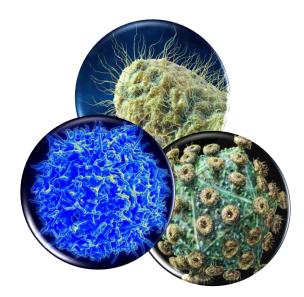
MICROBIOLOGY, VIROLOGY, IMMUNOLOGY

Laboratory workbook

Student _____ group of dental faculty



MINSK BSMU 2017

МИНИСТЕРСТВО ЗДРАВООХРАНЕНИЯ РЕСПУБЛИКИ БЕЛАРУСЬ БЕЛОРУССКИЙ ГОСУДАРСТВЕННЫЙ МЕДИЦИНСКИЙ УНИВЕРСИТЕТ КАФЕДРА МИКРОБИОЛОГИИ, ВИРУСОЛОГИИ, ИММУНОЛОГИИ

МИКРОБИОЛОГИЯ, ВИРУСОЛОГИЯ, ИММУНОЛОГИЯ

MICROBIOLOGY, VIROLOGY, IMMUNOLOGY

Лабораторный практикум



Минск БГМУ 2017

УДК 579+578+612.017.1(076.5)(075.8)-054.6 ББК 52.64я73 M59

Рекомендовано Научно-методическим советом университета в качестве практикума 17.05.2017 г., протокол № 9

А в т о р ы: канд. мед. наук, доц. В. В. Кочубинский; канд. мед. наук, доц. Т. А. Канашкова; канд. мед. наук, доц. Д. А. Черношей; канд. мед. наук, доц. И. А. Гаврилова

Р е ц е н з е н т ы: д-р мед. наук, проф., зав. каф. клинической микробиологии Витебского государственного ордена Дружбы народов медицинского университета И. И. Генералов; канд. мед. наук, доц. каф. биологии Белорусского государственного медицинского университета В. Э. Бутвиловский

Микробиология, вирусология, иммунология = Microbiology, virology, immunology : лабораторный практикум / В. В. Кочубинский М59 [и др.]. – Минск : БГМУ, 2017. – 82 с.

ISBN 978-985-567-812-1.

Отражены вопросы общей и частной медицинской микробиологии, вирусологии и иммунологии. Даны алгоритмы, схемы, некоторые справочные сведения, методики выполнения лабораторных работ по дисциплине «Микробиология, вирусология и иммунология».

Предназначен для студентов стоматологического факультета, обучающихся на английском языке.

УДК 579+578+612.017.1(076.5)(075.8)-054.6 ББК 52.64я73

© УО «Белорусский государственный медицинский университет», 2017

ISBN 978-985-567-812-1

Учебное издание

Кочубинский Валентин Витальевич Канашкова Татьяна Александровна Черношей Дмитрий Александрович Гаврилова Ирина Александровна

МИКРОБИОЛОГИЯ, ВИРУСОЛОГИЯ, ИММУНОЛОГИЯ

MICROBIOLOGY, VIROLOGY, IMMUNOLOGY

Лабораторный практикум

Ответственная за выпуск Т. А. Канашкова Переводчик В. В. Кочубинский Компьютерный набор В. В. Кочубинского Компьютерная верстка Н. М. Федорцовой

Подписано в печать 28.08.17. Формат 60×84/8. Бумага писчая «Снегурочка». Ризография. Гарнитура «Calibri». Усл. печ. л. 9,76. Уч.-изд. л. 5,56. Тираж 120 экз. Заказ 635.

Издатель и полиграфическое исполнение: учреждение образования «Белорусский государственный медицинский университет». Свидетельство о государственной регистрации издателя, изготовителя, распространителя печатных изданий № 1/187 от 18.02.2014. Ул. Ленинградская, 6, 220006, Минск.

Glossary

aerobic - Using oxygen for growth and metabolism.

agar - A gelling agent used in bacterial growth media that allows liquids to become a gel-like solid. **anaerobic** - Not requiring any oxygen for growth.

antigen - Part of an organism that is foreign to our bodies and stimulates an immune response.

asexual organisms - Living creatures (usually bacteria) that are neither male nor female, and therefore do not reproduce by exchanging genetic material.

biofilm - A complex community of microorganisms living together and attached to a surface.

capsule - A structure that surrounds or encapsulates many bacteria and may serve to protect them from harsh conditions or to assist with adherence to surfaces.

cariology - The study of cavities.

collagenase - An enzyme produced by some bacteria that breaks down the connective tissue collagen. **colonies** - Masses of bacteria that arise from a single cell on solid growth media.

colonization - The act of attaching to and inhabiting a surface.

conjugation - The process of DNA transfer from one bacterial cell to another.

culturing - The act of growing bacteria in a laboratory.

cytokine - Proteins that are made by cells that alter the properties and behavior of other cells.

cytosol - The interior of a cell that contains the cell's inner components, or "guts" .

dissemination - The process by which a pathogen is transmitted from one host to another.

DNA fingerprint - A characteristic sequence of nucleic acid bases (A, G, C, T) that is unique to and defines a given bacterial species.

endodontic infections - Infections that occur within the pulp of the tooth.

endoplasmic reticulum - In a eukaryotic cell, the structure on which ribosomes reside.

extracellular - The environment outside of a cell.

flagella - Flexible rope-like structures that help bacteria swim and move in different environments.

genome - The complete DNA material of an organism.

genus - The designation for a group of organisms highly related to each other.

gingivitis - Gum disease.

glucan - A general term for sugar or polysaccharide.

- **Gram negative** Bacteria that appear pink after the Gram stain procedure due to their thin peptidoglycan cell wall.
- **Gram positive** Bacteria that appear purple after the Gram stain procedure due to their thick peptidoglycan cell wall.

growth media - The food and nutrients on which bacteria grow in the laboratory.

Hemagglutination - The clumping together of red blood cells.

hemolysin - A bacterial toxin that is able to destroy red blood cells.

hemolysis - The act of lysing, or killing, a red blood cell.

host - The organism, usually a human, that a pathogen lives in or on.

immuno-compromised - A state where an individual's immune system is weakened, usually by an infection or disease.

incubate - To allow microorganisms to grow in the lab under favorable growth conditions.

inflammation - The process whereby immune cells and chemicals accumulate at the site of infection and result in swelling and redness.

inner membrane - The phospholipid-containing structure around a Gramnegative cell.

invasin - A protein that a pathogen uses to enter into a host cell.

lectin - A protein that binds to a specific type of sugar.

leukotoxin - A bacterial toxin that is able to destroy white blood cells.

lipid A - The innermost portion of lipopolysaccharide (LPS) that anchors it into the outer membrane of Gram-negative bacteria; composed of lipid.

lipopolysaccharide (LPS) - The outer part of the outer membrane of Gram-negative bacteria; composed of lipid and sugars.

localized - Found only at a specific location.

- macroscopic Large enough to be seen with the naked eye.
- metabolize To utilize a nutrient source for growth and maintenance.

microbiologist - A professional who studies organisms too small to be seen with the naked eye.

migration - The act of moving throughout the body and occupying a new environment.

mucins - Large proteins in saliva that give it hydrating properties.

normal flora - The community of microorganisms that is found in an environment during good health. **nucleoid** - The region of the bacterial cell cytosol that contains the chromosome.

O-antigen - The outermost portion of lipopolysaccharide; composed of sugars linked together in chains.

oligosaccharide core - The central portion of lipopolysaccharide that links the O-antigen to lipid A; composed of sugars.

organelles - Discrete structures that carry out specific functions within a cell.

outer membrane - The outermost layer of a Gram-negative cell that contains both phospholipids and lipopolysaccharide.

pathogen - An organism that can cause disease.

peptide - A short sequence of amino acids linked together in a chain.

peptidoglycan - Chemical that makes up a bacterial cell wall; composed of a mixture of amino acids and sugars.

persistent - A state where a pathogen remains in an environment for a prolonged period of time.

pH - The measure of how acidic or basic a substance is; acids have low pH values and bases have high pH values.

phagocytes - Cells of the immune system that are able to engulf pathogens and parts of them.

phospholipid bilayer - The composition of cell membranes, made up of phosphate groups attached to lipid molecules.

pili - Bacterial hair-like projections that are made of protein and aid in attachment to surfaces and other bacteria.

plaque - The bacterial biofilm that accumulates on teeth.

polymerase chain reaction (PCR) - The method by which the amount of genetic material (DNA) can be selectively increased.

polymicrobial infection - An infection caused by more than one microorganism.

resolution - The ability to distinguish two objects as separate entities.

ribosome - The structure on which amino acids are synthesized into a protein.

saliva - The liquid produced in our mouths by the salivary glands that helps to maintain good oral health.

salivary antibody - Proteins in the mouth that are directed against specific pathogens.

salivary glands - The organs in the mouth that produce saliva.

- **secretion systems** Components that bacteria use to export material from the inside of their cells to the outside.
- sialidase An enzyme produced by some bacteria that breaks apart specific types of sugars.

species - The designation for organisms that are biologically identical to each other.

transpeptidation - Linking together sugar chains with peptides.

- **vaccine** A substance that can boost the immune response and protect us from subsequent infection by a specific pathogen.
- virulence The ability to cause disease.

Laboratory safety procedures

- 1. Place all extra clothing, unnecessary books, purses, backpacks, and paraphernalia in an appropriate place. Racks are provided for these materials. The laboratory work area must be kept free of articles not actually in use.
- 2. Eating, drinking, and smoking are forbidden at all times in the laboratory.
- 3. Keep your locker or laboratory door clean. Do not allow your locker drawer to become filled with cultures that have no value in your current work.
- 4. Return all reagents, cultures, and glassware to their appropriate places.
- 5. Wear a laboratory coat, smock, or lab apron when working in the laboratory. This will protect clothing from contamination or accidental discoloration by staining solutions.
- 6. Do not place anything in your mouth while in the laboratory. This includes pencils, food, and fingers. Learn to keep your hands away from your mouth and eyes.
- 7. Avoid contamination of benches, floor, and wastebaskets.
- 8. Clean your work area (laboratory bench) with a phenolic disinfectant such as 5% Lysol or 5% phenol or a quaternary compound such as cetylpyridinium (Ceepyrn) before and after each laboratory period. This standard procedure lessens the chance for accidental infection as well as for contamination of cultures.
- 9. Special receptacles will be provided for infectious materials and used glass slides. Place all discarded cultures and contaminated glassware into these receptacles. Do not let unwanted and unneeded materials accumulate. Tall jars filled with a solution such as 5% Lysol or special receptacles will be provided for pipettes.
- 10. When infectious material is accidentally spilled, cover it immediately with a disinfectant such as 5% Lysol or 5% phenol and notify your instructor at once.
- 11. Flame wire loops and needles before and immediately after transfer of cultures. Do not move through the laboratory with a loop or pipette containing infectious material.
- 12. Wash your hands thoroughly before and after each experiment, using disinfecting soap if possible.
- 13. Label all experimental material with your:

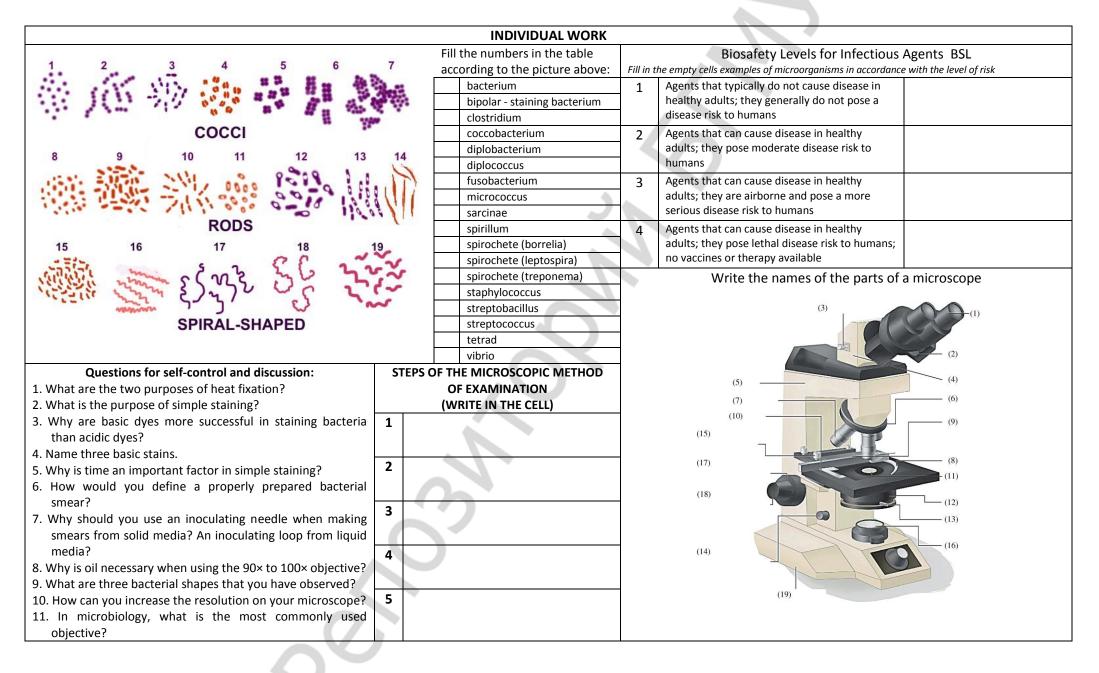
a. Name _____

b. Date ___/__/___ c. Exercise number Ex. 5

14. Telephone number to call in case of an emergency 101, 103.

Practical class 1. Methods in diagnostic microbiology. Microscopic method of examination (MME). Basic morphological forms of bacteria. Simple methods of staining

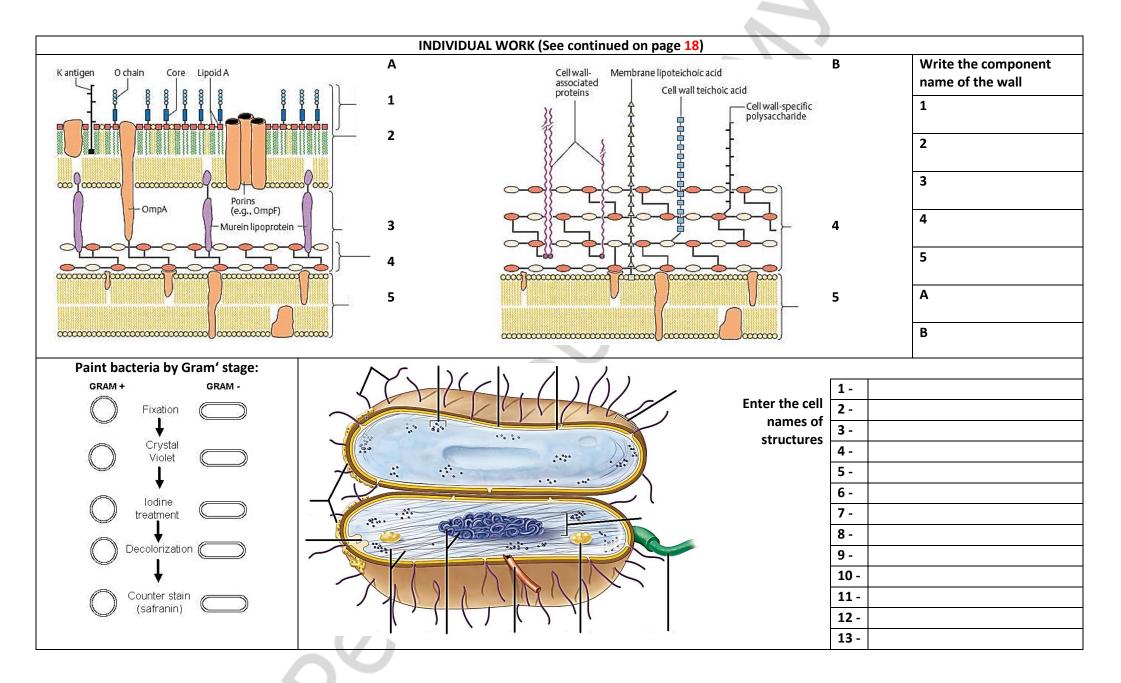
Suggested reading for self-study:								
History of the microbiology, virolog	y, immunology department; main spheres of a	ctivity and trends in resear	ch. Design and	Signatu	re of the tu	tor		
	afety levels. Basic rules of work in microbiologic	-	-	•				
biohazards). Universal precautions in work wit								
Taxonomy of microorganisms: classif	cation and nomenclature. Modern approaches	to taxonomy of microorganis	ms. Taxonomic		1	1		1
ranks. Vars (types), strains, clones, pure cultur	es.			Oral quiz	Laboratory	Individual	Tests	Total
Basic morphological forms of bacteria	. Morphological characteristics of cocci, rods and	spiral-shaped bacteria.		Oral quiz	work	work	16313	result
Microscopic method of examination:	tasks, procedure, method evaluation. Bright-fiel	d light microscope: compone	ents and proper					
use of the microscope. Smear preparation and	fixation. Simple methods of staining. The techn	ique of oil immersion microsc	ору.					
	Laborat	ory work						
Laboratory exercises		Laboratory re	port					
L. Prepare heat-fixed slide of Escherichia	1 Smear	2	Smear					
coli, cultured on agar medium, stain	Stain		Stain					
with methylene blue, examine under				/	<	`		
the oil immersion lens and complete						\backslash		
the report.					88 8			
2. Prepare heat-fixed slides of	(++++++++++++++++++++++++++++++++++++			 ++++	<u>····ᢪ</u> │·····ŀ	++++)		
Staphylococcus spp., cultured on								
liquid medium, stain with basic								
fuchsin, examine under the oil					< _			
immersion lens and complete the								
	3 Smear	4 Smear		5 Sm	ear			
B. Complete the drawings of slides seen	Stain	Stain			in			
in demonstration room:								
					/	\frown		
Streptococcus spp., pure culture,			\mathbf{i}			Π	\backslash	
stained with crystal violet;		/				К er		
Vibrio spp., pure culture, stained with	(++++++++++++++++++++++++++++++++++++++	 +++++/<mark>/</mark>+++++++	++++)				HHH)	
basic fuchsin;								
Bacillus spp., pure culture, stained with		\mathbf{X}			$\backslash 0$	0		
crystal violet.								
		\smile				\smile		



Practical class 2. MME. The morphology and fine structure of bacteria. Differential methods of staining

Suggested reading for self-study: Distinctive features of prokaryotic and composition, function, detection methods of ba The composition, function of capsule, flag staining. The cytoplasmic membrane: structure, f cytoplasm, cytoplasmic structures (nucleoid, p sulfur, polymetaphosphate (volutin)). Methods f Acid-fast bacteria and unique properti	cterial cell wall. Gram stain: medical gella, pili (fimbriae) and methods for unction. The most important bacter lasmids, ribosomes, and mesosome for nucleoid and volutin detection. L	application, principles, procedure for their detection. Detection of capsu rial cytoplasmic membrane protein es). Inclusion bodies - storage gran oeffler and Neisser stain for volutin	or Gram stain. le using negative s. Bacterial core: ules (starch, fat, granules.	Ŭ	Laboratory work	r Individual work	Tests	Total results
procedure.		Laboratory work						
Laboratory exercises			ory report					
 Prepare heat-fixed slide of the mixed culture of <i>Escherichia coli</i> (gram-negative) and <i>Staphylococcus aureus</i> (gram-positive), Gram stain, examine under oil immersion and complete the report. Complete the drawings of slides seen in demonstration room: slide with capsule of <i>Klebsiella pneumoniae</i>, negative staining; slide with mixture of <i>Escherichia coli</i> (gram- negative) and <i>Staphylococcus aureus</i> (gram positive). Cram stain: 	Stain	2 Smear	3 Smear Stain		St	nearain		+++)
 (gram-positive), Gram stain; slide with volutin granules of <i>Corynebacterium diphtheriae</i>, Loeffler staining; slide with volutin granules of <i>Corynebacterium diphtheriae</i>, Neisser staining; slide of the mixed culture of asid-fast and asid-liable microorganisms, staing Ziehl- Neelsen. 	5 Smear Stain	6 Smear Stain	7 Smear Stain		+)			

>



Practical class 3. MME. The morphology of the spirochetes, actinomyces, rickettsia, chlamydia, mycoplasmas

Suggested reading for self-study:											
Bacterial forms with defective cell	II wall removal, Signate	are of the tuto	or								
medical importance of L-forms.					_						
Resting forms of microorganisms. B	acterial endospores: medical imp	portance, properties of endospore	e, the periods of								
endospore formation, detection methods				Laboratory	Individual		Total				
Taxonomy, morphology, medical significance of the Spirochetes, Actinomyces, Rickettsiae, Chlamydiae, Oral quiz Laboratory Individual work work Tests results											
Mycoplasmas.											
Romanowsky-Giemsa stain. Dark-fie	eld light microscopy. Phase-contr	ast light microscopy. Fluorescence	e microscopy.								
		Laboratory work									
Laboratory exercises		Laborato	ory report								
1. Prepare slide of Rickettsia spp., stain	1 Smear	2 Smear	3 Smear	4 Sm	near						
with fuschin, examine under the	Stain	Stain	Stain	Sta	ain						
microscope, complete the report.											
2. Complete the drawings of slides seen							<				
in demonstration room:				\mathbf{N}			\backslash				
- slide with Treponema denticola in					1 .						
dental plaque, Gram stain;	<u> </u>	(++++ <u>++++++++++++++</u>)		++++)		+++++++++++++++++++++++++++++++++++++++	++++				
- Leptospira spp., dark-field											
microscopy;											
- Borrelia recurrentis in the blood of						\checkmark					
patient with relapsing fever,											
Romanowsky-Giemsa stain;	-		_								
- Chlamydia inclusions in cytoplasm of	5 Smear	6 Smear	7 Smear		near						
host-cell, Romanowsky-Giemsa stain;	Stain	Stain	Stain	Sta	ain						
- slide with Actinomyces spp., pure											
culture, Gram stain;				\setminus			\backslash				
- slide with spores of <i>Bacillus anthracis,</i>					1 .						
Ozheshko staining;	[(++++++++++++++++++++++++++++++++++++	(++++++++++++++++++++++++++++++++++++	++-)		+++++++++++++++++++++++++++++++++++++++	+++)				
- slide with E. coli, pure culture,							/				
acridine orange stain.					\backslash		/				
						\bigcirc	•				
	02	_									

	Morphology of Spirochetes (write in cells name	s of struc	INDIVIDUAL	Confront Gram-positive and Gram-negative bacteria							
Indoflagel	a (axial filaments) beneath outer membrane, Basal body, Outer membra			connone dram-positive							
peptidogly	rcan), Inner (cell/plasma) membrane, DNA in nucleoid, cytoplasm	1		Chauratha sintia	Curana Da siti va						
	1 ²			Characteristic	Gram-Positive	Gram-Negative					
				Number of peptidoglycan layers							
				Overall thickness in nm							
				Specific compounds							
	3	5		Interbridges between tetra peptides of neighbor glycan chains							
	8 6 6 6	6		Outer membrane							
	96	7		Periplasmic space							
7 8			Porin proteins								
0.1 μm 9				Permeability							
	The technique of Gram stain (write the component and exposure	time)		Secretion systems							
Compon	ent: crystal violet, tag water, basic fuchsine or safranin, o		line	Flagella fixation in cell envelope							
	component		exposure time, sec	Main mechanisms of genetic exchange							
1				Cell wall deficient forms in vitro							
2				Ability to produce spores							
3				Ability to produce long filamentous							
4		Susceptibility to Lysozyme									
5		Adhesion by pili									
6	6			Pathogenicity islands							
7	Tag water (wash slide thoroughly)		5	Gram stain (fill)							
			10			_1					

INDIVIDUAL WORK									
Questions for self-control and	discussion (Practical class 2)	Questions for self-control and discussion (Practical class 3)							
What is the function of the iodine solution in the Gram stain? If it were omitted, how would staining results be affected?	result	For what diseases would you use an acid- fast stain?							
What is the purpose of the alcohol solution in the Gram stain?		What chemical is responsible for the acid-fast property of mycobacteria?							
What counterstain is used? Why is it necessary? Could colors other than red be used? What is the advantage of the Gram stain over the simple stain?	result	How should the acid-fast stain of a sputum specimen from a patient with suspected pulmonary Nocardia infection be performed?							
Describe at least two conditions in which an organism might stain gram variable.		Is a Gram stain an adequate substitute for an acid-fast stain? Why?							
Which step is the most crucial or most likely to cause poor results in the Gram stain? Why?	.C	Are acid-fast bacteria gram positive or gram negative? Explain your answer.							
Why must young cultures be used when doing a Gram stain? What is meant by gram variable?	7	Why is it important to know whether bacterial cells possess flagella, or endospores?							
What part of the bacterial cell is most involved with Gram staining, and why?	3	What do endospore stains have in common with the Ziehl-Neelsen acid-fast stain? Is bacterial sporulation a reproductive process? Explain.							
What is an advantage of negative staining?	2	What is the purpose of the heat during the acid-fast staining procedure?							
Why is negative staining also called either indirect or background staining?		Why are endospores so difficult to stain?							

