80 22.2. Polyp of female genital organs, N84						

22	22.3. Glandular hyperplasia of the endometrium, N85.0 22.4.	Twice	Once a year	Gynecologist once a year	Gynecologica 1 ultrasound (transvaginal / transabdomin	Once a year	1 year after treatment
22	Adenomatous hyperplasia of the endometrium, N85.1 22.5. Erosion and ectropion of the cervix, N86 22.6. Leukoplakia of the cervix, N88.0				al)		
	Benign ovarian neoplasm, D27	Once every 6 month s	Once a year	Gynecologist once a year	ultrasound examination of the pelvis	Once a year	no recurrence for 3 years
Certain cond	ditions arising in the	he perin	atal period				
		Once a month	for mild severity, once every 6 months up to 1 year, then		computed tomography of the chest a n d mediastinum	Once a year for 3 years	
23	Perinatal onset of bronchopulm onary dysplasia, P27.1	up to 1 year , then once as needed; for moderate and severe severity, once	pediatric	echocardiogra phy	for 3 years	3 years, may increase according to indications	
Congenital a	anomalies (malfor	mations), deformations	and chromosor	nal disorders (c	hildren)	
	Congenital heart defects in the postoperative period: 24.1. Congenital anomalies (malformation					Once every 3 months in the 1st year of observation then once every 6 months	

25	s of the oesophagus, Q39 e 25.2.	year, once every	Once every 3 months during the 1st year of life; then from the 2nd year of	Once a year, a pediatric surgeon	25.2. chest radiography for Q79 25.3. diagnostic calibration	Once a year	
	Congenital mmalformation s: a 25.1. Congenital .	nonth Then	0		electrocardiog raphic examination (12 leads) 25.1. esophagogastr oduodenosco py at Q39	Once a year Once a year	observation up to 3 years of life
24	malformation a s) of the pulmonary and tricuspid valves, Q22 24.4. Congenital anomalies (malformation s) of the aortic and mitral valves, Q23 24.5. Other congenital anomalies (malformation s) of the heart, Q24 24.6. Congenital anomalies (malformation s) of large arteries, Q25	month	Once every 3 months	Once every 3 months by a pediatric cardiologist during the first year of observation, then as indicated	echocardiography	Once every 3 months in the 1st year of observation then once every 6 months	2 years, but in pulmonary hypertension, residual shur and valve insufficiency persist - for life

diaphragmatic		life - once	bougienage	according to
hernia, Q79	From	every 6	neoanus at	indications
25.3.	the	months	Q 4 2 (
Anorectal	2nd		according to	
malformation	year		indications)	
s, Q42	of life,		Computed	
	once		tomography	
	every		of the pelvic	according to
	6		organs with	indications
	month		contrast	
	S			

Appendix 2
to the Rules for the provision
of medical care
to persons with chronic diseases,
periodicity and duration
of observation,
mandatory minimum and
frequency of diagnostic tests

List of chronic diseases subject to dynamic monitoring at the level of consultative and diagnostic care

		Periodicity of	examina	ations	Minimum lab		
Item №	Name of diseases	examination of CSF (cerebrospinal fluid)	-	examination by specialized specialists	tests	frequency	Obser vation period s
1	Tuberculosis (A15 - A19)	Once a year	Once a year	examination by a phthisiatrician once every 6 months	Chest X-ray (1 projection)	Once in 6 months	2 years
2	Human immunodeficiency virus (HIV) disease (B20- B24)	Once a year	Once a year	examination by an infectious disease specialist once every 6 months	Ultrasound of t h e hepatobiliopa ncreatic region, chest X-ray	Once a year	for life
					General blood test 34 parameters	Once a year	
					General clinical urine test (GCT)	Once a year	_

				1-2 years - once every 3	Determination n of glucose in blood serum determination of direct	Once a year	_
	Melignent and having			months, 3-5 years - once every 6	bilirubin in blood serum	Once a year	_
3	Malignant and benign neoplasms (C00-97; D00-09; D37-48, except C81-96)	Once a year	Once a year	months, then once a year by a n oncologist	determination of total bilirubin in blood serum	Once a year	for life
					determination of alanine aminotransfer ase in blood serum	Once a year	
					Determinatio n of aspartate aminotransfer ase in blood serum	Once a year	
					Ultrasound of abdominal organs	Once a year	
					Chest X-ray	Once a year	
4	Malignant neoplasms of lymphoid, hematopoietic and related tissues (C81-96)	Once a year	Once a year	1-2 years - once every 3 months, 3-5 years - once every 6 months, then once a year b y a n oncologist	General blood test 34 parameters	Twice a year	for life
5	Myelodysplastic syndromes (D46) Chronic myeloproliferative disease (D47.1)	Once a year	Once a year	1-2 years - once every 3 months, 3-5 years - once every 6 months, then once a year b y a n oncologist, hematologist	General blood test 34 parameters	Twice a year	for life
					General blood test 34 parameters	Twice a year	
					General clinical urine test (General	Twice a year	

6	Hemolytic anemia (D 56; D 56.0-D 56.2; D 56.4; D 57; D 57.0-D 57.2)	Once a year	Once a year hematologist	urine analysis) Determinatio n of direct bilirubin in blood serum	Once a year	for life
	· 2 · 2)		Once a year	Determinatio n of alanine aminotransfer ase (ALA) in blood serum	Once a year	
			an oncologist	Determinatio n of aspartate aminotransfer ase (AST) in blood serum	Once a year	
			Twice a year hematologist	General blood test 34 parameters	Twice a year	
				Determinatio n of direct bilirubin in blood serum	Twice a year	
				Determination of osmotic resistance of red blood cells	Once every 2 years	
				Electrophores is of protein fractions in blood serum and other biological fluids on the analyzer	Once every 2 years	
				Determination of the level of enzymes glucose-6 phosphate dehydrogenase, pyruvate kinase	Once every 2 years	
				Coombs test	Once every 2 years	
	Paroxysmal nocturnal			Ultrasound of t h e hepatobiliopa ncreatic region (liver,		

Idiopathic thrombocytopenic purpura (D 69.3) Once a year hematologist Once a year hematologist Twice a year hematologist Twice a year hematologist Once a year hematologist Twice a year hematologist Determinatio n of bleeding time Determinatio n of blood clotting time Complete	7	hemoglobinuria (Marchiafava-Micheli) (D 59.5)	Once a year	Once a year an oncologist	gallbladder, pancreas, spleen)	Once every 2 years	for life	
Idiopathic thrombocytopenic purpura (D 69.3) Once a year hematologist Langerhans cell histiocytosis, not elsewhere classified (D 76.0) Langerhans cell histiocytosis, not elsewhere classified (D 76.0) Conce a year endocrinologi st Twice a year hematologist Twice a year hematologist Twice a year hematologist Complete blood count; Blood biochemistry; X-ray examination of lesions in bones Computed tomography Every 3 months Computed tomography	8				test 34	Twice a year	for life	
9 Idiopathic thrombocytopenic purpura (D 69.3) Once a year hematologist I wice a year hematologist Determination of blood clotting time Complete blood count; Blood biochemistry; X-ray examination of lesions in bones Once a year endocrinologi st Once a year endocrinologi st Once a year endocrinologi st Computed tomography Every 3-6 Months Months Every 6 Months Every 6 Months					test 34	Twice a year		
Langerhans cell histiocytosis, not elsewhere classified (D 76.0) Complete blood count; Blood months Once a year endocrinologi st Once a year endocrinologi st Computed blood count; Every 3-6 months X-ray examination of lesions in bones Computed tomography Every 6	9			1	n of bleeding	Twice a year	for life	
Langerhans cell histiocytosis, not elsewhere classified (D 76.0) Computed tomography Dlood count; Blood biochemistry; X-ray examination of lesions in bones Computed tomography Every 3-6 Blood count; Blood count; Blood count; Blood biochemistry; X-ray examination of lesions in bones Every 3-6 Every 3-6 Every 3-6 Every 3-6 Every 3-6 Every 3-6 Every 3					n of blood	Twice a year		
Langerhans cell histiocytosis, not elsewhere classified (D 76.0) Once a year endocrinologi st Once a year endocrinologi st Computed tomography Every 3 months Every 3 months					blood count; Blood	Every 3-6 months		
Computed tomography Every 6	10	not elsewhere classified (D		endocrinologi	examination of lesions in	-	for life	
		/6.0)		SI	tomography	-		
Ultrasound of the abdominal cavity Every 6 months					the abdominal	Every 6		

11	Immunodeficiencies (D80-D84)	Once a year	Twice a year hematologist	General blood test 34 parameters	Twice a year	for life
				Blood biochemistry: determination of glycated hemoglobin in blood serum	Twice a year	
12	Diabetes mellitus (E10-E14)	Once a year	Once a year endocrinologi st	determination of blood creatinine with calculation of glomerular filtration rate (GFR) in blood serum	Twice a year	for life
			St	Determination of LDL in blood serum	Twice a year	
				Determination of creatinine in urine	Once a year	
				Determinatio n o f microalbumin in urine	Once a year	
				Ophthalmosc opy	Once a year	
			Once a year endocrinologi st	Determinatio n of prolactin	Once a year	obser vation for 2
13	Other conditions of pituitary hyperfunction (E22.8)	Once a year	Gynecologist once a year	Ultrasound of the pelvic organs	Once a year	years with stabili zation o f clinica l indica tors
14	Hypopituitarism (E23.0)	Once a year	Once a year endocrinologi st	Determination of adrenocortico tropic hormone (ACTH) in	Once a year	

				blood serum by ELISA method		for life
15	Deficiency of other B vitamins (E 53.1)	Once a year		Complete blood count, complete urine analysis	Twice a year	
	Classical phenylketonuria (E 70.0)		endocrinologi	General blood test 6 parameters	Twice a year	
16		Once		General clinical urine test (General clinical urine test (General urine analysis))	Once a year	for
		a year		Determinatio n of sodium (Na) in blood serum	Once a year	life
				Determination of potassium (K) in blood serum	Once a year	
	Glycogen storage diseases (E 74.0)	Once a year	Once a year endocrinologi st	General blood test 6 parameters	Once a year	
17				Determination of glucose in blood serum	Once a year	for life
	Other sphingolipidoses (E 75.2)	Once	endocrinologi	General blood test 6 parameters	Once a year	
18				General clinical urine test (General urine analysis)	Once a year	
				Determinatio n of total cholesterol in blood serum	Once a year	for
		a year		Determination of alanine aminotransfer ase (ALA) in blood serum	Once a year	nic

				Determinatio n of aspartate aminotransfer ase (AST) in blood serum	Once a year	
19	Mucopolysaccharidosis (E 76.0-E 76.2)	Once a year	Once a year endocrinologi st	Determinatio n o f creatinine in blood serum	Once a year Once a year	for
1)				Determinatio n of total protein in blood serum		life
	Porphyria (E 80.2)	Once a year	Once a year endocrinologi st	General blood test 6 parameters	Once a year Once a year	for
20				Determination of glucose in blood serum		life
	Disorders of copper metabolism (E 83.0)		endocrinologi	Blood biochemistry: determination of potassium in blood serum	Once a year Twice a year	
				Determination of sodium in blood serum		
				Determinatio n of chlorides in blood serum		
21		Once a year		Determination of creatinine in blood serum		for life
				Determinatio n of total protein in blood serum		
				Determinatio n of urea in blood serum		
				General clinical urine test (General urine analysis		

