

INTERNATIONAL HIGHER SCHOOL OF MEDICINE

Department Pathology

SYLLABUS

Discipline Clinical Pathological Anatomy

for students of medical faculty

2025-2026 academic year

5th course, 10th semester, groups: 1-25

1 credit (30 h, including auditorial - 16 h, independent work - 14 h)

Practical classes:

Davydov V.T.
senior teacher
0558009979
Email: vtdavydov@mail.ru

Satylganov I.J.
d.m.s., professor
0550550912
Email: Cij_11@mail.ru

Dzhanaliev B.R.
d.m.s., professor
0550700164
Email: bolotdjanaliev5@gmail.com

Osmonalieva S.T.
assistant
0559040479
saltanat-2279@mail.ru

The Syllabus is considered
at the meeting of the Department of Pathology

Protocol № 2 dated 9.09 2025

Head of the department



Course objective: Formation of clinical thinking, medical behavior, algorithm of medical practice in solving professional problems based on clinico-morphological comparisons.

After study of the discipline the student must:

Knowledge:

- Organization, structure, tasks, documentation of pathoanatomical service.
- Tasks, methods and management of autopsy.
- Peculiarities of the autopsy of fetus, newborns and persons who died from overdangerous infections.
- Pathoanatomist's requirements for the clinical history of the disease, clinical diagnosis and epicrisis.
- Rules of construction of pathoanatomical diagnosis and preparation of clinico-pathoanatomical epicrisis.
- Rules of comparison of clinical and pathoanatomical diagnoses.
- Structure of death certificate.
- Tasks of clinico-pathoanatomical conference.
- Cases to be reviewed at the clinico-pathoanatomical conference.
- Issues to be resolved at the clinico-pathoanatomical conference in cases of discrepancy of clinical and pathoanatomical diagnoses.
- Tasks of the morphological examination of biopsies, surgical material and placentas.
- Organization of examination of biopsies, surgical material and placentas.

Skills:

- Assess the role of the work of pathoanatomist for the activities of clinician.
- Correctly prepare pathoanatomical documentation.
- Send cadavers for autopsy.
- Assess the correctness of the medical history, final clinical diagnosis and epicrisis.
- Identify categories of pathoanatomical diagnosis.
- Formulate pathoanatomical diagnosis.
- Determine thanatogenesis.
- Compare clinical and pathoanatomical diagnoses.
- Fill out death certificate.
- Organize and conduct clinico-pathoanatomical conferences.
- Take, mark, fix and send biopsy, surgical material and placentas for pathoanatomical examination.

Attitude:

- Preparing pathoanatomical documentation.
- Sending cadavers for pathoanatomical autopsy.
- Formulating and defining categories of clinical and pathoanatomical diagnoses.
- Comparing clinical and pathoanatomical diagnoses.
- Determination thanatogenesis and cause of death.
- Analyzing medical errors and iatrogenic pathology.
- Filling out medical death certificate.
- Techniques for marking, fixing and sending biopsy, surgical material and placentas for pathoanatomical examination.

Pre-requisites:

- Macro- and microanatomy.
- General and systemic pathological anatomy.
- Internal diseases.
- Pediatric diseases.
- Surgical diseases.
- Obstetrics and Gynecology.

Post-requisites:

- Postgraduate education.

THEMATIC PLAN OF PRACTICAL CLASSES

№	Themes of practical classes	Hours	Date
1	Pathoanatomical service.	2	According to timetable
2	Autopsy.	2	According to timetable
3	Pathoanatomical diagnosis.	2	According to timetable
4	Pathoanatomical diagnosis in cases of perinatal death and iatrogenic pathology.	2	According to timetable
5	Comparison of clinical and pathoanatomical diagnoses. Death certificate.	2	According to timetable
6	Clinico-pathoanatomical conference.	2	According to timetable
7	Examination of biopsies, surgical material and placentas.	2	According to timetable
8	Unit control.	2	According to timetable
TOTAL		16	

THEMATIC PLAN OF INDEPENDENT WORK OF STUDENTS

№	Themes of independent work	Hours	Date
1	Deontological basis of pathoanatomical practice.	3	According to timetable
2	Peculiarities of the autopsies of fetus and newborns. Peculiarities of the autopsies and bureal of persons who died from overdangerous infections.	3	According to timetable
3	Type and reasons of physician's mistakes. Classification of iatrogenic pathology.	4	According to timetable
4	Significance of modern morphological methods in diagnostics of diseases in patients.	4	According to timetable
TOTAL		14	

