parameters doesn't lead to the reflection or depletion of the neuron-muscle system. The amplitude and frequency of the received signals and their changes directly depend on the distance from the stimulating electrode to the nerve. It allows to find the laryngeal nerves

in the tissues of the wound without any mistakes.

Developed method allows to identify laryngeal nerves while operating on the thyroid gland extremely accurate without having complications such as injuries of laryngeal nerves.

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ON THE PATHOLOGICAL FEATURES OF THE COURSE OF ACUTE CEREBROVASCULAR

Pathologicoanatomic studies have always shown a basic facts about structural changes in acute cerebrovascular diseases and related by autopsies of patients described changes found, a comparison of in vivo observations. In the future held systematization of the data. With autopsy determined the cause of death of patients peculiarities of acute cerebrovascular events in each case, developing accurate statistics of death and mortality, it appears effectiveness of certain new drugs and more. During the pathologicoanatomic we get an idea of the more exciting medical initial morphological manifestations of acute cerebrovascular events, time of occurrence, as we are able to look at the opening of the changes in other organs and systems that seem to be not affected by the pathological process in vivo and are not always be recognized.

Thus, the provision of specialized angio neurological care for stroke should be conducted in angio neurological offices, patients should be delivered there

as soon as possible, preferably within the therapeutic window. To optimize the provision of care to patients with acute cerebrovascular events in Ukraine must create a sufficient network of specialized stroke offices equipped devices Computer tomography or MRT, working around the clock. They should organize regular service in the department of computer tomography Military Medical Clinical Centre of Southern region to ensure that the Computer tomography of the brain in all patients with acute cerebrovascular who received inpatient treatment at the Military Medical Clinical Centre South region for two hours. They should organize round the clock duty multidisciplinary team with mandatory participation neurologist, neurosurgeon, cardiologist, rehabilitologist. Permission to transport a patient with acute cerebrovascular shall provide qualified angio neurologist who will then deal with the treatment of the patient, not the physician, organizer or representative of the administration.