Hereditary familial amyloidosis without neuropathy (E 85.0) Once a year endocrinologi st Once a year endocrinologi on of creatinine in blood serum Once a year endocrinologi on of urea in blood serum Ultrasound of the kidneys General blood test 6 Once a year once a	Cystic fibrosis with other manifestations (E 84.8)	Once a year	Once a year endocrinologi st	Blood biochemistry: determination of total protein in blood serum Determination of total bilirubin in blood serum Determination of direct bilirubin in blood serum Determination of ALT in blood serum Determination of AST in blood serum Determination of Gerum Determination of Gerum Determination of AST in blood serum Determination of glucose in blood serum General clinical urine test (General urine analysis	Once a year	for life
familial without 85.0) Once a year endocrinologi st Once a year endocrinologi n o f creatinine in blood serum Determinatio n o f creatinine in blood serum Ultrasound of the kidneys General blood				Determination of glucose in blood serum General clinical urine test (General urine analysis) General blood test 6		
n of urea in blood serum Ultrasound of the kidneys General blood	amyloidosis without		endocrinologi	Determinatio n of total protein in blood serum Determinatio n o f creatinine in		
General blood				Determination of urea in blood serum Ultrasound of	-	_
parameters Determinatio				General blood test 6 parameters		

		gener alized epilep sies					neu gio rem	rophysiolo cal nission for ears.
28	-	elinating disease atral nervous systems (37)		Once a year	Once a year a neurologist	MRI of the brain	as indicate once every years)	itor
27	Degenerative diseases of the nervous system (G30-G32)			Once a year	Once a year a neurologist	test 6 parameters General clinical urine test (General urine analysis)	Once a yea	for life
26	Motor neuron disease (G 12.2)		e (G	Once a year	Once a year a neurologist	General clinical urine test (General urine analysis) Electroneuro myography General blood	Once a yea	
						General blood test 6 parameters	Once a yea	r
25		l and behavi ers (F00-F99)	oral	Once a year	accordance with the Standard for the provision of medical and social care in the field of	b y a psychiatrist in accordance with the Standard for the provision of medical and social care in the field of mental health	with the Standard f the provisi of medica and socia care in the field of	years after stable comp ensati on
					examination	Determination n of aspartate aminotransfer ase (AST) in blood serum examination	examinatio	
24		ers of plasma problem (E 88.0)	rotein	Once a year	Once a year endocrinologi st	n of alanine aminotransfer ase (ALA) in blood serum	Once a yea	for life r
						bilirubin in blood serum	Once a yea	r

29	and epilep tic syndr omes (G 40.4)	Once a month	Once a year, a neurologist;	Electroenceph	Once a year	Social adaptation
30	Encep halop athy, unspe cified	Once a month	Once a year, a neurologist;		as indicated (once every 2 years)	clinical and neurophysiolo gical remission for 5 years.
	(G 93.4)			Ultrasound of the kidneys		social adaptation
				General blood test 34 parameters	Twice a year	for life
31	Acute rheum atic fever (Twice a year	Once a year pediatrician, once a year	General clinical urine test (General urine analysis)	Once a year	
	I00- I02)		cardiologist	Antistreptolys in "O"	Twice a year	
				Electrocardio graphic examination (12 leads)	Twice a year	
				Electrocardio graphic examination (12 leads)	Once a year	
				Echocardiogr aphy	Once a year	
				Determination of creatinine in blood serum	Once a year	
				Determination of urea in blood serum	Once a year	
				biochemistry : definition ALT in blood serum	Twice a year	
	Prima r y			Determination of AST in blood serum	Twice a year	
32	pulmo nary	Twice a year		Determination of direct		for life

	hypert ension		Once a year cardiologist,	bilirubin in blood serum	Twice a year	
	(I 27.0)		pulmonologist	Determination of total bilirubin in blood serum	Twice a year	
				Coagulogram: determination of prothrombin time (PT) with subsequent calculation of prothrombin index (PTI) and international normalized ratio (INR) in blood plasma (PT-PTI-INR)		
33	Other interst itial lung diseas es (J 84; J 84.0; J	Twice a year	Once a year pulmonologist	General blood test 34 parameters General clinical urine test (General urine analysis	Once a year	for life
	84.1; J 84.8; J 84.9)			Spirometry Chest X-ray	_	
34	Bullo u s disord ers (L 10; L 13.0)	Once a year	Dermatologist once a year	General blood test 6 parameters	Once a year	for life
	Osteo			Determination of calcium (Ca) in blood serum	Once a year	
35	genesi s imperf ecta (Q	genesi s imperf ecta (4 times a year	4 times a year by a pediatric traumatologist in the first year of observation, then as indicated	Determination of phosphorus (P) in blood serum	Once a year	restoration of functional range of motion in the joint
	78.0)		maioaicu	Radiography of the affected segment	Once a year	

	Conge nital ichthy osis (Q 80)	4 times a year	4 times a year by a pediatric dermatologist in the first year of observation, then as indicated	General blood test 6 parameters	Once a year	for life
36				General clinical urine test (General urine analysis)	Once a year	
	Epider molys			General blood test 6 parameters		
37	i s bullos a (Q 81)	Once a year	Dermatologist once a year	General clinical urine test (General urine analysis)	Once a year	for life

Appendix 3
to the Rules for
provision of
medical care to persons
with chronic diseases,
periodicity and duration
of observation,
mandatory minimum and
frequency of diagnostic tests

List of chronic diseases subject to monitoring by specialized medical practitioners within the framework of the guaranteed volume of medical care and (or) in the compulsory health insurance system

		Periodicity of	Periodicity of examinations			Minimum laboratory and diagnostic tests		
Item №	Name of the group of diseases	examination of CSF (cerebrospina 1 fluid)	by a primary	examination b y specialized medical practitioners	tests	frequency	Observation periods	
Consequen	ces of previous in	nfectious and p	parasitic diseas	es				
1	Consequence s of previous poliomyelitis (B91)		Once a year		Electroneuro myography	Once a year	for life	
					Ultrasound of abdominal organs			
2	Condition after surgery f o r echinococco sis (B67)		Twice a year	Once a year surgeon	Ultrasound of the pleura and pleural cavity	Once a year	for life	

				Chest X-ray (2 projections)		
3	Consequence s of previous tuberculosis (B90)	Once a year		Chest X-ray (2 projections)	Twice a year	for life
Diseases of	of the blood and hematopo	pietic organs				
4	Iron deficiency anemia (D50)	Once in 6 months	Once a year hematologist	General blood test 6 parameters	Once a year	until the indicators a r e normalized
			Once a year hematologist	General blood test 34 parameters	Once a year	
5 h			Once a year - oncologist	Determinatio n of direct bilirubin in blood serum	Once a year	for life
	hemolytic	Once in 6 months		Determination of alanine aminotransferase (ALA) in blood serum	Once a year	
				Determination of aspartate aminotransfe rase (AST) in blood serum	Once a year	
			Twice a year hematologist	General blood test 34 parameters	Twice a year	
				Determinatio n of direct bilirubin in blood serum	Twice a year	
				Determination n of osmotic resistance of red blood cells	Once every 2 years	
				Electrophore sis of protein fractions in blood serum and other		

6	Acquired hemolytic anemia (D59, except D59.5)	Once in months	Once a year - oncologist	biological fluids on the analyzer Determinatio n of the level of enzymes glucose-6 phosphate dehydrogena se, pyruvate kinase	Once every 2 years	for life
				Coombs test Ultrasound of the hepatobiliop ancreatic region (liver, gallbladder, pancreas, spleen)	Once every 2 years Once every 2 years	
7	Acquired pure red cell aplasia (erythroblasto penia) (D60), other aplastic anemias (D61, except D 61.9), Acute posthemorrh agic anemia (D62), Anemia in neoplasms (D63)	Once in months	Twice a year hematologist, once a year oncologist	General	Twice a year	for life
Diseases o	f the endocrine syste	em, nutritional disorders	and metabolic d	isorders	ı	ı
				Determination of free triiodothyron ine (T3) in blood serum by ELISA method		
	Other forms o f			Determination of free thyroxine (T4) in blood		

8	hypothyroidi sm (E03), Other forms of nontoxic goiter (Nodular and mixed euthyroid goiter after surgery) (E04)	Once a year	Once a year endocrinolog ist	serum by ELISA method Determination n of antibodies to thyroid peroxidase (a-TPO) in blood serum by ELISA method Thyroid ultrasound Electrocardi ographic examination (12 leads) with		for life
9	Hypoparathy roidism (E20	Once a year	Once a year endocrinolog ist	decoding Determination n of parathyroid hormone in blood serum by ELISA method Determination n of calcium (Ca) in blood serum Determination n of	Once a year Once a year	for life
10	Hyperfunction of the pituitary gland (E22, except E22.8)	Once a year	Once a year endocrinolog ist Gynecologist once a year	prolactin	Once a year	observation for 2 years with stabilization of clinical indicators
11	Hypofunctio n and other disorders of the pituitary gland (E 23, except E 23.0)	Once a year	Once a year endocrinolog ist	Determination of adrenocortic otropic		for life

	Diabetes insipidus (E23.2)			by ELISA method	Once a year	
			Once a year endocrinolog ist	Determination of cortisol in blood serum by immunoche miluminescence method	Once a year	
12	Cushing syndrome (Determination of glucose in blood serum	Once a year	for life
	E24)			X-ray of the thoracic spine	Once a year	
				X-ray of the lumbosacral spine	Once a year	
				Ultrasound of the adrenal glands	Once a year	
13	Adrenogenit al disorders (E25)	Once a year	Once a year endocrinolog ist, urologist			observation for 5 years with stable remission
				Determination of thyroid stimulating hormone (TSH) in blood serum	Once a year	observation for 3 years with stable remission, improvement of clinical indicators
14	Ovarian dysfunction (E28)	Once a year		Determination of follicle-stimulating hormone (FSH) in blood serum	Once a year	
				Determination of luteinizing hormone (LH) in blood serum	Once a year	
				Determination of thyroid stimulating hormone (Once a year	

15	Disorders of puberty, not elsewhere classified (E30)	Once a year	Once a year gynecologist, endocrinolog ist	TSH) in blood serum Determination of follicle-stim ulating	Once a year	observation for 3 years with stable remission, improvement
			ist	hormone (FSH) in blood serum Determinatio		of clinical indicators
				n o f luteinizing hormone (LH) in blood serum	Once a year	
			Once a year endocrinolog ist	Determination of thyroid stimulating hormone (TSH) in blood serum	Once a year	observation
16	Other endocrine disorders (E34)	Once a year		Determination of follicle-stimulating hormone (FSH) in blood serum	Once a year	for 3 years, removal in case of stable remission, improvement of clinical indicators
				Determination of luteinizing hormone (LH) in blood serum	Once a year	
17	Vitamin D deficiency (E55)	Once a year	1x per year orthopedic surgeon	Biochemical blood test for calcium and phosphorus	Twice a year	within three years
Diseases	of the genitourinary system	n		I	I	I
18	Prolapse of female	Once a veer		Smear for oncocytolog y	Once every 2 years	until complete
10	genital Once a year organs (N81)		Ultrasound of the pelvic organs	Once a year	recovery	
				Determination n of thyroid stimulating hormone (TSH) in blood serum	Once a year	

19	Absence of menstruation, scanty and rare menstruation (N91)	Once a year	Once a year obstetrician-gynecologist	Determination of follicle-stimulating hormone (FSH) in blood serum	Once a year	restoration of menstrual function
				Determination of luteinizing hormone (LH) in blood serum	Once a year	
				General blood test 6 parameters	Once a year	
	Other		Once a year obstetrician-gynecologist	Determination of thyroid stimulating hormone (TSH) in blood serum	Once a year	
20	abnormal bleeding from the uterus and vagina (N93)	Once a year		Determination of follicle-stimulating hormone (FSH) in blood serum	Once a year	restoration of menstrual function
				Determination of luteinizing hormone (LH) in blood serum	Once a year	
21	Female infertility (Once a year	Once a year obstetrician-	Smear for oncocytolog y	Once a year	restoration of
	N97)		gynecologist	Ultrasound of the pelvic organs	Once a year	fertility
Diseases	of the nervous system					
22	Sequelae of inflammator y diseases of the central nervous system (G09)	Once in 6 months		ophthalmosc opy	Once a year	observation until full or partial restoration of functions is achieved