Recommended reading for students:

Basic literature

№	Authors	Title	The year of publishing
1	Sorokina I.V., Markovskiy V.D.	Biopsy-Autopsy Course.	2012
2	Romaniuk A.M., Karpenko L.I., Moskalenko R.A. et al.	Biopsy-Sectional Course.	2015
3	Connolly A.J., Finkbeiner W.E., Ursell P.C., Davis R.L.	Autopsy Pathology. A Manual and Atlas.	2009
4	Kumar V., Abbas A.K., Aster J.A., Deyrup A.T.	Robbins Essential Pathology.	2021

Additional literature

№	Authors	Title	The year of publishing
1	Harsh Mohan	Textbook of Pathology.	2019
2	Harsh Mohan	Pathology. Practical Book.	2013
3	Strayer D.S., Rubin E.	Rubin's Pathology. Clinicopathologic Foundations of Medicine.	2015
4	Mills S.E., Greenson J.K., Hornick J.L., Longacre T.A., Reuter V.E.	Sternberg's Diagnostic Surgical Pathology.	2015

Grading policy and procedures for all types of work

For the period of studying the discipline, the student gains points for the relevant parameters (per unit):

- current score - 40 points,
 - independent work - 20 points,
 - control score (final assessment of knowledge per unit) - 40 points,
- Maximum score - 100 (40+20+40)

Grading system for student's achievements

Grading criteria per discipline				
Maximum score	Intervals			
	«unsatisfactory»	«satisfactory»	«good»	«excellent»
Current control – 40	0-23	24-30	31-35	36-40
Interval description	answer represents scattered knowledge with significant errors on the question	answer is incomplete, with errors in details, the ability to reveal the meaning of generalized knowledge is not shown, the format of the speech requires correction	complete, detailed answer to the question is given, the ability to identify essential and non-essential signs, cause-and-effect relationship in matters of clinical pathanatomy is shown	complete, detailed answer to the question was given
Independent work – 20	0-11	12-15	16-17	18-20
Interval description	significant errors in the review of the main definitions of clinical pathological anatomy	student demonstrates partial understanding of the theme	no errors in clinical pathological anatomy	answer has a clear structure, logical sequence that reflects the essence concepts, theories and phenomena
Control work (module) – 40	0-23	24-30	31-35	36-40
Interval description	here is a fragmentary illogical presentation, student does not realize the connection of the issue under discussion with other objects of the discipline	student cannot answer most additional questions	student demonstrates good understanding of the theme	knowledge of the subject is demonstrated in the background understanding it in the system of this science and interdisciplinary connections
TOTAL – 100	0-59	60-75	76-89	90-100

Conduct Policy (lateness, absence, behavior in the auditorium, late submission of work):

- Punctuality and completion of tasks.
- Mandatory attendance of classes.
- Attending class in a clean medical uniform.
- Eliminating conversations on a cell phone in the classroom.
- Active participation in the learning process.
- Doing homework on time.
- Academic detention at the time specified by the teacher.

For violations of the Conduct Policy, the total points for discipline might be reduced to 1-10 points.

Academic Ethics Policy:

- Be tolerant, respect the opinions of others.
- Formulate objections in the correct form.
- Constructively support feedback in all classes.
- Plagiarism and other forms of dishonest work are unacceptable. Plagiarism includes the following: the absence of references when using printed and electronic materials, quotes, thoughts and works of other authors or students.
- Prompting and cheating during tests, exams, classes is unacceptable as well as passing an exam for another student, unauthorized copying of materials.

For violations of the Academic Ethics Policy, the total points for the discipline may be reduced to 1-10 points.

Guidelines for the practical classes of the discipline

Theme № 1. Pathoanatomical service.

1. Pathoanatomical service as a branch of public health.
2. Structure and aims of pathoanatomical service.
3. Structure and staff of pathoanatomical department of hospital. Pathoanatomical bureau.
4. Practical work of pathoanatomist.
5. Documentation of pathoanatomical department.

Recommended reading for this class:

1. Sorokina I.V., Markovskiy V.D. Biopsy-Autopsy Course. 2012.
2. Romaniuk A.M., Karpenko L.I., Moskalenko R.A. et al. Biopsy-Sectional Course. 2015.