Practical class 4. Ecology of microorganisms. Asepsis. Methods of sterilization, disinfection and antisepsis

Suggested reading for self-study:											
Ecology of microorganisms. Inter	rspecific and intraspe	cific relations. Sy	ymbiosis, its var	iants. Antago	onistic Signa t	ure of the tute	or				
microbial relationships, its background an	d medical importance.	Bacteriocins.									
Definition of terms asepsis, sterili	zation, disinfection, ar	tisepsis. Methods	of sterilization:	physical, che	mical,						
mechanical. Differences between steriliza	tion and disinfection. T	ypes and method	s of disinfection.	Types and me	ethods	. Laboratory	Individual		Total		
of antisepsis. Practical antisepsis. Classif	ication of antiseptics,	origin and charac	cteristics of grou	ps. Mechanis	ms of Oral o	uiz work	work	Tests	results		
action on microorganisms. Antimicrobial r	management in dentist	ry.									
		Lab	oratory work								
Laboratory exercises				aboratory re	port						
1. Test the effectiveness of hygienic and	1. Divide a nutrient agar plate into 4 sections with a marking pen or pencil. Mark each section of the plate with numbers 1, 2, 3, 4.										
surgical hand antisepsis. The result is	2. Mark each plate with your group number and your name.										
taken into account in the next	3. On the surface of agar medium at section N 1 make a fingerprint of skin untreated with any antiseptic (control).										
practical class.	4. Wash your hands with soap as you do it usually at home and make a fingerprint on the surface of the agar medium at section N2.										
	5. Wash your hands with soap twice and then your fingers with antiseptic (1% solution of iodopyron) – 2 minutes, neutralize										
	iodopyron with ne medium at sectior	•	ution of sodium t	hiosulfate) fo	or 2 minutes	and make a fi	ngerprint o	n the surfa	ace of agar		
	6. Do not wash your h		with antiseptic (19	% of jodopyrd	on) – 2 minut	es. neutralize i	odopyron w	ith neutra	lizer (1% of		
	, sodium thiosulfate			• •	-		• •		,		
	7. Incubate Petri dishe				U						
	8. After incubation co	ount the amount of	of colonies grown	at each sect	ion and fill ir	the table. For	mulate the	conclusior	n regarding		
	effectiveness of hy		, e						0 0		
		5	-								
	1	2		Section	E	periment desc	cription	Q	uantity of CFU		
	A l		in the second se	1	Control						
	A			2	Hygienic hand	antisepsis (was	hing with soa	p)			
	<i>M</i>			Surgical hand	gical hand antisepsis						
				4	Antisepsis wit	h iodopyron					
				Conclusion:							
	4	3	a the second								

2. Test the effectiveness of hygienic oral	1. Mark the Petri plate "Experience" and "Control".		"Experienc	ce" / "Control"		
antisepsis. The result is taken into account in the next practical class.	 Rinse mouth with sterile saline 45 seconds, and spit in the plate "Control". 				A	
account in the next practical class.	3. Rinse the mouth with 1% solution of boric acid 45					
	seconds and spit into the sink.					
	 Rinse mouth with sterile saline, and spit in the plate of "Experience". 			Blok		
	 Using a sterile pipette and spray bulb make breeding materials: 					
	a) prepare 4 test tubes with 4,5 ml of sterile saline, label 1C, 2C, 3C, 4C;					and the second se
	- dial 0,5 ml of material from the plate "Control" and		1 0,5 ml	2 0,5 ml	3 0,5 ml	4
1757	release into the tube 1C. Reset the pipette into a porcelain cup;	Saline, 4,5 ml				
	 other pipette to mix the contents of the tube 1C, type 0,5 ml tube and release in 2C. Reset the pipette into a porcelain cup. Do this with the other tubes. 					
	b) analogous prepare "Experience" material.					
	6. Use a glass pipette and spray bulb produce seed		0,5 ml	0,5 ml	0,5 ml	0,5 ml
	dilutions on sugar broth:	Sugar broth, 4,5 ml		Í I		
	- prepare 4 tubes with Sugar broth sign 1C, 2C, 3C, 4C;					\bigcirc
	- sterile pipette to stir the contents of the tube 4C gain of					
	diluted material 0,5 ml in a test tube and release 4C broth;					
	- without changing the pipette, transfer 0,5 ml of the					
	diluted material from the tube into the tube 3C		\checkmark			
	broth; do this with the other tubes.	Result Experience				
	7. Analogous prepare "Experience" material.	Control				
	8. Incubate all tubes at 37°C for 24 hours. After	Conclusion:				
	incubation observe each tube for growth (+) or					
	absence of growth (–). Complete the table by					
	recording your own results and formulate the					
	conclusion regarding effectiveness of oral antisepsis.					
4	13					

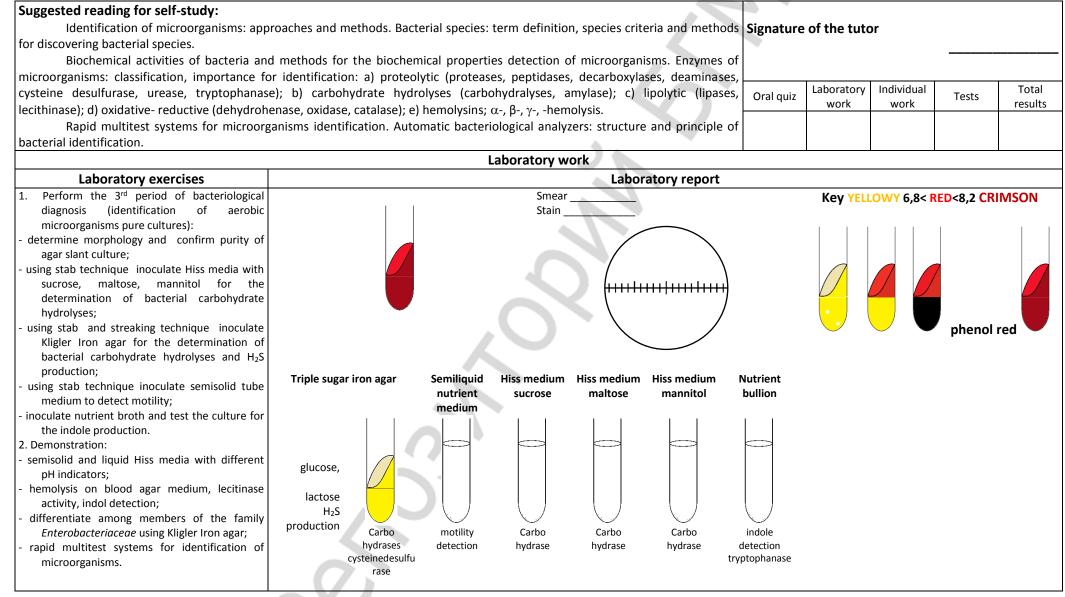
	INDIVIDU		
	ssible methods of sterilization	Give the definition of	the following terms:
Bacteriological loops		Antisepsis -	
Gauze, cotton, bandage		Asepsis -	
Rubber, plastic products		Disinfection -	
Glass products		Sterilization -	
Air in operating room		Modes of action of disinfectants	and antiseptics (write in cells)
General-purpose media		Mode	Disinfectants or antiseptics
Enriched media with serum or			
blood			
Solution which is inactivated	0		
at above 60 °C			
Borer			
Dental mirror			
Tooth brush			
	1	4	

Practical class 5. Bacteriological method of laboratory diagnosis of infectious diseases. Techniques for pure culture isolation and maintenance

through the membrane. Breathing microbes, I Cultivation of microorganisms. Conditi Culture media ingredients, procedure of prepa	nicrobes. Constructive and energy metabolism. Types and methods o preathing apparatus, ways of biological oxidation. Aerobic, anaerobic, ons required for growth. Nutrient media for culturing bacteria: class aration and sterilization. General requirements to bacteriologic nutrie	c, facultative anaerobes. sification and characteristics. ent media. Incubator.			
Bacteriological method of laboratory microorganisms isolation in pure culture. Bact	diagnosis: tasks, procedure, evaluation of the method. Methods	s of aerobic and anaerobic	Oral Laboratory quiz work	Individual . work	Tests result
	1 million 1	~			
	Laboratory work				
Laboratory exercises	Labo The 2 ND PERIOD OF BACTERIOLOGICAL DIAGNOSIS	oratory report Incubation 24 hours, 3			
 antisepsis (see class N 4). Perform the 2nd period of bacteriological diagnosis (inspection and accumulation of aerobic microorganisms pure cultures isolation): 	Nutrient agar with isolated colonies	isolated o	on of slant media w colony of gative bacteria	ith ►	
 characterize morphology of colonies two different types present on agar medium; determine morphology and purity of 					
 characterize morphology of colonies two different types present on agar medium; determine morphology and purity of colonies two different types using 		Morphology of colony	Colony of culture 1	Colony	of culture 2
 characterize morphology of colonies two different types present on agar medium; determine morphology and purity of colonies two different types using Gram stain; 		Morphology of colony Shape	Colony of culture 1	Colony	of culture 2
 characterize morphology of colonies two different types present on agar medium; determine morphology and purity of colonies two different types using Gram stain; use aseptic technique and transfer the 			Colony of culture 1	Colony	of culture 2
 characterize morphology of colonies two different types present on agar medium; determine morphology and purity of colonies two different types using Gram stain; use aseptic technique and transfer the colony of Gram-negative 		Shape	Colony of culture 1	Colony	of culture 2
 characterize morphology of colonies two different types present on agar medium; determine morphology and purity of colonies two different types using Gram stain; use aseptic technique and transfer the colony of Gram-negative microorganisms for subculturing on a 		Shape Size Surface	Colony of culture 1	Colony	of culture 2
 characterize morphology of colonies two different types present on agar medium; determine morphology and purity of colonies two different types using Gram stain; use aseptic technique and transfer the colony of Gram-negative 		Shape Size Surface Edge	Colony of culture 1	Colony	of culture 2
 characterize morphology of colonies two different types present on agar medium; determine morphology and purity of colonies two different types using Gram stain; use aseptic technique and transfer the colony of Gram-negative microorganisms for subculturing on a surface of agar slant for microbial 		Shape Size Surface Edge Color	Colony of culture 1	Colony	of culture 2
 characterize morphology of colonies two different types present on agar medium; determine morphology and purity of colonies two different types using Gram stain; use aseptic technique and transfer the colony of Gram-negative microorganisms for subculturing on a surface of agar slant for microbial 	Morphology of culture 1 Morphology of culture 2	Shape Size Surface Edge Color Consistency	Colony of culture 1	Colony	of culture 2
 characterize morphology of colonies two different types present on agar medium; determine morphology and purity of colonies two different types using Gram stain; use aseptic technique and transfer the colony of Gram-negative microorganisms for subculturing on a surface of agar slant for microbial 		Shape Size Surface Edge Color	Colony of culture 1	Colony	of culture 2

Are the large numbers of microorganisms found in the mouth cause for concern? Explain. Image: Concern? Explain. Why are plate cultures incubated in the inverted position? Image: Concern? Explain. How do you decide which colonies should be picked from a plate culture of a mixed flora? Image: Concern? Explain. Why is it necessary to make pure subcultures of organisms grown from clinical specimens? Image: Concern? Explain. How can you determine whether a culture or subculture is pure? Image: Concern? Explain. What kinds of clinical specimens may yield a mixed flora in bacterial cultures? Image: Concern? Explain.		INDIVIDUAL WORK
Define a bacterial colony. List four characteristics by which bacterial colonies may be distinguished. Why should a Petri dish not be left open for any extended period? Why does the streaking method of plates inoculation result in isolated colonies? Why are culture media sterilized before use? Discuss the relative value of broth and agar media in isolating bacteria from mixed cultures. At what temperature does agar solidify? At what temperature does agar mell? Define a culture media uncell factors involved in the composition, and in the preparation, of a culture medium. Why is it necessary to isolate individual colonies from a mixed growth? Are the large numbers of microorganisms found in the mouth cause for concern? Explain. Why are plate cultures incubated in the inverted position? How do you decide which colonies should be picked from a plate culture of a mixed flora? Why is in the censary to make pure subcultures of organisms grown from clinical specimens? How can you determine whether a culture or subculture is pure? What kinds of clinical specimens may yield a mixed flora in bacterial cultures?	Ques	tions for self-control and discussion:
bacterial colonies may be distinguished. Why should a Petri dish not be left open for any extended period? Why should a Petri dish not be left open for any extended period? Why does the streaking method of plates inoculation result in isolated colonies? Why are culture media sterilized before use? Discuss the relative value of broth and agar media in isolating bacteria from mixed cultures. At what temperature does agar solidify? At what temperature does agar mell? Define a culture media. Discuss some of the physical and chemical factors involved in the composition, and in the preparation, of a culture medium. Discuss row of the physical and chemical factors involved in the composition, and in the preparation, of a culture medium. Why are plate cultures incubated in the inverted position? How doy ou decide which colonies should be picked from a plate culture of anixed flora? Why is it necessary to make pure subcultures of organisms grown from clinical specimens? How doy ou decide which colonies should be picked from a plate culture of a culture or subculture is pure? Why is it necessary to make pure subcultures of organisms grown from clinical specimens? How can you determine whether a culture or subculture is pure? What kinds of clinical specimens may yield a mixed flora in bacterial cultures? Mote in the second flora in bacterial cultures?	Define a pure culture, a mixed culture.	
Why does the streaking method of plates inoculation result in isolated colonies? Why are culture media sterilized before use? Discuss the relative value of broth and agar media in isolating bacteria from mixed cultures. At what temperature does agar solidify? At what temperature does agar mel? Define a culture medium. Discuss some of the physical and chemical factors involved in the composition, and in the preparation, of a culture medium. Why is it necessary to isolate individual colonies from a mixed growth? Are the large numbers of microorganisms found in the mouth cause for concern? Explain. Why are plate cultures incubated in the inverted position? How doy ou decide which colonies should be picked from a plate culture of a mixed flora? Why is it necessary to make pure subcultures of organisms grown from clinical specimens? How do you determine whether a culture or subculture is pure? What kinds of clinical specimens may yield a mixed flora in bacterial cultures?		
isolated colonies? Why are culture media sterilized before use? Discuss the relative value of broth and agar media in isolating bacteria from mixed cultures. At what temperature does agar solidify? At what temperature does agar melt? Define a culture medium. Discuss some of the physical and chemical factors involved in the composition, and in the preparation, of a culture medium. Why is it necessary to isolate individual colonies from a mixed growth? Are the large numbers of microorganisms found in the mouth cause for concern? Explain. Why are plate cultures incubated in the inverted position? How do you decide which colonies should be picked from a plate culture of a mixed flora? Why is it necessary to make pure subculture is pure? What kinds of clinical specimens may yield a mixed flora in bacterial cultures?	Why should a Petri dish not be left open for any extended period?	
Discuss Discuss form mixed cultures. At what temperature does agar solidify? At what temperature does agar melt? Define a culture medium. Discuss some of the physical and chemical factors involved in the composition, and in the preparation, of a culture medium. Discuss some of the physical and chemical factors involved in the composition, and in the preparation, of a culture medium. Why is it necessary to isolate individual colonies from a mixed growth? Are the large numbers of microorganisms found in the mouth cause for concern? Explain. Why are plate cultures incubated in the inverted position? How do you decide which colonies should be picked from a plate culture of a mixed flora? Why is it necessary to make pure subcultures of organisms grown from clinical specimens? How can you determine whether a culture or subculture is pure? What kinds of clinical specimens may yield a mixed flora in bacterial cultures? Sectore and the flora in the dot and the acuture or subculture is pure?		
bacteria from mixed cultures. At what temperature does agar solidify? At what temperature does agar melt? Define a culture medium. Define a culture medium. Discuss some of the physical and chemical factors involved in the composition, and in the preparation, of a culture medium. My is it necessary to isolate individual colonies from a mixed growth? Are the large numbers of microorganisms found in the mouth cause for concern? Explain. My are plate cultures incubated in the inverted position? How do you decide which colonies should be picked from a plate culture of a mixed flora? My is it necessary to make pure subcultures of organisms grown from clinical specimens? How can you determine whether a culture or subculture is pure? What kinds of clinical specimens may yield a mixed flora in bacterial cultures?	Why are culture media sterilized before use?	
does agar melt?	• •	
Discuss some of the physical and chemical factors involved in the composition, and in the preparation, of a culture medium.Image: Composition of a culture medium.Why is it necessary to isolate individual colonies from a mixed growth?Image: Composition of microorganisms found in the mouth cause for concern? Explain.Are the large numbers of microorganisms found in the mouth cause for concern? Explain.Image: Composition?Why are plate cultures incubated in the inverted position?Image: Composition of a culture of a mixed flora?How do you decide which colonies should be picked from a plate culture of a mixed flora?Image: Composition of composition of culture of organisms grown from clinical specimens?How can you determine whether a culture or subculture is pure?Image: Composition of clinical specimens may yield a mixed flora in bacterial cultures?		
composition, and in the preparation, of a culture medium.Why is it necessary to isolate individual colonies from a mixed growth?Are the large numbers of microorganisms found in the mouth cause for concern? Explain.Why are plate cultures incubated in the inverted position?How do you decide which colonies should be picked from a plate culture of a mixed flora?Why is it necessary to make pure subcultures of organisms grown from clinical specimens?How can you determine whether a culture or subculture is pure?What kinds of clinical specimens may yield a mixed flora in bacterial cultures?	Define a culture medium.	
growth? Are the large numbers of microorganisms found in the mouth cause for concern? Explain. Why are plate cultures incubated in the inverted position? Image: Concern? Explain. How do you decide which colonies should be picked from a plate culture of a mixed flora? Image: Concern? Explain. Why is it necessary to make pure subcultures of organisms grown from clinical specimens? Image: Concern? Explain. How can you determine whether a culture or subculture is pure? Image: Concern? Explain. What kinds of clinical specimens may yield a mixed flora in bacterial cultures? Image: Concern? Explain.		
cause for concern? Explain. Why are plate cultures incubated in the inverted position? How do you decide which colonies should be picked from a plate culture of a mixed flora? Culture of a mixed flora? Why is it necessary to make pure subcultures of organisms grown from clinical specimens? How can you determine whether a culture or subculture is pure? What kinds of clinical specimens may yield a mixed flora in bacterial cultures? Mixed flora in bacterial cultures?		
How do you decide which colonies should be picked from a plate culture of a mixed flora? Why is it necessary to make pure subcultures of organisms grown from clinical specimens? How can you determine whether a culture or subculture is pure? What kinds of clinical specimens may yield a mixed flora in bacterial cultures?		
culture of a mixed flora? Why is it necessary to make pure subcultures of organisms grown from clinical specimens? How can you determine whether a culture or subculture is pure? What kinds of clinical specimens may yield a mixed flora in bacterial cultures?	Why are plate cultures incubated in the inverted position?	
from clinical specimens? How can you determine whether a culture or subculture is pure? What kinds of clinical specimens may yield a mixed flora in bacterial cultures?		D
What kinds of clinical specimens may yield a mixed flora in bacterial cultures?		
bacterial cultures?		
When more than one colony type appears in a pure culture, what are the most likely sources of the extraneous organisms?		

Practical class 6. Bacteriological method of infectious diseases laboratory diagnosis. Techniques for pure culture identification



	INDIVIDUA	AL WORK			
	BACTERIOLOGICAL METHOD OF L				
1	2	3	4		
	18				

Practical class 7. Molecular Basis of Bacterial Genetics. Molecular methods of infectious diseases diagnosis and bacterial genetic investigations

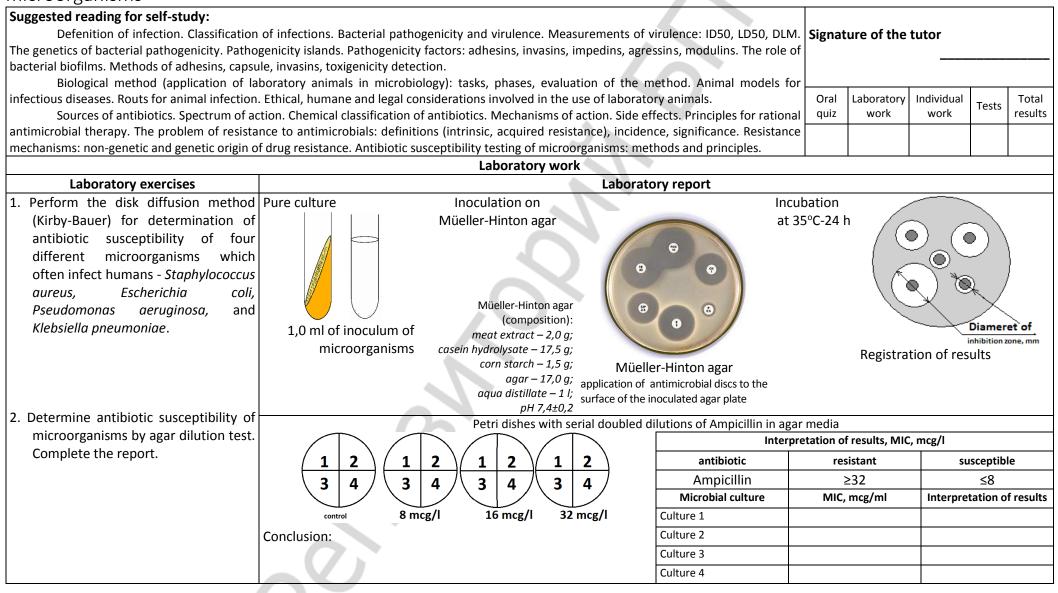
<u> </u>														
Suggested reading for self-study:														
The structure of bacterial genetic appa		-								gnatu	re of the tuto	r		
Detection of plasmids. Bacterial variability: p		•					lecha	nisms	of					
genetic variability: Mutation and recombination			tant b	acteri	a sele	ction.								
Molecular methods: tasks, specimens f	-	-) -		Lab anatam.	La altatala al		
Molecular hybridization: test material										Oral qui	z Laboratory work	Individual work	Tests	Total results
detection of DNA hybrid duplexes, interpretat											WORK	WOIN		
Polymerase chain reaction (PCR): test		-						prime	rs,					
PCR thermal cycle, detection of amplicons, int	erpretation of results.					of PCR.	-							
		Labo	rator	y wor			-							
Laboratory exercises			1		_	abor								
1. Identify isolated pure culture and	Species	Morphology		Bic	ochen	nical c	hara	cteris	tics	-	Conclusion:			
complete the final report:			e	e	e e	5	e			ty	According to	morpholo	gical, cult	tural,
- register the biochemical properties of			Glucose	Lactose	Maltose	Mannito	Sucrose		Indole	Motility	biochemical	properties	X-microb	be is
tested pure culture in the table;			Glu	Lac	Ξ	Ξ _	Suc	H ₂ S	Ind	Ĕ	attributed to			
- analyze the results and determine the	E. coli Gram- rods AG AG AG AG + +													
species of tested pure culture.	S. Typhi	Gram- rods	AG A*	AU	AG	A	-	+	- T	+	-			
	7.	Gram- rods	AG	-	AG	AG	_	•	_	+				
	S. Paratyphi A			-			-	-	-					
	S. Schottmuelleri	Gram- rods	AG	-	AG	AG	-	+	-	+				
	X-microbe										* "A" – acid, "G"	- gas		
2. Perform PCR for the detection of	Procedure of PCR													
M.tuberculosis in the sputum of the	DNA extraction:													
patient with tuberculosis suspected.		ne volume 1,5 ml with l			-		-			-				
	negative control to th	e tube marked with lette	er NC.	Shake	e the t	ubes t	horou	ughly a	and bo	oil in th	ne water bath fo	or 10 minutes	(in room 5	07).
Identification of M.tuberculosis in	PCR cocktail preparat													
sputum is based on the detection of gen		ne volume 0,5 ml with l					-	-				-) µl of
MPB64 unique for <i>M. tuberculosis</i> and		μl of liquid into PCR' tul	be. An	nplifica	ation i	n spec	cial ec	luipmo	ent - t	hermo	cycler – for app	roximately 1	hour.	
M. bovis. PCR amplifies the fragment	Detection of PCR proc							_						
with the size 357 bp. of this gene.	Electrophoresis of PCI	products in agarose ge	I. UV d	detect	ion of	specif	ic PC	R-proc	ducts i	n gel w	vith ethidium br	omide.		
	Report:	10			. .		-							
	Specific products siz	ed 357 bp were / not	dete	cted.	Sputi	im is j	posit	ive /	negat	ive to	r Mycobacteri	um tubercul	OSIS.	