23	Parkinson's disease (G20	Once a year	Once a year a neurologist	for life
24	Other degenerative diseases of the basal ganglia (G23)	Once a year		for life
25	Migraine (G43)	Once a year	Once a year a neurologist	observation until complete or partial restoration of functions: improvement of quality of life
26	Trigeminal nerve disorders (G50)	Once a year	Once a year a neurologist	observation for 1 year subject to regression and/or stabilization o f neurological symptoms
27	Facial nerve lesion (G51)	Once a year	Once a year a neurologist	observation for 1 year subject to regression and/or stabilization o f neurological symptoms
28	Disorders of other cranial nerves (G52)	Once a year	Once a year a neurologist	observation for 1 year subject to regression and/or stabilization o f neurological symptoms
29	Disorders of nerve roots and plexuses (G54)	Once a year	Once a year a neurologist	observation for 1 year subject to regression and/or stabilization o f

						neurological symptoms
30	Myasthenia gravis and other disorders of the eneuromuscul ar junction (G70.0-G70.9)	Twice a year	Once a year a neurologist	Electroneuro myography	Once a year	for life
31	Other diseases of spinal cord (G95)	Once a year	Once a year a neurologist	General blood test 6 parameters	Once a year	for life
Eye disea	ses					
	Iridocyclitis		Once a year	Tonometry	Once a year	relief of the
32	(H20)	Once a year	ophthalmolo gist	Biomicrosco py	Once a year	inflammator y process
33	Chorioretinal dystrophies (after laser surgery) (H32)	Once a year	Once a year ophthalmolo gist	Visometry	Once a year	for life
			Once a year ophthalmolo gist	Perimetry	Once a year	
				Ophthalmosc opy	Once a year	
34	Retinal detachment	Once a year		Biomicrosco py of the eye	Once a year	for life
34	and retinal tears (H33)	Once a year	Once a year a neurologist	Optical coherence tomography	Once a year	for me
				Cycloscopy	Once a year	
				Ultrasound of the eyeball	Once a year	
35	Retinal vascular occlusions (H34)	Once a year				for life
36	Other diseases of retina (H35)	Once a year				for life
	Diseases of		Once a year	Visometry	Once a year	
37	the eyeball (Once a year	ophthalmolo	Perimetry	Once a year	for life

	Glaucoma (Once a year ophthalmolo gist	Daily tonometry (non-contact) (1 eye)	Once a year	
38 H40)		Once a year		Unloading and loading tests for glaucoma (1 eye)	Once a year	for life
				Perimetry	Once a year	
				Keratometry	Once a year	
				Gonioscopy	Once a year	
39	Refractive errors and accommodat ion (H52)	Once a year				improving visual acuity
40	Visual disturbance (H53)	Once a year				improving visual acuity
Diseases	of the hearing organs	'				
41	Conductive a n d sensorineural hearing loss (H90)	Once a year	Once a year otolaryngolo gist	Pure Tone Threshold Audiometry	Once a year	for life
Diseases	of the circulatory system	·		<u> </u>		
				General clinical urine test (GCT)	Once a year	
42	Cardiomyop athy (I42)	Once in 6 months	Once a year a cardiologist	Electrocardi ographic examination (12 leads)	Twice a year	for life
				Echocardiog raphy	Once a year	
43	Atrioventric ular block and left bundle branch block (144)	Once in 6 months	Once a year a cardiologist	Electrocardi ographic examination (12 leads) with decoding	Once a year	until complete recovery and n o recurrence for 5 years
44	Atrioventric ular block and right bundle branch block (145)	Once in 6 months	Once a year a cardiologist	Electrocardi ographic examination (12 leads) with decoding	Once a year	until complete recovery and n o recurrence for 5 years
	Hereditary a n d					

45	idiopathic neuropathy (G60)	Once a year		General blood test 6 parameters	Once a year	for life
	Diseases of		Once a year hematologist	General blood test 6 parameters	Once a year	until complete
46	capillaries (I78)	Once a year	rheumatologi st, vascular surgeon (as indicated)	General clinical urine test (general urine analysis)	Once a year	n o recurrence for 5 years
47	Atherosclero sis (I70)	Once a year	Once a year surgeon	Determination of low-density lipoproteins in blood serum	Once a year	for life
48	Aneurysm a n d dissection of the aorta (I71)	Twice a year	Once a year, a n angiosurgeo n	Ultrasound Doppler of t h e abdominal aorta and its branches	Once a year	for life
49	Other peripheral vascular diseases (173	Once a year	Once a year a surgeon or vascular surgeon			observation for 3 years in the absence of signs of disease progression
50	Other disorders of arteries and arterioles (I77)	Once a year	Once a year a surgeon or vascular surgeon			observation for 1 year in the absence of signs of disease progression
51	Phlebitis and thrombophle bitis (I80) Postphlebitic syndrome (I87) Varicose veins of the lower extremities (I83)	Once a year	Once a year surgeon, vascular surgeon	Ultrasound Doppler of the veins of the lower extremities	Once a year	observation for 2 years in the absence of signs of disease progression
Respirato	ory diseases					
52	Emphysema of the lung (J43.9)	Once a year	Once a year surgeon, pulmonologi st	Spirometry	1 time per year	for life

Diseases of	of the digestive sys	stem					
53	Other diseases of the esophagus (K22)	4 times a year	Once a year	Once a year gastroenterol ogist			observation until stable remission is achieved
54	Hernias of the anterior abdominal wall (K40- 43.9):		Once a year				observation until the hernia is eliminated
55	Gallstone disease (K80) Chronic cholecystitis (K81)		Once a year				observations until gallbladder removal, achieving stable remission
Diseases of	of the skin, subcuta	aneous tissue					
56	Atopic dermatitis (L20)		Once a year	Dermatologi st once a year	General urine analysis	Once a year	observation for 5 years with complete recovery and n o recurrence
					General blood test 6 parameters	Twice a year	
					General clinical urine test (General urine analysis)	Twice a year	
					Blood biochemistry: determinatio n of alanine aminotransfe rase (ALA),	Once a year	observation
57	Psoriasis (L40)		Once a year	Dermatologi st once a year	Determination of aspartate aminotransferase (AST) in blood serum	Once a year	observation for 5 years with complete recovery and n o recurrence
					Determinatio n of total		

				bilirubin in blood serum Determinatio n of direct bilirubin in blood serum	Once a year	_
				Determination of glucose in blood serum	Once a year	
				General blood test 6 parameters	Once a year	observation
58	Erythema multiforme (L51)	Once a year		General urine analysis	Once a year	for 5 years with complete recovery and
				Determination of direct bilirubin in blood serum	Once a year	n o recurrence
59	Granulomato us changes of the skin a n d subcutaneou s tissue (L92)	Once a year	Dermatologi st once a year	General blood test 6 parameters	Once a year	observation for 5 years with complete recovery and n o recurrence
60	Lupus erythematos us (L93)	Once a year		General blood test 6 parameters	Once a year	for life
61	Other diseases of the skin and subcutaneou s tissue, not elsewhere classified (L98)	Once a year	Dermatologi st once a year			for life
62	Facultative and obligate precancers of the skin; cutaneous horn, cysts, radiation dermatitis, xeroderma pigmentosu m, Paget's disease , Bowen's	Once a year	Dermatologi st once a year	General blood test 6 parameters	Once a year	observation for 5 years with complete recovery and

	disease , (L85.8, L72.9 , L58, Q82.1, M88, L90, L91)					n o recurrence
Diseases	of the musculoskeletal sy	rstem				
63	Arthrosis (M15-M19)	Once a year	Twice a year traumatologi st-orthopedis t	X-ray of the affected joints	Once a year	reduction of pain syndrome, signs of inflammatio n
	Consequence s of trauma - contractures,		Once a year,	General blood test 6 parameters	Once a year	improving t h e
64	ankylosis in a vicious position, osteomyelitis in adults (M21)	Once a year	traumatologi st-orthopedis t	Radiography of the affected segment	Once a year	functional range of motion in joints
65	Osteopathy a n d chondropath	Once a year	Twice a year traumatologi	General blood test 6 parameters Radiography	Once a year	observation for 3 years in the absence
	y (M80-M94)	2.140 u y 6.111	st-orthopedis t	of the affected segment	Once a year	o f exacerbation
Lesions in	the perinatal period	'				
66	Subdural hemorrhage due to birth injury (P10.0	Twice a year	Twice a year neurologist			observation until full or partial restoration of functions is achieved
67	Birth injury of the peripheral nervous system (P14)	Twice a year	Twice a year neurologist			observation until full or partial restoration of functions is achieved
Congenita	al anomalies (malformati	ons) of the eye, ear, fac	ce and neck			
68	Microcephal y (Q2)	Once a year	Twice a year neurologist			observation until full or partial restoration of functions is achieved
	Anophthalm os, microphthal			Ophthalmosc opy	Once a year	

69	mos and congenital macrophthal mos, after removal of eyes due to other ophthalmopa thology, (Q11)	Once a year	Once a year ophthalmolo gist	Perimetry	Twice a year	for life
70	Congenital malformatio ns of the ear causing hearing impairment (Q16)	Once a year	Once a year otolaryngolo gist	Pure Tone Threshold Audiometry	Once a year	for life
	Congenital	from birth to 6 months monthly,		General blood test 6 parameters	Once a year	deregistratio
71	clefts of palate and lip (Q35- Q37)	from 6 months to 6 years once every two months and according to indications	Once a year surgeon (maxillofacial surgeon)	Determination of total protein in blood serum	Twice a year	n after restoration of anatomical integrity of tissues
72	Congenital malformatio ns and deformities of the musculoskel etal system (Q65-Q79)	Once a year	Once a year, traumatologi st-orthopedis t	Radiography of one segment	Once a year	restoration of functional range of motion in the joint
Injuries			ı	I	ı	I
73	Head injuries (S06)	Twice a year				observation until full or partial restoration of functions is achieved
74	Trauma of abdomen, lower back, lumbar spine and pelvis (S30-S39)	Once a year	Once a year, traumatologi st-orthopedis t	Control radiographs of the affected segment CT scan of the spine	at 6, 12 and 36 weeks after surgery as indicated (once every 3 years)	observation until full or partial restoration of functions is
Condition	after organ and tissue tra	nsplantation			J)	
Condition	and organ and ussue lia	mspianiation				

Pregnancy-in duced hypertension without significant proteinuria, O13 Once per month Once a year creatinine in blood serum determinatio n of un	or life		General blood test 34 parameters General clinical urine test (GCT) Serum tacrolimus/ CsA level	Specialist according to indications	_	Once	arfum i	e poetn	Presence of transplanted organs and tissues (Z94)	75															
Pregnancy-in duced hypertension without significant Once per month Once per month Once per month Once per month Once a year	uring regnancy	Unce a vear	blood test 6 parameters			period	artum j	Postp	indoitti and ti	regnancy, ci															
Pregnancy-in duced hypertension without significant proteinuria, O13 Once per month Once per month Once per month Once a year determinatio n of creatinine in blood serum determinatio n of urea in blood serum determinatio n of alanine aminotransfe rase (ALA) in blood serum Determinatio n of aspartate aminotransfe rase (AST) in blood serum Determinatio n of aspartate aminotransfe rase (AST) in blood serum Determinatio n of direct bilirubin in Once a year		Once a year	clinical urine																						
Pregnancy-in duced hypertension without significant proteinuria, O13 Once per month Once a year		Once a year	n of daily proteinuria																						
duced hypertension without significant proteinuria, O13 Once per month Once a year		Once a year	n of creatinine in						Pragnancy in																
significant proteinuria, O13 Once per month Once a year		Once a year	n of urea in																					duced hypertension	
n of aspartate aminotransfe rase (AST) in blood serum Determinatio n of direct bilirubin in Once a year		Once a year	n of alanine aminotransfe rase (ALA) in blood		_		-		significant proteinuria,	76															
n of direct bilirubin in Once a year		Once a year	n of aspartate aminotransfe rase (AST) in blood																						
blood setulii		Once a year	n of direct																						
Determinatio n of indirect bilirubin in blood serum Once a year		Once a year	n of indirect bilirubin in																						