Theme № 2. Autopsy.

1. Aims of postmortem examination of cadavers (autopsy).
2. Autopsy of adults, children, newborns and fetus.
3. Direction of cadavers to postmortem examination, registration of cadavers and giving it to relatives.
4. Basic techniques and methods of autopsy.
5. Documentation of autopsy.

Recommended reading for this class:

1. Sorokina I.V., Markovskiy V.D. Biopsy-Autopsy Course. 2012.
2. Romaniuk A.M., Karpenko L.I., Moskalenko R.A. et al. Biopsy-Sectional Course. 2015.
3. Connolly A.J., Finkbeiner W.E., Ursell P.C., Davis R.L. Autopsy Pathology. A Manual and Atlas. 2009.

Theme № 3. Pathoanatomical diagnosis.

1. Diagnosis - definition. Pathoanatomical diagnosis as a method of control of the clinical diagnosis and treatment of patients.
2. Requests of pathologist to clinical case history, final clinical diagnosis and epicrisis.
3. Pathoanatomical diagnosis: construction and categories.
4. Clinico-pathoanatomical epicrisis: contents and formation.

Recommended reading for this class:

1. Sorokina I.V., Markovskiy V.D. Biopsy-Autopsy Course. 2012.
2. Romaniuk A.M., Karpenko L.I., Moskalenko R.A. et al. Biopsy-Sectional Course. 2015.
3. Kumar V., Abbas A.K., Aster J.A., Deyrup A.T. Robbins Essential Pathology. 2021.

Theme № 4. Pathoanatomical diagnosis in cases of perinatal death and iatrogenic pathology.

1. Construction of pathoanatomical diagnosis in cases of perinatal death.
2. Unfavorable consequences of treatment and diagnostic manipulations as categories of diagnosis.
3. Construction of pathoanatomical diagnosis in cases of iatrogenic pathology.

Recommended reading for this class:

1. Sorokina I.V., Markovskiy V.D. Biopsy-Autopsy Course. 2012.
2. Romaniuk A.M., Karpenko L.I., Moskalenko R.A. et al. Biopsy-Sectional Course. 2015.

Theme № 5. Comparison of clinical and pathoanatomical diagnoses. Death certificate.

1. Comparison of clinical and pathoanatomical diagnoses.
2. Categories of evaluation of the comparison of clinical and pathoanatomical diagnoses (coincidence, discrepancy).
3. Certification of discrepancy of the basic clinical and pathoanatomical diagnoses. Categories of discrepancy of the clinical and pathoanatomical diagnoses.
4. Reasons of discrepancy of the basic clinical and pathoanatomical diagnoses (objective and subjective).

5. Death certificate: structure and rules of preparation and giving. Peculiarities of preparation and giving of the certificate of perinatal death.

Recommended reading for this class:

1. Sorokina I.V., Markovskiy V.D. Biopsy-Autopsy Course. 2012.
2. Romaniuk A.M., Karpenko L.I., Moskalenko R.A. et al. Biopsy-Sectional Course. 2015.
3. Connolly A.J., Finkbeiner W.E., Ursell P.C., Davis R.L. Autopsy Pathology. A Manual and Atlas. 2009.

Theme № 6. Clinico-pathoanatomical conference.

1. Aims and organization of clinico-pathoanatomical conference.
2. Cases which must be discussed at the clinico-pathoanatomical conference.
3. Questions which must be decided at the clinico-pathoanatomical conference in cases of discrepancy of the clinical and pathoanatomical diagnoses, in cases of death from anesthesia, in postoperative period and as a result of medical manipulations.
4. Conduction, decisions and documents of clinico-pathoanatomical conference.

Recommended reading for this class:

1. Sorokina I.V., Markovskiy V.D. Biopsy-Autopsy Course. 2012.
2. Romaniuk A.M., Karpenko L.I., Moskalenko R.A. et al. Biopsy-Sectional Course. 2015.

Theme № 7. Examination of biopsies, operating material and placentas.

1. Significance of the method of antemortem histological and cytological examination.
2. Definition of biopsy, cytologic and surgical material.
3. Types of biopsies: incisional, puncture, aspiration, planning, urgent.
4. Purposes of examination of the biopsy and surgical material.
5. Requests to condition of biopsy specimens.
6. Types of pathohistological conclusions (final diagnosis, preliminary diagnosis, descriptive conclusion).
7. Peculiarities of examination of the placenta.
8. Direction of specimens to pathohistological laboratory. Duty of physician directing the biopsy and operating material to pathomorphological examination.