Laboratory exercises			Laboratory report		
 3. Perform the bacterial conjugation experiment: prepare the mating mixture by aseptically transferring 0,5 ml of an overnight meat-peptone both culture of donor and recipient <i>E. coli</i> into the separate tube; mix and incubate at 37 °C for 1 hours; confirm the resistance status and leucine and threonine production by the culturing donor, recipient and recombinant E. coli on minimal medium supplemented with streptomycin. 	In bacterial conjugation experiment donor E.coli is susceptible to streptomycin and synthesize threonine and leucine. Recipient E.coli displays complementary properties: resistant to streptomycin and unable to synthesis threonine and leucine. Recombinants of these two strains will have combination of either the donor or recipient strains' characteristics and can be readily detected by using selective minimal media.	E. coli D (donor) F ⁺ tre ⁺ leu ⁺ str ^s	3 1 2 3 1 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3	Recombinant <i>E.coli</i> F tre leu str 1- donor 2- Recipient 3- recombinant Registration of THE results after 24 hours incubation at 37 °C	R (recip F ⁻ tre ⁻ leu ⁻ str ^R 2

		INDIVIDUAL WORK		
	Bacter	ial conjugation - Draw a process di	jagram	
0 min	2 min	10 min	15 min	20 min
	Pilus formation	DNA replication with continued pilus formation	DNA transfer	Conjugates separate
	Q	20		

	INDIVIDUAL WORK
The	e polymerase chain reaction (PCR), complete cells
Stages	Amplification
Evaluation of method	Practical application
	Practical application
	21

Practical class 8. Infections. Application of laboratory animals in microbiology. Antibiotic susceptibility testing of microorganisms



3. Determine antibiotic susceptibility of	Results of pure culture _		testin	g by dis	c diffusion	method				
microorganisms by disk diffusion							Antibiotic	Diamete	er of inhibition zones	
method, complete the report		Diameter o	of inhibition	Inter	pretation o	fraculte	Antibiotic	resistant		susceptible
	AIIIDIOUC	zone	<i>,</i> mm	inter	pretation o	Tresuits		Staphylococ	cus spp.	
(perform it at classes N 9).							Penicillin	≤28		≥29
							Oxacillin			
							S.aureus	≤10		≥13
							CNS	≤17		≥18
							Canamycine	≤13		≥18
							Gentamicin	≤12		≥15
							Ciprofloxacin	≤15		≥21
							Tetracycline	≤14		≥19
							Erythromycine	≥23		≥23
4. Demonstration:							Lincomycine	≤13		≥21
- agar disk diffusion test for antibiotic	0,5 1,0 2,0	4,0	8,0	16,0	32,0	Control	Chloramphenicol	<17		≥18
susceptibility testing of microorganisms;	μg/ml μg/ml μg/n	nl µg/ml	µg/ml	µg/ml	µg/ml		<u>.</u>	Enterobacte	eriaceae	
- rapid test for antibiotic susceptibility testing							Ampicillin	≤13		≥17
of microorganisms;							Cefazolin	≤14		≥18
- slide of <i>Bacillus anthracis</i> in tissues of white			\square			\square	Cefotaxime	≤14		≥23
							Canamycine	≤13		≥18
mouse, Gram stain;							Gentamicin	≤12		≥15
- slide of Y.pestis in tissues of white mouse,							Ciprofloxacin	≤15		≥21
Gram stain;							Lomefloxacin	≤18		≥22
- slide of <i>Klebsiella pneumoniae</i>				\bigcirc	\square	\mathbf{i}	Tetracycline	≤14		≥19
rhinoscleromatis in tissues of white		_			_	-	Doxicycline	≤12		≥16
mouse, Gram stain.							Chloramphenicol	≤12		≥18
	DDM report (formula therapy):	te what anti	biotics can	be reco	ommended	for the	4-1 Smear Stain		4-2 Smear Stain	
	BDT report: minima	3			of outib					
	μg/ml		y concern	liation			(++++++++++++++++++++++++++++++++++++++	++++++++)	(++++++++++++++++++++++++++++++++++++++	
	0									
	Q	_	_	23	_	_				

	INDIVIDU	AL WORK
Define the target ac	ction of antibiotics	Mechanisms of action of antimicrobial drugs (write in cells)
A-directed RNA polymerase, Cell wall synthesis, RNA enthesis (30S inhibitors), Folic acid metabolism, Cytoplas	Ribosomes 50 50 50 50 50 50 50 50 50 50	
ide effects of antimicrobial drugs	Pathogenicity factors' groups	Mechanisms of resistance of bacteria to an antimicrobial agents
(write in cells)	(write in cells)	(write in cells)
	3	
	3	

	INDIVIDUAL WORK	
Interacting factors of antimicrobial therapy (write in circle)	Characteristics of ideal antimicrobial drug:	Analyze the circuit in the picture (in the middle) and answer next. Which of the resistance mechanisms are
		shown in the figure?
Give the definition of the following terms:		Methods of the antibiotic susceptibility testing (writ
	= antibiotic	methods and indicate possibility to determine MIC
Antibiotic -		
Specific – antibacterial therapy		
Minimal -		
inhibitory		
concentration		
Multiple - resistance		
Pathogenicity -		
Q	25	

Practical class 9. Credit "Morphology and physiology of microorganisms"

	List of questions			Oral quiz	Script	Tests	Total results
1	History of microbiology as a science. Periods. The founders of microbiology main routs.	25	The structure of bacterial genetic appara	atus Phenotyne	genotype geno	me genes Reg	ulation of gene
2.	Microscopic method of examination: tasks, procedure, evaluation of the method.	25.	expression. General properties and varieties				subtion of gene
2. 2	Bright-field light microscope: components and proper use of the microscope. Dark-field light microscopy: the	26		•			ion variability
э.			Molecular methods in diagnosis of infection				
		27.			nethous, auvanta	iges. Molecular	
	microscopy. Fluorescence microscopy: principles behind the fluorescence microscopy. The technique of oil	20	polymerase chain reaction: principles of the r				
	immersion microscopy.	28.	Doctrine regarding infections. Terms for e	mergence of info	ectious disease.	Basic terminolog	y of infectology.
4.	Type of microscopic preparations. Smear preparation and fixation. Simple methods of staining.	20	Classification of infections.		h		
5.	Differential stains of microorganisms. Gram stain: medical application, principles, procedure for Gram stain.	29.	Role of microorganisms in infection emerge		U ,		
6.	Morphology of bacteria. Distinctive features of prokaryotic and eukaryotic cells. Basic morphological forms of		pathogenicity. Pathogenicity islands. Pathoge			npedins, agressin	s, modulins.
	bacteria. Morphological characteristics of cocci, rods and spiral-shaped bacteria. Motility of bacteria, methods of		Role of microorganisms, social and physical fa		•		
	detection.		Biological method (application of laboratory a				
7.	Structure and function of cell envelope and appendages. Capsule. Detection methods of the capsule.	32.	Chemoprophylaxis and chemotherapy; an		otherapeutic age	ents and antibio	otics. Sources of
8.	The composition, function, detection methods of bacterial cell wall. The cell wall of gram-positive bacteria. The		antibiotics. Especially the use of antibiotics in	•			
	cell wall of gram-negative bacteria. Bacterial forms with defective cell wall. Factors inducing cell wall removal,	33.	Mechanisms of antibiotics action. Side effect	s of antibiotics. P	rinciples for ration	nal antimicrobial	therapy.
	medical importance of L-forms.	34.	The problem of resistance to antimicrobials	: definitions (inti	rinsic, acquired r	esistance), incide	nce, significance.
9.	Bacterial core: cytoplasm, cytoplasmic structures; their functions and detection methods. Acid-fast bacteria and		Resistance mechanisms.				
	unique properties of their cell wall. Methods of acid-fast staining: medical application, principle, procedure.	35.	Antibiotic susceptibility testing of microorgan	isms: methods ar	d principles.		
10.	Resting forms of microorganisms. Bacterial endospores: medical importance, properties of endospore, the periods	36.	Ecology of microorganisms. Basic terminology	y of ecology.			
	of endospore formation, detection methods (principles, procedures).	37.	Asepsis: definition, surgical, medical asepsis,	asepsis in microbi	ological laborato	γ.	
11.	Taxonomy of microorganisms: classification and nomenclature. Modern approaches to taxonomy of	38.	Sterilization: definition, methods of sterilizati	on (physical, cher	nical, mechanical	, quality control.	
	microorganisms. Taxonomic ranks. Vars (types), strains, clones, pure cultures.		Disinfection: definition, methods of disinfecti				
12.	Taxonomy, morphology, medical significance of the spirochetes. Methods for spirochetes detection.	40.	Antisepsis: definition, methods of antisepsis.	Disinfectant and a	antiseptics: classif	ication and mode	es of action.
	Taxonomy, morphology, medical significance of Actinomyces.				•		
	Taxonomy, morphology, medical significance of Mycoplasmas. Methods for Mycoplasmas investigations.	List	of practice.				
	Taxonomy, morphology, medical significance of Chlamydiae and Rickettsiacea.	1.	Prepare heat-fixed slide of bacteria, cultured	d on agar medium	. stain with meth	vlene blue.	
	Nutrition of microorganisms. Source of macro- and micronutrients, growth factors. Nutritional types. Transport	2.	Prepare heat-fixed slides of bacteria, culture	•		•	
-0.	mechanisms for nutrient absorption.	3.	Prepare heat-fixed slides of bacteria, culture		-		
17	Energy strategies in microorganisms. Aerobic and anaerobic respiration. Structures involved in respiration in	4.	Technology immersion microscopy.				
17.	microorganisms.	5.	Determine the morphology of Staphylococc	us nure culture (Fram stain		
18	Reproduction of microorganisms. Mechanisms and phases of bacterial division.	5. 6.	Determine the morphology of Staphylococc				
	Bacteriological method of laboratory diagnosis: tasks, procedure, evaluation of the method.	0. 7.	Determine the morphology of Gram+ and G			ain	
	Cultivation of microorganisms. Conditions required for growth. Nutrient media for culturing bacteria: classification	7. 8.	Determine the morphology of the culture in		,	ann.	
20.							
	and characteristics. Culture media ingredients, procedure of preparation and sterilization. General requirements	9.	Define streptobacill pure culture morpholog		-		
24	to bacteriologic nutrient media.	10.	· · · ·	• •			
	Methods of aerobic microorganisms isolation in pure culture.	11.	Characterize morphology of two different ty	pes of colonies pi	esent on agar me	alum.	
22.	Methods of anaerobic microorganisms isolation in pure culture. Cultivation of anaerobic bacteria: culture media,						
	techniques, equipment.						
	Identification of microorganisms: morphological, cultural, serologic, biological, genetic.						
24.	Biochemical identification of microorganisms. Detection of: a) proteolytic enzymes; b) carbohydrate hydrolyses						
	enzymes; c) lipolytic enzymes; d) oxidative- reductive enzymes; e) hemolysins. Automatic stations for						
	identification of bacteria.						

Practical class 10. Immune system. Innate immunity. Methods for innate immunity factors evaluation

Suggested reading for self-study:									~	L	~			
Human immune system: organs, cells	s, molecul	es (CD; red	ceptors; N	/HC I, II,	III; cytoki	nes, adhe	sion mol	ecules etc	:.).	Signatur	e of the tuto	r		
Immunity, types of immunity.		_					-	4						
Innate immunity. Immune and not-			-	-	m: compo	osition, w	ay of ac	tivation, f	functions.					
Methods for estimation of complement system	-		-											
Polynuclear and mononuclear phage			agocytosis	s: phase	s, intrace	llular killi	ng mech	anisms, o	outcomes.	Oral quiz	Laboratory	Individual	Tests	Total results
Dendritic cells. Methods for estimation of pha	igocytosis	•									work	work		
Natural killer cells.														
Antigen-presenting cells. TOLL-like re	eceptors.				Laha		aula I							
	1				Lado	ratory w								
Laboratory exercises									ry report					
1. Determine phagocytosis parameters in												Smear Stain		
prepared slides stained by Gimza		20 min. Th						ine throat	Stain					_
method.	a transferration	oil immer											\frown	
2. Complete the drawings of slides seen	staphylo	cocci are o	counted a	na pnag	ocytosis p	barameter	's calcula	tea.	/					\mathbf{i}
in demonstration room:			• • • •	NI							\backslash			
- incomplete phagocytosis of N.		gocytosis	-	Numbe	er of phag	gocyting	leucocy	tes / All	<u> </u>	++++++++++		- L	++++++++++++	
gonorrhoea.		tes count										- (····		
- incomplete phagocytosis of K.		· - 40-60 9												
rhinoscleromatis.	-	gocytosi		-										
		ococci / N	lumber o	of phago	cyting le	ucocytes	5			\sim			\searrow	
3. Register the complement system	Norma*	ʻ- 4-7.												
activity by 50% hemolysis method.														
				V		f diluted	(1:10) s	erum, ml	l					
Serum is diluted and added in wells from 0,05 to	0,05	0,1	0,15	0,2	0,25	0,3	0,35	0,4	0,45	0,5 5	50% hemolysis	1 CH ₅₀ – ir	י m	ıl serum
0,5 ml. Then saline solution is added to the	1 1 1											X CH ₅₀ – ir	n 1 ml seru	m
final volume of 1,5 ml. 1,5 ml of hemolytic		\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc				
system is added to each well. Reaction is				l l'										
incubated at 37oC for 45 min, cooled at 4 °C and centrifuged at 1500 rpm for 5 min. The												N 40-60	CH ₅₀	
well in which 50% hemolysis occurred is														
determined visually. This means the volume														
of patient's serum that contains one unit of		\sim	\sim	\bigcirc	\mathbf{i}	\bigcirc	\bigcirc	\bigcirc	. J	\bigcirc				
CH50. Then the CH50 for the whole serum is					1			1	<u>г</u> 1	1		-		
calculated.		$\langle \rangle$												
								•				•		

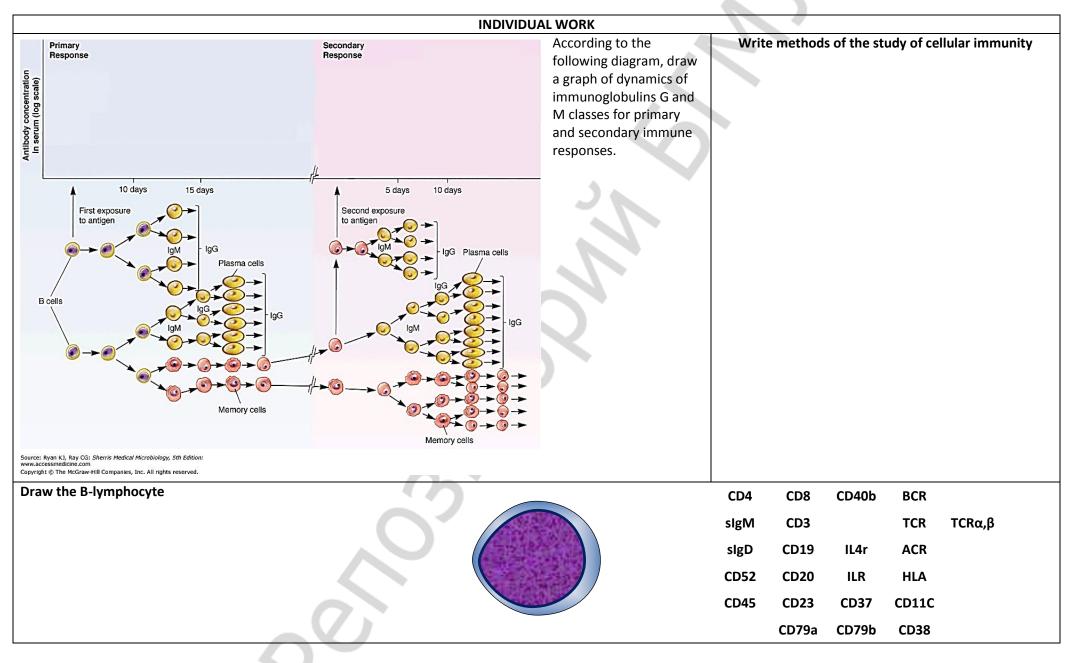
			INDIVIDUAL WORK		
Fill cells with types o	of immunity		Fill wit	n sample of	
nmunity, adoptive, passive, nat ictors, humoral, cellular, non-ir	ural, artificial, immune	Organs	s of immune system Cells of in	mune system	Molecules of immune system
		· · · ·	Write in cells ligand of receptors	Associate th	e scientist and his discovery
		Pattern	Ligand	Edward Anthony	Phagocytosis,
		Recognition Receptors	pathogen-associated molecular patterns	Jenner	Cell-mediated immunity
		TLR1	N.	Élie Metchnikoff	Chemical structure of antibodies
		TLR2		Polly Celine Eveline Matzinger	Smallpox vaccine, vaccination
	INNATE	TLR3	9	Charles Alderson Janeway	side chains, humoral immune response
		TLR4	2	Rodney Robert Porter Gerald M. Edelman	Diphtheria antitoxin
		TLR5		Karl Landsteiner	Danger model, danger theory
		TLR6		Paul Ehrlich	Immune toleranc
		TLR7)	Jules Jean-	pattern
				Baptiste Vincent Bordet	recognition theor
active		TLR8		Emil Adolf von Behring	complement
		TLR9		Frank Macfarlane Burnet	blood group system, Rh factor poliovirus

			AL WORK	2
	Compara			Nose Associated Lymphoid Tissue
	Compare			Nose-Associated Lymphoid Tissue
	ADOPTIVE/A			1 –
				1-
				2 –
				-
				3 –
				4 –
				5 –
	Complement system		Phases of phagoc	ytosis (write in cells)
Activation				
pathway				
activators				
C3-convertase				
C5-convertase				
MAC development		0		
The illustration shows the pro	ocess of phagocytosis.	Granules		
Draw a picture of the possible		Invagination of cell membrane		
process in adjacent cells and	named them.			
		Bacterium		
			Nucleus	
		H ₂ O ₂		
		2	9	

Practical class 11. Antigens. Antibodies. Immune response

Suggested reading for self-study: Immune response, definition, main fa Antigens: definition, main features, cl B-lymphocytes system. B cells genesis	assifi	cation.	or (BCI	R). B-cell a	ctivatio	on, prolif	eration, differentiation to plasmocyte,	Signature	of the tuto	r		
Methods of B-lymphocytes evaluation: quantit	ons. (ative TCR. and 1	Classes ar and funct Genetic co 7 types.	nd su tional t ontrol	bclasses c tests. of TCR div	of imm ersity.	iunoglob T-lympho	ulins. Monoclonal immunoglobulins.	Oral quiz	Laboratory work	Individual work	Tests	Total results
Methods for evaluation of T- and B-ly	mpho	ocytes syst	tem: q	uantitative	e and f							
						Labor	atory work					
Laboratory exercises 1. Determine the quantity of B-cells by	N	Count	N	Count	N	Count	Laboratory report The method reveals CD20 antigen on	D Smoor		۶m	ear	
immune rosettes methods in ready-	1	Count	11	count	21	Count	cell surface;	Stain _			iin	
made slides.	2		12		22		Normal B-cells count by CD20 = 8-20%	0	\frown			<u> </u>
	3		13		23		total blood lymphocytes.			\mathbf{i}		
2. Complete the drawings of slides seen	4		14		24		B _{CD20} = rosette's Cell/30=				/	
in demonstration room:	5		15		25			(+++		+++++) (i)
 immune rosettes method for T-cell quantity determination (Romanowsky-Giemsa 			16		26							/
determination (Romanowsky-Giemsa stain);	7		10		20		-				\backslash	
- blast transformation of lymphocytes	/ 8		17		27		Conclusion:		\searrow		\sim	
(Romanowsky-Giemsa stain);			_				-					
- determine an IgG, A, M concentration in	9		19		29	· ·	-					
serum by Manchini method (simple radial gel immunodiffusion).	10		20		30							
		2					30					

Write figures for elements of an mmunoglobulin molecule indicated on schemeLight chain (L)Variable domen of the light chainConstant domen of the light chainHeavy chain (H)Variable domen of the heavy chainConstant domen of the heavy chainHinge fragmentFc- fragmentFab- fragmentActive center	Enter the names of structures of bacteria, which are antigens
Variable domen of the light chainConstant domen of the light chainHeavy chain (H)Variable domen of the heavy chainConstant domen of the heavy chainHinge fragmentFc- fragmentFab- fragment	
Constant domen of the light chainHeavy chain (H)Variable domen of the heavy chainConstant domen of the heavy chainHinge fragmentFc- fragmentFab- fragment	
Heavy chain (H)Variable domen of the heavy chainConstant domen of the heavy chainHinge fragmentFc- fragmentFab- fragment	
Variable domen of the heavy chain Constant domen of the heavy chain Hinge fragment Fc- fragment Fab- fragment	
Constant domen of the heavy chain Hinge fragment Fc- fragment Fab- fragment	
Hinge fragment Fc- fragment Fab- fragment	
Fc- fragment Fab- fragment	
Fab- fragment	- ARCARA
	1 Court
Active center	
Fc-receptor ligand	
olved Write down the characteris	stics of immunoglobulin according to class and molecule structure
structure	characteristics cla
de la chain	lg
	Ig
	lg
st state	Ig
	Ig
	olved Write down the characteri



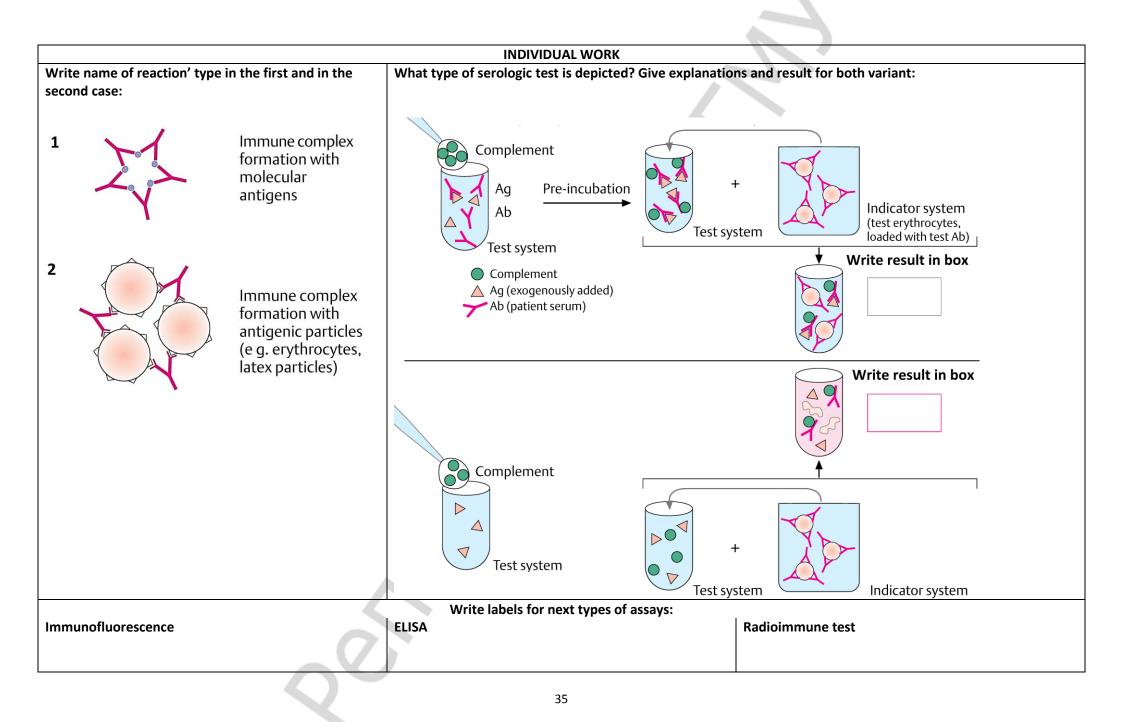
Practical class 12. Serological method

Suggested reading for self-study:										
Serological method, characteristics. Antibody titre. Diagnostic titre. Diagnosticum. Diagnostic serum.					Signature of the tutor					
Agglutination, passive agglutination, reversed passive agglutination, latex agglutination.										
Precipitation. Ring precipitation test, double immunodiffusion in a gel (by Ouchterlony), simple radial						Laboratory	Individual			
immunodiffusion in a gel (by Mancini), immunoelectrophoresis, electroimmunodiffusion.					Oral quiz	work	work	Tests	Total results	
Immune lysis reactions. Complement fixation test: ingredients, implementation, characteristics.										
Immunofluorescence test: direct and indirect variants. Immunoenzyme test. ELISA. Radioimmune test.										
Laboratory work										
Laboratory exercises	Laboratory report									
 Perform slide agglutination test to identify an X-bacteria. 	1. antiserum S.Typhi	2. antiso	erum	3. Saline		X-bacteria				
					Conclusion: X-microbe is					
2. Determine the result of the	CFT	1:20	1:40	1:80	1:160	1:320			SC	AC
complement fixation test.										
	Key "+" "-"	\bigcirc		\mathbf{i}	\sim	\bigcirc			Contraction of the second	No. of the second se
	Assess:									
	Conclusion:									
PASSIVE BLOOD AGGLUTINATION TEST					T			_		
	Key 1/10	1/20	1/40	1/80	1/160	1/320	1/640		SC	AC
3. Determine the result of passive hemagglutination reaction.										
	Assess:									
	Conclusion:									

~

Laboratory exercises	Laboratory report					
 4. Perform ELISA for HBs antigen detection in donor serum: a) put 100 mcl of control serum and samples according to test scheme; b) put 50 mcl of conjugate in each well; c) incubate for 1 hour at 37°C; d) wash the strip 5 times; e) put 100 mcl of chromogen in each well; f) incubate for 30 min at 37°C; g) put 50 mcl of stop-reagent in each 	ELISA test for HBs-Ag detecti on in the serum $\begin{bmatrix} 1 & 2 & 3 & 4 & 5 \\ A & & & & \\ B & & & & \\ C & & & & \\ C & & & & \\ C & & & &$	Laborate Negative control Low positive control High positive control Sample 1 Sample 2 Sample 3 Sample 4	Test validity: - average OD of negative controls must be < 0,15 OD(NC) (negative controls) = - OD negative controls must range from 0,6 to 1,4 of average OD(NC) ⁻ 0,6 OD(NC) = 1,4 OD(NC) = - average positive controls OD must be more than four times as much as OD(NC): average OD(PC)/ OD(NC) = - Low positive control OD must be higher than cut-off level Cut-off calculation:			
well; h) measure the strip on ELISA reader and print out the results; i) fill in the report: check the test validity and make the final		Cut-off = OD(NC) + 0,04 Conclusion:				
validity and make the final conclusion about results.	Sample 3 Sample 4	,0`	-			

INDIVIDUAL WORK				
Write down the fol	llowing definitions:			
Titer	-			
Diagnostic titer	-			
Diagnosticum	-			
Diagnostic serum	-			
	Direct variant	Draw the scheme of ELISA	Indirect variant	
		Antigen – 🛆		
		Antibody – 🗡		
		Anti-Ig antibody –		
		Enzyme -		
		34		



Practical class 13. Immunoprophylaxis and immunotherapy. Immunopathology and clinical immunology

Suggested reading for self-study:											
Immunoprophylaxis and immunotherapy.								Signature of the tutor			
Vaccines, classification, essential characteristics. Vaccinal immunity, factors affecting its development. Methods of vaccinal immunity evaluation.											
Passive immunoprophylaxis. Immune sera a											
Allergy, periods, types. Immediate type of hypersensitivity mechanisms: mediator type (I), cytotoxic type (II), immune complex type (III). Delayed type									Individual		Total
of hypersensitivity mechanism (IV). Drug allergy. All		Oral quiz	Laboratory work	work	Tests	results					
Clinic immunology: definition. Immune stat	us. Immunogram.							WORK	WORK		TCSUILS
Primary and secondary immunodeficiency.											
Autoimmune disease. Causes, manifestation		-									
status correction. Immunosuppression. Immunostir	nulation. Immunon	nodulators. Thy			ces. Interleukins, int	erferons.					
	I		Labora	tory work							
Laboratory exercises					Laboratory rep	ort					
1. Perform the passive hemagglutination test	1. Saline	2. Patient's	3. ER	1. Saline	2.Patient's	3. Latex					
for the detection of rheumatoid factor.		serum	Diagnosticum		serum	Diagnosticum		Stain			
Diagnosticum = armed bull erythrocytes									\frown		
coated with human IgG.	\bigcirc	\bigcirc	\bigcirc	\square	\bigcirc	\bigcirc				、	
Rheumatoid factor is an autological antibody										\backslash	
(IgM) to IgG. It is found in certain											
autoimmune diseases (SLE, RA etc.) and								(++++++	+++++++++++	+++)	
is useful for diagnostics.											
2. Perform the LA test to detect		\bigcirc	\bigcirc			\bigcirc					
autoantibodies to thyreoglobulin									/	/	
Latex diagnosticum = latex microsphera											
coated with thyreoglobulin molecules						/					
					\bigcirc						
3. Demonstration:											
- degranulation of mast cells, Romanowsky-						/					
Giemsa stain;											
- Allergens;	Conclusion:			Conclusion:							
- Medicine for correction.											
	I			1							