77	Diabetes mellitus originating during pregnancy O24.4,	Once a month	Once a month		General blood test 6 parameters General clinical urine test (GCT)	Once a year	during pregnancy
	Diabetes mellitus in pregnancy, unspecified O24.9				Determination of glycated hemoglobin in blood serum	Once a year	
78	Rhesus immunizatio n requiring medical care for the mother	Once a month	Once a month		Examination of the Rh factor of the fetus in Rh-negative women from 9 weeks to 13 weeks using the molecular genetic method of examining venous blood.	Once during pregnancy	during
	O36.0				If the fetus is Rh-positive, determine the titer of anti-erythroc y t e antibodies using the indirect Coombs test.	Once a month	

Appendix 4
to the Rules for the provision
of medical care to persons
with chronic diseases,
periodicity and duration
of observation, mandatory minimum
and frequency of diagnostic studies

Table 1. Classification of nursing diagnoses

A.	PHYSICAL ACTIVITY COMPONENT
A01.2	Risk of inability to perform daily activities - A01.2
A02.0	Changes in the musculoskeletal system -
B.	COMPONENT GASTROINTESTINAL TRACT
B03.0	Changes in bowel movements

B03.1	Fecal incontinence
B03.4	Intestinal obstruction
B03.5	Decreased frequency of bowel movements
C.	COMPONENT CARDIOVASCULAR SYSTEM
C05.0	Change in cardiac output
C06.0	Cardiovascular changes
C06.2	Risk of bleeding
D.	COGNITIVE / NEUROLOGICAL COMPONENT
D07.0	Cerebral changes
D07.1	Confusion
D08.0	Lack of knowledge
D08.1	Lack of knowledge about diagnostic tests
D08.2	Lack of knowledge about diet
D08.3	Lack of knowledge about the disease
D08.4	Lack of knowledge about the amount of liquid
D08.5	Lack of knowledge about taking medications
D08.7	Lack of knowledge about treatment
D09.0	Changes in the thinking process
D09.1	Memory impairment
E.	COMPONENT OF PSYCHOLOGICAL ADAPTATION
E11.0	Decreased ability to cope with family difficulties
E11.2	Inability to overcome family difficulties
E12.0	Individual problems with overcoming difficulties
E12.1	Adaptation disorder
E12.2	Problems with decision making
E12.3	Protective adaptation
E12.4	Trying to reduce anxiety/worry
E13.0	Post-traumatic reaction
E13.1	Traumatic syndrome associated with violence
E14.0	Change of spiritual state
E14.1	Mental fatigue
E52.0	Violation of social adaptation
E53.0	Sorrow
E53.1	Premonition of grief
E53.2	Dysfunctional Grief
F.	COMPONENT VOLUME OF LIQUID
F15.0	Change in liquid volume
F15.1	Fluid volume deficit
F15.2	Risk of fluid volume deficit
F15.3	Excess fluid volume
F15.4	Risk of excess fluid volume

F62.0	Electrolyte imbalance
H.	MEDICINAL COMPONENT
H21.0	Risk of side effects from taking a drug
H21.1	Polypharmacy
I.	METABOLISM COMPONENT
I22.0	Endocrine changes
I23.0	Diseases of the immune system
J.	POWER COMPONENT
J24.0	Change in diet
J24.1	Malnutrition
J24.2	Risk of malnutrition
J24.3	Overnutrition
J24.4	Risk of overnutrition
J24.5	Swallowing disorder
K.	COMPONENT OF REGULATION OF PHYSICAL PROCESSES
K25.0	Somatic condition of the patient
K25.1	Spinal cord injury
K25.2	Hyperthermia
K25.3	Hypothermia
K25.4	Violation of thermoregulation
K25.5	Risk of infection
K25.6	Infection
K25.7	Changes in the patient's condition with intracrania pressure
L.	COMPONENT OF THE RESPIRATORY SYSTEM
L26.0	Change in breathing
L26.1	Airway obstruction
L26.2	Respiratory failure
L26.3	Violation of gas exchange
L56.0	Violation of pulmonary ventilation
M.	RELATIONSHIP COMPONENT
M27.3	Sexual dysfunction
M27.4	Obsessive concern for another person
M28.0	Difficulties in communication
M28.1	Inability to express one's thoughts when speaking
M29.0	Stable marriage or loneliness
M31.0	Changes in sexual life
M32.0	Disorders of personality development
M32.1	Violation of the interrelationship of personal relationships
M32.2	Isolation from society

M32.3	Difficulty in parting with the past (housing, household items)
N.	SECURITY COMPONENT
N33.0	Risk of injury
N33.1	Risk of aspiration
N33.2	Immobilization syndrome
N33.3	Risk of poisoning
N33.4	Risk of suffocation
N33.5	Risk of injury
N33.6	Risk of falling
N34.0	Risk of violence
N34.1	Suicidal risk
N34.2	Risk of self-harm
N57.0	Risk of postoperative complications
N57.1	Postoperative complications
N57.2	Disruption of the body's condition with delayed
N57.2	recovery after surgery
N58.0	Drug Abuse/Substance Abuse
N58.1	Tobacco use
N58.2	Alcohol use/Alcoholism
N58.3	Drug Use/Drug Addiction
0.	SELF-CARE COMPONENT
O38.1	Changes in life processes
P.	SELF-ASSESSMENT COMPONENT
P40.0	State of worry and anxiety
P41.0	State of feeling fear
P42.0	Inability to assess a situation or problem
P42.1	Hopelessness/Despair
P42.2	Powerlessness/Helplessness
P43.0	Inability to personally evaluate oneself
P43.1	Disturbance of body perception-
P43.2	Mental personality disorder
P43.3	Conscious or subconscious belittling of one's capabilities, merits and talents
P43.4	Negative self-esteem towards oneself and one's abilities
Q.	SENSOR COMPONENT
Q44.0	Sensory perception disorder
Q44.1	Hearing impairment
Q44.2	Taste disturbance
Q 44.3	Disturbances in the state of the body during kinesthetic perception
Q44.4	Disturbance of the body's condition with changes in the sense of smell

Q44.5	Disturbances in the state of the body with impaired tactile sensations
Q44.6	Disorders of the body's condition in motor and sensory functions
Q44.7	Disturbances in the body's condition with changes in vision
Q45.0	Disturbance of the body's condition with a change in the feeling of comfort
Q63.0	Pain
Q63.1	Acute pain
Q63.2	Chronic pain
R.	SKIN INTEGRITY COMPONENT
R46.0	Changes in the integrity of the skin
R46.1	Disorder of the oral mucosa
R46.2	Violation of the integrity of the skin
R46.3	Risk of damage to the integrity of the skin
R46.4	Violation of the integrity of the skin during surgical intervention
R46.5	Disruption of the body's condition in case of allergy to latex
R47.0	Peripheral changes
S.	TISSUE PERFUSION COMPONENT
S48.0	Disruption of the body's condition due to problems with tissue oxygenation, including the circulatory and vascular systems
Γ.	COMPONENT OF THE UROGENITAL SYSTEM
Г49.0	Disruption of the body's condition due to changes in the genitourinary system
Г49.1	Disturbance of the body's condition in functional incontinence
Г49.2	Disturbance of the body's condition with reflex urinary incontinence
Г49.3	Disturbance of the body's condition with urinary incontinence under stress or tension
Г49.5	Disturbance of the body's condition in imperative urinary incontinence
Г49.6	Disturbance of the body's condition due to urinary retention
Г50.0	Disruption of the body's condition due to impaired renal function
U.	REPRODUCTIVE HEALTH COMPONENT
U59.0	Reproductive health risk
U 59 .1	Risk of childbearing age
U59.2	Risk of infertility
U59.3	Risks associated with contraception

U60.0	Perinatal risk
U60.1	Threat of pregnancy
U60.2	Threat in childbirth
U60.3	Threat at birth

Table 2. Classification of nursing interventions

B.	COMPONENT GASTROINTESTINAL TRACT
B06.0	Bowel care
B06.0.1	Assessment of the scope of measures/actions to control and restore bowel function
B06.0.2	Implementation of measures to control and restore bowel function
B06.0.3	Training in measures to control and restore bowel function
B06.0.4	Coordination of activities to monitor and restore bowel function or adjust nursing interventions
B06.1	Preparing the intestines for removal
B06.1.1	Assessment of the scope of activities/actions to prepare the intestines for removal
B06.1.2	Carrying out measures to prepare the intestines for removal
B06.1.3	Teach the procedures for performing bowel preparation for removal
B06.1.4	Coordination of activities for the implementation of bowel preparation for removal or correction of nursing interventions
B06.3.0	Enema
B06.3.1	Assessment of the volume of activities/actions for performing rectal administration of liquid
B06.3.2	Carrying out activities for the implementation of rectal administration of liquid
B06.3.3	Teach procedures for administering rectal fluids
B06.3.4	Coordination of activities for the implementation of rectal fluid administration or correction of nursing interventions
B07.0	Caring for a bowel stoma
B07.0.1	Assessment of the scope of activities/actions for performing intestinal stoma care
B07.0.2	Carrying out measures for the care of the intestinal stoma
B07.0.3	intestinal stoma care procedures
B07.0.4	Coordination of activities for the implementation of intestinal stoma care or adjustment of nursing interventions

B07.1	Flushing of the intestinal stoma
B07.1.1	Assessment of the scope of activities/actions to perform intestinal stoma cleansing
B07.1.2	Carrying out measures to cleanse the intestinal stoma
B07.1.3	bowel stoma cleansing procedures
B07.1.4	Coordination of activities to carry out bowel stoma cleansing or correction of nursing interventions
B62.0	Stomach care
B62.0.1	Assessment of the scope of activities/actions for the implementation of gastric care
B62.0.2	Carrying out activities to care for the stomach
B62.0.3	Teach activities to carry out gastric care
B62.0.4	Coordination of gastric care activities or adjustment of nursing interventions
C.	COMPONENT CARDIOVASCULAR SYSTEM
C08.1	Cardiological rehabilitation
C08.1.1	Assessment of the scope of activities/actions to restore heart rhythm
C08.1.2	Carrying out measures to restore heart rhythm
C08.1.3	Teach heart rhythm restoration activities
C08.1.4	Coordination of cardiac rhythm restoration activities or correction of nursing interventions
C09.0	Caring for a pacemaker
C09.0.1	Assessment of the scope of activities/actions for pacemaker care
C09.0.2	Carrying out measures for the care of a pacemaker
C09.0.3	Teach pacemaker care procedures
C09.0.4	Coordination of pacemaker care or adjustment of nursing interventions
D.	COGNITIVE / NEUROLOGICAL COMPONENT
D10.0	Behavior Care
D10.0.1	Evaluation of the scope of activities/actions to monitor the patient's reactions to stimuli
D10.0.2	Carrying out activities to monitor the patient's reactions to stimuli
D10.0.3	Teach activities to monitor patient reactions to stimuli
D10.0.4	Coordination of activities to monitor patient responses to stimuli or adjustment of nursing interventions
D11.0	Orientation to reality
D11.0.1	Evaluation of the scope of activities/actions to develop the ability to find oneself in the environment
D11.0.2	Carrying out activities to develop the ability to find oneself in the environment
D11.0.3	Teach activities to develop the ability to find oneself in the environment

