ABSTRACT
Object: To define the concept of the scientistic component of the future doctor’s speech competence on the example of studying the discipline "Latin language" in a non-linguistic institution. The task of the study is to examine the main components of the concept of speech competence and to study the features of the scientistic component. Methods: Methods of a research are the comparative and etymological analysis of words of a Greek-Latin origin that are part of the structure of speech competence. Findings: The result of the study was the introduction into the teaching process of the Latin language of students’ independent work on the history of diseases with the purpose of their analysis and full study in the Latin language. Conclusions: The scientistic component of speech competence is connected with the communicative, psychological, social, cultural components. But plays a more important role in the formation of speech competence among medical students.

Keywords: competence; knowledge; student; Latin language; personal development; analysis; disease history; think; mind; branches of medicine; abilities; specialist; doctor.

Introduction
Nowadays in the educational standards of medical specialties there is a tendency to reduce the hours of the basic part of the disciplines. Therefore, it becomes extremely important to form the speech competence of the future specialist of any profession. A student of medical specialties should be the most focused on the gradual development and formation of his speech competence, because he is a representative of a special profession that affects not only the body of a person, but also his soul, his emotional state and psychological perception of his illness and life in general.

The relevance of this study is explained by the fact that teachers of the Latin language use the methods of working with students, which allow developing the students' verbal competence. This need for the formation of speech competence in future doctors is an ethical and psychological need due to pathogenicity (pathogenus from the Greek pathos - passion, suffering, disease, genus - born, caused by the defeat of something). Thus, the pathogenic nature of man is struck by passions, deviations, inherently morbid nature of modern man, but also "an indispensable condition for the physical and mental survival of the human race" (Fromm, 2008). Nowadays it can be said that the physical health of man and the entire human race depends on the spiritual development and formation of each individual. Consequently, the formation of speech, language and cultural competencies as professionally significant qualities of any future specialist is an actual and paramount factor in the process of development and education of the individual.

Materials and methods
The material of the study is the scientistic component of speech competence. The emphasis is on a comparative analysis of terms of Greco-Latin origin, which include the concept of "knowledge". The etymological analysis of such words as "scientia, ae f", "notitia, ae f", "prudentia, ae f", "γνώµη, ης ἦ" gives a more accurate definition of the scientistic component and, as a result, guides Latin teachers to use in Method of new forms of work, gradually replacing the work with the textbook to solve practical problems.

Literature review
The concept of language competence is relevant for the scientific community of researchers. Modern scientists are trying to offer their definitions of language competence. Professor Titova S.V. (Titova,
2012) introduced the concept of mobile technologies in language teaching and defined the concept of mobile competence of the teacher and student. Korenev A.A. (Korenev, 2016) Medvedev N.E. (Medvedev, 2016) considered the formation of writing skills, communicative tasks and communicative competence of the teacher and student. In our article, we follow Professor Musohranova M.B. (Musohranova and Kononov, 2008), who believes that the main thing in the process of teaching the Latin language is the formation of the student's verbal competence, when students "learn to think with medical realities expressed in terms".

Results
After analyzing the scientistic component and proving that it includes not only the program laid down in the basic educational standard for discipline, we suggest a gradual introduction into the teaching of the Latin language of medical terminology of new forms of work such as the analysis of disease histories, the formulation of recipes for annotations, special dictionaries for different branches of medicine.

Discussions
The first step in the study of medicine is the study of its language and nomenclature. The main language of the doctor is Latin. "Invia est in medicina via sine lingua Latina" is the basic postulate, from which the first acquaintance with the future profession begins. In the process of studying the Latin language, like any other language aimed at forming the speech competence of the future doctor, the emphasis is on the following components. Firstly, it is a program laid down by the educational standard, which gives a general idea of medical terminology in new forms of work such as the analysis of disease histories, the formulation of recipes for annotations, special dictionaries for different branches of medicine.

The medical knowledge is based on anatomical, clinical and pharmaceutical terminology, and the ability to use them adequately. Working with Greek-Latin terms, highlighting their meaning, composition and etymology, develops such abilities as analysis, comparison, abstraction. In other words, it is a scientistic or gnostic component of speech competence. A comparative analysis of these terms helps to identify the following conclusions.

In Latin language, there are several nominations for the concept of "knowledge" such as "Scientia", "ae f; Notitia", "ae f; Prudentia", "ae f". The main term is "scientia, ae f", which is defined as "the result of cognitive activity, the system of concepts acquired with its help about reality", "the activity of consciousness aimed at comprehending reality", "possessing information about something" and "the aggregate of information in some area" (Ushakov, 2008) or "knowledge" in another way. This word is derived from the verb "scio, ivi, itum, ire - to know, to recognize, to test, to notice, to see, to decide, to decide." Consequently, knowledge is the result of the task and its solution, as a tested experience, as recognition of something new for the future physician, in other words, recognition of the terminology describing the anatomy of the human body, its pathology and forms of treatment.

The second term "prudentia, ae f" has a more precise meaning, describing knowledge as foresight of disease, as prudence in the choice of surgical, preventive and diagnostic actions, as prudence in the diagnosis. It is interesting to consider the etymological chain of the term. "Prudentia, ae f" is formed from "prudens, entis - conscious, knowledgeable, knowledgeable, experienced, intelligent, reasonable, prudent, judicial, deft, skillful" (Dvoreckij, 2006), from "providens, entis - prudent, cautious, faithful, reliable", and from the producing verb "provideo, vivi, visum, ire - to see, anticipate, pre-weigh, pre-contemplate, provide, care, to prepare ". Thus, the term "scientia" (Dvoreckij, 2006) is a more general concept, including the understanding of the field of knowledge, in which the future specialist works, and directly the medical information of a particular field (for example, therapy, surgery, dentistry and Etc.), and the presence of experience and dexterity of certain actions. The term "prudentia" gives a complete idea of the medical profession in terms of knowing (knowing), and in terms of the qualities that a professional doctor should be endowed with.