INDIVIDUAL WORK							
Write down the types of allergy by P.G.H.Gell and P.R.A.Coombs (1964):							
	-07						

	INDIVIDUAL WORK		
	What type of allergy phenomena is depicted? Give explanations.	The vaccines for active immuniza into four groups:	ation can be divided
 Ischemia Hyperthermia Hypothermia Physical or chemical damage Trauma Swelling of the cell, damage to organelles Lysis - organelles destroyed chromatin destroyed 	Inflammation What are the two phenomena are depicted in the diagram. Give explanations.		ite major allergens of drug allergy:
Chromatin Cell shrinkage, Chromatin Segmentation condensation zeiosis margination of the nucleus, DNA fragmentatio	no n inflammation		
	37		

Practical class 14. Test "Immunology. Immunity. Allergy"

List of questions			Oral quiz	Script	Tests	Total results	
List of questions							
1. Immunology. Definition, tasks, methods. History of immunology.	29.	Allergic read	ction of immediate t	ype, clinical pher	iomena.		
2. Immune system. Characteristics. Organs, cells, molecules of the immune system.	30. Mediator type of ITH: definition, mechanisms, clinical phenomena, approaches f						
3. Cytokines. Definition, classification. Biological importance.		prophylaxis					
4. Immunity: definition, classification. Characteristics of anti-infection immunity.	31.	Cytotoxic (II) and immunoco	mplex (III) ITH	types: definitions,	mechanisms, clinical	
5. Innate immunity: definition, immune and non-immune factors, characteristics.		phenomena	ı.				
6. Complement system: definition, ways of activation, functions. Medical importance.	32.	Hypersensit	ivity of delayed type	(IY): definition, o	classification, clinical	phenomena.	
Methods of complement activity evaluation.	33.	Methods fo	r ITH diagnostics (in	vivo and in vitro)			
7. Phagocytosis. Phagocytes. Phagocytosis phases. Phagocytosis outcome (complete,	34.	Methods fo	r DTH diagnostics (ir	vivo and in vitro	o).		
incomplete). Chemotaxins, opsonins: origin and medical importance.	35.	Immune tol	erance: definition, n	nechanisms, med	ical importance.		
8. Phagocytosis evaluation methods.	36.	Transplantat	tion immunity. MHC	antigens of I, I	I, III types, role for	an immune response	
9. Immune response and factors influencing its strength.		developmer	nt. Transplantological	reactions. Mecha	nisms of transplant re	jection. Prophylaxis.	
10. B-lymphocytes, characteristics, main markers. Humoral immune response, periods.	37.	Clinical imm	nunology: definition,	aims.			
11. Methods for B-lymphocytes quantity and functional activity evaluation.	38.	Primary a	nd secondary in	nmunodeficiencie	es: definitions, cla	assification, medical	
12. Antigens: structure, classification, characteristics.		importance					
13. Bacteria antigenic structure. Cross-reacting antigens.	39.	Immune sta	atus: definition, met	hods for evaluat	ion. Influence of life	way on the immune	
14. Antibodies, structure-functional organization of immunoglobulin molecule, characteristics.		system fund	ction.				
Antiidiotypic and monoclonal antibodies.	40.	Autoimmun	e diseases, classifica	tion. Autoantige	ns. Mechanisms of au	ıtoimmunity.	
15. Classes of immunoglobulins, characteristics.					ctions. Achievements	-	
16. Mechanisms of antigens and antibodies interactions. Specificity. Phases. Affinity. Avidity.	42.	Vaccines, m	ain demands. Classi	fication, charact	eristics, approaches	to development. New	
17. Serology reactions, characteristics. Tasks, periods, clinical importance.		vaccines.					
18. Agglutination reaction. Methods of conduction and result registration. Medical	43. Vaccinal immunity. Factors influencing vaccinal immunity.						
importance.	44. Passive immunoprophylaxis. Antisera for therapy and prophylaxis, medical importance.						
19. Passive hemagglutination, ingredients. Methods of conduction and result registration.	45.			or suppression a	nd stimulation of th	ie immune response,	
Medical importance. Reversed passive agglutination test. Latex agglutination.		drugs for im	munocorrection.				
20. Precipitation reaction. Methods of conduction and result registration. Medical importance.				List of practi	ce.		
21. Immunofluorescence test. Medical importance.	1.	-	e result of agglutinat				
22. Immunoenzyme analysis. ELISA. Ingredients, methods of conduction, results registration,		-	e result of gel immur		est.		
characteristics. Medical importance.	3.		e result of compleme				
23. Immune lysis reactions. Hemolysis.	4.	-	e result of passive he		est.		
24. Complement fixation test. Ingredients, methods of conduction, results registration,			e slide agglutination				
characteristics. Medical importance.	6.		the immunoglobulin				
25. T-lymphocytes system, characteristics. Cellular immune response, dynamics.	7.				by immune rosettes	method.	
26. Methods for T-lymphocytes quantity and functional activity evaluation.	8.	Determine	phagocytosis indices	in ready slides			
27. Allergy: definition, classification. Allergy phases and types.							
28. Allergens: definition, classification, characteristics.							

Practical class 15. Microbiological diagnostics of diseases caused by Staphylococci, Streptococci, Neisseria

Suggested reading for self-study:								
Staphylococci, general characteristics. Pathog	Signatu	ire of the tu	tor					
causative agents of nosocomial infections. Methods of s	staphylococcal infections microbiological diagnostics. The material for the research	•						
depending on the infection form. Scheme of pure cultu	re isolation (from pus, mucus, blood, etc.). Identification methods, phagetyping of							
Staphylococci. Specific prevention and treatment of stap	hylococcal infections.			1				
Streptococci, systematics, general characterist	ics. Antigenic structure. S.pyogenes, S.pneumoniae, S.mutans and other spp of	Oral qui	Laboratory	Individual	Tests	Total		
the oral cavity. The role in the health and pathology of	the oral cavity. The role in the health and pathology of the oral cavity. Acute and chronic diseases, pathogenesis, immunity. Methods for							
streptococcal infections diagnosis. Bacteriological method	nod, study design. Material for studies depending on the form of the infection,							
the rules and methods for taking material. Principles of t								
	he role in the health and pathology of the oral cavity. Meningococcus, gonococcus.							
	obiological diagnostics, material for studies. Specific prevention and treatment.							
Laboratory	work - practical class' duration in second semester is 2 academic hours 15 r	ninutes						
Laboratory exercises	Laboratory report							
1. Microbiological diagnostics of staphylococcal			Staph	ylococcal	colonie	S		
infection, 2 nd period:	Stain	S	hape (form)					
- macro- and microscopic examination of the		s	ize/elevation					
colonies on YSA;		s	surface (appearance)					
- plasmacoagulase test (stabilized rabbit plasma,	(++++++++++++++++++++++++++++++++++++++		edge (margin)					
37°C, 2-4-24 h).								
		<u> </u>	pigmentation					
			consistency					
	Conclusion: according to morphological, cultural and biochemical properties unknow	J V V I I	vn transparency					
	bacterium is identified as	le	ecithinase					
2. Microbiological diagnostics of streptococcal	Smear	I		I				
infection, 3 rd period:	Stain							
- the description of Streptococci growth in serum								
broth;								
- determining the morphology of streptococci,	(++++++++++++++++++++++++++++++++++++++							
Gram staining;								
- determination of streptococcus serogroups by								
ring precipitation test.								
	Conclusion: according to morphological, cultural and biochemical properties unknow	מאור						
	bacterium is identified as							

Laboratory exercises		Labora	itory report	
 Laboratory exercises 3.Demonstration: Staphylococcus aureus in pus, Gram staining; Streptococcus pneumonia, pure culture, Gram staining; S.pneumoniae, white mice, Gram staining; Neisseria gonorrhoeae in pus, Gram staining; Neisseria meningitidis in cerebrospinal fluid, methylene blue; the growth of staphylococci on YSA, blood agar, broth; the growth of streptococci on blood agar and broth; 	Smear	SmearStain	SmearStain	SmearStain
 coagulase test (plasma); anaerobic mannitol fermentation; phage typing of staphylococci. 		8		

INDIVIDUAL WORK									
		40							

Practical class 16. Microbiological diagnostics of acute enteric infections caused by Enterobacteria. Methods for food

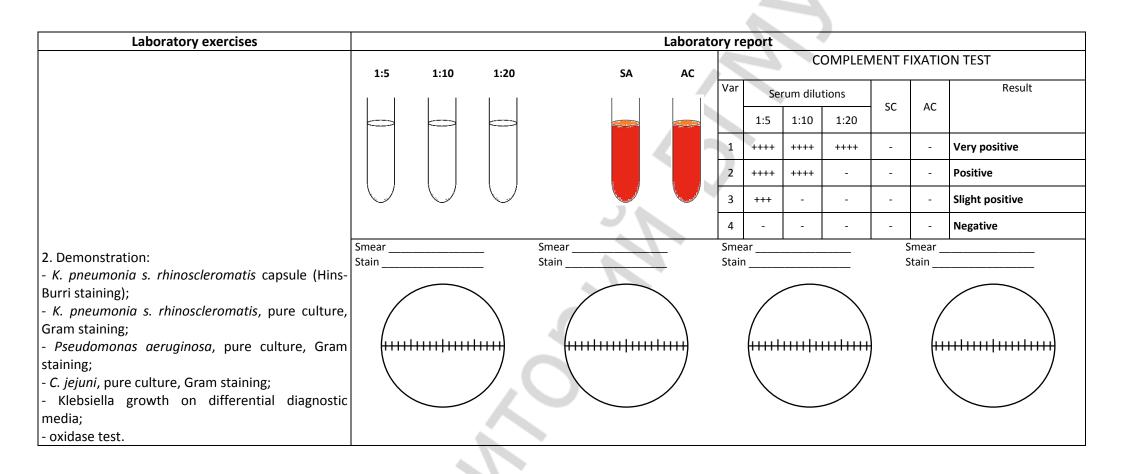
poisoning diagnostics

Suggested reading for self-study:											
General characteristics of Enterobacteriace	General characteristics of Enterobacteriaceae family.					Signature of the tutor					
Escherichia, general characteristics. The bio	logical role of Escherichia co	oli in health and pathology.									
Salmonella, classification and general chara	acteristics. The role in the p	athology, the pathogenesis of typho	pid,								
manifestations in the oral cavity.				Laboratory	Individual						
Shigella, classification, general characteristi	Shigella, classification, general characteristics. The role in pathology.						Total results				
Common principle of microbiological diagno	osis of acute intestinal infect	tion.		work	work						
Etiology of food poisoning. Principles of mic											
	Laboratory work										
Laboratory exercises		Laborator									
1. Demonstration:	Smear		Smear								
- E. coli, pure culture, Gram staining;	Stain		Stain								
- Salmonella typhi pure culture, Gram staining;				<							
- Shigella flexneri pure culture, Gram staining;				\backslash							
- clean media: Endo, Levin, Ploskirev, bismuth	$ $ \rangle		/								
sulfite agar, Rapoport, magnesium, Kliglera;	(++++++++++++++++++++++++++++++++++++++			+++++							
- the same media with the growth of E. coli,											
Salmonella, Shigella;			\backslash								
- biochemical activity of E. coli and Salmonella;											
2. Slide agglutination test with diagnostic O	Smear		Slide agglutina	ation test							
and H-serum for identification of Salmonella.	Stain	~					2000000 -				
					Conclus	ion·					
	(++++++++++++++++++++++++++++++++++++++					1011.					
			<u> </u>								

Practical class 17. Microbiological diagnostics of diseases caused by Klebsiella, Campylobacter, Helicobacter and Pseudomonada

Suggested reading for self-study:										
Klebsiella, classification and general charact	eristics, main di	iseases cause	ed.			Signature of the tutor				
Campylobacter, general characteristics, rol				oathogene	esis. Diagnosis of	•				
campylobacteriosis. Helicobacter.										
Pseudomonas aeruginosa, general characte	ristics role in h	uman nathol	Ogy				Laboratory	Individual	_	Total
r seudomonas deruginosa, general enaracte			ogy.			Oral quiz	work	work	Tests	results
		I	Laboratory w	ork			•			
Laboratory exercises					Laboratory rep	ort				
1. Microbiological diagnostics of Klebsiellosis, 3 rd							Smear			
period:							Stain			
- determine the biochemical properties of						\bigcirc			_	
Klebsiella;										
- perform slide agglutination test with anti-										
capsule diagnostic sera and determine the)	
K-antigen;								+++++++++++++++++++++++++++++++++++++++		
	Duesell	2		 1	5 6	7			/	
- determine the titer of CFT for serological	Russell	2	5		5 0	,		\backslash		
diagnosis of Scleroma.										
	Slide agglutina	tion test wit	h anti-capsule	e serum	Biochemical			K. pneumon	iae	
				1	properties	s. rhinos	cleromatis	s. ozaenae	s. pn	eumoniae
					1, 2 Glucose (A+G)		-	+/-		+
					1, 3 Lactose	,	-	+/-		+
				/	4 Saccharose (4 th day	')	-	+/-		+
					5 Citrate 6 Urea		-	+/- -/+		+
					7 Malonate		+	-/+		+ +
			~ (8 Antigens	02	2a:K3	O2b:K4	01	,3-5:K1-3
	К3	K4 CA								
	Conclusion:									
				_						

 \mathbf{J}^{-}



Practical class 18. Final test "General microbiology. Immunology"

	List of questions			Oral quiz	Script	Tests	Total results
	List of questions						
1.	Microbiology: definition, area and fields of microbiology, methods of investigation. Dental microbiology: goals, objectives, role in the dentist's practice.	18.				enicity and virulence. Fa	
2.	Milestones (periods) in microbiology. Work of Louis Pasteur, Robert Koch, Ilya Mechnikov. Evolution of microorganisms and infectious diseases.	19.			nd latency in host's orga factors in the infectious		
3.	Common with other organisms and the unique features of microorganisms. Principles of microorganisms systematics . Classification and nomenclature of microorganisms. The term of "species" in bacteria: group of traits for species identification (criteria for speciation).		phases, evalua	ation. Disbiosis: causes, c	onsequences, preventior		
4.	Morphology of bacteria. Basic morphological forms of bacteria. The bacterial cell structure. Functions of the surface and cytoplasmic structures of the bacterial cell. Mechanism of Gram staining. Forms of bacteria with the cell wall defects.		in the genesi microorganism	is and development of ns in the nature.	the Biosphere (the co	oncept of the microbial	dominance). Spread of
5.	Unique features of metabolism in prokaryotes. Nutrition of bacteria: types, requirements of bacteria, nutrients and pathways of nutrients penetration into the bacterial cell. Nutrient media: specification (what they should be to provide the best growth of bacteria), classification.		agents, mecha . The antisepsis	anisms and spectrum of a : definition of the term,	iction on microbial cells.		
	Respiration of microorganisms: types, pathways of energy production. Enzymes and cell structures involved into the process of respiration. Classification of bacteria regarding their oxygen requirements.	-	. The antibiotics Antibiotics for	s: characteristics, classif bacterial complications	ication, mechanisms of prophylaxis. Side effects	action. The rational anti of antibiotics.	
	Growth and reproduction of bacteria. The mechanism of simple division and its phases. Dormant forms of microorganisms: general characteristics, factors inducing their formation, medical importance.						chemical mechanisms of ng the microorganisms
	Sampling for microbiological studies: types of samples, the rules of sampling, storage, transportation. Principles of organization, equipment and levels of biosafety in microbiological laboratories.	line .	σ,	definition of the term,	aim and task, method	ls, history of developme	nt, branches. Immunity:
9.	Microscopic (bacterioscopic) method of diagnosing the infectious diseases: definition, aim and tasks, steps and evaluation of specificity, sensitivity, disadvantages of the method. Types of microscopic preparations. Staining of microorganisms: methods. Types of microscopes.	27.	. The immune	es of immunity. system. Central and function, molecules.	peripheral organs of	the immune system. I	mmunocompetent cells:
10.	The bacteriological method of the infectious diseases diagnosing: aim, tasks, phases, and evaluation of specificity, sensitivity, disadvantages of the method.	28.			versus acquired immun in the innate immune sys		nmune factors of innate
11.	Methods for isolation identification of aerobic and anaerobic bacteria pure cultures. Identification of microorganisms without pure culture isolation.	29.				ctivators and activation system activity evaluation	
12.	Genetic apparatus of bacteria (nucleoid, plasmids, transposons, IS-elements) characteristics, functions, effect and importance. The concept of genetic engineering and biotechnology.	30.				tes, classification. Phago . Methods of phagocytos	
13.	Inheritance and variability of microorganisms. Types of variability. Mutations. The genetic recombination of bacteria. Phenotypic variability. The practical significance of the variability of microorganisms in the diagnosis, treatment and prevention of infectious diseases.		. Antigens: struc		cation. T-dependent and	T- independent antigens. ype, species, group antig	
14.	Molecular biological method of diagnosing the infectious diseases (molecular hybridization, polymerase chain reaction): definition, the principle of the methods, application in dentistry.		Cross- reactive	e antigens, medical impo	rtance.	moral immune response:	_
15.	Effect of physical and chemical factors on microorganisms. Disinfection: definition of the term, aim and tasks, types, disinfectants, methods of disinfection quality control.		Activation, pro	oliferation, differentiation	•	cells involved. T-depend	
16.	Sterilization: the term definition, methods, quality control. Sterilization of instruments and medical devices. Consequences of sterilization errors.	34.	. B cells: devel functional acti		gen-specific B cell rece	ptor. Methods for B-ly	mphocytes quantity and
17.	Infection (infection process): the term definition, causes and conditions of infectious diseases emergence. Differences in communicable and non-communicable diseases. Periods of infectious diseases. Infectious disease classification and outcomes.		mechanism of . Methods for th	interaction of antibodie	s with antigens: specificit centration detection: sin	ssification, immunoglob cy, phases, manifestations nple radial immunodiffusi	. Affinity and avidity.

- 37. Serological method of investigation: general definition of the term, objectives, basic concepts (diagnosticum, diagnostic serum, titer, diagnostic titer, paired sera). Samples for serological examination. General characteristics of the method. Use of serological method for infectious and non-infectious diseases diagnostics.
- 38. Agglutination: ingredients, main variants of performance, registration, evaluation, application. Indirect (passive) and reverse passive agglutination: ingredients, mechanism, methodology, registration of results, practical use.
- 39. Immunoprecipitation reaction: ingredients, mechanism, main methods of performance, application. Reaction of the immune lysis. Complement fixation test: ingredients, mechanism, registration of results.
- 40. Solid phase immunoassay reactions. Immunofluorescence (fluorescent antibodies test, FAT), main variants, ingredients, mechanisms, registration of results, practical use. ELISA: ingredients, mechanisms, registration of results, practical use. Immunoblotting (IB). Radioimmunoassay (RIA).
- 41. T cells: development, markers, subpopulations. Helper T-cells, main types (Th1, Th2, Th3, Th17), spectrum of cytokines produced. Control of the immune response of T lymphocytes (Th3, T- regulators, CD4+CD25+Tcells). Methods for assaying of the amount and functional activity of T lymphocytes.
- 42. T-cell receptor: structure, types, genetic control, variety. T-dependent antigens. T- cell epitopes. T-cell restriction.
- 43. Cellular immune response: definition, development, main periods, manifestation. The model of two (three) signals: the response, anergy, apoptosis. Manifestation of cellular immune response. Immunological memory.
- 44. Anti-infection immunity and its types depending on pathogen nature. Innate and acquired defines mechanisms. Protective immunity. Mechanisms of antitoxic, antibacterial, antifungal, antiparasite immunity. Maternal immunity: mechanisms, significance.
- 45. Immunoprophylaxis and immunotherapy for infectious diseases. Active immunoprophylaxis. Vaccines: requirements, characteristics of main vaccines types (live, inactivated (corpuscular, chemical, conjugated, split, subunit), toxoids, genetic engineered). The concept of "ideal vaccine." Adjuvants mechanisms of action. New approaches for the vaccine development. Side effects of vaccination: sever vaccinal reaction, post-vaccination complications.
- 46. Post-vaccination immunity: mechanisms and factors influencing its development. Indications and contraindications to vaccination. Immunization schedule. Expanded Programme on immunization. Collective immunity to infectious diseases, importance.
- 47. Passive immunoprophylaxis and immunotherapy of infectious diseases: indications, principles, complications. Classification of serum preparations (specificity, the manufacturing method, object of the antibodies action, purpose).
- 48. Allergology: the definition, objectives. Allergens. Allergy: the periods, types of reactions.
- 49. Allergic reaction in the oral cavity. Allergic method of investigation: definition, objectives, general characteristics, periods, evaluation.
- 50. Immediate type hypersensitivity (ITH). Mediator type (I) ITH: allergens, mechanism, development, manifestation, prevention of anaphylaxis. Cytotoxic (II) type ITH: allergens, development, mechanisms, manifestations. Immunocomplex (III) type ITH: allergens, development, mechanisms, manifestations.
- 51. Delayed type of hypersensitivity (IV): allergens, development, mechanism, manifestation (infection and contact allergy), importance in oral cavity.
- 52. Drug allergy: major allergens, the mechanisms and types of allergic reactions, methods for diagnostics and prevention.
- 53. Food allergy. Main allergens. Prevention of food allergy. Paraallergy. Idiosyncrasy.
- 54. Autoantibodies: origin, role in the pathology. Autoimmune diseases: definition, classification, etiology, mechanisms of tissue damage, manifestations. Principles of treatment. Prophylaxis.

dis.

- 55. Transplantation immunity. Histocompatibility antigens. Graft reaction types, mechanisms of development, prevention. Immunological tolerance: mechanisms, significance.
- 56. Clinical Immunology: definition, objectives, main concepts. Immune status: principle and methods of examination. Immunogram. Immunodeficiency conditions: classification, causes of development, methods for detection, principles for correction. Antitumor immunity. The concept of immune surveillance. Mechanisms of tumour escape from immune surveillance.

	MICROBIOLOGY	IMMUNOLOGY
INDIVIDUAL WORK		
TEST		
PRACTICAL SKILLS		
AVERAGE GRADE		
ABSENCE FROM PLACTICAL CLASS		
ABSENCE FROM LECTURE		
RATING		
	Credit (CROSS) «PASSED»	«NOT PASSED»
		·

Practical class 1 (19). Microbiological diagnosis methods of diseases caused by Corynebacteria, Bordetella

Suggested reading for self-study:				Oral quiz	Laborator	Individual	Tests	Total	
Corynebacterium diphtheria, general chara	acteristics of the pathogen. Types of C	Corynebacteriu	m diphtheria, their		y work	work	TESIS	results	
distinctive features. Diphtheria toxin and antitoxi		-							
Methods of diphtheria microbiological and molecular biological diagnosis. Principles of diphtheria therapy and prevention.									
Bordetella pertussis and parapertussis. Cha				Signatur	e of the tu	tor			
pertussis, manifestation in the oral cavity, immunity									
Laboratory work									
Laboratory exercises			aboratory report						
1. Bacteriological diagnosis of diphtheria, the 2 nd	Smear	Feature	Colonies on serum tellu	irite agar	1 1		1 1		
period: - describe the colonies Corynebacterium on	Stain	Shape							
potassium tellurite serum agar;		Size							
 seed bacteria from typical colonies into Hiss media (glucose, sucrose, starch). 		Surface							
	(++++++++++++++++++++++++++++++++++++++	Edge		(G			' 🔾	
		Color			5	a Starc	h Urea	n H₂S	
		Consistency							
			Biochemical pro	perties of	sertain co	rynobacte	obacteria		
			· · · ·		Enzymatic activity				
		Corynobact		th Acid prod		Cystein	ase	Ureasa	
			Glucose	Sucros					
		C. diphtheriae	-	-	+	+		-	
		C. diphtheriae C. pseudodipht		-	-	+		- +	
		(hofmani)	-	-	-	-		Ŧ	
		C. xerosis	+	+	-	-		+	
		C. ulcerans	+	-	+	+		+	
		X-microbe							
	Conclusion: according to morphologica	I, cultural and	biochemical proper	ties					
	unknown bacterium is identified as		- ·						

2. Demonstration:	Smear	Smear	Smear	Smear
- Corynebacterium diphtheria stained by Neisser; -	Stain	Stain	Stain	Stain
C.diphtheria stained by Leffler;				
 Bordetella pertussis, Gram staining; 				
- test for Corynebacterium diphtheria toxigenicity;				
- preparations for specific prevention and	(++++++++++++++++++++++++++++++++++++++	(++++++++++++++++++++++++++++++++++++++	(++++++++++++++++++++++++++++++++++++++	(+ + + + + + + + + + + + + + + + + + +
treatment of diphtheria and pertussis;				
- Growth of Bordetella pertussis and parapertussis				
on CCA, NA with tyrosine, urease test;				
- assessment of antidiphtheria immunity intensity.		JN		

Practical class 2 (20). Microbiological diagnosis methods of diseases caused by Mycobacteria and Actinomycetes

Suggested reading for self-study:				Oral quiz	Laborator	Individual	Tests	Total			
Actinomycetes, systematic position, general cha	•	n the oral cavity pathology. Etiolo	ogy, pathogenesis,	•	y work	work		results			
microbiological diagnostics principles of the head and ne	ck tissues actinomycosis.										
Mycobacteria, general characteristics, resistance	e to acids. The causative agent	s of tuberculosis, species composi	ition, morphology,	Signatur	e of the t	utor					
nutritional needs, pathogenicity factors, differences fro	om non-tuberculosis mycobac	teria. The pathogenesis of tuber	culosis, infectious								
granuloma, immunity, allergy, anergy. Principles of micr	obiological diagnostics of tube	rculosis, immunoprophylaxis. TB	chemotherapeutic								
drugs. TB symptoms in the oral cavity.											
		aboratory work									
Laboratory exercises	Laboratory exercises Laboratory report										
1. Bacteriological diagnosis of diphtheria, the 3 rd period:	Smear	Smear	Smear		Sn	near					
- the assessment of Corynobacteria enzymatic activity, identification, conclusion.	Stain	Stain	Stain		St	ain					
				\sim	、 、						
2. Demonstration:					\backslash						
- Cord factor of <i>M.tuberculosis</i> , Ziehl-Neelsen staining;		())			
Actinomycetes spp., pure culture, Gram staining;	(++++++++++++++++++++++++++++++++++++	(++++++++++++++++++++++++++++++++++++	(++++++++	+++++++++++++++++++++++++++++++++++++++	++)	+++++++	 	++++			
- M. leprae, Ziehl-Neelsen staining;											
 M.tuberculosis in sputum, Ziehl-Neelsen staining; 				/	/						
 Mycobacteria growth on nutrient media; 											
- Flotation method;							\smile				
- determination of M. tuberculosis drug resistance.											