D11.0.4	Coordination of activities to develop the ability to find oneself in the environment or correction of nursing interventions
D63.0	Movement control
D63.0.1	Evaluation of the scope of measures/actions to control abnormal patient mobility
D63.0.2	Implementation of measures to control abnormal patient mobility
D63.0.3	Teach measures to control abnormal patient mobility
D63.0.4	Coordination of measures to control abnormal patient mobility or correction of nursing interventions
D64.0	Providing assistance to a patient with memory loss
D64.0.1	Assessment of the scope of events/actions to restore memory
D64.0.2	Carrying out memory restoration activities
D64.0.3	Teach memory restoration activities
D64.0.4	Coordination of memory restoration activities or correction of nursing interventions
D78.0	Providing assistance to a patient with neurological diseases
D78.0.1	Assessment of the scope of activities/actions to provide assistance to a patient with neurological problems
D78.0.2	Carrying out activities to provide assistance to a patient with problems of the neurological system
D78.0.3	To teach measures to provide assistance to a patient with problems of the neurological system
D78.0.4	Coordination of activities to provide care to a patient with neurological problems or correction of nursing interventions
E.	COMPONENT OF PSYCHOLOGICAL ADAPTATION
E12.2	Stress management
E12.2.1	Assessment of the scope of activities/actions to monitor the patient's physiological responses to stimuli
E12.2.2	Carrying out activities to monitor the patient's physiological reactions to stimuli
E12.2.3	Teach measures to control physiological reactions to stimuli
E12.2.4	Coordination of activities to monitor the patient's physiological reactions to stimuli or correction of nursing interventions
E12.3	Crisis psychotherapy/Therapy
E12.3.1	Assessment of the scope of activities/actions for the implementation of crisis therapy
E12.3.2	Implementation of crisis therapy activities
E12.3.3	Train in the activities provided for crisis therapy

E12.3.4	Coordination of crisis intervention activities or adjustment of nursing interventions
E14.0	Providing assistance to a patient in the terminal stage
E14.0.1	Assessment of the scope of activities/actions for patient care during the dying period
E14.0.2	Carrying out activities to care for a patient during the dying period
E14.0.3	Teach measures for caring for a patient during the period of dying
E14.0.4	Coordination of patient care activities during the dying period or adjustment of nursing interventions
F.	COMPONENT VOLUME OF LIQUID
F15.0	Infusion therapy
F15.0.1	Assessment of the scope of activities/actions to ensure sufficient fluid intake
F15.0.2	Taking steps to consume sufficient amounts of liquid
F15.0.3	Teach measures for drinking sufficient amounts of fluids
F15.0.4	Coordination of measures to ensure adequate fluid intake or adjustment of nursing interventions
F15.1	Hydration Monitoring/Fluid Monitoring –
F15.1.1	Assessment of the scope of activities/actions to implement fluid balance control
F15.1.2	Carrying out measures to control fluid balance
F15.1.3	Teach fluid balance management measures
F15.1.4	Coordination of fluid balance management or adjustment of nursing interventions
F15.3	Fluid intake
F15.3.1	Assessment of the volume of activities/actions to determine the volume of liquid consumed
F15.3.2	Carrying out activities to determine the volume of liquid consumed
F15.3.3	Teach measures to determine the volume of liquid consumed
F15.3.4	Coordination of activities to determine the volume of fluid consumed or correction of nursing interventions
F15.4	Fluid removal
F15.4.1	Assessment of the volume of activities/actions to determine the volume of fluid removed
F15.4.2	Carrying out activities to determine the volume of excreted fluid
F15.4.3	Teach measures to determine the volume of excreted fluid
F15.4.4	Coordination of activities to determine the volume of fluid excreted or correction of nursing interventions
F79.0	Hemodynamic care

F79.0.1	Assessment of the scope of activities/actions to regulate the movement of solutions in the blood
F79.0.2	Implementation of measures to regulate the movement of solutions in the blood
F79.0.3	Teach measures to regulate the movement of solutions in the blood
F79.0.1	Coordination of activities to regulate the movement of solutions in the blood or correction of nursing interventions
F79.2	Caring for a venous catheter
F79.2.1	catheter care
F79.2.2	Carrying out activities for the care of a venous catheter
F79.2.3	Teach procedures for caring for a venous catheter
F79.2.4	catheter care activities or adjustment of nursing interventions
F79.3	Arterial Catheter Care
F79.3.1	catheter care
F79.3.2	Carrying out measures to care for an arterial catheter
F79.3.3	Teach procedures for caring for an arterial catheter
F79.3.4	catheter care activities or adjustment of nursing interventions
G.	HEALTH ATTITUDE COMPONENT
G17.1	Adult Day Center
G17.1.1	Estimation of the scope of activities/activities for the implementation of a day program for adults
G17.1.2	Carrying out activities according to the day program for adults
G17.1.3	Teach activities according to the adult day program
G17.1.4	Coordination of activities according to the adult day program or adjustment of nursing interventions
G17.3	Food delivery to your home
G17.3.1	Assessment of the scope of activities/actions to provide the patient with nutrition at home
G17.3.2	Carrying out activities to provide nutrition to the patient at home
G17.3.3	To train in the activities of providing nutrition to the patient at home
G17.3.4	Coordination of activities to provide nutrition to the patient at home or adjustment of nursing interventions
G18.2	Maintaining water balance
G18.2.1	Assessment of the scope of activities/actions to maintain water regime/balance
G18.2.2	Implementation of measures to maintain water regime/balance
G18.2.3	Teach water regime/balance measures

G18.2.4	Coordination of hydration/balance measures or adjustment of nursing interventions
G18.5	Observance of safety precautions
G18.5.1	Assessing the scope of measures/actions to comply with measures to protect against injury, danger or loss to oneself or others
G18.5.2	Carrying out activities to ensure that you or others are protected from injury, danger, or loss
G18.5.3	Teach procedures to protect yourself or others from injury, danger, or loss
G18.5.4	Coordination of activities to ensure protection from injury, danger or loss to self or others or adjustment of nursing interventions
G19.1	Human Rights Act
G19.1.1	Assessment of the scope of activities/actions related to the application for sickness benefit
G19.1.2	Carrying out activities for writing an application for sickness benefits
G19.1.3	Provide training on how to receive sickness benefits
G19.1.4	Coordination of sickness benefit activities or adjustment of nursing interventions
G19.2	Nursing care coordination
G19.2.1	Assessing the scope of activities/actions to summarize the nurse's care plan
G19.2.2	Carrying out activities to summarize the nurse's care plan
G19.2.3	Teach activities to summarize the nurse's care plan
G19.2.4	Coordination of activities to summarize the nurse's care plan or adjustment of nursing interventions
G21.0	Highly qualified medical care
G21.0.1	Assessment of the scope of activities/actions to support patient functions carried out by the medical team
G21.0.2	Carrying out activities to maintain patient functions
G21.0.3	Teach activities to maintain patient functions
G21.0.4	Coordination of activities to support patient functions or correction of nursing interventions
G21.1	Professional care by a trained caregiver
G21.1.1	Assessment of the scope of activities/actions for the implementation of care support by a caregiver
G21.1.2	Carrying out activities to support care by a caregiver
G21.1.3	Train a caregiver in caregiving activities
G21.1.4	Coordination of activities for the implementation of nursing care or correction of nursing interventions
G21.3	Advanced Practice Nurse Jobs

G21.3.1	Assessment of the scope of activities/actions for the implementation of the consultations/instructions provided by an extended practice nurse/practicing nurs
G21.3.2	Carrying out activities based on the advice/instruction provided by an extended practice nurse/practicing nurs
G21.3.3	Train in activities based on consultations/instruction provided by an extended practice nurse/nurse practitioner
G21.3.4	Coordination of activities to provide consultation instructions by an extended practice nurse/nurse practitioner or adjustment of nursing interventions
H.	MEDICINAL COMPONENT
H22.0	Nursing care for a patient after chemotherapy
H22.0.1	Assessment of the scope of activities/actions for performing patient care after chemotherapy
H22.0.2	Carrying out patient care activities after chemotherapy
H22.0.3	Teach patient care procedures after chemotherapy
H22.0.4	Coordination of patient care activities after chemotherapy or adjustment of nursing interventions
H24.1	Adverse drug reactions
H24.1.1	Evaluation of the scope of activities/actions for monitoring expected reactions to prescribed drugs
H24.1.2	Carrying out activities to monitor expected reactions t prescribed drugs
H24.1.3	Train in monitoring suspected reactions to prescribed medications
H24.1.4	Coordination of activities for monitoring suspected reactions to prescribed drugs
H24.2	Preliminary arrangement of drugs in the clinical pharmacy department
H24.2.1	Assessment of the scope of activities/actions for th continuous provision of prescribed drugs
H24.2.2	Implementation of measures for the continuous provision of prescribed drugs
H24.2.3	To train in continuous provision of prescribed medications
H24.2.4	Coordination of activities for the continuous provisio of medications or adjustment of nursing interventions
H24.3	Side effects of the drug
H24.3.1	Evaluation of the scope of activities/actions to control adverse reactions to prescribed drugs
H24.3.2	Implementation of measures to control adverse reactions to prescribed drugs
H24.3.3	To train in measures to control adverse reactions to prescribed drugs.

H24.3.4	Coordination of activities to monitor adverse reactions to prescribed drugs or correction of nursing interventions
H25.0	Nursing care after radiation therapy
H25.0.1	Assessment of the scope of activities/actions for the implementation of care after radiotherapy
H25.0.2	Carrying out post-radiation care activities
H25.0.3	To train post-radiation care
H25.0.4	Coordination of post-radiation care activities or adjustment of nursing interventions
I.	METABOLISM COMPONENT
I26.0	First aid for allergic reaction
126.0.1	Assessment of the scope of measures/actions to relieve allergic reactions/reduce symptoms
126.0.2	Carrying out measures to relieve allergic reactions reduce symptoms
126.0.3	To teach measures to relieve allergic reactions/reduce symptoms
I26.0.4	Coordination of measures to relieve allergic reactions symptom reduction or correction of nursing interventions
I27.0	Caring for a patient with diabetes
127.0.1	Assessment of the scope of activities/actions for the implementation of care for a patient with diabetes
I27.0.2	Carrying out activities to care for a patient with diabetes
127.0.3	To train measures to perform care for a patient with diabetes
I27.0.4	Coordination of activities for the implementation of care for a patient with diabetes or adjustment of nursing interventions
I65.0	Immune system care
I65.0.1	Assessment of the scope of measures/actions to implement protection against the disease
I65.0.2	Implementation of measures to protect against disease
I65.0.3	To teach measures to protect against disease
165.0.4	Coordination of activities to implement protection against the disease
J.	POWER COMPONENT
J28.0	Enteral tube care
J28.0.1	Assessment of the scope of activities/actions for care of enteral drainage tube
J28.0.2	Carrying out measures for the care of an enteral drainage tube
J28.0.3	enteral drainage tube care procedures
J28.0.4	enteral drainage tube care or adjustment of nursing interventions

J28.1	Insertion of an enteral tube
J28.1.1	Assessment of the scope of activities/actions for the installation of an enteral drainage tube
J28.1.2	Carrying out measures for the installation of an enteral drainage tube
J28.1.3	To teach procedures for inserting an enteral drainage tube
J28.1.4	enteral drainage tube placement or adjustment of nursing interventions
J28.2	Enteral tube irrigation
J28.2.1	Assessment of the scope of activities/actions for flushing the enteral tube
J28.2.2	Carrying out measures to flush the enteral tube
J28.2.3	To teach procedures for flushing the enteral tube
J28.2.4	enteral tube flushing activities or adjustment of nursing interventions
J29.2	Feeding techniques
J29.2.1	Assessment of the scope of activities/actions for the implementation of special feeding measures
J29.2.2	Implementation of measures to implement special feeding measures
J29.2.3	To train in the implementation of special feeding measures
J29.2.4	Coordination of activities for the implementation of special feeding measures or correction of nursing interventions
J29.3	Regular diet
J29.3.1	Assessing the volume of activities/actions for food nutrient intake according to established nutritional standards
J29.3.2	Implementation of food/nutrient intake activities in accordance with established nutritional standards
J29.3.3	To teach food/nutrient intake activities according to established nutritional standards
J29.3.4	Coordination of food/nutrient intake activities according to established nutritional standards or adjustment of nursing interventions
J29.4	Special diet
J29.4.1	Estimation of the volume of activities/actions for the intake of prescribed specific food/nutrients
J29.4.2	Carrying out activities to take prescribed specific food nutrients
J29.4.3	To teach steps to take prescribed specific foods nutrients
J29.4.4	Coordination of activities for the administration of prescribed specific foods/nutrients or adjustment of nursing interventions
	nationis interventions