Recommended reading for this class:

1. Sorokina I.V., Markovskiy V.D. Biopsy-Autopsy Course. 2012.
2. Romaniuk A.M., Karpenko L.I., Moskalenko R.A. et al. Biopsy-Sectional Course. 2015.
3. Kumar V., Abbas A.K., Aster J.A., Deyrup A.T. Robbins Essential Pathology. 2021.

Theme № 8. Unit control.

Unit control includes oral interview, MCQ-tests and decision of cases.

Recommended reading for this class:

1. Sorokina I.V., Markovskiy V.D. Biopsy-Autopsy Course. 2012.
2. Romaniuk A.M., Karpenko L.I., Moskalenko R.A. et al. Biopsy-Sectional Course. 2015.
3. Connolly A.J., Finkbeiner W.E., Ursell P.C., Davis R.L. Autopsy Pathology. A Manual and Atlas. 2009.
4. Kumar V., Abbas A.K., Aster J.A., Deyrup A.T. Robbins Essential Pathology. 2021.

List of questions for MCQ part of the final unit control:

1. The main task of autopsies is:
 - A. Post-mortem diagnosis of diseases
 - B. Identification of errors in clinical diagnosis and treatment of patients
 - C. Post-mortem diagnosis of infectious diseases
 - D. Training of doctors and students
 - E. Scientific research of sectional material
2. The task of autopsy of corpses, which has an anti-epidemic value is:
 - A. Post-mortem diagnosis of diseases
 - B. Identification of errors in clinical diagnosis and treatment of patients
 - C. Post-mortem diagnosis of infectious diseases
 - D. Training of doctors and students
 - E. Scientific research of sectional material
3. A pathoanatomic autopsy is performed in the presence of:
 - A. Medical records with the visa of the head of the Department
 - B. Medical records with a visa of the chief medical officer of the hospital
 - C. Outpatient card

- D. Directions from the hospital with no history of disease
- E. Medical records with a visa of the Deputy chief medical officer of the hospital

4. It is forbidden to cancel autopsies:

- A. In cases of perinatal death
- B. In cases of death from cancer
- C. In cases of sudden death from heart disease
- D. In cases of death at home with an established diagnosis
- E. In all cases with an unclear diagnosis.

5. It is forbidden to cancel autopsies:

- A. In cases of perinatal death
- B. In cases of death from cancer
- C. In cases of sudden death from heart disease
- D. In case of death from an infectious disease or at suspicion on them.
- E. In cases of death at home with an established diagnosis

6. During autopsy of person who died from overdangerous infections, the following method is used:

- A. Virchov method
- B. Shor method
- S. Abrikosov method
- D. Fischer method
- E. Zenker method

7. Type of biopsy in which tissue is removed for examination. surgically:

- A. Incisional
- B. Puncture
- C. Aspiration
- D. Planned
- E. Urgent

8. Type of biopsy in which tissue is obtained for examination using special needles and troacars:

- A. Incisional
- B. Puncture
- C. Aspiration
- D. Planned
- E. Urgent

9. Type of biopsy in which tissue for examination is obtained by suction from hollow organs and cavities, using special instruments^

- A. Incisional
- B. Puncture
- C. Aspiration
- D. Planned
- E. Urgent

10. Necessary manipulation before sending the biopsy and surgical material for histological examination:

- A. Weighing
- B. Coloring with brilliant green
- C. Fragmentation
- D. Rinsing under running water
- E. Fixation

11. Necessary manipulation before sending biopsy and surgical material for histological examination:

- A. Weighing
- B. Labeling
- C. Fragmentation
- D. Rinsing under running water
- E. Photographing