Practical class 3 (21). Methods of anaerobic infections microbiological diagnostics

Suggested reading for self-study:			2	Oral quiz	Laboratory	Individual	Tests	Total
Anaerobes, classification, general characteri	stics.				work	work		results
Non-spore anaerobes of the oral cavity (s	streptococci, bacteroides, fus	sobacteria, peptococci	, peptostreptococci,					
veillonella, fusobacterial, leptotrichi, prevotella, bilo								
Causative agents of gas gangrene, tetanu	s, botulism, general charact	eristics. Pathogenicity	factors, exotoxins.	Signature	of the tuto	r		
Clostridium role in dentistry. General principles a	and methods for anaerobic	infections diagnosis. I	Molecular biological	-				
diagnostics - PCR. Principles of anaerobic infections	therapy and prevention.							
	La	boratory work						
Laboratory exercises			Laboratory report					
1. Bacteriological diagnosis of diphtheria, the 3 rd period:	Smear Stain	Smear Stain	Smear Stain			near ain		
 the assessment of Corynobacteria enzymatic activity, identification, conclusion. Demonstration: Clostridium, Gram staining; Bacteroides, Gram staining; veillonella spp., Gram staining; fusobacterial spp., Gram staining; anaerobes growth on nutrient media. 				+				

Practical class 4 (22). Microbiological diagnostics of diseases caused by Spirochetes, Rickettsia, Chlamydia, Mycoplasma

Suggested reading for self-study:		<i>,</i> ,	Oral quiz	Laboratory	Individual	Tests	Total		
Spirochetes, classification, general characte	ristics.			work	work	Tests	results		
Treponema. Systematics and general chara		mmunity in syphilis, manifestat	tions in						
the oral cavity. Methods of syphilis microbiolo	ogical diagnosis. Principles	of syphilis therapy and prev	ention.						
Fusospirochetosis pathogens.									
Leptospira, Borrelia. Role in human patholo	Signature	Signature of the tutor							
Rickettsiae, systematic position, classificat	kettsia								
typhii, pathogenesis, immunity and methods of mic	robiological diagnostics. Othe	r pathogenic rickettsia.							
Chlamydia, systematics and general charact	eristics, role in human pathol	ogy.							
Mycoplasma, systematics and general chara	acteristics, role in human path	ology.							
	La	boratory work							
Laboratory exercises			ory report						
1. Demonstration:	Smear	Smear	Smear						
 Leptospires spp., dark field microscopy; 	Stain	Stain	Stain		Stain				
- Borrelia recurentis in blood, Romanovsky-Giemsa						\frown	<		
staining;						·	\mathbf{i}		
- Treponema spp. in dental plaque, Gram staining;			/						
- Treponema pallidum, pure culture; Romanovsky-	[(++++++++++++++++++++++++++++++++++++	(++++++++++++++++++++++++++++++++++++++	(++++++++++++++++++++++++++++++++++++++		(1111	+++++++++++++++++++++++++++++++++++++++			
Giemsa staining;									
- Chlamydia spp. in cell culture, Romanovsky-			\backslash						
Giemsa staining;									
- <i>R.prowazeki</i> , pure culture, Zdrodovski staining;									
- Wasserman test (ELISA).	Smear	Smear							
	Stain	Stain							
	(++++++++++++++++++++++++++++++++++++	(++++++++++++++++++++++++++++++++++++++							
	[[]	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							

	1										
Laboratory exercises			1			oratory rep		-			
2. Assess CFT for the epidemic typhus diagnostics.	4. (CFT	1:20	1:40	1:80	1:160	1:320			SC	AC
	Key "+"										
	Assess:			-							
	Conclusion	n:									
2. Dessive blood agglutination test for differential		1	1				INATION T	EST			
3. Passive blood agglutination test for differential	1/10	1/20	1/40	1/80	1/160	1/320	1/640		SC1	A	С
diagnostics of epidemic and residual typhus.									SC2		
4. Perform the slide microprecipitation reaction	Conclusion	n:									
(VDRL) for the syphilis serodiagnosis.5. Assess ELISA (Wasserman test) for the syphilis diagnostics.			 Patient serur Saline sol. Cardiolipin . 	n 1:20 react syphi Ag	microprecipit ion (VDRL) fo lis serodiagno lusion:	r the		asserman tes	it) for the i	syphilis dia	gnostics.
Q	0			50		1					

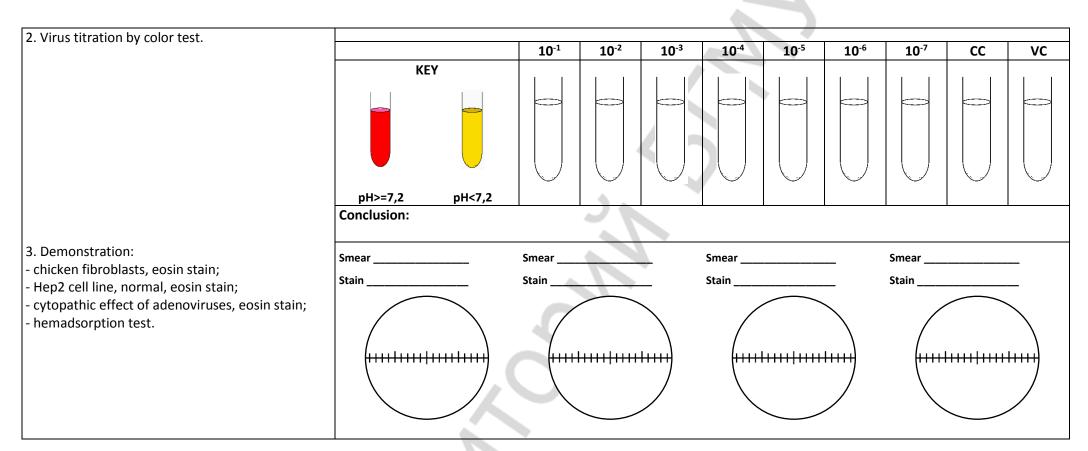
Practical class 5 (23). Test "Special bacteriology"

List of questions		Oral quiz	Script	Tests	Total results
 Staphylococci, classification, general characteristics. Staphylococcal infections, pathogenesis and immunity. Role in in oral cavity pathology. Microbiological diagnosis. Principles of staphylococcal infections treatment and prevention. Streptococci, classification, general characteristics, antigenic structure. Acute and chronic streptococcal infections. Oral streptococci. The role of streptococci in oral pathology. Methods of streptococcal infections diagnostics. Principles of therapy and prophylaxis. Classification of Neisseria. Meningococcus, general characteristics. Meningococcal infections, mechanisms of pathogenesis, immunity, methods of diagnosis, prevention. Gonococci, general characteristics. Mechanisms of pathogenesis and immunity. Microbiological diagnosis of acute and chronic gonorrhea. Principles of therapy and prophylaxis. Gonorrheal stomatitis. General characteristics of the family. Enterobacteriaceae. General Principles of acute intestinal infections (AII) bacteriological diagnosis. E. coli, common characteristic. The biological role of Escherichia coli. Diseases caused by Scherichia. Salmonella. General characteristics. Nembers of the genus. Diseases caused by Salmonella. Pathogenes of typhoid, paratyphoid A and B, general characteristic. Pathogenesis, immunity, prophylaxis and methods of microbiological diagnosis of typhoid and paratyphoid. The etiology of bacterial origin food poisoning and intoxication. Materials and methods of diagnosis. Salegnes and characteristics. Role in human pathology. Methods of klebsiellosis microbiological diagnostics. Pseudomonas aeruginosa, general characteristics, pathogenicity factors. Role in human pathology. Caphtheria, general characteristics. Role in the oral cavity pathology. Actinomycosis, characteristic of pathogenesis, immunity. Microbiological diagnosis, principles of pertussis treatment and prevent	 tetanus treatment and p Pathogenesis, principles of ga 21. The causative agent of both prevention and therapy. 22. Methods of anaerobic infection 23. Classification and general chain 24. Classification of treponemes a Pathogenesis, immunity, princeavity. Methods of syphilis dia 25. Oral spirochetes. Fusospirochain 26. Rickettsia. Role in human path 27. Chlamydia. Role in human path 28. Mycoplasma. Role in human path 28. Mycoplasma. Role in human path 29. Determine the morphology of G 20. Determine the morphology of G 21. Determine the morphology of G 22. Determine the morphology of G 23. Determine the morphology of G 24. Determine the morphology of G 25. Determine the morphology of G 26. Determine the morphology of G 27. Determine the morphology of G 28. Determine the morphology of G 29. Determine the morphology of G 20. Determine the morphology of G 21. Determine the morphology of G 22. Determine the morphology of G 23. Determine the morphology of G 24. Determine the morphology of G 25. Determine the morphology of G 26. Determine the morphology of G 27. Determine the morphology of G 28. Determine the morphology of G 29. Determine the morphology of G 30. Determine the morphology of G 	revention. Gas s gangrene treatr ulism, general cl ons diagnosis. racteristics of spin and treponemal of ciples of syphilis agnosis. aetosis. hology. Pathogen hology. Pathogen bathology.	gangrene pati nent and prevent naracteristic. Pat rochetes. Borrelic diseases. Charact therapy and prop esis, immunity, n nesis, immunity, n genesis, immunity al skills: ure culture, Gram Gram stain. ure culture, Gram ureus and Escher culture, Gram stai Gram stain. ulture, Gram stai e culture, Leffler culture, Hins-Burr sputum, Ziehl-Net	hogens, general tion. hogenesis, princi osis and leptospirc eristics of syphilis ohylaxis, manifest nethods of typhus methods of diagno y, methods of diagno y, methods of diagno y, methods of diagno the stain. stain. stain. n. stain. n. stain. elsen stain.	characteristic: ples of botulisr ples agents. causative agen ations in the ora diagnosis. psis. gnosis.

 $\mathbf{\tilde{c}}$

Practical class 6 (24). Methods of investigations in virology. Bacteriophages

Suggested reading for self-study:		Oral quiz	Laboratory work	Individual work	Tests	Total results
	ises. Mechanisms of reproduction. Strict parasitism and cytotropism		WOIK	WOIN		Tesuits
of viruses.						
The types of viral infection. The mechar	nisms of antiviral immunity. Principles for the prevention of viral					
infections in the dental practice. Methods of viral in	fections diagnostics. Culturing of viruses.	C:				
Viruses of bacteria (bacteriophages), cha	racteristics of bacteriophages. Use of bacteriophages in medical	Signature	of the tuto	or		
practice.						
	Laboratory work					
Laboratory exercises	Laboratory repor	t				
1. Chicken embryo inoculation with influenza virus	1.Study the structure of hen embryo (8-11 days)				F	
in allantois cavity.	2. Examine hen embryo in ovoscope and determine the vitality signs:			T		
	a) the dimensions of the embryo shape b) presence of the developed blood vessels pattern					
	c) active mobility of the embryo				Ц	
	d) mark the air cavity border					
	3. Set embryo on the egg rack and work with the shell as follows:				Summer and the second s	ALCONT OF STREET
	a) 70% alcohol			ALL		JA
	b) 5% iodine				F-C	
	4. Inoculate embryo as follows:			3	Gal	//////////////////////////////////////
	a) flame scissors b) carefully pierce the shell for 3-5 mm above the air cavity border			11 //	19	HH
	c) introduce 0,2 ml of viral material (live influenza vaccine) into the syringe				1 3	
	d) put the needle into the embryo (25 mm) vertically and introduce the material.			4月十八	1-1	J/III
	5. Repeat the shell manipulations according to p.3.					MH 6
	6. Seal the shell with tape or melted wax. Mark the embryo (group number).			ETA:	ALC.	
				5		All
	Inoculation of the Allantois cavity:					×
	1. Use cotton wool and 70 percent alcohol to swab the eggs end to be inoculated. Allow the alc 2. Swab the eggshell punch with 70 percent of alcohol solution. Place used cotton wool in disca		rate.		7	8
	3. Pierce a hole in the end of the egg at the marked inoculation site.	ru tray.		1. Shell m	ombrana	
	4. Attach needle to 1 mL syringe.			2. Air sac	emprane	
	5. Draw inoculum into 1 mL syringe.				allantoic memb	rane
	6. Keeping the needle and syringe vertically, run through the eggshell hole approximately for 1	5 mm into the	egg to reach th	e 4. Allanto		
	allantois cavity.			5. Amnior		
	7. Inject 0.1 mL of inoculum into the egg.			6. Yolk sad		
	 8. Take the needle out from the egg. 9. Seal the hole in the shell with stationery tape or melted wax. 			7. Albumi		
	10. Discard the used needles and syringes.			8. Extraen 9. Embryc	nbryonic cavity	
	11. Put the inoculated eggs into an incubator.			9. EIIIDIYO	,	



			INDIVIDU	JAL WORK									
	According to Baltimore classification, viruses are divided into the following seven classes (fill table)												
class	I	II		IV	V	VI	VII						
Description of genome and replication strategy			5										
tip	T-C-A-G A-G-T-C	T-C-A-G	U-C-A-G A-G-U-C	U-C-A-G	U-C-A-G-	U-C-A-G↓↑	T-C-A-G ↓↑ A-G-T-C						

Practical class 7 (25). Virology diagnostics of diseases caused by Orthomyxoviruses, Paramyxoviruses. Togaviruses

Suggested reading for self-study:								
Orthomyxoviruses. Taxonomy and cha	racteristics of the family. Influenza viruses, morphology, antigenic structure	Oral quiz	work	work	Tests	results		
and antigenic diversity (shift and drift) and its	consequences. Methods for influenza diagnostics. Principles of therapy and							
prophylaxis.								
Paramyxoviruses. Taxonomy and chara	acteristics of the family. Differentiation with Orthomyxoviruses,							
Parainfluenza viruses, Mumps virus, Morbilivir	us, HRSV. Pathogenesis, immunity, specific prophylaxis.	Signature	of the tut	or				
Rubella virus. General characteristics.	Role in pathology. Manifestations of rubella in the maxillofacial region.							
Prevention of rubella.	Prevention of rubella. Laboratory work							
Laboratory exercises								
1. Chicken embryo autopsy.	1. Before autopsy embryo should be cooled for 2-3 hours at 4–6° C for		sels constri	iction.				
2. Virus indication by slide HT.	2. Treat the eggshell with 70%-alcohol and flamed. Repeat it once mor							
3. Evaluation of HIT for influenzavirus	3. Open the shell by sterile scissors 2-3 mm above air sack border. Ren	move shell	membran	e and aspir	ate 1 ml o	f allantois		
identification.	cavity liquid.							
	4. Amnion cavity liquid can also be taken (0,5-1,5 ml).							
	5. Remove an embryo on the Petri plate. Allantois membrane shoul	d be carefu	ully examination of the second s	ned by eye	es. Usually	influenza		
	viruses produce no CPE.							
	6. Perform slide HT for virus indication							
	1 2 3 SLIDE HT							
	1 2 3 SLIDE HT Put two drops of 5% chicken	onuthroputor	Smear					
	suspension onto glass slide. Add							
	drop of allantois liquid (experimen							
	(negative control) with each drop.							
	The test is positive if flakes of eryt			/				
	developed. The test is negative if remain in suspension after 5-7 min.	erythrocytes		/	١			
				 +++++++++	+++++++++++++++++++++++++++++++++++++++			
				/				
				\backslash				
	1. Allantois liquid.							
	2. Saline.							
	3. 5% chicken erythrocytes.							
<u></u>			1					

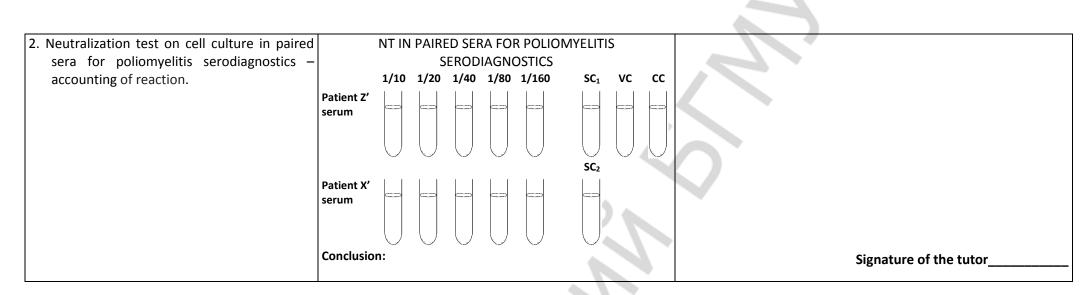
 $\mathbf{2}$

		Laborat	tory work						
Laboratory exercises				Laborat	tory report				
4. Evaluation of HIT for influenza virus	L patient's virus	Anti H ₁ N ₁	Anti H ₃ N ₂	Anti H₅N1	EC	VC	К _{анти} С1	К _{анти} С2	КантиСЗ
identification									
	D patient's virus								
	Conclusion:			1					

			INDI	VIDUAL WO	DRK					
						Fill th	e table			
	 Hemagglutinin Neuraminidase 		Host	Tropism	Diseases	Trans- mission	Vaccine	Antiviral drugs	Samples	Laboratory diagnostics
Constructions Constructions Constructions Constructions Constructions Constructions Constructions Constructions Constructions Constructions Constructions Constructions Constructions	 Lipid bilayer membrane Matrix protein M1 Ion channel protein M2 Nucleoprotein Nuclear export protein Polymerase complex 	Influenza A virus	77							
Virion ofvirus (identify numerals virion structure) Baltimore Group		Measles virus	2							

Practical class 8 (26). Virologic diagnostics of diseases caused by picornaviruses and hepatitis viruses

	uggested reading for self-study: Picornaviruses. Characteristics of the family, importance for human pathology. Etiology, pathogenesis, immunity									Laboratory work	Individua work	al T	ests		otal sults
					•	exsackieviruses and ECHOviruses.									
RNA-viru		interioproj		i pononiyo	211113. C			y							
		ses A B (DETa	xonomy a	nd chai	acteristics, role in human patholo	by Pathogenesis and immur	nity in							
				•		ecific prophylaxis in dentistry.	by: I denogenesis and imma	Si	gnature	e of the tut	or				
neputitis	D. Lubore	itory ulugi	1051105. 5p		non s	cente propriytaxis în dentistry.			•						
						Laborator	ry work								
	Lab	oratory e	xercises				Laboratory r	eport							
1. Perfor	mance of	ELISA for	VHC diagr	nostics.		ibodies from patients' serum bind to				gative control				1	2
			_			ombinant antigens adsorbed on the well			·Ρ ·	ositive control; um patient 1;		Core	Α	C-	X 1
						a plate. Specific immune complexes then		e for 1 ho	uii	rum patient 2	;	NS₃	В	C-	X 1
		I on the co				ected by conjugate antibody-enzyme and pective enzymatic reaction. Colored			-	2»–plate ver	-	•			
		ombiBest an eals antibod	A e) put 100 µл of conjugate in ead	ch well:	A-H - p	olate horizonta	l rows;	NS ₄	С	C-	X1				
antige			bate for 3	30			NS₅	D	C-	X 1					
	Reaction scheme: min at 37°C;											Core	Ε	C+	X ₂
	a) HCV antigens are adsorbed on the strip g) wash 5 times;											NS₃	F	C+	X2
					we	Is as follows: rows A, E – core	h) put 100 μ l of substrate in each	n well;	Card S	TATEMENT		NS₄	G	C+	X ₂
						rows B,F – NS3 rows C,G - NS4	 i) incubate for 30 min at 37°C; j) put 50 µl of stop solution in ea 	ch well:				•			
						rows D, H - NS5	k) measure the plate by ELISA re					NS₅	н	C+	X ₂
							l) evaluate results.	,							
	1	1		1											
Antigens	Row	OD	OD	Cut-off	Result		•			ple(core)/ C	•	•	=		
Core	Α	control	probe			Negative control OD < 0,2		•		ple (NS3)/Cu	•	•			
NS ₃	B					Mean negative control OD =				ple (NS3)/Cu					
NS ₄	C					 Mean positive control OD >0,8 Mean positive control OD = 		esults ev		ple (NS3)/Cu	ut-off(NS5	-Ag) =			
NS ₅	D					- 2. Cut-off level for each antigen:				mple is cons	idorod na	vastivo			
Core	E					Cut-off (core-Ag) = NC ODO(core)			-	sidered pos		-			
NS ₃	F					- Cut-off (NS3-Ag) = NC OD (NS3) +		e-Ag		sidered pos		exceeu	5 1 101	•	
NS ₄	G					- Cut-off (NS4-Ag) = NC OD (NS4) +		two anti	zens						
NS ₅	н					Cut-off (NS5-Ag) = NC OD (NS5) +	•		-	d uncertain	if IP excee	ds 1 fc	or one		
						3. Positivity index determination f		structura							
L							<u> </u>	-	•	,					
						56									



			IND	IVIDUAL W	ORK					
						Fill the	e table			
S. Sile	1. DNA 2. DNA		Host	Tropism	Diseases	Trans- mission	Vaccine	Antiviral drugs	Samples	Laboratory diagnostics
	Polymerase 3. Lipid bilayer membrane 4. Large HBsAg 5. Medium HBsAg 6. Small HBsAg 7. Core HBcAg 8. HBeAg	Hepatitis B virus Hepatitis C virus	17							
Virion of virus (identify numerals virion structure) Baltimore Group										

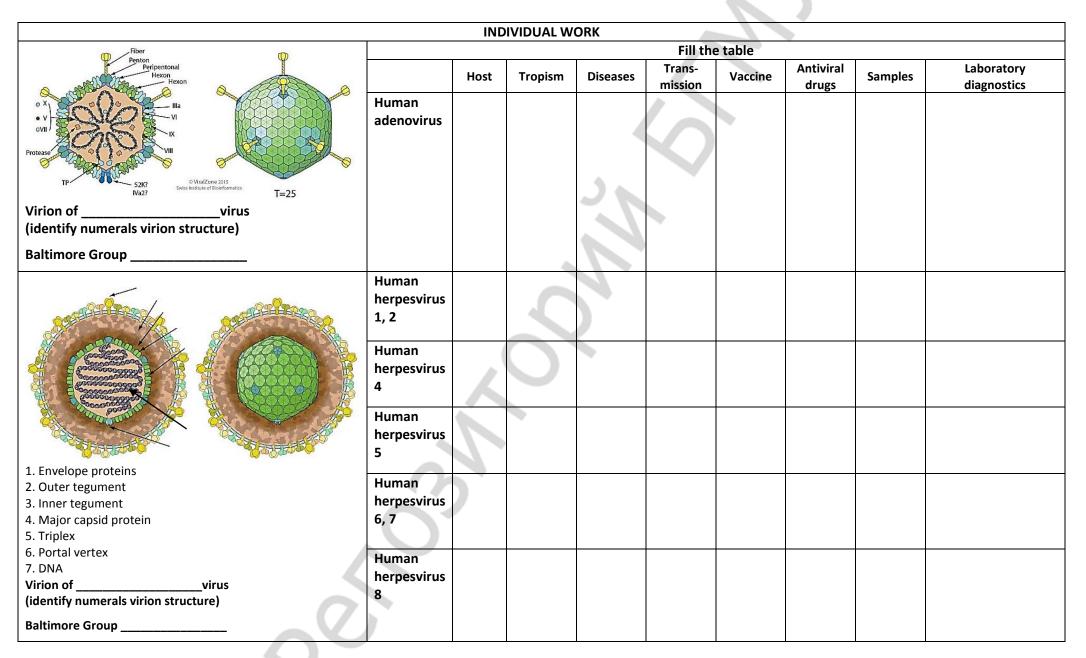
		1	IND	DIVIDUAL W	ORK					
				1			e table	Antiviral		Laboratoria
Т	-0000000		Host	Tropism	Diseases	Trans- mission	Vaccine	drugs	Samples	Laboratory diagnostics
27 nm	VP1 VP3	Hepatitis E virus				6				
1. RNA 2. Capsid J 3. VPg	NA apsid polypeptides		1		2					
					K					
Baltimor	e Group			\bigcirc						
Virus	Family Conversion				The		ing of the s			e viele averue
HAV	Family-Genus-Species Picornaviridae – Hepatovirus - Hepatitis A virus		Ge	nome	Thes	structure, s	lize of the	virion, nm		h-risk group
HBV	Hepadnaviridae – Orthohepadnavirus - Hepatitis	s B virus		-						
HCV	Flaviviridae – Hepacivirus - Hepatitis C virus									
HDV	Unassigned - Deltavirus - Hepatitis delta virus		\mathcal{D}^{-}							
HEV	Hepeviridae- Hepevirus - Hepatitis E virus		-							
				58						

Practical class 9 (27). Methods of diagnostics for diseases caused by Retroviruses and Rabdoviruses

