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HYGIENIC CONDITIONS OF THE COCKTAIL PROCESS OF MEDICAL PERSONNEL

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Relevance of the problem: The economic reforms being carried out in the Republic of Uzbekistan leads to the emergence of new types and modern medical institutions. Features of the process of exposure to the body when studying the conditions and nature of the workflow of medical personnel working with corpses (contact with allergens of drugs, toxic substances, pathogenic microorganisms, overstrain of the visual analyzer, stereotypical movements of small muscles of the working arm, nervous and emotional tension), Adverse factors were identified that caused inconveniences in the arrangement of the premises of the forensic medical examination and pathologists, various equipment, tool designs, imperfection of fillers and materials of the drug.

The Purpose: Currently, within the field of medicine, there are state institutions of this profile, which differ from each other in the volume of services provided, the level of technical equipment (new and modern in medical institutions, as well as high-quality tools, the latest techniques and technologies) of medical personnel working with mortars [3, 4]. In modern literature, hygienic data on risk factors and the state of health of those who worked with corpses, due to new forms of labor organization, are scarce and incomplete, which determined the relevance of the study.

The examination of medical personnel before starting work is carried out at the beginning and at the end of the working day. Operational chronometric monitoring of the production process is carried out, taking into account two variants of labor organization to assess the severity of staffs' work with corpses and the presence of tension. In this case, the time spent on normal activities is determined, in particular:

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medical and diagnostic examinations, registration of medical documentation, walking around the room, taking tests for the laboratory in an upright position, time spent outside production.

Research results: At the end of the day, it was found that the attention of working doctors who work with corpses is manifested at a much higher level than the average time indicator of low stability, an indicator of the time that medical personnel spend on performing the test.

The functional state of vision was worse in the group among the medical staff, when a tapping test is performed, the work is confirmed by a significant decrease in the rate of strokes by the end of the day

At the end of the working day, a decrease in the subtle sensorimotor activity of the hands of doctors of medical personnel working with corpses was clearly observed, compared with colleagues of the secondary medical staff, but not at a convincing level.

The work proves that a significant decrease in dynamometry during the day, in our opinion, is a clear fatigue of the hands of employees working with solutions, as a result of working with outdated, non-ergonomic equipment that requires high physiological costs. In a subjective assessment of the health status of medical personnel working with corpses, the survey method found that among the complaints expressed by medical personnel about their health, complaints indicating the presence of neurotic disorders, impaired sense of smell, digestive organs, circulatory system, musculoskeletal system and connective tissue pathologies, sensory organs predominate.

Conclusion. A comparative analysis of the parameters of the volume of work of doctors of secondary and junior medical personnel, their functional state in the dynamics of workload showed that the work of doctors (forensic medical examination and pathologists) is associated with a high professional risk compared with the work of secondary and junior medical personnel.

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Used literature

1. Мелдо А.А., Уткин Л.В., Трофимова Т.Н. Искусственный интеллект в медицине: современное состояние и основные направления развития интеллектуальной диагностики. Лучевая диагностика и терапия. 2020;11(1):9-17. https://doi.org/10.22328/2079-5343-2020-11-1-9-17.

↑2. Труфанов Г.Е., Ефимцев А.Ю. Технологии искусственного интеллекта в МР-нейровизуализации. Взгляд рентгенолога. Российский журнал персонализированной медицины. 2023;3(1):6-17. https://doi.org/10.18705/2782-3806-2023-3-1-6-17.

↑3. Данилов Г.В., Ишанкулов Т.А., Котик К.В. и др. Технологии искусственного интеллекта в клинической нейроонкологии. Вопросы нейрохирургии имени Н.Н. Бурденко. 2022;86(6):127 33. https://doi.org/10.17116/neiro202286061127.

↑4. Сухих Г.Т., Давыдов Д.Г., Логинов В.В. и др. Состояние и перспективы внедрения технологий искусственного интеллекта в акушерско-гинекологическую практику. Акушерство и гинекология. 2021;(2):5-12. https://doi.org/10.18565/aig.2021.2.5-12.

↑5. Liu P.R., Lu L., Zhang J.Y. et al. Application of Artificial Intelligence in medicine: an overview. Curr Med Sci. 2021;41(6):1105-15. https://doi.org/10.1007/s11596-021-2474-3.