J29.5	Enteral nutrition
J29.5.1	Assessment of the scope of activities/actions for the implementation of nutrition with special mixtures through the gastrointestinal mucosa
J29.5.2	Implementation of nutritional measures with special mixtures through the gastrointestinal mucosa
J29.5.3	To teach the procedures for administering nutrition with special mixtures through the gastrointestinal mucosa
J29.5.4	Coordination of activities for the implementation of nutrition with special mixtures through the gastrointestinal mucosa or correction of nursing interventions
J29.6	Parenteral nutrition
J29.6.1	Assessment of the scope of activities/actions for the implementation of nutrition by intravenous or subcutaneous infusion bypassing the gastrointestinal tract
J29.6.2	Implementation of measures to provide nutrition by intravenous or subcutaneous infusion bypassing the gastrointestinal tract
J29.6.3	To teach measures for performing nutrition by intravenous or subcutaneous infusion bypassing the gastrointestinal tract
J29.6.4	Coordination of activities for the implementation of nutrition by intravenous or subcutaneous infusion bypassing the gastrointestinal tract or correction of nursing interventions
TO.	COMPONENT OF REGULATION OF PHYSICAL PROCESSES
K30.0	Infection control
K30.0.1	Assessment of the scope of measures/actions to prevent the spread of infectious disease
K30.0.2	Implementation of measures to prevent the spread of infectious diseases
K30.0.3	To teach measures to prevent the spread of infectious diseases
K30.0.4	Coordination of activities to prevent the spread of infectious diseases or correction of nursing interventions
K30.1	Prevention of hospital-acquired infections –
K30.1.1	Assessment of the scope of measures/actions to prevent the spread of infections and infectious diseases
K30.1.2	Implementation of measures to prevent the spread of infections and infectious diseases
K30.1.3	To teach measures to prevent the spread of infections and infectious diseases

K30.1.4	Coordination of activities to prevent the spread of infections and infectious diseases or correction of nursing interventions
K31.1	Collecting information about the patient
K31.1.1	Assessment of the scope of activities/actions to obtain information about past illnesses and health status
K31.1.2	Carrying out activities to obtain information about past illnesses and health status
K31.1.3	To teach activities according to the information received about past illnesses and health status
K31.1.4	Coordination of activities based on information received about past illnesses and health status or correction of nursing interventions
K31.3	Medical examination
K31.3.1	physical examination activities/actions to assess the somatic condition
K31.3.2	Performing physical examination activities to assess the somatic condition
K31.3.3	To teach the procedures for performing a physical examination to assess the somatic condition
K31.3.4	Coordination of activities for performing physical examination to assess somatic status or correction of nursing interventions
K32.0	Histological examination
K32.0.1	Estimation of the scope of activities/actions for collecting/examining a body sample
K32.0.2	Carrying out activities for collecting/examining a body sample
K32.0.3	To train in body sample collection/examination procedures
K32.0.4	Coordination of body sample collection/examination activities or adjustment of nursing interventions
L.	COMPONENT OF THE RESPIRATORY SYSTEM
L35.0	Oxygen therapy
L35.0.1	Assessment of the scope of activities/actions for treatment with oxygen
L35.0.2	Carrying out treatment activities using oxygen
L35.0.3	To teach treatment measures using oxygen
L35.0.4	Coordination of activities for the implementation of treatment using oxygen or correction of nursing interventions
L36.0	Caring for a patient with lung disease
L36.0.1	Assessment of the scope of activities/actions for the implementation of pulmonary hygiene
L36.0.2	Carrying out activities to maintain lung hygiene
L36.0.3	To teach measures to maintain lung hygiene

L36.0.4	Coordination of activities to implement pulmonary hygiene maintenance or correction of nursing interventions
L36.1	Breathing exercises
L36.1.1	Assessment of the volume of measures/actions for therapy under respiratory or pulmonary load
L36.1.2	Carrying out measures to implement therapy under respiratory or pulmonary load
L36.1.3	To teach therapeutic measures for respiratory or pulmonary stress
L36.1.4	Coordination of activities to implement therapy under respiratory or pulmonary load or correction of nursing interventions
L36.2	Physiotherapy of the chest organs
L36.2.1	Assessment of the scope of measures/actions to ensure postural drainage of the lungs
L36.2.2	Implementation of measures to ensure postural drainage of the lungs
L36.2.3	To teach activities for performing postural drainage of the lungs
L36.2.4	Coordination of postural pulmonary drainage activities or correction of nursing interventions
L36.3	Inhalation therapy
L36.3.1	Assessment of the volume of activities/actions for respiratory procedures
L36.3.2	Carrying out activities on breathing procedures
L36.3.3	To teach the procedures for performing breathing procedures
L36.3.4	Coordination of activities for the implementation of respiratory procedures or correction of nursing interventions
L36.4	Care of the respiratory system
L36.4.1	Assessment of the scope of measures/actions for control and monitoring of the use of artificial ventilation
L36.4.2	Implementation of measures to ensure the use of artificial ventilation
L36.4.3	To teach measures for the use of artificial ventilation
L36.4.4	Coordination of activities for the implementation of the use of artificial ventilation or correction of nursing interventions
L37.0	Tracheostomy care technique
L37.0.1	tracheostomy care
L37.0.2	tracheostomy care activities
L37.0.3	tracheostomy care
L37.0.4	tracheostomy care activities or adjustment of nursing interventions

M.	RELATIONSHIP COMPONENT		
M39.4	Analysis of sexual behavior		
M39.4.1	Evaluation of the scope of activities/actions to change and/or modify human sexual response		
M39.4.2	Carrying out activities to change and/or modify a person's sexual response		
M39.4.3	To teach interventions to change and/or modify human sexual response		
M39.4.4	Coordination of activities to implement changes and/or modifications to human sexual response		
N.	SECURITY COMPONENT		
N40.0	Nursing interventions for patients with drug use/substance abuse		
N40.0.1	avoid harm		
N40.0.2	Implementation of measures to minimize or avoid harm		
N40.0.3	avoid harm		
N40.0.4	Coordination of activities to implement harm minimization or avoidance or adjustment of nursing interventions		
N40.2	Nursing interventions for patients with alcohol use		
N40.2.1	Assessment of the scope of measures/actions to prevent and minimize the consumption of alcoholic beverages.		
N40.2.2	Implementation of measures to prevent and minimize the consumption of alcoholic beverages.		
N40.2.3	To teach measures to prevent and minimize the consumption of alcoholic beverages.		
N40.2.4	Coordination of activities to implement prevention, minimization of alcohol consumption or correction of nursing interventions		
N40.3	Nursing Intervention for Drug Abuse		
N40.3.1	Assessing the scope of measures/actions to avoid or minimize any addictive drug.		
N40.3.2	Taking steps to avoid and minimize any addictive drug.		
N40.3.3	avoidance and minimization measures for any addictive drug.		
N40.3.4	Coordination of activities to implement avoidance, minimization of any addictive drug or adjustment of nursing interventions		
N41.0	Nursing intervention in emergency care		
N41.0.1	Assessment of the scope of activities/actions to provide emergency care.		
N41.0.2	Carrying out measures to provide emergency assistance.		
N41 0.3	To teach emergency care procedures		
N41.0.4	Coordination of emergency care activities or adjustment of nursing interventions		
P.	SELF-ASSESSMENT COMPONENT		

P45.0	Mental Health Care
P45.0.1	Evaluation of the scope of activities/actions to improve the emotional state
P45.0.2	Carrying out activities to improve emotional state
P45.0.3	To teach activities to improve emotional state
P45.0.4	Coordination of activities to improve emotional state of correction of nursing interventions
P45.1	History of mental health
P45.1.1	Assessing the scope of activities/actions to obtain information about past or present emotional well-being health.
P45.1.2	Carrying out activities to obtain information about pas or present emotional well-being/health.
P45.1.3	To teach activities based on information received about past or present emotional well-being/health.
P45.1.4	Coordination of activities based on information receive about past or present emotional well-being/health or adjustment of nursing interventions
P45.2	Strengthening mental health
P45.2.1	Evaluation of the scope of activities/actions to improve emotional well-being/health
P45.2.2	Implementing activities to improve emotional well-being/health
P45.2.3	To teach activities to improve emotional well-being health
P45.2.4	Coordination of activities to improve emotional well-being/health or adjustment of nursing intervention
P45.3	Mental health screening
P45.3.1	Evaluation of the scope of activities/actions for the assessment of emotional well-being/health
P45.3.2	Conducting emotional well-being/health screening activities
P45.3.3	To teach activities according to the emotional well-being/health survey
P45.3.4	Coordination of activities to perform emotional well-being/health assessment or adjustment of nursing interventions
Q.	SENSOR COMPONENT
Q47.0	Pain management
Q47.0.1	Assessing the scope of activities/actions to support the response to injury or damage
Q47.0.2	Carrying out activities to implement a response to injuror damage
Q47.0.3	To teach caregiving activities to respond to injury o damage

Q47.0.4	Coordination of activities to implement a response to trauma or injury or adjustment of nursing interventions
Q47.1	Acute pain management
Q47.1.1	Assessment of the scope of measures/actions for the implementation of acute pain management
Q47.1.2	Implementation of acute pain management measures
Q47.1.3	To teach nursing interventions to manage acute pain
Q47.1.4	Coordination of activities to implement acute pain management or adjustment of nursing interventions
Q47.2	Chronic Pain Management
Q47.2.1	Evaluation of the scope of activities/actions for the implementation of chronic pain management
Q47.2.2	Implementation of chronic pain management activities
Q47.2.3	To teach chronic pain management interventions
Q47.2.4	Coordination of activities to implement chronic pain management or adjustment of nursing interventions
Q48.0	Patient care to ensure comfort
Q48.0.1	Assessing the scope of activities/actions to promote or improve well-being
Q48.0.2	Carrying out activities to promote or improve well-being
Q48.0.3	To teach activities to promote or improve well-being
Q48.0.4	Coordination of activities to promote or improve well-being or adjustment of nursing interventions
Q49.0	Ear care
Q49.0.1	Estimation of the volume of ear care activities/actions
Q49.0.2	Carrying out ear care activities
Q49.0.3	To teach ear care procedures
Q49.0.4	Coordination of ear care activities or adjustment of nursing interventions
Q49.1	Caring for your hearing aid
Q49.1.1	Assessing the scope of activities/actions for hearing aid care
Q49.1.2	Carrying out activities to care for the hearing aid
Q49.1.3	To teach hearing aid care procedures
Q49.1.4	Coordination of hearing care activities or adjustment of nursing interventions
Q49.2	Earwax removal
Q49.2.1	Estimation of the scope of measures/actions for ear wax removal
Q49.2.2	Carrying out measures to remove earwax
Q49.2.3	To teach ear wax removal procedures
Q49.2.4	Coordination of ear wax removal procedures or adjustment of nursing interventions
Q50.0	Eye care

Q50.0.1	Estimation of the scope of eye care activities/actions
Q50.0.2	Carrying out eye care activities
Q50.0.3	To teach eye care activities
Q50.0.4	Coordination of eye care activities or adjustment on nursing interventions
Q50.1	Eye care for cataracts
Q50.1.1	Assessment of the scope of activities/actions for ey care in cataracts
Q50.1.2	Carrying out eye care activities for cataracts
Q50.1.3	To teach eye care measures for cataracts
Q50.1.4	Coordination of cataract eye care activities or adjustment of nursing interventions
Q50.2	Care for vision problems
Q50.2.1	Assessment of the scope of activities/actions for visio care
Q50.2.2	Carrying out activities to provide vision care
Q50.2.3	To teach vision care activities
Q50.2.4	Coordination of vision care activities or adjustment on nursing interventions
R.	SKIN INTEGRITY COMPONENT
R51.0	Care for bedsores
R51.0.1	Assessment of the scope of measures/actions for th prevention, detection and treatment of pressure ulcers
R51.0.2	Implementation of measures to prevent, detect and treat pressure ulcers
R51.0.3	To train in nursing interventions for the prevention detection and treatment of pressure ulcers
R51.0.4	Coordination of activities to implement prevention detection and treatment of pressure ulcers or correction of nursing interventions
R51.1	Care for stage 1 bedsores
R51.1.1	Assessment of the scope of measures/actions for the prevention, detection and treatment of stage 1 pressurulcers
R51.1.2	Implementation of measures to prevent, detect and treastage 1 pressure ulcers
R51.1.3	To teach nursing interventions to prevent, detect an treat stage 1 pressure ulcers
R51.1.4	Coordination of activities for the implementation of prevention, detection and treatment of stage 1 pressurulcers or correction of nursing interventions
R51.2	Care for Stage 2 Bedsores
R51.2.1	Assessment of the scope of measures/actions for the prevention, detection and treatment of stage 2 pressurulcers