AIDS-associated diseases. Manifestations in	cteristics of the family. Human immunodeficiency virus (HIV-1, HIV-2). Pathogenesis. In the oral cavity. HIV diagnostics, prophylaxis, treatment. HIV in Belarus. Incteristics of rabdoviruses. Pathogenesis, immunity and specific prophylaxis of rabies.	Oral quiz Signatu	Laboratory work ure of the to	Individual work Jtor	Tests	Total results
	Laboratory work					
Laboratory exercises	Laboratory report					
 Demonstration: Negry bodies in mouse brain homogenate, Muromtcev stain. 	Smear Stain	+				

Practical class 10 (28). Methods of diagnostics for diseases caused by herpes- and adenoviruses diseases in oral cavity

Suggested reading for self-study:		Oral quiz	Laboratory work	Individual work	Tests	Total results
immunity, diagnostics, chemo and immunother of chicken pox and herpes zoster. Cytomega properties, role in human pathology. Infectio Immunity, diagnosis, chemotherapy and immur	v characteristics. HSV-1, HSV-2, properties, role in human pathology, pathogenesis, apy. Herpetic stomatitis, keratoconjunctivitis, facial skin lesions and red lip rims. A virus ovirus, properties, forms of infection. Cytomegalovirus parotitis. Epstein-Barr virus, us mononucleosis. Herpesviruses of human 6, 7, 8 types, role in human pathology. Notherapy of herpetic infections. adenoviruses. Virions structures, pathogenesis, immunity, laboratory diagnostics.					
	Laboratory work					
Laboratory exercises	Laboratory report					
 1. Demonstration: - CPE of adenoviruses. 	Smear Stain ++++++++++++++++++++++++++++++					



Practical class 11 (29). Dental microbiology. Methods of oral cavity normal flora investigation. Etiology and pathogenesis of caries

Suggested reading for self-study:			Dral quiz	aboratory work	Individual work	Tests	Total results
Dental microbiology, goals and objectives. Normal microflora of				WUIK	WUIK		results
Influence of genetic and non-genetic factors on the composition of the or a state of a set burgers and the set of a set o							
soft tissue, contact with alien microorganisms, diet and oral hygiene). Th Dysbacteriosis of the mouth, causes, diagnostic methods.	e value of normal micronora. Methods of						
The etiology of caries. Causal importance of microorganisms. S. n	utans proportios Subsidiary gorms Dath	Si	gnature o	of the tuto	or		
conducive to the caries development. Prophylaxis and therapy of caries							
microflora. Criteria for assessment of the isolated microorganisms etiological and the solated microorganisms and the solated microorgan		study of carlesogenic					
	Laboratory work						
Laboratory exercises		oratory report					
1. Perform isolation of normal flora from - Divide agar plates into four	sections with a marking pen or pencil. Mark e	each section with 1, 2, 3, 4.		В	lood agar	r MacCo	nkey agar
mucus of oral cavity membrane surfaces - Mark each plate with grou		· · · · · · · · · · · · · · · · · · ·		1	-		
to gain the microarganisms diversity - Add sterile isotonic solutio	to the Petri dish with sterile filter paper squa			2	\frown		
- Ose named forceps to cov	er the squares of the various body sites in w nbranes of tong, cheeks) with filter paper for		ivestigated	3			
	per for 60 sec on the surface of blood and Ma				*		
	es in which the microbial flora is under study.		for 24-48				
hours.							
2. Register the results of experiment on Results of registration	of dysbacteriosis: Body site	1 -	2 -		3 ·	-	
normal flora isolation from mucus	Amount of						
membrane surfaces, Gram stain different	colonies						
types of colonies, explore under Conclusion:	and their						
microscope, complete the report. (<i>The</i>	dia tien description						
task will be given at the next lesson).							
3 Smear	1– Gram stain	Smear	Smear _		Sm	near	
3. Prepare neat-fixed smear from dental	2 –	Stain	Stain		Sta	ain	
plaque, Gram stain, explore under	3-			_			_
				\sim			
microscope, complete the report.	4 -			\frown			
	4 – 5 –				\mathbf{n}		
	4 - 5 - 6 -				\sum		
microscope, complete the report.) () (++++++++	
microscope, complete the report. 4. Demonstration:	6 - 7 - 8 -) (····!····!·	
microscope, complete the report. 4. Demonstration: - slide with dental plaque, Gram stain;	6 – 7 –) (++++++++		 	

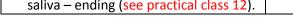
Practical class 12 (30). Dental microbiology. Methods of oral cavity immunity factors investigation

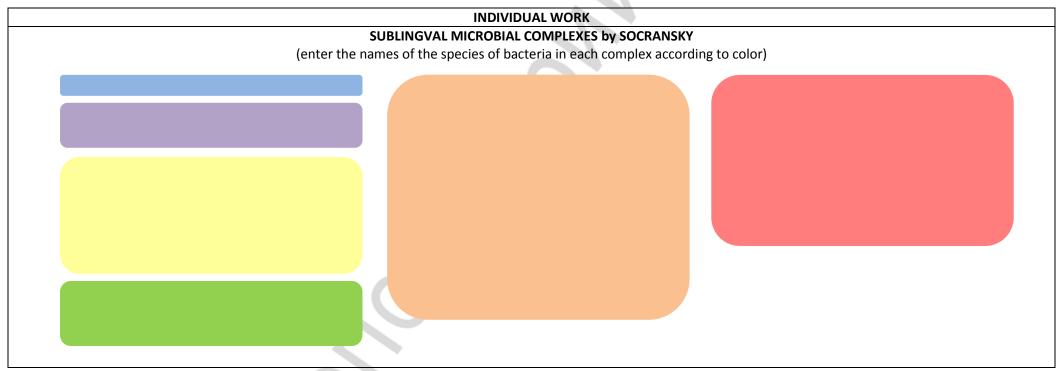
Suggested reading for self-study:		Oral quiz	Laboratory	Individual	Tests	Total
	nisms in the oral cavity (natural and acquired). Protective mechanisms of saliva,	. ·	work	work		results
	ty, enamel, dentin and pulp of the teeth. Importance of phagocytosis.	-				
Immunoglobulins of the oral cavity. Secre		Signatur	e of the tut	or		
Cell-mediated immunity. Mechan	isms of antibacterial and antiviral immunity in the oral cavity.					
	Laboratory work					
Laboratory exercises	Laboratory report					
1. Determine the content of lysozyme in	Smear 1 2 3	4 S	aliva, 1-1,5 ml			
saliva.	Stain					
- collect 1-1,5 ml saliva in a tube.				$\langle \frown \rangle$	\sim	
- mark the Petri dish with the ready-hole		\bigcirc		(\bullet)	(•) \	
seeded Micrococcus lysodeikticus,				\sim	\sim	
according to the scheme.				\bigwedge	>	
- pipette in the wells of the lysozyme						
appropriate dilutions 50 μ l (from low		\bigcirc		\sim		
to high concentration).		50,00 ncg/ml			Diameter	
- in the central well of the test add 50 μl	Standard curve		Standar	d of	Zone of in	hibition
of saliva.			Lysozyme,		diameter	-
- incubate the plate for 24 hours.	lg, g/L		6,25 (1/	-	alameter	
- construct a calibration curve and			12,50 (1			
determine the concentration of						
lysozyme in your sample.			25,00 (1	/2)		
- compare with the standard and make a			50,00 (1)		
conclusion.		Х	(sample			
	1/8					
			Conclusion:			
	1/16	Ľ	Lonciusion:			
	1/32					
	⁰ _{Diameter, mm} ⁵ 10 15					

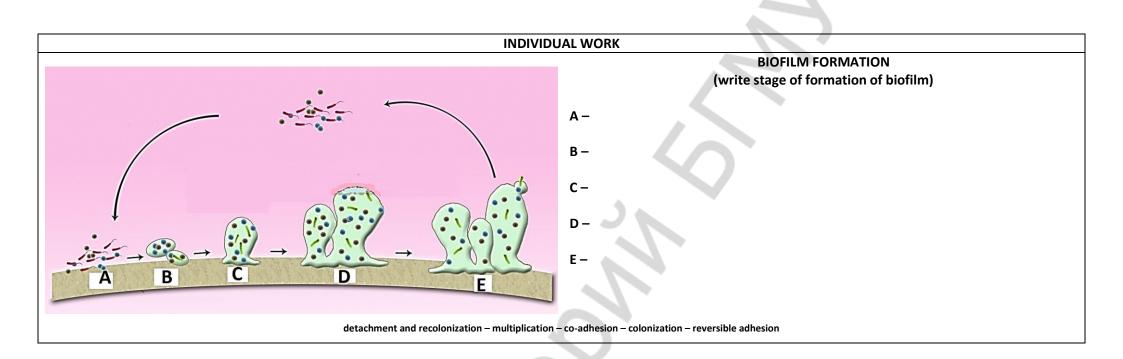
Laboratory exercises										La	aboı	ratory repor	t			
2. Determine the IgA concentration in saliva by Manchini method (simple radial						Т	1						2		dart curve d sIgA = 2 g/l	
gel immunodiffusion). slgA standard – 2,0 g per liter.	lg, g/L			Ш						Ш				titer	concentrtion, g/l	Diameter, mm
											Ī	Point 1		1	2,000	
											1	Point 2	-	1/2	1,000	
Register the experiment results on ormal flora isolation from mucus embrane surfaces, Gram stain different	1/2										I	Point 3		1⁄4	0,500	
											I	Point 4		1/8	0,250	
	1/4		++	++	+		-		++	14		Point 5		1/16	0,125	
types of colonies, explore under the			++	++	╉		-			Н		X-sample				
microscope, complete the report.	1/8		++	++	+	_						As a normal sig	A ranger is 0,3	3-0,4 g/l		
nicroscope, complete the report.	1/16 - 1/32 1/64											Conclusion:				
	() Diam	neter, m	1 1 nm ⁵	+ +	Ż	1	0	++	15						

Practical class 13 (31). Dental microbiology. Microbiology of periodontal and peri-implantitis diseases

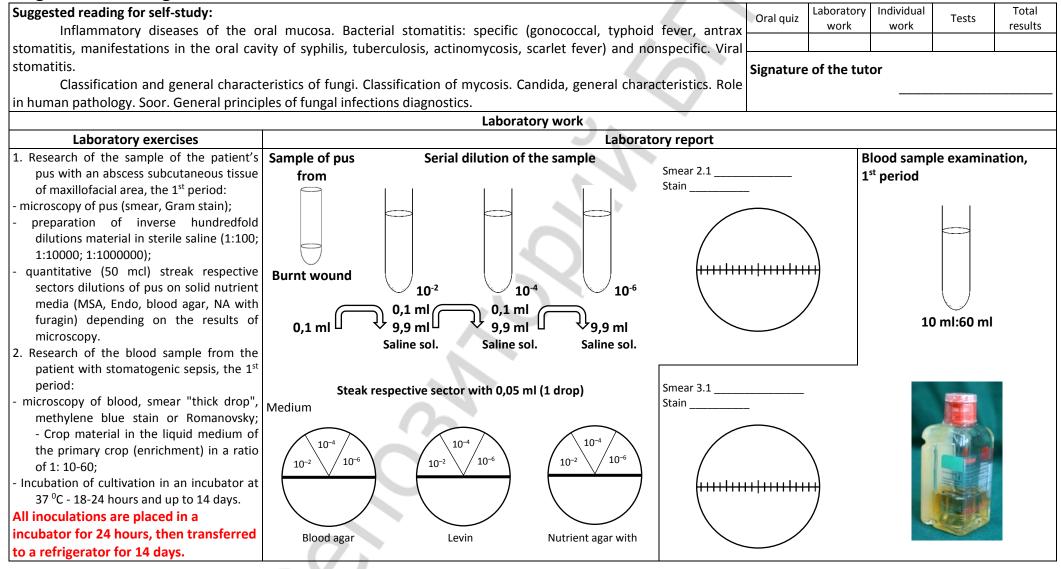
Suggested reading for self-study:			Laboratory	Individual		Total
	rganisms-colonizers. Plaque as a biofilm. Periodontal diseases: classification,	Oral quiz	work	work	Tests	results
	enesis of periodontitis. Properties of periodontopathogenic microorganisms,					
mechanisms of invasion and persistence. Mi	crobial complexes (Socransky, 1998). Immune mechanisms in diseases of the ntion and treatment of periodontitis. Dynamics of microflora with successful		of the tuto	or 		
	Laboratory work					
Laboratory exercises	Laboratory report					
1. Determine the content of lysozyme in						
colive anding (see practical class 12)						







Practical class 14 (32). Dental microbiology. Methods of microbiological diagnostics of stomatitis. Microbiological diagnostics of fungal infections



Laboratory exercises	Laborate	ory report			
formation of tooth decay (dental caries) occurs as a result of the production of lactic acid by bacteria (<i>Streptococcus mutans</i> and others) in the presence of sucrose high levels. Of the various methods that have been devised to determine one's susceptibility to	 mouth to the other. <i>Do not swallow the saliva</i>. As it accumulates, deposit it in the small sterile beaker. 3. Vigorously shake the sample in the beaker from side to side for 30 seconds to disperse the organisms. 4. With a 1 ml pipette transfer 0.2 ml of saliva to the tube of agar. Do not allow the pipette to touch the side of the tube or agar. 	 tube vigorously between the b	ween the palms of the on a gummed label on a gummed label he at 37° C. Examine ndicator has changed s susceptibility is det	and attach it to the t e the tube every 24 d to yellow. If it has, ermined from the ta	ube. hours to see if th the test is positiv
that has been shown to have a high reliability correlation. This method relies on the rapidity of organisms in saliva to lower the pH in the medium that contains 2% dextrose (Snyder test agar). Since decalcification of enamel begins at pH of 5.5, and progresses rapidly as the pH is lowered to 4.4 and less, the demonstration of			\prec		
 pH lowering becomes evidence of susceptibility to caries. To indicate the presence of acid production in the medium, the indicator bromcresol green is incorporated in it. This indicator is green at pH 4.8 and becomes yellow at pH 4.4, remaining yellow below 4.4. 					
susceptibility to caries. To indicate the presence of acid production in the medium, the indicator bromcresol green is incorporated in it. This indicator is green at pH 4.8 and becomes yellow at pH 4.4, remaining yellow below 4.4. Figure illustrates the procedure that is used in the Snyder caries susceptibility test. Note that		CARIES	MED		
susceptibility to caries. To indicate the presence of acid production in the medium, the indicator bromcresol green is incorporated in it. This indicator is green at pH 4.8 and becomes yellow at pH 4.4, remaining yellow below 4.4. Figure illustrates the procedure that is used in the Snyder caries susceptibility test. Note that 0.2ml of saliva is added to the tube of liquefied Snyder test agar (50° C) and mixed	Materials: 1 tube of Snyder test agar (5 ml in 15 mm dia tube)	CARIES SUSCEPTIBILITY	MED 24 HOURS	IUM TURNS YELLO 48 HOURS	W IN: 72 HOURS
susceptibility to caries. Fo indicate the presence of acid production in the medium, the indicator bromcresol green is incorporated in it. This indicator is green at pH 4.8 and becomes yellow at pH 4.4, remaining yellow below 4.4. Figure illustrates the procedure that is used in the Snyder caries susceptibility test. Note that 0.2ml of saliva is added to the tube of liquefied Snyder test agar (50° C) and mixed well by rotating the tube between the palms of both hands. After the medium has solidified, the tube is incubated at 37° C for a	Materials: 1 tube of Snyder test agar (5 ml in 15 mm dia tube) 1 30 ml sterile beaker 1 piece of paraffin (1/4" 1/4" 1/8") 1 ml pipette				
susceptibility to caries. To indicate the presence of acid production in the medium, the indicator bromcresol green is incorporated in it. This indicator is green at pH 4.8 and becomes yellow at pH 4.4, remaining yellow below 4.4. Figure illustrates the procedure that is used in the Snyder caries susceptibility test. Note that 0.2ml of saliva is added to the tube of liquefied Snyder test agar (50° C) and mixed well by rotating the tube between the palms of both hands. After the medium has solidified, the tube is incubated at 37° C for a period of 24–72 hours. If the medium turns yellow in 24–48 hours, the individual is said	Materials: 1 tube of Snyder test agar (5 ml in 15 mm dia tube) 1 30 ml sterile beaker 1 piece of paraffin (1/4" 1/4" 1/8") 1 ml pipette 1 gummed label	SUSCEPTIBILITY	24 HOURS		
susceptibility to caries. To indicate the presence of acid production in the medium, the indicator bromcresol green is incorporated in it. This indicator is green at pH 4.8 and becomes yellow at pH 4.4, remaining yellow below 4.4. Figure illustrates the procedure that is used in the Snyder caries susceptibility test. Note that 0.2ml of saliva is added to the tube of liquefied Snyder test agar (50° C) and mixed well by rotating the tube between the palms of both hands. After the medium has solidified, the tube is incubated at 37° C for a period of 24–72 hours. If the medium turns	Materials: 1 tube of Snyder test agar (5 ml in 15 mm dia tube) 1 30 ml sterile beaker 1 piece of paraffin (1/4" 1/4" 1/8") 1 ml pipette 1 gummed label	SUSCEPTIBILITY Marked	24 HOURS Positive	48 HOURS	

Practical class 15 (33). Test "General and special virology. Dental microbiology"

List of questions		Oral quiz	Script	Tests	Total results
 Uirology, tasks and methodologies. The systematic position and classification of viruses. Forms of viruses existence. The morphology of virions. The interaction of viruses with susceptible cells. Features of infection and immunity in viral infections. Methods of virus cultivation (cell culture, chicken embryo, laboratory animals). General principles of viral infections diagnostics. Influenza laboratory diagnosis. Manifestations in the oral cavity. Paramysoviruses, general characteristics. Mumps virus, respiratory-syncytial virus, measles virus, parainfluenza viruses. Manifestations in the oral cavity. Paramysoviruses, general characteristics, role in human pathology. Poliovirus, pathogenesis and laboratory diagnostic, specific prevention. Manifestations of enteroviruses infection in oral cavity. Classification of hepatitis viruses. Characterization of hepatitis A, B, C virus. Pathogenesis, immunity, laboratory diagnostic, specific prevention. Retroviruses, Human immunodeficiency virus (HIV-1, HIV-2). Pathogenesis. AIDS-associated diseases in dentistry. HIV diagnostics, prophylaxis. Aertoviruses, general characteristics. Pathogenesis, laboratory diagnostics of adenoviral infections. Manifestations in oral cavity. Herge viruses. Classification. General characteristics, disease. Herpetic stomatitis. Bacterial viruses (bacteriophages), properties, classification. The practical use of bacteriophages. The microflora of the oral cavity (indigenous, transient). Ontogeny of normal oral flora. Representatives of the normal oral flora: Gram-positive (propionjbacterium, lactobacillus, actinomyces, corynebacterium) and Gram-negative rods (bacteroides, prevotella, porphyromonas, fusobacterium, leptotrichia), their role. Representatives of the normal oral flora spiralshaped bacteria (vibrio, wolinella, centipedia, selenom	 24. The etiology of dental caries. Features <i>S.mutans</i>. Characteristics of lactobacilli. Asso development of caries. 25. Cariogenesis: mechanisms of streptocod glucans and their characteristics. Factors redental caries. 26. Odontogenic infections: etiology, types. Dynamics of the microflora of implants in caries. 27. The role of microorganisms in the parosteomyelitis, abscesses and soft tissue absores. Periodontal diseases: classification, risk from complex microorganisms: <i>Porphyromonas</i> pathogenicity factors and their role in the develop microorganisms of orange and yellow complication. 29. Dental Plaque: microflora, formation s Microorganisms of orange and yellow complication. 30. Immune mechanisms in the develop microorganisms. Mechanisms to protect tis periodontitis 31. The role of microorganisms in the forformation. 32. Inflammatory diseases of the oral mucos and nonspecific stomatitis. 33. Stomatitis caused by obligate pathogens; i 36. Viral stomatitis. 37. Candida: systematics, properties, pathormation. 38. Methods of studying the normal oral flor 39. Manifestations of allergic and immunode 40. Types and etiology of stomatogenic infections. 	ciative (additional ci adhesion to tee esponsible for car The role of microo e of successful imp chogenesis of pulp esses. actors. General pro gingivalis, Tannera he pathogenesis elopment of aggres tages. The role of alexes, their role ir in the formation of unent of periodo sues from microbi rmation of dental a: classification, th and opportunistic cteristics of pathog tion, characteristic munity, microbio genicity factors. C a. Methods of sam ficiency conditions tions. stic pathogens. Sp ogenesis and diag) microorganisms. eth and their role i ies development. Irganisms in the eti- plantation and com- pitis, acute and cl operties of periodoc ella forsythia, Trep- of periodontitis. sive periodontitis. sive periodontitis. f dental plaque in n the development of plaque. New app- pontal diseases. Fa al invasion. Princip- calculus. Pathoge- bacteria. gens, pathogenesis s, antigenic structu- plogical diagnosis, p candidosis: factors s in the oral cavity. ecific features opp	The role of the m in dental plaque Resistance to ca ology and pathog pplicated. hronic periodont ontopathogenic m onema denticolo Characteristics of the developmen of periodontal do proaches to reduc actors contribution enesis of the ca anisms in their der , clinical forms. ire, factors of patorevention. responsible for seases diagnosis. Recurrent viral ap portunistic pathog	icroorganism in the formation. Role of ries. Prevention of genesis of gingiviti itis ray, periostiti acroorganisms. Reformed a Characterization of Aggregatibactor in of periodontiti lisease. Plaque as use the bioburden of m and treatment of rie dental calculut velopment. Specif the developement the developement phthous stomatitic gens and infection

Practical class 16 (34). Dental microbiology. Method of microflora investigation in diseases of the teeth and oral cavity soft tissues

Suggested reading for self-study:						Oral quiz	Laboratory work	Individual work	Tests	Total results
Odontogenic inflammation. Microfle		sis, microbiolog	ical diagnosis c	of pulpitis, periodontitis	s, periostitis,		WUIK	WUIK		Tesuits
osteomyelitis, odontogenic abscesses and phil	•	ion and honor	of the maxillate	vial area. Dathagana n	athegenesic					1
Purulent-inflammatory dental diseas methods of microbiological diagnostics (mar						Signature	of the tuto	r		
examination of pus, criteria for the etiologica					-					
sepsis. Pathogens, methods of microbiological			is). Determinatio		iotics. Dentai					
			Labora	tory work						
Laboratory exercises				Laborato	ory report					
1. Research of the sample of the	charactorictics	Medium	Medium	Smear Stain			$\overline{}$	\frown		$\overline{}$
patient's pus with an abscess	Snape					10	p^4 /	10-4	$ \setminus \ / \$	10-4
subcutaneous tissue of maxillofacial	Size					10-2	10-6	10-2 10-6	5	10-6
area, 2 nd period:	Surface			1/ \			·····) (V		
- microscopy of slides prepared from all	Edge			1(+++++++++++++++++++++++++++++++++++++				`	$/ \setminus$	
types of colonies;	Color			-\ ' /	1			\searrow		
- the study of microbial growth on the	Consistency									
media;	Transparency									
 determination of the pathogen quantity per ml/g (CFU) of the sample with formula; oxidase test; coagulase test; seeding the pure culture for accumulation and biochemical identification, incubation in an incubator at 37 °C - 18-24 hours. 	Det Calculation of sample: N _(CFU/ml) = n – colonies qu 20 – conversior	Ermination of bacteria quality = n × 20 × 10 ^x , antity in respect n factor for 1 ml, e of the sample	per ml/g of the	Coagulase test Sample control	Oxidase tes Sample	Conclusi	on:			
 2. Research of the blood sample from the patient with stomatogenic sepsis, the 2nd period: the study of microbial growth on the media; microscopy of slides prepared from the media; seeding on the blood and Yolk-salt agar for the pure culture. 										

