

namics of restoration of immune system was outlined, but has not been completely reached.

The conclusion. By data tubtests with 2 TU us it is noted authentic distinctions in dynamics of the sizes of a papule at patients 1A and 1B groups. Application of reaction of Mantou as criterion of efficiency «D» the account didn't reflect a full picture of interaction macro and a microorganism. It was the functional test and a marker of immune dysfunctions. Because results tubdiagnostics are defined by two versatile indicators: a condition **infected** and an immunoreactivity condition, they should be read in aggregate with indicators **IC**. Among the immunological indicators distinguishing groups among themselves, low level of Lymph with receptor CD7⁺ at patients 1A groups and decrease in Lymph, expreccing molecules CD95⁺ isn'ted at removal from the account. IDF can be the objective test for an estimation of efficiency of application ATP. Proceeding from the aforesaid, the papule on 2 TU PPD-L can't be the only thing and (or) the basic criterion of diagnostics of a latent tuberculosis and efficiency of preventive actions. Alternative tubdiagnostics for an estimation of efficiency of application ATP can be IDF as the objective test which is carried out in vitro.

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The work is submitted to the International Scientific Conference «Priority development trends of a science, technologies and technique», Italy (Rome-Florence), 10-17th April 2011, came to the editorial office on 29.01.2011.

LEAN-TECHNOLOGY APPLICATION IN DIAGNOSTIC PROCESS

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The pace of modern medicine development demands the innovational ways of diagnostics and treatment. A new type of relations between a doctor and a patient is developing and a patient gets an opportunity to choose his special doctor and the diagnostic method too. However, it leads to inefficient use of time and financial resources: the load on the diagnostic department and a specialist doctor increases, the patient's way to a correct diagnosis and treatment lengthens. Modern diagnostic department is a high-technology equipment and complicated diagnostic methods. It's necessary to take clinical aspects of the disease into consideration and to be aware of various opportunities of laboratory and instrumental examination methods, to be able to interpret the data. The doctor-consult of the diagnostic department possesses this knowledge.

A system that allows to remove «pain points» of the diagnostic process was designed, it is based on applying the principles of lean production – logistics concept work that involves improving internal processes while enhancing customer and staff satisfaction.

At the first visit of the patient the consultant physician of the diagnostic department makes a plan and a timetable for the survey on the basis of complaints, anamnesis and objective examination and helps the patient to realize it as soon as possible. According to the data of examination the need of any specialist doctors is determined. Thus the diagnostic department staff is free from performing extra procedures and a specialist doctor consults an examined patient. The system allows the patient to pass all the diagnostic procedures he needs and to get the conclusion of his clinical diagnosis and recommendations about treatment in short term and to avoid spending long time, extra physical and financial resources.

The work is submitted to the International Scientific Conference «Problems of the international integration of national educational standards», Russia-France (Moscow-Paris), 18-25th March 2011, came to the editorial office on 29.05.2011.