R51.2.2	Implementation of measures to prevent, detect and treat stage 2 pressure ulcers
R51.1.3	To teach nursing interventions to prevent, detect and treat stage 2 pressure ulcers
R51.2.4	Coordination of activities for the implementation of prevention, detection and treatment of stage 2 pressure ulcers or correction of nursing interventions
R51.3	Care for Stage 3 Bedsores
R51.3.1	Assessment of the scope of activities/actions for the prevention, detection and treatment of stage 3 pressure ulcers
R51.3.2	Implementation of measures to prevent, detect and treat stage 3 pressure ulcers
R51.1.3	To teach nursing measures for the prevention, detection and treatment of stage 3 pressure ulcers
R51.3.4	Coordination of activities for the implementation of prevention, detection and treatment of stage 3 pressure ulcers or correction of nursing interventions
R51.4	Care for Stage 4 Bedsores
R51.4.1	Assessment of the scope of measures/actions for the prevention, detection and treatment of stage 4 pressure ulcers
R51.4.2	Implementation of measures to prevent, detect and treat stage 4 pressure ulcers
R51.1.3	To teach nursing interventions to prevent, detect and treat stage 4 pressure ulcers
R51.4.4	Coordination of activities for the implementation of prevention, detection and treatment of stage 4 pressure ulcers or correction of nursing interventions
R53.0	Oral care
R53.0.1	Assessment of the scope of activities/actions for oral care
R53.0.2	Carrying out oral care activities
R53.0.3	To teach oral care activities
R53.0.4	Coordination of oral care activities or adjustment of nursing interventions
R53.1	Caring for dentures
R53.1.1	Assessment of the scope of activities/actions for the care of dentures
R53.1.2	Carrying out activities for the care of dentures
R53.1.3	To teach denture care procedures
R53.1.4	Coordination of activities for the implementation of dental care or correction of nursing interventions
R54.0	Skin care
R54.0.1	Assessment of the scope of activities/actions to maintain the condition of the skin.

R54.0.2	Carrying out skin care activities
R54.0.3	To teach skin care procedures
R54.0.4	Coordination of activities to implement skin/skin maintenance or correction of nursing interventions
R54.1	Nursing interventions for risk of skin destruction
R54.1.1	Assessment of the scope of activities/actions in case of destruction of the skin
R54.1.2	Carrying out measures to eliminate destruction of the skin
R54.1.3	To teach care measures for skin destruction
R54.1.4	Coordination of measures in case of skin destruction or correction of nursing interventions
R55.0	Caring for damaged exposed skin areas
R55.0.1	Assessment of the scope of measures/actions for the care of damaged exposed skin areas
R55.0.2	Carrying out care measures for damaged exposed skin areas
R55.0.3	To teach care measures for damaged exposed skin areas
R55.0.4	Coordination of activities to provide care for damaged exposed skin areas or correction of nursing interventions
R55.1	Drainage care
R55.1.1	Assessment of the scope of activities/actions for the functioning of drainage tubes
R55.1.2	Carrying out activities for the functioning of drainage tubes
R55.1.3	To teach the procedures for performing drainage tubes
R55.1.4	Coordination of activities to ensure the functioning of drainage tubes or correction of nursing interventions
R55.2	Bandaging
R55.2.1	Estimation of the scope of activities/actions for remova and replacement of a new dressing
R55.2.2	Carrying out activities for removing and replacing a new dressing
R55.2.3	To teach procedures for removing and replacing a new dressing
R55.2.4	Coordination of activities to perform removal and replacement of a new dressing or correction of nursing interventions
R55.3	Caring for a surgical wound
R55.3.1	Assessment of the scope of activities/actions for the treatment of a surgical wound
R55.3.2	Carrying out measures for the treatment of a surgical wound
R55.3.3	To teach surgical wound care procedures

R55.3.4	Coordination of activities for the treatment of a surgical wound or correction of nursing interventions
R81.0	Caring for a patient with burns
R81.0.1	Assessment of the scope of measures/actions for healing burned areas of the body.
R81.0.2	Carrying out measures to heal burned areas of the body.
R81.0.3	To teach procedures for caring for burned areas of the body.
R81.0.4	Coordination of activities for the implementation of care for burned areas of the body or correction of nursing interventions
S.	TISSUE PERFUSION COMPONENT
S56.0	Foot care
S56.0.1	Assessment of the scope of activities/actions to eliminate leg problems
S56.0.2	Carrying out foot care activities
S56.0.3	To teach foot care activities
S56.0.4	Coordination of foot care activities or adjustment of nursing interventions
S57.0	Perineal care
S57.0.1	Assessment of the scope of activities/actions to eliminate problems in the perineum
S57.0.2	Carrying out perineal care activities
S57.0.3	To teach perineal care procedures
S57.0.4	Coordination of foot care activities or adjustment of nursing interventions
S69.0	Care for excess fluid in the tissue
S69.0.1	Assessment of the scope of measures/actions to manage excess fluid in the tissue
S69.0.2	Implementation of measures to manage excess fluid in the tissue
S69.0.3	To teach measures to manage excess fluid in tissue
S69.0.4	Coordination of activities to implement management of excess fluid in tissue or correction of nursing interventions
S70.0	Care to maintain normal blood circulation
S70.0.1	Assessment of the scope of measures/actions in case of disturbance of normal blood circulation
S70.0.2	Carrying out measures in case of disturbance of normal blood circulation
S70.0.3	To teach measures to deal with circulatory disorders
S70.0.4	Coordination of measures to maintain normal blood circulation or correction of nursing interventions
S82.0	Care for problems with the vascular system
S82.0.1	Assessment of the scope of activities/actions for the management of vascular system problems

S82.0.2	Carrying out care activities for problems of the vascular system
S82.0.3	To teach care measures for vascular problems
S82.0.4	Coordination of activities for the implementation of care for problems of the vascular system or correction of nursing interventions
T.	COMPONENT OF THE UROGENITAL SYSTEM
T58.0	Care for urinary dysfunction
T58.0.1	Assessment of the scope of measures/actions in case of urinary dysfunction
T58.0.2	Carrying out measures in case of urination disorders
T58.0.3	To teach measures for urinary dysfunction
T58.0.4	Coordination of activities in case of urinary dysfunction or correction of nursing interventions
T58.1	Instillation of the bladder
T58.1.1	Assessment of the volume of activities/actions for infusing the solution into the bladder through a catheter
T58.1.2	Carrying out activities to infuse fluid into the bladder through a catheter
T58.1.3	To teach the procedure of infusing the solution into the bladder through a catheter
T58.1.4	Coordination of activities for the implementation of infusion of solution into the bladder through a catheter or correction of nursing interventions
T58.2	Caring for urinary drainage
T58.2.1	Evaluation of the scope of activities/actions for training in urinary drainage care
T58.2.2	Implementation of activities to teach urinary drainage care
T58.2.3	To teach urinary drainage care procedures
T58.2.4	Coordination of activities for the implementation of training in urinary drainage care or correction of nursing interventions
T59.0	Care while on dialysis
T59.0.1	Assessment of the scope of activities/actions to remove waste products and excess fluid from the body
T59.0.2	Carrying out activities to remove waste products and excess fluid from the body
T59.0.3	To teach measures to remove waste products and excess fluid from the body
T59.0.4	Coordination of activities to remove waste products and excess fluid from the body or correction of nursing interventions
T59.1	Care while on hemodialysis
	Assessment of the scope of activities/actions for

T59.1.2	Carrying out activities for the mechanical removal of waste products from the blood
T59.1.3	To teach the procedures for mechanical removal of waste products from the blood
T59.1.4	Coordination of activities to perform mechanical removal of waste products from the blood or correction of nursing interventions
T59.2	Care while on peritoneal dialysis
T59.2.1	Assessment of the scope of activities/actions for osmotic removal of waste products from the blood
T59.2.2	Carrying out measures of osmotic removal of waste products from the blood
T59.2.3	To teach the measures of osmotic removal of waste products from the blood
T59.2.4	Coordination of activities to perform osmotic removal of waste products from the blood or correction of nursing interventions
T60.0	Caring for a urinary catheter
T60.0.1	Evaluation of the scope of measures/actions for managing urinary catheter use.
T60.0.2	Carrying out activities for the use of a urinary catheter
T60.0.3	To teach urinary catheter care procedures
T60.0.4	Coordination of activities for the implementation of urinary catheter use or adjustment of nursing interventions
T60.1	Placing a urinary catheter
T60.1.1	Assessment of the scope of activities/actions for the installation of a urinary catheter in the bladder.
T60.1.2	Carrying out measures to place a urinary catheter in the bladder.
T60.1.3	To teach procedures for caring for a urinary catheter in the bladder.
T60.1.4	Coordination of activities for the placement of a urinary catheter in the bladder or correction of nursing interventions
T60.2	Irrigation of urinary catheter
T60.2.1	Assessment of the scope of activities/actions for flushing a urinary catheter.
T60.2.2	Carrying out procedures for flushing a urinary catheter.
T60.2.3	To teach procedures for flushing a urinary catheter.
T60.2.4	Coordination of urinary catheter flushing activities or adjustment of nursing interventions
T72.0	Care for inability to hold urine and/or involuntary loss of urine
T72.0.1	Evaluation of the scope of measures/actions to manage inability to hold urine and/or involuntary loss of urine.

T72.0.2	Implementation of measures to manage the inability to retain and/or involuntary release of urine
T72.0.3	To teach measures to manage inability to hold urine and /or involuntary loss of urine.
T72.0.4	Coordination of activities to implement management of inability to retain urine and/or involuntary loss of urine or correction of nursing interventions
T73.0	Care for kidney problems
T73.0.1	Assessment of the scope of measures/actions for the management of kidney problems
T73.0.2	Implementation of measures to manage kidney problems
T73.0.3	To teach kidney care measures
T73.0.4	Coordination of renal care activities or adjustment of nursing interventions
T83.0	Caring for a bladder stoma (cystostomy)
T83.0.1	Assessment of the scope of activities/actions for the functioning of an artificial opening for urine removal
T83.0.2	Carrying out activities for the functioning of an artificial opening for the removal of urine
T83.0.3	To teach procedures for caring for urine removal artificial opening
T83.0.4	Coordination of activities for the implementation of care for an artificial opening for the urine removal or correction of nursing interventions
T83.1	Irrigation of the bladder stoma (cystostomy)
T83.1.1	Assessment of the scope of activities/actions for flushing the artificial opening for urine removal
T83.1.2	Carrying out activities to flush the artificial opening for urine removal
T83.1.3	Teach the procedures for flushing the artificial opening to remove urine
T83.1.4	Coordination of activities for performing irrigation of the artificial opening for urine removal or correction of nursing interventions
U.	REPRODUCTIVE HEALTH COMPONENT
U74.1	Care for patients of childbearing age
U74.1.1	Evaluation of the scope of activities/actions to increase the possibility of conceiving offspring/a child.
U74.1.2	Carrying out activities to increase the possibility of conceiving offspring/a child.
U74.1.3	To teach measures to increase the possibility of conceiving offspring/a child.
U74.1.4	Coordination of activities to increase the possibility of conception of offspring/child or correction of nursing interventions