Laboratory exercises		Lab	oratory report			
Research of the sample of the patient's			Antibiotic	Diameter	r of inhibition zones	s (mm)
pus with an abscess subcutaneous tissue		Smear	Antibiotic	resistant		susceptible
of maxillofacial area, 3 rd period (<i>The</i>		Stain		Staphylococcus :	spp.	
			Penicillin	≤28		≥29
task will be given at the next lesson)			Oxacillin CNS	≤17		≥18
microscopy of slides prepared from pure			S.aureus	≤10		≥13
culture;			Canamycine	≤13		≥18
he study of microbial growth on the media;			Gentamicin	≤12		≥15
seeding the pure culture for accumulation		(++++++++++++++++++++++++++++++++++++++	Ciprofloxacin	≤15		≥21
		()	Tetracycline	≤14		≥19
			Erythromycine	≥23		≥23
in an incubator at 37 °C - 18-24 hours;			Lincomycine	≤13		≥21
seeding the pure culture for determination			Chloramphenicol	<17		≥18
of antibiotic resistance. Research of the sample of the patient's				Enterobacteriacea	a spp.	
			Ampicillin	≤13		≥17
	IPPPPP		Cefazolin	≤14		≥18
			Cefotaxime	≤14		≥23
			Canamycine	≤13		≥18
			Gentamicin	≤12		≥15
			Ciprofloxacin	≤15		≥21 ≥22
Research of the sample of the natient's			Lomefloxacin Tetracycline	≤18 ≤14		≥22 ≥19
pus with an abscess subcutaneous tissue			Doxicycline	≤14 ≤12		≥19 ≥16
-			Chloramphenicol	≤12		≥10 ≥18
of maxillofacial area, 4 th period (The			Chioramphenicol	antibioticgram	m	218
task will be given at the next lesson):			Antibiotic	Diameter of inhibition		pretation of re
microscopy of slides prepared from pure		Smear				•
culture;		Stain				
he study of microbial growth on the media;						
letermination of antibiotic resistance;						
conclusion: identification and typing results,						
antibioticgramm.						
		(+ + + + + + + + + + + + + + + + + + + 				
			DD	М		
			- make standard inoculu		0	
			(0,5 unit MacFarlane)			
			- microscopy of slides p	repared from moculum	30	Ű
	Conclusion:		culture)			
	conclusion.		- seeding of 1,0 ml of ino		G	6
			- incubation 18-20 hours	35°C.		0

Practical class 17 (35). Clinical microbiology. Microbiological diagnostics of purulent infections of bronchi and lungs. Hospital-acquired infection

Suggested reading for self-study:				Oral quiz	Laboratory	Individual	Tests	Total
Dental bronchopulmonary diseases.	Pathogens. Pathogenesis. Conditi	ions of occurrence. Me	ethods of microbiologica	al	work	work	10505	results
diagnosis (materials for research, rules and	methods of sampling, a scheme for	or bacteriological sputu	m examination, bronchia	al				
washings, criteria for the etiological role of iso	lated microorganisms).			Signature	e of the tut	or		
Determination of sensitivity to antibio	otics.			Signature		01		
Nosocomial infections. Pathogens, fe	•	, principles of diagnosis	. Anti-epidemic regime i	n				
dental practice. Principles of microbiological d	iagnosis. Prevention.							
		Laboratory work						
Laboratory exercises			Laboratory report					
1. Research of the blood sample from the	Blood agar Y	SA MH	agar C	oagulase test	t	Gluco	se and man	nitol
patient with stomatogenic sepsis, the 3rd		\frown	E)	op Contro	bl	fermen	tation (anae	robic)
period:			O					
- the study of microbial growth on the		$\land (\bigcirc$			>			
medium;			0					
- microscopy of slides prepared from all types								
of colonies;			•					
- oxidase test;				八八)	(、八 丿	
- coagulase test;	Hemolyses Lecithinas	e Kirby-Bau	er method Stabilized ral	obit plasm: 37	∽ °∩_		$\bigcirc \bigcirc$	
- seeding the pure culture for accumulation	,		2, 4, 24 h		C			
and biochemical identification, incubation		Colonies				Conclusion	•	
in an incubator at 37 °C - 18-24 hours. - incubation at 37 °C - 18-24 hours.	Smear	characteristics	Medium	Medium				
- Incubation at 37 °C - 18-24 hours.	Stain	Shape						
2. Research of the blood sample from the								
patient with stomatogenic sepsis, the 4 th		Size						
period:		Surface						
- the study of tests used for identification of		Surface						
cultures and antimicrobial sensitivity level	(++++++++++++++++++++++++++++++++++++++	Edge						
in DDM.		Color						
		Consistency						
		Transparency						

Exam' questions for the dental faculty students

• · · · ·	uestions
 Microbiology: definition, area and fields of microbiology. Objects and methods of research. Dental microbiology: goals, objectives, role in the dentist's practice. Milestones (periods) in microbiology. Work of L.Pasteur, R.Koh, I.I.Mechnikov. Evolution of microorganisms and infectious diseases. Common with other organisms and the unique features of microorganisms. Principles of systematics of microorganisms. Classification and nomenclature of microorganisms. The term of "species" in bacteria: group of traits for species identification (criteria for speciation). Morphology of bacteria. Basic morphological forms of bacteria. The structure of a bacterial cell. Functions of the surface and cytoplasmic structures of a bacterial cell. Mechanism of Gram staining. Forms of bacteria with the cell wall defects. Unique features of metabolism in prokaryotes. Nutrition of bacteria: types, requirements of bacteria, nutrients and pathways of nutrients penetration into the bacterial cell. Respiration of microorganisms: types, pathways of energy production. Enzymes and cell structures involved in the process of respiration. Classification of bacteria regarding their oxygen requirements. Growth and reproduction of bacteria. The mechanism of simple division and it's phases. Dormant forms of microorganisms: general characteristics, factors inducing their formation, medical importance. Sampling for microbiological studies: types of samples, the rules of sampling, storage, transportation. Principles of organization, equipment and levels of biosafety in microbiological laboratories. Microscopic (bacterioscopic) method of diagnosing the infectious diseases: definition, aim and tasks, steps and evaluation of specificity, sensitivity, disadvantages of the method. Types of microorganisms without isolation of aurentend. Chutvation of bacteria, nutrient media: requirements, classification. Methods for the isolat	 The role of microorganisms in the infectious process. Pathogenicity and virulence. Factors of pathogenicity of microorganisms. Pathogenicity island. Microbial toxins. Types of exotoxins and their biological properties. Mechanisms of microbial persistence and latency in host's organisms. The role of host, social, environmental factors in the infectious process. The biological (experimental) method of diagnosing the infectious diseases: definition of the term, aim, tasks, phases, evaluation. The ecology of microorganisms. Types of ecological relationships in microorganisms. The role of microorganisms in the genesis and development of the Biosphere (the concept of the microbial dominance). Spread of microorganisms in the nature. The characteristic of normal human microflora and its biological role. Methods of study. Disbiosis: causes, consequences, prevention. Gnotobiology. Sterilization: definition of the term, methods, quality control. Sterilization of instruments and medical devices. Consequences of sterilization errors. Disinfection: definition of the concept, types, methods of conducting. Groups of disinfectants used in dentistry. The antisepsis: definition of the term, types, categories, methods of application. Antiseptic agents: classification, mechanism of action, side effects. Principles of rational antisepsis in dental practice. The chemotherapy and chemoprophylaxis of infectious diseases. Groups of antimicrobial chemotherapeutic agents, mechanisms and spectrum of action on microbial cells. Chemotherapeutic index. Antibiotics: characteristic, classification. Requirements for antibiotics. Mechanisms of action of antibiotics. Natural and acquired resistance of microorganisms to antibiotics. The genetic and biochemical mechanisms of resistance of microorganisms. Genotypic and phenotypic methods for determining the susceptibility of microorganisms to anti
 Genetic apparatus of bacteria (nucleoid, plasmids, transposons, IS-elements) characteristics, functions, effect and importance. The concept of genetic engineering and biotechnology. Inheritance and variability of microorganisms. Types of variability. Mutations. The genetic recombination of bacteria. Phenotypic variability. The practical significance of the variability of microorganisms in the diagnosis, treatment and prevention of infectious diseases. Molecular biological method of diagnosing the infectious diseases (molecular hybridization, polymerase) 	 Immunology: definition of the term, aim and task, methods, history of development, branches. Immunity: definition, types of immunity. Immune system of the body: organs, cells, molecules of the main histocompatibility complex (structure, distribution on cells, biological role), cytokines (classification, functions). Innate immunity. Immune and non-immune factors of innate immunity. Mechanisms of recognition in the innate immune system.
 chain reaction): definition, the principle of the methods, application in dentistry. 16. Infection (infection process): definition of the term causes and conditions of infectious diseases emergence. Differences in communicable and non-communicable diseases. Periods of infectious diseases. Infectious disease classification and outcomes. 17. Classification of infectious processes: the nature of the pathogen, the source of infection, the mechanisms and routes of infection, prevalence, the multiplicity of infection, duration. 	 Phagocytes, classification. Phagocytosis reaction: phases, mechanisms of intracellular microorganisms killing, outcomes. Methods of phagocytosis evaluation. Phagocytic reaction indexes, definition and importance in clinical practice. The complement system: definition, main components, activators and activation pathways, functions of components and their fragments. Methods of evaluation of the complement system activity. Antigens: structure, properties, classification. T-dependent and T-independent antigens. Superantigens. Antigens of microorganisms. Antigenic structure of bacteria. Type, species, group antigens. Protective antigens. Cross- reactive antigens, medical importance.

 Antigen presenting cells: types, characteristics. B-lymphocytes: development, markers, antigen-specific B- cell receptor. 	55. Drug allergy: major allergens, the mechanisms and types of allergic reactions, methods for diagnostics and prevention. Food allergy. Main allergens. Prevention of food allergy. Idiosyncrasy.
39. Humoral immune response: definition, development. Activation, proliferation, differentiation and	56. Methods of diagnosing allergic diseases. Prevention of allergy.
interactions of cells involved. T-dependent and T-independent response. Primary and secondary humoral immune response characteristics.	 Antitumor immunity. The concept of immune surveillance. Mechanisms of tumor escape from immune surveillance.
40. Antibodies (immunoglobulins): structure, properties, classification, Immunoglobulins biosynthesis. The	58. Clinical Immunology: definition, objectives, main concepts. Immune status: principle and methods of
mechanism of interaction of antibodies with antigens: specificity, phases, manifestations. Affinity and	examination. Methods for determining the amount and functional activity of T-and B-lymphocytes.
avidity. Monoclonal antibody: principles of production, application. 41. Serological method of investigation: general definition of the term, objectives, basic concepts	 Autoantibodies: origin, role in pathology. Autoimmune diseases: definition, classification, aetiology, mechanisms of tissue damage, manifestations.
(diagnosticum, diagnostic serum, titer, diagnostic titer, paired sera). Samples for serological examination. General characteristics of the method. Use of serological method for infectious and noninfectious diseases	 Immunodeficiency conditions: classification, causes of development, methods for detection, principles for correction.
diagnostics.	61. Staphylococci: classification, characterization, antigenic structure, pathogenicity factors. Staphylococcal
42. Agglutination: ingredients, main variants of performance, registration, evaluation, application. Indirect	infections: pathogenesis, immunity, microbiological diagnosis and principles of prevention,
(passive) and reverse passive agglutination: ingredients, mechanism, methodology, registration of results, practical use.	immunotherapy. Staphylococcal carriage: diagnosis, significance. Staphylococcus aureus: MRSA, antibiotics of choice for their therapy.
43. Immunoprecipitation reaction: ingredients, mechanism, main methods of performance, application.	62. Streptococci: classification, characterization, antigenic structure, pathogenicity factors. Streptococcal
Reaction of the immune lysis. Complement fixation test: ingredients, mechanism, registration of results.	disease: pathogenesis, immunity, microbiological diagnosis, and prevention. Pneumococci: classification,
44. Immunofluorescence (fluorescent antibodies test, FAT), main variants, ingredients, mechanisms,	characterization, antigenic structure, pathogenicity factors. Pneumococcal infections.
registration of results, practical use. ELISA: ingredients, mechanisms, registration of results, practical use.	63. Neisseria meningitidis: systematics, characterization, antigenic structure, pathogenicity
Immunoblotting (IB). Radioimmunoassay (RIA).	factors. Meningococcal infections: pathogenesis, immunity, microbiological diagnosis, prophylaxis.
45. T cells: development, markers, subpopulations. Helper T-cells, main types (Th1, Th2, Th3, Th17), spectrum	64. Neisseria gonorrhoeae: systematics, characterization, antigenic structure, pathogenicity
of cytokines produced. T-cell receptor: structure, types, genetic control, variety.	factors. Pathogenesis, immunity, microbiological diagnosis of acute and chronic gonorrhoea,
46. Cellular immune response: definition, development, main stages, manifestation. The model of two (three)	prophylaxis. Prevention of gonorrhoea and gonorrhoeal conjunctivitis, stomatitis.
signals: the response, anergy, apoptosis. Manifestation of cellular immune response. Immunological	65. Family of Enterobacteria: classification, characterization, pathogenicity factors. Principle of microbiological
memory.	diagnosis of GIT diseases caused by Enterobacteria. Principles of identification of enterobacteria.
47. Anti-infection immunity and its types depending on pathogen nature. Mechanisms of antitoxic,	66. Escherichia: systematics, characterization, antigenic structure, pathogenicity factors. Pathogenic and
antibacterial, antifungal, antiparasite immunity.	opportunistic Escherichia coli. The biological role of Escherichia coli. Escherichiosis: pathogenesis,
48. Immunoprophylaxis and immunotherapy for infectious diseases. Active immunoprophylaxis. Vaccines:	immunity, microbiological diagnosis and prevention.
requirements, characteristics of main types of vaccines. Adjuvants mechanisms of action. Side effects of	67. Salmonella: systematics and classification, characterization, antigenic structure, pathogenicity factors, role
vaccination: sever vaccinal reaction, post-vaccination complications.	Salmonella in pathology. Salmonellosis and Typhoid fever: pathogenesis, immunity, prevention.
49. Post-vaccination immunity: mechanisms and factors influencing its development. Indications and	68. Shigella: classification, characteristics, antigenic structure, pathogenicity factors. Bacterial dysentery:
contraindications to vaccination. Immunization schedule. Expanded Programme on immunization.	pathogenesis, immunity, microbiological diagnosis, prophylaxis.
Collective immunity to infectious diseases, importance.	69. Food poisoning of microbial aetiology: classification, etiology, pathogenesis, principles of microbiological
50. Passive immunoprophylaxis and immunotherapy of infectious diseases: indications, principles,	diagnosis, prophylaxis.
complications.	70. Klebsiella: classification, characteristics, antigenic structure, pathogenicity factors, Klebsiella diseases.
51. Allergology: the definition, objectives. Allergens. Allergy: the stages, types of reactions. Classification of	Pseudomonas: characteristics, antigenic structure, pathogenicity factors, role in the pathology.
allergens. Allergens in dentistry.	71. Campylobacter, Helicobacter: characteristics, role in pathology.
52. Immediate type hypersensitivity (ITH). Mediator type (I) ITH: allergens, mechanism, development,	72. Corynebacterium: classification, characteristics, antigenic structure, pathogenicity factors. Diphtheria:
Manifestations in the oral cavity, ways to prevent anaphylaxis.	pathogenesis, immunity, microbiological diagnostics, immunotherapy and aetiological therapy of
53. Cytotoxic (II) type ITH: allergens, development, mechanisms, manifestations. Immunocomplex (III) type	diphtheria, prophylaxis. Manifestation of diphtheria in oral cavity.
ITH: allergens, development, mechanisms. Manifestations of allergic reactions II and III types in the oral	73. Bordetella: classification, characteristics, antigenic structure, pathogenicity factors. Whooping cough:
Cavity.	pathogenesis, immunity, microbiological diagnosis, prophylaxis. Haemophilus spp.: characteristics, role in
54. Delayed type of hypersensitivity (IV): allergens, development, mechanism, manifestation (infection and	pathology, prophylaxis Hib-infections.
contact allergy), importance in oral cavity.	74. Actinomyces: classification, characterization, antigenic structure, pathogenicity factors. Cervico- maxillofacial actinomycosis: pathogenesis, immunity, microbiological diagnosis, prevention.
	I maxinoraciai acunomycosis, patnogenesis, innnunity, inicrobiological ulagnosis, prevention.

75. Mycobacteria: classification, characteristics, antigenic structure, pathogenicity factors. Tuberculosis:	94. Principles of etiologic diagnostics of viral infections. Rapid methods. Serological diagnostics: principles,
pathogenesis, immunity, methods of diagnosis, principle of prevention and treatment. Mycobacterioses.	criteria for diagnosis. Principles of viral infections chemotherapy. Groups of antiviral drugs.
Manifestation of tuberculosis in oral cavity.	95. Cultivation of viruses. Indication and identification of viruses.
76. Obligate anaerobes. Classification and characteristics. Clinical signs of anaerobic infection. Features of	96. The aetiology of acute respiratory viral infections. Influenza viruses: classification, characteristics, antigenic
taking the material in case of suspected anaerobic infection.	properties. Influenza: pathogenesis, immunity, prevention, etiologic diagnostics of influenza,
77. Gas gangrene Clostridia spp.: classification, characteristics, antigenic structure, pathogenicity factors.	chemotherapy and chemoprophylaxis of influenza.
Anaerobic myonecrosis: pathogenesis, immunity, microbiological diagnostics and prophylaxis, aetiological	97. Paramyxoviruses: classification, characteristics, role in pathology. Prevention of infection caused by
treatment.	paramyxoviruses
78. Clostridium tetani: systematics, characterization, antigenic structure, pathogenicity factors. Tetanus:	98. Rabies virus: classification, characteristics, specific inclusion. Rabies: pathogenesis, etiologic diagnosis,
pathogenesis, immunity, microbiological diagnosis, prevention, aetiological treatment.	prevention.
79. Nonsporforming anaerobes: classification, characteristics, role in pathology of oral cavity. Principles of	99. Rubella virus. General characteristics. Role in pathology. Prevention of rubella.
sampling in anaerobic bacteriology. Principle of bacteriological diagnosis of infections caused by nonsporforming anaerobes.	 Enteroviruses: classification, characteristics. Enterovirus infections: pathogenesis, prevention. Role in pathology of oral cavity.
80. Quarantine diseases: characteristics, classification. Principles of collection, transportation and investigation	101. Viral hepatitis A: pathogenesis, immunity, etiologic diagnosis, prevention.
of specimens with pathogens of 3d and 4th biosafety levels.	102. Parenteral hepatitis viruses: classification, characteristics. Parenteral hepatitis: pathogenesis, immunity,
81. Vibrio: classification, characteristics, antigenic structure, pathogenicity factors. Cholera: pathogenesis,	etiologic diagnostics, prevention.
immunity, microbiological diagnosis, prophylaxis.	103. Retroviruses. Human immunodeficiency virus (HIV). HIV infection: pathogenesis, immunity, etiologic
82. Classification and characteristics of causative agents of plague, tularemia, pathogenicity factors, microbiological diagnosis, prophylaxis.	diagnostics, principles of therapy, prophylaxis. AIDS - related illnesses. HIV-associated diseases in oral cavity.
83. Classification and characteristics of causative agents of brucellosis, anthrax, pathogenicity factors,	104. Herpesviruses: classification, characterization, role in pathology. Herpetic stomatitis. Chickenpox. Herpes
microbiological diagnosis, prophylaxis.	viruses of 4-8 types, their role in human pathology.
84. Spirochetes: classification, characteristics, antigenic structure, pathogenicity factors. Role of Borrelia spp. 📥	105. Adenoviruses: classification, characteristic. Adenoviral infections: pathogenesis, immunity, etiological
in human pathology. Lyme borreliosis: aetiology, pathogenesis, immunity, microbiological diagnosis,	diagnosis. Papillomaviruses: characteristics, role in pathology, disease prevention.
prophylaxis. Role of Leptospira in human pathology, prophylaxis of leptospirosis.	106. Dental microbiology: definition, goals, objectives. General principles of microbiological diagnosis of dental
85. Treponema: classification, characteristics, antigenic structure, pathogenicity factors. Syphilis: pathogenesis,	diseases.
immunity, microbiological diagnosis, prophylaxis. Manifistation of Syphilis in oral cavity.	107. The microflora of the oral cavity (indigenous, transient). Ontogeny of normal oral flora.
86. Treponema of oral cavity and their role in pathology. Fusospirochetozes: etiology, characteristics of	108. The role of normal microflora of the oral cavity (positive and negative). Dysmicrobiosis of the oral cavity:
pathogens, pathogenesis, clinical forms.	causes, effects, prevention, principles of correction. Influence of environmental factors, physiological
87. Chlamydia: classification, characterization, development cycle, antigenic structure, pathogenicity factors,	features of the oral cavity and other factors of the microorganism on the microflora of the oral cavity.
role in pathology. Microbiological diagnostics and prevention.	109. Representatives of the normal microflora of the oral cavity: aerobes and facultative anaerobes
88. Mycoplasma spp.; classification, characteristics, role in pathology.	(streptococci, corynebacteria, staphylococci, Neisseria), their role. General characteristics of streptococci
89. Rickettsia: classification, characteristics, role in pathology.	of the oral cavity.
90. Pathogenic fungi: classification, characteristics. Fungal infections promoting factors and conditions. Role	110. Representatives of the normal oral flora: anaerobes (velonella, propionjbacterium, lactobacillus,
microfungi in human pathology. Prophylaxis of mycoses.	actinomyces, bacteroides, prevotella, porphyromonas, fusobacterium, leptotrichia), their role.
91. Virology: definition, objectives, methods. Systematic position and classification of viruses. History.	111. Representatives of the normal oral flora spiralshaped bacteria (vibrio, wolinella, centipedia, selenomonas,
D.Ivanovski works importance. Forms of existence of viruses. Morphology and biochemical structure of	campylobacter, spirochetes), mycoplasma, protozoa, fungi, and their role.
virions. Structure, function and properties of virion nucleic acid, proteins, lipids and carbohydrates. Prions, role in human pathology.	112. Microflora of specific areas of the mouth: saliva, dorsum of the tongue, dental pocket, mucous membranes. Features of these biotopes, affecting microorganisms.
92. Interaction of the virus and susceptible cell. Strict parasitism and cytotropism of viruses. Cell receptors for	113. Methods of study of oral microflora. Methods of sampling material for dental diseases. Environments for
viruses. Viral genome organization. Reproduction strategy of DNA and RNA viruses.	the isolation of cariogenic streptococci, lactobacilli.
93. Types of viral infection of cell. Changes in the host cells in the process of a viral infection. Peculiarities of	114. Nonspecific mechanisms of defense of the mucous membranes, saliva, gingival fluid, tooth enamel,
viral infections of an organism. Acute, chronic and slow infection. Local and systemic mechanisms of	normal microflora's, system of polymorphonuclear leukocytes.
antiviral immunity. Factors of innate and adaptive antiviral immunity. Interferons: classes, properties,	115. Functions of saliva. Antimicrobial factors of saliva: defensins, cathelicidin, mucins, histatin, statherin,
mechanisms of antiviral activity.	cystatins, peroxidase.

116. The role of factors and mechanisms of acquired immunity of the oral cavity. Local immunity of the oral	125. Microorganisms of orange, green and yellow complexes, their role in the development of periodontal
cavity. Functions of secretory immunoglobulins A.	diseases. Characteristics Aggregatibacter actinomycetemcomitans, pathogenicity factors, the mechanism
117. Dental plaque: the stages of formation, microorganisms-colonizers. Plaque as a biofilm. The role of factors	
in the quorum of sensing in the formation of plaque. New approaches to reducing the bioburden of	126. Immune mechanisms in diseases of periodontal tissues. Factors contributing to the invasion of
plaque.	microorganisms. Mechanisms of tissue protection from microbial invasion. Principles of prevention and
118. Etiology of caries. Criteria of cariogenicity. Cariesogenic streptococci. Characteristic of S. mutans et	treatment of periodontitis.
sobrinus. Characteristics of lactobacilli. Associative (auxiliary) microorganisms. The role of the	127. Inflammatory diseases of the oral mucosa: specific and nonspecific bacterial stomatitis.
macroorganism in the development of caries.	128. Viral stomatitis.
119. Pathogenesis of caries: mechanisms of adhesion (carbohydrate-dependent and carbohydrate-	129. Candida: systematics, properties, pathogenicity factors. Candidosis: factors responsible for the
independent) streptococci and mechanisms of destruction of tooth tissues. The role of streptococci in	developement, methods of diagnosis and prevention.
coaggregation. Glukans. Conditions for the development of caries. Caries resistance. Prophylaxis of caries.	130. Manifestations of allergic and immunodeficiency conditions in the oral cavity. Recurrent viral aphthous
Fluorides and their influence are microorganisms.	stomatitis.
120. Odontogenic inflammation: etiology, types and phases of inflammation. Significance in pathology of foci	131. Dental Clinical Microbiology. Opportunistic pathogens. Specific features opportunistic pathogens and
of chronic odontogenic infection. Immunological aspects of the relationship between inflammatory	infections caused by them. Specific features of pathogenesis and diagnosis of opportunistic diseases.
periodontal diseases, cardiovascular and rheumatic diseases.	Criteria of Etiological significance of isolated bacteria from a specimen.
121. Types of microorganisms and their role in the origin and pathogenesis of pulpitis, acute and chronic apical	132. Etiology and principles of microbiological diagnosis of opportunistic diseases of skin and subcutaneous
periodontitis, periostitis, osteomyelitis, abscesses and phlegmon soft tissues.	tissue of stomatogenic origin.
122. Periodontal disease: classification, risk factors for development. The role of microorganisms in the	133. Etiology and principles of microbiological diagnosis of opportunistic diseases of bronchopulmonary tract
etiology and pathogenesis of gingivitis. Dynamics of microflora of implants in case of successful and	of stomatogenic origin.
complicated implantation.	134. Etiology and principles of microbiological diagnosis of bacteremia, sepsis of stomatogenic origin.
123. The role of dental plaque in the development of periodontitis. The role of microorganisms in the	135. Nosocomial infections: definition of the term, etiology, incidence and spread, principles of microbiological
formation of dental plaque. Pathogenetic importance of dental plaque.	diagnosis, prevention. Antiepidemic control in stomatology.
124. General properties of periodontopathogenic microorganisms. Microorganisms of the red complex:	
Porphyromonas gingivalis, Tannerella forsythia, Treponema denticola. Characteristics, pathogenicity	
factors, their role in the pathogenesis of periodontitis.	

PRACTICAL SKILLS FOR DEMONSTRATION (PRE-EXAM)

1. Prepare a smear from bullion culture of bacteria and stain by Gram method.	13. Identify capsule of <i>Klebsiella spp</i> . (negative contrasting)
2. Prepare a smear from agar medium culture of bacteria and stain by Gram method.	14. Identify Mycobacterium in sputum (Ziehl-Neelsen stain stain)
3. Identify Staphylococcus spp.	15. Demonstrate inoculation technique on plated agar medium from slant media.
4. Identify Streptococcus spp.	16. Demonstrate inoculation technique on slant agar medium from plated medium.
5. Identify Neisseria gonorrhoeae.	17. Demonstrate inoculation technique on slant medium from slant medium.
6. Identify Escherichia coli.	18. Register and assess the results antibiotic susceptibility testing by disc diffusion method.
7. Identify a mixture of Staphylococcus spp. and Escherichia coli.	19. Assess the results of agglutination reaction in tubes.
8. Identify a causative agent of anthrax – Bacillus anthracis.	20. Assess the results of Complement fixation test.
9. Identify Vibrio spp.	21. Assess the results of Indirect (passive) agglutination test.
10. Identify Brucella spp.	22. Assess the results of haemagglutination inhibition test.
11. Identify Candida spp.	23. Demonstrate the technique of slide agglutination testing.
12. Identify Corynebacterium diphtheria (Loffler stain).	
7	75

References

ТЕХТВООК

1. *Medical* microbiology / F. H. Kayser [et al.]. 10th ed., 2005. 742 p.

- 2. *Manual* of Clinical Microbiology / ed. in chief, J. H. Jorgensen. 11th ed. American Society for Microbiology, 2015. P. 2892.
- 3. Samaranayake, L. Essential microbiology for dentistry / L. Samaranayake. 3rd ed., 2005. P. 389.
- 4. Khaitov, R. M. Immunology : textbook / R. M. Khaitov. Moscow : GEOTAR-Media, 2008. 256 p.