12. Which substance is used to fix biopsy and surgical material:
- A. Distilled water
 - B. Xylene
 - C. Glutaraldehyde
 - D. Toluene
 - E. Formalin
13. Normative period for examination of planned biopsy and operating material:
- A. 1-2 days
 - B. 2-3 days
 - S. 4-5 days
 - D. 6-7 days
 - E. 9-10 days
14. Nosological unit that has the most pronounced manifestations is threatening the health and life of the patient is defined as:
- A. Basic disease
 - B. Complication of the basic disease
 - C. Associated disease
 - D. Pre-existing disease
 - E. Accompanying disease
15. Nosological unit not related to the underlying disease is not influencing its course and not contributing to the onset death is defined as:
- A. Basic disease
 - B. Complication of the basic disease
 - C. Associated disease
 - D. Pre-existing disease
 - E. Accompanying disease
16. Nosological unit existing simultaneously with the main one disease, significantly aggravating the patient's condition and individually capable of causing death is determined as:
- A. Basic disease
 - B. Competitive disease
 - C. Associated disease
 - D. Pre-existing disease
 - E. Accompanying disease
17. Nosological unit existing in parallel with the main one a disease that is not individually fatal, but together with the main one leading to death, is defined as:
- A. Basic disease
 - B. Competitive disease
 - C. Associated disease
 - D. Pre-existing disease
 - E. Accompanying disease
18. Nosological unit that plays a significant role in the occurrence and the course of the underlying disease or contributing the occurrence of fatal complications is defined as:
- A. Basic disease
 - B. Competitive disease
 - C. Associated disease
 - D. Pre-existing disease
 - E. Accompanying disease
19. Adverse consequences of therapeutic and diagnostic measures as categories of pathoanatomical (clinical) diagnosis are considered as a complication of treatment:
- A. If medical intervention is carried out according to indications and carried out correctly, the death of the patient occurred due to individual intolerance to the drug
 - B. If medical intervention is taken as indicated, but carried out incorrectly
 - C. If medical intervention is undertaken due to an erroneous diagnosis
 - D. For allergic reactions without a preliminary allergy test
 - E. If the medical intervention is undertaken for cosmetic purposes

20. Adverse consequences of therapeutic and diagnostic measures as categories of pathoanatomical (clinical) diagnosis are considered as a complication of treatment:

- A. If medical intervention is undertaken according to indications and carried out correctly, and the death is associated with severe the patient's condition
- B. If medical intervention is taken as indicated, but carried out incorrectly
- C. If medical intervention is undertaken due to an erroneous diagnosis
- D. For allergic reactions without a preliminary allergy test
- E. If the medical intervention is undertaken for cosmetic purposes

Examples of cases for final unit control:

CASE № 1

Atherosclerosis of aorta, coronary and cerebral arteries of 3rd stage.
Chronic ischemic heart disease – microfocal atherosclerotic cardiosclerosis.
Diabetes mellitus – atrophy, fibrosis and lipomatosis of the pancreas.
Steatosis of the liver. Diabetic glomerulosclerosis.
Gangrene of the right lower extremity.
Chronic catarrhal bronchitis.

TASK:

- 1) Determine categories of pathoanatomical diagnosis:
 - a) Basic disease?
 - b) Complication?
 - c) Accompanying diseases?
- 2) Explain thanatogenesis.

CASE № 2

Chronic catarrhal bronchitis.
Carcinoma of the pyloric area of stomach. Metastasis of carcinoma in the lymph nodes and liver.
Chronic atrophic gastritis.
Atherosclerosis of aorta and coronary arteries of 1st - 2nd stages.

TASK:

- 1) Determine categories of pathoanatomical diagnosis:
 - a) Basic disease ?
 - b) Complication?
 - c) Pre-existing disease?
 - d) Accompanying diseases?
- 2) Explain thanatogenesis.

CASE № 3

Carcinoma of the upper lobe of right lung. Metastasis of carcinoma in the lymph nodes of mediastinum, liver and bones.
Chronic catarrhal bronchitis. Focal pneumosclerosis.
Chronic atrophic gastritis.
Atherosclerosis of aorta and coronary arteries of 2nd stage.

TASK:

- 1) Determine categories of pathoanatomical diagnosis:
 - a) Basic disease ?
 - b) Complication?
 - c) Pre-existing disease?
 - d) Accompanying diseases?
- 2) Explain thanatogenesis.

CASE № 4

Chronic glomerulonephritis. Nephrosclerosis (weight of kidneys-150 gr.).
Chronic renal failure. Uremia: cerebral edema, sero-fibrinous bronchitis, pulmonary edema, fibrinous pleuritis, fibrinous pericarditis, steatosis of liver, hyperplasia of spleen.
Chronic atrophic gastritis.
Atherosclerosis of aorta and coronary arteries of 1st - 2nd stages.