U74.2	Nursing interventions to promote conception of offspring/child in patients with infertility
U74.2.1	Assessment of the scope of activities/actions for the treatment of infertility
U74.2.2	Carrying out infertility treatment activities
U74.2.3	To teach about infertility treatment measures
U74.2.4	Coordination of activities for the implementation of infertility treatment or correction of nursing interventions
U74.3	Contraception
U74.3.1	Assessment of the scope of measures/actions to prevent conception of offspring/child.
U74.3.2	Carrying out measures to prevent conception of offspring/child.
U74.3.3	To teach measures to prevent conception of offspring/child.
U74.3.4	Coordination of activities to implement the prevention of conception of offspring/child or correction of nursing interventions
U75.3	Care during childbirth
U75.3.1	Assessment of the volume of activities/actions to support at the time of the birth of offspring/child
U75.3.2	Carrying out activities at the time of extraction of offspring/child
U75.3.3	To teach care measures at the time of birth of offspring/child
U75.3.4	Coordination of activities to implement support at the time of birth of offspring/child or correction of nursing interventions

Appendix 5
to the Rules for the provision
of medical care to persons
with chronic diseases,
periodicity and duration
of observation,
mandatory minimum and
frequency of diagnostic tests

Frequency of dynamic observation (examination by a medical technician and a primary care physician), laboratory and instrumental tests, examinations by specialized medical practitioners based on patient segmentation within the framework of the PHC

№	Population category (Frequency of appointments	examinations	- scheduled	Minimum labor tests	atory diagnostic
		examination of CSF (examination by specialized		

	a set of clinical and behavioral indicators	_	examination by a primary care physician	medical practitioners	tests	frequency			
1	Arterial hyperte	Arterial hypertension							
1.1	Optimal (green zone)								
	High normal blood pressure AD 130-139 and/or 85-89 (code "0" in the register)	4 times a year	Once a year	-	Determination of microalbum in urine Determination of creatinine in urine Calculation of S A C: microalbumin/ creatinine * (mg/g, mg/ mmol) Determination of LDL	Once a year			
					Electrocardiog raphy	Once a year			
1.2	Suboptimal (yel	low zone)			I	I			
	1-3 degree of arterial pressure when target values				Determination o f microalbumin in urine Determination of creatinine in urine Determination of LDL cholesterol	Once a year, And if necessary, by decision of the MDT			
	are not reached AD 140-159 and/or 90-99 (code "1" in the register)	Once every 3 months	Once in 6 months	By decision of the MDC	Electrocardiog raphy	Once a year, And if necessary, by decision of the MDT			
	AD 160-179 and/or 100-109 (code "2" in the register)				hour blood pressure monitoring	Once a year, And if necessary, by decision of the MDT			
					Echocardiogra phy	Once a year, And if necessary, by decision of the MDT			
1.3	Bad (red zone)								
					Determination o f				

					lipoproteins Ophthalmosco	Once a year
	Glycated hemoglobin < or = 7.0	Once every 6 months.	Once every 6 months.	-	blood tests: determination of glycated hemoglobin in the blood, blood creatinine with calculation of the glomerular filtration rate (GFR), low density	Once a year
2.1	Optimal (green	zone)			Biochemical	
2	Type 2 diabetes					
					Echocardiogra phy	Once a year, And if necessary, by decision of the MDT
					hour blood pressure monitoring	Once a year, And if necessary, by decision of the MDT
	AD 160-179 and/or 100-109 (code "2" in the register)				Electrocardiog raphy	Twice a year, And if necessary, by decision of the MDT
	1-3 degree of arterial pressure with persistent risk factors (if target values are not reached)	Once a month	Once a month	By decision of	microalbumin in urine Determination of creatinine in urine Calculation of S A C: microalbumin/ creatinine* (mg/g, mg/ mmol) Determination of cholesterol, triglyceride , LDL	And if necessary, by decision of the

	Glycated hemoglobin from 7.1-9.0		Once in 3 months	By decision of the MDC	Biochemical blood tests: determination of glycated hemoglobin in the blood, Determination of blood creatinine with calculation of glomerular filtration rate (By decision of the MDC
		Once every 3 months			GFR), Low density lipoproteins	
		7.1-9.0			Ophthalmosco py with wide pupil	the MDC
					Determination o f microalbumin in urine Determination of creatinine in urine Calculation of S A C: microalbumin/ creatinine* (mg/g, mg/ mmol)	
3	Bad (red zone)	I		I	I	
					Biochemical blood tests: determination of glycated hemoglobin in the blood, blood creatinine with calculation of glomerular filtration rate (GFR), lipid spectrum	By decision of the MDC
	Glycated hemoglobin> 9.1	Once a month	Once a month	By decision of the MDC	Determination of microalbumin in urine Determination of	

					creatinine in urine Calculation of S A C: microalbumin/ creatinine* (mg/g, mg/	By decision of the MDC		
					Ophthalmosco py with wide	By decision of the MDC		
3	Chronio hoort fo	.:l.,,,,			pupil			
3.1	Chronic heart failure Optimal (green zone)							
	New York Heart Association Class I Left ventricular ejection fraction <40% Good condition at rest. Normal physical activity does not result in fatigue, shortness of breath or palpitations.	Zoney	3 Once every 3 months	Once a year a cardiologist	Determination of blood creatinine with calculation of SCF creatinine Determination of LDL cholesterol	Once a year		
					Electrocardiog ram	Once a year		
					Echocardiogra phy	Once a year		
		Once every 3 months			Determination o f microalbumin in urine Determination of creatinine in urine Calculation of S A C: microalbumin/ creatinine* (mg/g, mg/ mmol)	Once a year		
					Sodium	By decision of the MDC		
					Potassium	By decision o the MDC		
3.2	Suboptimal (ye	llow zone)			Determination of blood creatinine with calculation of SCF	By decision o the MDC		

	New York Heart Association Class II - IV Left ventricular ejection fraction <40% Normal	Once every 3 months	Once in 6 months	By decision of the MDC	Determination of LDL cholesterol Electrocardiog ram Echocardiogra phy	By decision of the MDC By decision of the MDC
	physical activity results in fatigue, shortness of breath, or palpitations.				Determination o f microalbumin in urine Determination of creatinine in urine Calculation of S A C: microalbumin/ creatinine* (mg/g, mg/ mmol)	By decision of the MDC
3.3	Bad (red zone)					
	New York Heart Association Class IV Left ventricular ejection fraction <40% Feeling good at rest. A little physical activity leads to fatigue, shortness of breath, palpitations		Once every 3		Determination of blood creatinine with calculation of SCF Determination of LDL cholesterol	By decision of the MDC
				By decision of	Electrocardiog ram	By decision of the MDC
					Echocardiogra phy	By decision of the MDC
		months	the MDC	Determination o f microalbumin in urine Determination of creatinine in urine Calculation of S A C: microalbumin/ creatinine* (mg/g, mg/ mmol)	By decision of the MDC	

Segmentation

Population segmentation is the division of the target population within the disease management Program into groups that are sufficiently homogeneous to be feasible.

Note:

Population segmentation is the division of the target population within the disease management Program into groups that are sufficiently homogeneous to enable the creation of a package of the most appropriate health services to meet the anticipated needs of patients.

- *Norms for albumin/microalbumin in urine (0 30) mg/day.
- **Norms for creatinine in urine (5 18) mmol/day.

There are 3 zones of population segmentation within the framework of the disease management Program: Red (Bad),

Yellow (Suboptimal), Green (optimal).

There are two types of criteria for population segmentation:

- 1. Clinical criteria based on relevant clinical guidelines and clinical protocols. These clinical criteria were added to the patient observation cards for specific diseases.
- 2. Behavioral criteria that measure the patient's level of confidence in managing symptoms and health problems.

The clinical criteria for each disease in the DMP are:

1. Primary arterial hypertension

High normal - BP 130-139 and/or 85-89 (code "0" in the register)

Stage 1 - BP 140-159 and/or 90-99 (code "1" in the register)

Stage 2 - BP 160-179 and/or 100-109 (code "2" in the register)

Stage 3 - BP≥180 and/or ≥110 (code "3" in the register)

2. Type 2 diabetes

Glycated hemoglobin < 7.0

Glycated hemoglobin from 7.0-9.0

Glycated hemoglobin > 9.0

3. Chronic heart failure

Class I (according to the New York Heart Association) - no symptoms.

Class II (according to the New York Heart Association) - symptoms occur with ordinary physical activity.

Class III (according to the New York Heart Association) - symptoms occur with little physical activity.

Class IV (according to the New York Heart Association) - onset of symptoms at rest.

The frequency of examinations is determined individually, taking into account the condition and needs of each patient. It is determined by the doctor in accordance with clinical protocols and recommendations established for a particular disease.

Appendix 1 to the Rules for the organization of provision of medical care to persons with chronic diseases, periodicity and duration of observation, the mandatory minimum and frequency of diagnostic tests "List of diseases subject to dynamic observation in primary health care organizations within the framework of the guaranteed volume of free medical care" shall be set out in a new version in accordance with Appendix 1 to this List;

Appendix 2 to the Rules for the organization of provision of medical care to persons with chronic diseases, periodicity and duration of observation, mandatory minimum and frequency of diagnostic tests "List of socially significant diseases subject to dynamic observation by specialized medical practitioners at the level of consultative and diagnostic care within the framework of the guaranteed volume of free medical care" shall be set out in a new version in accordance with Appendix 2 to this List;

Appendix 3 to the Rules for the organization of provision of medical care to persons with chronic diseases, periodicity and duration of observation, mandatory minimum and frequency of diagnostic studies "List of chronic diseases subject to observation by specialized medical practitioners at the level of consultative and diagnostic care within the framework of the guaranteed volume of free medical care and (or) in the system of compulsory social health insurance" shall be set out in a new version in accordance with Appendix 3 to this List;

The rules for organizing the provision of medical care to individuals with chronic diseases, periodicity and duration of observation, mandatory minimum and frequency of diagnostic tests shall be supplemented with Appendix 4 "Table 1. Classification of nursing diagnoses and Table 2. Classification of nursing interventions" in accordance with Appendix 4 to this List;

The rules for organizing the provision of medical care to individuals with chronic diseases, periodicity and duration of observation, mandatory minimum and frequency of diagnostic tests shall be supplemented with Appendix 5 "Frequency of dynamic observation (examination of CSF and by a primary care physician), laboratory and instrumental tests, examinations by specialized medical practitioners based on patient segmentation within the framework of the DMP" in accordance with Appendix 5 to this List.

Appendix 2 to the order

List of some orders of the Ministry of Healthcare of the Republic of Kazakhstan that have become invalid

- 1) order of the Minister of Health of the Republic of Kazakhstan dated March 30, 2019 № RK MH-16 "On approval of the Rules for dynamic observation of patients with chronic diseases" (registered in the Register of State Registration of Normative Legal Acts on April 8, 2019 under № 18474, published on April 16, 2019 in the Reference Control Bank of regulatory legal acts of the Republic of Kazakhstan in electronic form);
- 2) order of the Minister of Health of the Republic of Kazakhstan dated October 17, 2019 № RK MH-136 "On approval of the list of chronic diseases, in which dynamic observation of patients is carried out, the list of socially significant diseases for which medical and social assistance is provided, the list of diagnostic services, including number of laboratory diagnostics, a list of infectious diseases and diseases that pose a danger to others, a list of diseases that are not subject to dynamic monitoring within the guaranteed volume of free medical care, a list of certain categories of the population subject to emergency and planned

dental care, a list of diseases (conditions) subject to medical rehabilitation and restorative treatment in the direction of a specialist in primary health care or a medical organization "(registered in the Register of State Registration of Normative Legal Acts on October 18, 2019 under № 19484,published on October 18, 2019 year in the Reference Control Bank of regulatory legal acts of the Republic of Kazakhstan in electronic form).

© 2012. «Institute of legislation and legal information of the Republic of Kazakhstan» of the Ministry of Justice of the Republic of Kazakhstan