PRACTICAL BOOK

Harley, J. P. Laboratory Exercises in Microbiology / J. P. Harley, L. M. Prescott. 5th ed., 2002. P. 445.
 Alexander, S. V. Lab Exercises in Organism and Molecular Microbiology / S. V. Alexander, D. Strete, M. J. Niles. 2004. 384 p.
 Benson, D. Microbiological Applications Lab Manual / D. Benson. 8th ed. 2001. P. 438.

COMPLEMENTARY LITERATURE

8. Rabson, A. Really essential medical immunology / A. Rabson, I. M. Roitt, P. J. Delves. 2nd ed., 2005. 242 p.

9. *Lippincott's* Illustrated Reviews : Microbiology. 2nd ed., e-book.

10. Kachlany, S. C. Infectious diseases of the mouth / S. C. Kachlany ; foreword by D. Heyman. 2007. 92 p.

11. Paul, W.,E. Fundamental Immunology / W. E. Paul. 6th ed. Lippincott Williams & Wilkins, 2008. P. 1555.

12. Abbas, A. K. Cellular and molecular immunology / A. K. Abbas, A. H. Lichtman. 4th ed. Elsevier Inc., 2007. P. 476.

13. *Immunobiology* : immune system in health and disease / Ch. A. Janeway [et al.]. 5th ed. Garland Publishing, 2001. P. 735.

14. Keogan, M. T. Concise Clinical Immunology for Health Care Professionals / M. T. Keogan, E. M. Wallace, P. O' Leary. Routledge, 2006. P. 426.

INTERNET SOURCE

http://www.bsmu.by http://www.ada.org http://www.asm.org http://www.forsyth.org http://www.iadr.org http://www.nidcr.nih.gov Belarusian State Medical University American Dental Association American Society for Microbiology The Forsyth Institute International Association for Dental Research The National Institute of Dental and Craniofacial Research The National Institutes of Health This site provides important information

This site provides important information about practicing good oral hygiene This organization provides valuable resources about bacteria and microorganisms. This institute is a leader in oral biology research.

This association provides valuable resources about oral care and research in dentistry. This site provides information about dental research funding in America. The site provides information about grants and research funding in America.

Appendix 1. Classification of bacteria

PROCARIOTE by Bergy, 2001 DOMAIN BACTERIA

PHYLUM	CLASS	ORDER	FAMILY	GENUS	SPECIES
	Alphaproteo-	Rickettsiales	Rickettsiaceae	Rickettsia	R.prowazekii, R.typhi, R.felis, R.rickettsii, R.conorii, R.australis, R.akari, R.sibirica, R.japonica, R.honei
				Orientia	O.tsutsugamushi
	bacteria		Ehrlichiaceae	Ehrlichia	E.chaffeensis, E.sennetsu, E.equilike (E.phagocytophila)
		Rhizobiales	Bartonellaceae	Bartonella	B.quintana, B.henselae, B.bacilliformis, B.chlaridgeae, B.elizabethae
			Brucellaceae	Brucella	B.melitensis, B.abortus, B.suis u dp.
	Betaproteo-	Burkholderiales	Burkholderiaceae	Burkholderia	B.mallei, B.pseudomallei, B.cepacia и др.
			Alcaligenaceae	Alcaligenes	A.faecales u dp.
	bacteria			Bordetella	B.pertussis, B.parapertussis, B.bronchiseptica u dp.
		Neisseriales	Neisseriaceae	Neisseria	N.gonorrhoeae, N.meningitidis, N.sicca, N.subflava u ∂p.
				Eikenella	E.corrodens
				Kingella	К.kingae и др.
		Nitrozomonadales	Spirillaceae	Spirillum	S.minus u dp.
		Thiotrichales	Francisellaceae	Francisella	F.tularensis
		Legionellales	Legionellaceae	Legionella	L.pneumophila u dp.
			Coxiellaceae	Coxiella	C.burnetii
Q		Pseudomonadales	Pseudomonadaceae	Pseudomonas	P.aeruginosa u dp.
1			Moraxellaceae	Moraxella	Подрод Moraxella (M.lacunata и др.); Подрод Branhamella (B.catarralis и др.)
O				Acinetobacter	A.calcoaceticus u dp.
		Vibrionales	Vibrionaceae	Vibrio	V.cholerae (биовары: cholerae, eltor), V.parahaemolyticus, V.vulnificus, V.sputorum и др.
20	ia	Aeromonadales	Aeromonadaceae	Aeromonas	A.hydrophilia
Proteobacteria	Gammaproteobacteria	Enterobacteriales	Enterobacteriaceae	Enterobacter	E.cloacae, E.sakazakii, E.agglomerans, E.gergoviae и др.
1 X	Cte			Calymmatobacterium	C.granulomatis
	ac			Citrobacter	C.freundii, C.amalonaticus, C.diversus и др.
te l	q			Edwardsiella	E.tarda u др.
õ	e c			Erwinia	E.amylovora и др.
Ľ	ot			Escherichia	E.coli, E.fergusonii, E.germannii, E.vulneris, E.blattae
d d	Dr.			Hafnia	H.alvei
	do			Klebsiella	К.pneumoniae (подвиды: ozaenae, rhinoscleromae, pneumoniae), K.oxytoca, K.planticola, K.terrigena
	3			Morganella	M.morganii
	Ē			Plesiomonas	P.shigelloides
	a			Proteus	P.vulgaris, P.mirabilis, u δp.
	6			Providencia	P.alcallifaciens и др.
				Salmonella	S.enterica, S.bongori. Bud S.enterica состоит из 6 подвидов (subsp.: arizonae, diarizonae, enterica, houtenae,
					indica, salamae). Серовары: S.Typhi, S.Paratyphi A, S.Schottmuelleri, S.Enteritidis, S.Typhimurium, S.Choleraesuis
					u dp.
				Serratia	S.marcescens u dp.
				Shigella	S.dysenteriae, S.flexneri, S.boydii, S.sonnei
				Yersinia	Y.pestis, Y.enterocolitica, Y.pseudotuberculosis и др.
		Pasteurellales	Pasteurellaceae	Haemophilus	H.influenzae, H.ducreyi и др.
	Epsilonpro-	Campylobacteriales	Campylobacteriaceae	Campylobacter	C.jejuni, C.fetus, C.coli и др.
	teobacteria		Helicobacteriaceae	Helicobacter	H.pylori, H.heilmanii и др.
				Wolinella	W.succinogenes

Electric Electr	utes	Clostridiales Mycoplasmatales Bacillales	Clostridiaceae Peptostreptococcaceae Peptococcaceae Acidaminococcaceae Mycoplasmataceae Bacillaceae	Clostridium Peptostreptococcus Peptococcus Centipeda Mitsuokella Selenomonas Veillonella Mycoplasma	C.botulinum, C.perfringens, C.novyi, C.histolyticum, C.septicum, C.tetani, C.defficile u dp. P.anaerobius u dp. P.niger C.periodontii M.dentalis S.sputigena V.parvula u dp.
Hitmicutes Bacilli	utes		Peptococcaceae Acidaminococcaceae Mycoplasmataceae	Peptococcus Centipeda Mitsuokella Selenomonas Veillonella Mycoplasma	P.niger C.periodontii M.dentalis S.sputigena V.parvula u dp.
	ates		Acidaminococcaceae Mycoplasmataceae	Centipeda Mitsuokella Selenomonas Veillonella Mycoplasma	C.periodontii M.dentalis S.sputigena V.parvula u dp.
	ates		Mycoplasmataceae	Mitsuokella Selenomonas Veillonella Mycoplasma	M.dentalis S.sputigena V.parvula u dp.
	ates		Mycoplasmataceae	Selenomonas Veillonella Mycoplasma	S.sputigena V.parvula u dp.
	ates		Mycoplasmataceae	Veillonella Mycoplasma	V.parvula u dp.
	ates			Mycoplasma	V.parvula u dp.
	ates				Administration of Longinia Advantations Administration Advantation and a set of the device of the de
		Bacillales		Line and a see :	M.pneumoniae, M.hominis, M.fermentans, M.salivarum, M.orale, M.artritidis u δp.
		Bacillales	Pacillaceae	Ureaplasma	U.urealiticum u dp.
			DULIIIULEUE	Bacillus	B.anthracis, B.cereus u dp.
			Listeriaceae	Listeria	L.monocytogenes u dp.
		1	Staphylococcaceae	Staphylococcus	S.aureus, S.epidermidis, S.saprophyticus u ∂p.
A sting		Lactobacillales	Lactobacillaceae	Lactobacillus	L.caseii, L.fermentum, u dp.
A stingt			Enterococcaceae	Enterococcus	E.faecalis, E.faecium u dp.
A stingt			Leuconostoccaceae	Leuconostoc	L.mesenteroides
A Actinok			Streptococcaceae	Streptococcus	S.pyogenes, S.pneumoniae, S.agalactiae, S.anginosus, S.bovis, S.mutans, S.mitis, S.salivarius, S.sanguis, S.milleri
A attack Actinok					и др.
A _ ! · _ Actinok				Lactococcus	L.lactis u dp.
	bacteria	Actinomycetales	Actinomycetaceae	Actinomyces	A.israelii, A.naeslundii, A.viscosus, A.odontolyticus, A.pyogenes,
Actino-	bucteria		Micrococcaceae	Micrococcus	M.lysodeicticum, M.luteus u dp.
hastoria			Corynebacteriaceae	Corynebacterium	C.diphtheriae, C.ulcerans, C.urealyticum, C.xerosis u dp.
bacteria			Mycobacteriaceae	Mycobacterium	M.tuberculosis, M.bovis, M.africanum, M.leprae, M.kasasii, M.avium, M.ulcerans, M.fortuitum u dp.
			Nocardiaceae	Nocardia	N.asteroides, N.farcinica u dp.
			Propionibacteriaceae	Propionibacterium	P.acnes, P.propionicus u dp.
		Bifidobacteriales	Bifidobacteriaceae	Bifidobacterium	B.bifidum u dp.
		, ,	,	Gardnerella	G.vaginalis
Chlamydiae Chlamy	vdiae	Chlamydiales	Chlamydiaceae	Chlamydia	C.trachomatis
cinality unde	yuluc			Chlamydophila	C.psittaci, C.pneumoniae
Spirochaetes Spiroch	haetes	Spirochaetales	Spirochaetaceae	Borrelia	B.recurrentis, B.burgdorferi, B.duttoni, B.persica u dp.
spirocituetes opirocit	nucles			Treponema	Т.pallidum (подвиды – pallidum, endemicum, pertenue), T.carateum, T.denticola, T.minutum, T.refringens,
					T.scoliodontum, T.vincentii и др.
			Leptospiraceae	Leptospira	L.interrogans, L.biflexa
Bacteroidetes Bactero	roidetes	Bacteroidales	Bacteroidaceae	Bacteroides	B.fragilis, B.gingivalis u dp.
bucterofueres Buctere	oractes		Porphyromonadaceae	Porphyromonas	P.gingivalis, P.endodontales u dp.
			Prevotellaceae	Prevotella	P.melaninogenica, P.denticola u dp.
Flavoba	nacteria	Flavobacteriales	Flavobacteriaceae	Flavobacterium	F.meningosepticum, F.breve u dp.
		Fusobacteriales	Fusobacteriaceae	Fusobacterium	F.nucleatum, F.necroforum, F.vincentii и др.
Fusobacteria Fusoba	acteria	TUSODUCIETIUIES	TUSODUCIETTUCEUE	Leptotrichia	L.buccalis u dp.
				Streptobacillus	S.moniliformis

Genome	Order	Family	Subfamily	Genus	Species	
dsDNA	Herpesvirales	Herpesviridae	Alphaherpesvirinae	Simplexvirus	Human alphaherpesvirus 1, 2	
dsDNA	Herpesvirales	Herpesviridae	Alphaherpesvirinae	Varicellovirus	Human alphaherpesvirus 3	
dsDNA	Herpesvirales	Herpesviridae	Betaherpesvirinae	Cytomegalovirus	Human betaherpesvirus 5	
dsDNA	Herpesvirales	Herpesviridae	Betaherpesvirinae	Roseolovirus	Human betaherpesvirus 6A, 6B, 7	
dsDNA	Herpesvirales	Herpesviridae	Gammaherpesvirinae	Lymphocryptovirus	Human gammaherpesvirus 4	
dsDNA	Herpesvirales	Herpesviridae	Gammaherpesvirinae	Rhadinovirus	Human gammaherpesvirus 8	
dsDNA	Unassigned	Adenoviridae		Mastadenovirus	Human mastadenovirus A-F	
dsDNA	Unassigned	Iridoviridae	Alphairidovirinae	Lymphocystivirus	Lymphocystis disease virus 1	
dsDNA	Unassigned	Papillomaviridae		Alphapapillomavirus	Alphapapillomavirus 1-72	
dsDNA	Unassigned	Papillomaviridae		Betapapillomavirus	Betapapillomavirus 1	
dsDNA	Unassigned	Papillomaviridae		Deltapapillomavirus	Deltapapillomavirus 1	
dsDNA	Unassigned	Papillomaviridae		Gammapapillomavirus	Gammapapillomavirus 1	
dsDNA	Unassigned	Polyomaviridae		Alphapolyomavirus	Human polyomavirus 12	
dsDNA	Unassigned	Polyomaviridae		Betapolyomavirus	Human polyomavirus 1	
dsDNA	Unassigned	Polyomaviridae		Deltapolyomavirus	Human polyomavirus 6	
dsDNA	Unassigned	Poxviridae	Chordopoxvirinae	Molluscipoxvirus	Molluscum contagiosum virus	
dsDNA	Unassigned	Poxviridae	Chordopoxvirinae	Orthopoxvirus	Vaccinia virus	
dsDNA	Unassigned	Poxviridae	Chordopoxvirinae	Orthopoxvirus	Variola virus	
dsDNA	Unassigned	Poxviridae	Chordopoxvirinae	Orthopoxvirus	Monkeypox virus	
ssDNA(-)	Unassigned	Anelloviridae		Alphatorquevirus	Torque teno virus 1	
ssDNA(-)	Unassigned	Anelloviridae		Betatorquevirus	Torque teno mini virus 1	
ssDNA(-)	Unassigned	Anelloviridae		Gammatorquevirus	Torque teno midi virus 1	
ssDNA(+/-)	Unassigned	Circoviridae		Circovirus	Human associated circovirus 1	
ssDNA(+/-)	Unassigned	Genomoviridae		Gemykibivirus	Human associated gemykibivirus 1	
ssDNA(+/-)	Unassigned	Genomoviridae		Gemyvongvirus	Human associated gemyvongvirus 1	
ssDNA(+/-)	Unassigned	Parvoviridae	Parvovirinae	Bocaparvovirus	Ungulate bocaparvovirus 1	
dsDNA-RT	Unassigned	Hepadnaviridae		Orthohepadnavirus	Hepatitis B virus	
ssRNA(-)	Bunyavirales	Nairoviridae		Orthonairovirus	Crimean-Congo hemorrhagic fever orthonairovirus	
ssRNA(-)	Bunyavirales	Peribunyaviridae		Orthobunyavirus	Bunyamwera orthobunyavirus	
ssRNA(-)	Bunyavirales	Peribunyaviridae		Orthobunyavirus	California encephalitis orthobunyavirus	
ssRNA(-)	Mononegavirales	Bornaviridae	-	Bornavirus	Mammalian 1 bornavirus	
ssRNA(-)	Mononegavirales	Filoviridae		Ebolavirus	Bundibugyo/Reston/Sudan/Taï Forest/Zaire ebolavirus	
ssRNA(-)	Mononegavirales	Filoviridae		Marburgvirus	Marburg marburgvirus	
ssRNA(-)	Mononegavirales	Paramyxoviridae		Henipavirus	Hendra henipavirus	
ssRNA(-)	Mononegavirales	Paramyxoviridae		Morbillivirus	Measles morbillivirus	
ssRNA(-)	Mononegavirales	Paramyxoviridae		Respirovirus	Human respirovirus 1, 3	
ssRNA(-)	Mononegavirales	Paramyxoviridae		Rubulavirus	Human rubulavirus 2, 4	
ssRNA(-)	Mononegavirales	Paramyxoviridae		Rubulavirus	Mumps rubulavirus	
ssRNA(-)	Mononegavirales	Pneumoviridae		Metapneumovirus	Human metapneumovirus	
ssRNA(-)	Mononegavirales	Pneumoviridae		Orthopneumovirus	Human orthopneumovirus	
ssRNA(-)	Mononegavirales	Rhabdoviridae		Lyssavirus	Rabies lyssavirus	
ssRNA(-)	Mononegavirales	Rhabdoviridae		Vesiculovirus	Indiana vesiculovirus	
ssRNA(-)	Unassigned	Orthomyxoviridae		Influenzavirus A	Influenza A virus	
ssRNA(-)	Unassigned	Orthomyxoviridae		Influenzavirus B	Influenza B virus	
ssRNA(-)	Unassigned	Orthomyxoviridae		Influenzavirus C	Influenza C virus	
ssRNA(-)	Unassigned	Orthomyxoviridae		Influenzavirus D	Influenza D virus	

Appendix 2. Classification of viruses (updates approved during EC 48, Budapest, Hungary, August 2016; Email ratification 2017)

•				-	
Genome	Order	Family	Subfamily	Genus	Species
ssRNA(-)	Unassigned	Orthomyxoviridae		Quaranjavirus	Quaranfil virus
ssRNA(-)	Unassigned	Orthomyxoviridae		Thogotovirus	Thogoto virus
ssRNA(-)	Unassigned	Unassigned		Deltavirus	Hepatitis delta virus
ssRNA(+/-)	Bunyavirales	Phenuiviridae		Phlebovirus	Rift Valley fever phlebovirus
ssRNA(+/-)	Bunyavirales	Phenuiviridae		Phlebovirus	Uukuniemi phlebovirus
ssRNA(+/-)	Unassigned	Arenaviridae		Mammarenavirus	Junín mammarenavirus
ssRNA(+/-)	Unassigned	Arenaviridae		Mammarenavirus	Lassa mammarenavirus
ssRNA(+/-)	Unassigned	Arenaviridae		Mammarenavirus	Lymphocytic choriomeningitis mammarenavirus
ssRNA(+/-)	Unassigned	Arenaviridae		Mammarenavirus	Machupo mammarenavirus
ssRNA(+)	Nidovirales	Coronaviridae	Coronavirinae	Alphacoronavirus	Human coronavirus 229E, NL63
ssRNA(+)	Nidovirales	Coronaviridae	Coronavirinae	Betacoronavirus	Human coronavirus HKU1
ssRNA(+)	Nidovirales	Coronaviridae	Torovirinae	Torovirus	Human torovirus
ssRNA(+)	Picornavirales	Picornaviridae		Aphthovirus	Foot-and-mouth disease virus
ssRNA(+)	Picornavirales	Picornaviridae		Cardiovirus	Cardiovirus A
ssRNA(+)	Picornavirales	Picornaviridae		Cosavirus	Cosavirus A
ssRNA(+)	Picornavirales	Picornaviridae		Enterovirus	Enterovirus C
ssRNA(+)	Picornavirales	Picornaviridae		Enterovirus	Rhinovirus A
ssRNA(+)	Picornavirales	Picornaviridae		Hepatovirus	Hepatovirus A
ssRNA(+)	Picornavirales	Picornaviridae		Kobuvirus	Aichivirus A
ssRNA(+)	Picornavirales	Picornaviridae		Parechovirus	Parechovirus A, B, C
ssRNA(+)	Picornavirales	Picornaviridae		Rosavirus	Rosavirus A
ssRNA(+)	Picornavirales	Picornaviridae		Salivirus	Salivirus A
ssRNA(+)	Unassigned	Astroviridae		Mamastrovirus	Mamastrovirus 1
ssRNA(+)	Unassigned	Caliciviridae		Norovirus	Norwalk virus
ssRNA(+)	Unassigned	Caliciviridae		Sapovirus	Sapporo virus
ssRNA(+)	Unassigned	Flaviviridae		Flavivirus	Dengue virus
ssRNA(+)	Unassigned	Flaviviridae		Flavivirus	Japanese encephalitis virus
ssRNA(+)	Unassigned	Flaviviridae		Flavivirus	Murray Valley encephalitis virus
ssRNA(+)	Unassigned	Flaviviridae		Flavivirus	Omsk hemorrhagic fever virus
ssRNA(+)	Unassigned	Flaviviridae		Flavivirus	Tick-borne encephalitis virus
ssRNA(+)	Unassigned	Flaviviridae		Flavivirus	West Nile virus
ssRNA(+)	Unassigned	Flaviviridae		Flavivirus	Yellow fever virus
ssRNA(+)	Unassigned	Flaviviridae		Flavivirus	Zika virus
ssRNA(+)	Unassigned	Flaviviridae		Hepacivirus	Hepacivirus C
ssRNA(+)	Unassigned	Flaviviridae		Pegivirus	Pegivirus H
ssRNA(+)	Unassigned	Hepeviridae		Orthohepevirus	Orthohepevirus A
ssRNA(+)	Unassigned	Togaviridae		Alphavirus	Chikungunya virus
ssRNA(+)	Unassigned	Togaviridae		Alphavirus	O'nyong-nyong virus
ssRNA(+)	Unassigned	Togaviridae		Alphavirus	Semliki Forest virus
ssRNA(+)	Unassigned	Togaviridae		Alphavirus	Sindbis virus
ssRNA(+)	Unassigned	Togaviridae		Alphavirus	Venezuelan equine encephalitis virus
ssRNA(+)	Unassigned	Togaviridae		Rubivirus	Rubella virus
dsRNA	Unassigned	Picobirnaviridae		Picobirnavirus	Human picobirnavirus
dsRNA	Unassigned	Reoviridae	Sedoreovirinae	Rotavirus	Rotavirus A-G
dsRNA	Unassigned	Reoviridae	Spinareovirinae	Coltivirus	Colorado tick fever virus
ssRNA-RT	Unassigned	Retroviridae	Orthoretrovirinae	Deltaretrovirus	Primate T-lymphotropic virus 1
ssRNA-RT	Unassigned	Retroviridae	Orthoretrovirinae	Lentivirus	Human immunodeficiency virus 1, 2
ssRNA-RT	Unassigned	Retroviridae	Spumaretrovirinae	Spumavirus	Simian foamy virus

TABLE OF CONTENTS

Practical class 1. Methods in diagnostic microbiology. Microscopic method of examination (MME). Basic morphological forms of bacteria. Simple methods of staining	5
Practical class 2. MME. The morphology and fine structure of bacteria. Differential methods of staining	
Practical class 3. MME. The morphology of the spirochetes, actinomyces, rickettsia, chlamydia, mycoplasmas	9
Practical class 4. Ecology of microorganisms. Asepsis. Methods of sterilization, disinfection and antisepsis	
Practical class 5. Bacteriological method of laboratory diagnosis of infectious diseases. Techniques for pure culture isolation and maintenance	
Practical class 6. Bacteriological method of infectious diseases laboratory diagnosis. Techniques for pure culture identification	
Practical class 7. Molecular Basis of Bacterial Genetics. Molecular methods of infectious diseases diagnosis and bacterial genetic investigations	
Practical class 8. Infections. Application of laboratory animals in microbiology. Antibiotic susceptibility testing of microorganisms	
Practical class 9. Credit "Morphology and physiology of microorganisms"	26
Practical class 10. Immune system. Innate immunity. Methods for innate immunity factors evaluation	
Practical class 11. Antigens. Antibodies. Immune response	
Practical class 12. Serological method	
Practical class 13. Immunoprophylaxis and immunotherapy. Immunopathology and clinical immunology	36
Practical class 14. Test "Immunology. Immunity. Allergy"	
Practical class 15. Microbiological diagnostics of diseases caused by Staphylococci, Streptococci, Neisseria	
Practical class 16. Microbiological diagnostics of acute enteric infections caused by Enterobacteria. Methods for food poisoning diagnostics	41
Practical class 17. Microbiological diagnostics of diseases caused by Klebsiella, Campylobacter, Helicobacter and Pseudomonada	
Practical class 18. Final test "General microbiology. Immunology"	
Practical class 1 (19). Microbiological diagnosis methods of diseases caused by Corynebacteria, Bordetella	46
Practical class 2 (20). Microbiological diagnosis methods of diseases caused by Mycobacteria and Actinomycetes	
Practical class 3 (21). Methods of anaerobic infections microbiological diagnostics	
Practical class 4 (22). Microbiological diagnostics of diseases caused by Spirochetes, Rickettsia, Chlamydia, Mycoplasma	
Practical class 5 (23). Test "Special bacteriology"	
Practical class 6 (24). Methods of investigations in virology. Bacteriophages	
Practical class 7 (25). Virology diagnostics of diseases caused by Orthomyxoviruses, Paramyxoviruses. Togaviruses	
Practical class 8 (26). Virologic diagnostics of diseases caused by picornaviruses and hepatitis viruses	56
Practical class 9 (27). Methods of diagnostics for diseases caused by Retroviruses and Rabdoviruses	
Practical class 10 (28). Methods of diagnostics for diseases caused by herpes- and adenoviruses diseases in oral cavity	
Practical class 11 (29). Dental microbiology. Methods of oral cavity normal flora investigation. Etiology and pathogenesis of caries	61
Practical class 12 (30). Dental microbiology. Methods of oral cavity immunity factors investigation	62
Practical class 13 (31). Dental microbiology. Microbiology of periodontal and peri-implantitis diseases	
Practical class 14 (32). Dental microbiology. Methods of microbiological diagnostics of stomatitis. Microbiological diagnostics of fungal infections	66
Practical class 15 (33). Test "General and special virology. Dental microbiology"	68
Practical class 16 (34). Dental microbiology. Method of microflora investigation in diseases of the teeth and oral cavity soft tissues	
Practical class 17 (35). Clinical microbiology. Microbiological diagnostics of purulent infections of bronchi and lungs. Hospital-acquired infection	
Exam' questions for the dental faculty students	72
References	76
Appendix 1. Classification of bacteria	
Appendix 2. Classification of viruses	