TASK:

- 1) Determine categories of pathoanatomical diagnosis:
 - a) Basic disease?
 - b) Complication?
 - c) Accompanying diseases?
- 2) Explain thanatogenesis.

CASE № 5

Disentery – fibrinous colitis. Hyperplasia of liver, spleen and lymph nodes. Hemorrhagic syndrome.
Acute microfocal bronchopneumonia of the upper lobe of right lung.
Acute respiratory failure.
Edema of brain.

TASK:

- 1) Determine categories of pathoanatomical diagnosis:
 - a) Basic disease?
 - b) Complications?
- 2) Explain thanatogenesis.

CASE № 6

Clinical diagnosis:

Basic disease: Ischemic heart disease – Acute myocardial infarction.

Complication: Acute heart failure.

Accompanying diseases: Diabetes mellitus. Chronic gastritis

Pathoanatomical diagnosis:

Basic disease: Chronic peptic ulcer.

Complication: Acute gastric hemorrhage.

Pre-existing disease: Chronic atrophic gastritis.

Accompanying disease: Diabetes mellitus.

- 1) Compare clinical and pathoanatomical diagnoses.
- 2) Prepare death certificate.

CASE № 7

Clinical diagnosis:

Basic disease: Chronic peptic gastric ulcer

Complication: Perforation of ulcer. Peritonitis.

Accompanying disease: Chronic ischemic heart disease.

Pathoanatomical diagnosis:

Basic disease: Acute purulent cholecystitis.

Complications: Purulent cholangitis. Acute pancreonecrosis.

Accompanying disease: Chronic ischemic heart disease – microfocal atherosclerotic cardiosclerosis.

- 1) Compare clinical and pathoanatomical diagnoses.
- 2) Prepare death certificate.

CASE № 8

Clinical diagnosis:

Basic disease: Lobar pneumonia.

Complication: Acute respiratory failure.

Accompanying disease: Chronic ischemic heart disease

Pathoanatomical diagnosis:

Basic disease: Pulmonary tuberculosis.

Complication: Acute respiratory failure.

Accompanying diseases: Chronic ischemic heart disease. Chronic cholecystitis.

1) Compare clinical and pathoanatomical diagnoses.

2) Prepare death certificate.

CASE № 9

Clinical diagnosis:

Basic disease: Portal liver cirrhosis.

Complication: Chronic hepatic failure.

Accompanying diseases: Chronic peptic gastric ulcer. Chronic bronchitis.

Pathoanatomical diagnosis:

Basic disease: Primary carcinoma of liver.

Complication: Metastasis to lymph nodes and lungs.

Pre-existing disease: Portal liver cirrhosis.

Accompanying diseases: Chronic peptic gastric ulcer. Chronic bronchitis.

1) Compare clinical and pathoanatomical diagnoses.

2) Prepare death certificate.

CASE № 10

Clinical diagnosis:

Basic disease: Ischemic heart disease – Acute myocardial infarction.

Complication: Acute heart failure.

Pre-existing disease: Atherosclerosis of aorta and coronary arteries.

Accompanying diseases: Primary arterial hypertension.

Pathoanatomical diagnosis:

Basic disease: Ischemic heart disease – Acute myocardial infarction.

Complication: Rupture of ventricular wall. Hemopericardium.

Pre-existing disease: Atherosclerosis of aorta and coronary arteries.

Accompanying diseases: Primary arterial hypertension.

1) Compare clinical and pathoanatomical diagnoses.

2) Prepare death certificate.

Methodological instructions for the implementation of independent work on the discipline:

Student must prepare an essay using additional literature. Essay has a structure consisting of 7 mandatory sections: 1) title page, 2) content, 3) introduction, 4) main part, 5) conclusion, 6) list of used literature, 7) appendices.

Essay should be 10-15 pages long. The text of the essay is typed at one and a half intervals. If the essay is printed in the Microsoft Word text editor, use Times New Roman font with a font size of 14 pt up to 60 lines per 1 sheet. Each new structural part of the essay begins on a new page. The recommended indentation between the chapter and the text, between the chapter and the paragraph is 2 spaces.

Appendices are auxiliary materials that allow you to reveal the selected topic of the essay in full. These include graphs, tables, diagrams, diagrams, photos and other visual material that is taken outside the general scope of the document, but which is mentioned in the text of the work.