The third term "notitia, ae f" illustrates the other side of the concept of "knowledge". According to Dvoreckij I.H (Dvoreckij, 2006) firstly, this concept includes the consequences of applied knowledge by a specialist such as fame after successful intervention in the human body. Secondly, this recognition is the correct and reliable actions of the doctor, the autopsy and the explanation of certain knowledge.
clinical terms, studying new signs of a particular disease, and getting acquainted with certain anatomy, physiology, also studies the Latin language, translating anatomical phrases, analyzing consistently, gets acquainted with such disciplines as propaedeutics of the disease, pathological clinical and pharmaceutical terminology. The student, reading and analyzing the history of the disease of the onset of the disease until complete recovery. In other words, it is a material on anatomical, complete description of a person's disease from its primary diagnosis and the collection of the causes scientistic component of speech competence. The medical history is a medical document, which is a detailed analysis of the medical history is such a form of work that is directly aimed at forming the foundation on which the development and formation of the speech competence of the doctor and his personality begins. Therefore, the methodology of teaching the language should be directed in such a way that the student understands the importance of studying the Latin language, because through it the disease "speaks", informing itself about the information of the anatomical, clinical, diagnostic plan.

We can conclude that the scientific component of the speech competence of the future doctor includes not only knowledge, but also other components, such as communicative, psychological, social. It is important to emphasize that the formation of a communicative, psychological, social component for students is a fundamental goal. It includes not only knowledge in terms of "treat" as the main specificity of the doctor, but also knowledge in terms of narrow areas of the medical field: "mix, prepare, season" - the scope of the pharmacist - tincturam Belladonae cum tinctura Chamomillae; "Paint, color" - the scope of the chemical - aliquid aliqua re; "Embalming" - pathologist - mortui arte medicati; "Soften" - for example, a masseur - cutem, semina; "Endow with miraculous power, enchant" - the therapist, the psychologist - fruges medicatae; "Poison" - anesthesiologist - medicata veneno tela (Dvoreckij, 2006). Consequently, the doctor is a broad concept. A doctor is a person capable of performing any actions in relation to a person's health. "Doctors should be able not only to amputate and cut, but also rinse your mouth, bandage, put an enema and poultice, etc." (Borodina, 2008). “Honour the physician for the need thou hast of him: for the most High hath created him. For all healing is from God, and he shall receive gifts of the king. The skill of the physician shall lift up his head, and in the sight of great men he shall be praised. The most High hath created medicines out of the earth, and a wise man will not abhor them” (Hanssler-Verlag, 2001). This is a true confirmation that a doctor must have special knowledge or a scientific component of speech competence.

Another important part of the speech competence is its communicative component (“communicatio, onis f - message transmission, the conversation”), reflected in the knowledge of the meaning of certain terms and their conscious use in communicating with colleagues, clients (“cliens, entis - dependent, slave of someone”), patients (“patiens, patientis - impatient, carrying the suffering, tortured, subjected to the test allows and finds" - is completely dependent on the actions of the doctor”), as well as meaningful speech perception (“oratio, onis f - faculty of speech; ech, language, saying, speech; utterance; decree; prayer”) of the communication partner.

The communicative component of competence is closely connected with the psychological, forming a value attitude to the word through the reflection and analysis of information embedded in the term, as well as social, that is combined with the working atmosphere, first in the university, then at work.

The uniqueness of the scientific component of the future doctor's speech competence lies in the fact that in the course of the Latin language only medical terminology is studied. Medical terminology is divided into three main parts. During the studying in a medical college, the student begins training with the study of body anatomy, then he studies the pathological anatomy of a person and completes his studies in pharmacology. In practical classes in the Latin language, in the first year the student gets acquainted with these stages of his education, studying the Greek-Latin medical terminology. Latin is the foundation on which the development and formation of the speech competence of the doctor and his personality begins. Therefore, the methodology of teaching the language should be directed in such a way that the student understands the importance of studying the Latin language, because through it the disease "speaks", informing itself about the information of the anatomical, clinical, diagnostic plan. This is not only about the classic work on the textbook, but also about the introduction of new forms of work that would further draw the students' attention to the Latin language and the future profession. A detailed analysis of the medical history is such a form of work that is directly aimed at forming the scientific component of speech competence. The medical history is a medical document, which is a complete description of a person's disease from its primary diagnosis and the collection of the causes of the onset of the disease until complete recovery. In other words, it is a material on anatomical, clinical and pharmaceutical terminology. The student, reading and analyzing the history of the disease consistently, gets acquainted with such disciplines as propaedeutics of the disease, pathological anatomy, physiology, also studies the Latin language, translating anatomical phrases, analyzing clinical terms, studying new signs of a particular disease, and getting acquainted with certain
medications. Stories of the disease are always different. The student can choose the history of the disease by his own interests. The result of this work can be the compilation of a dictionary for a specific disease, the calculation of the percentage ratio of anatomical, clinical and pharmaceutical terms, the compilation of a list of unfamiliar words, etc.

The teacher can give an assignment to compose prescriptions for the annotations of medicines to students of the pharmaceutical faculty. This work will allow to study in detail the pharmacological groups of medicinal products (antibiotics, hormones, analgesics, etc.), memorize the writing of frequency segments included in the names of medications. This task will enable students to compose a recipe on their own, having worked out its grammatical line. Therefore, the teacher, applying this form of work in the course of Latin language, is working on the formation of the scientific component of speech competence, arouses students learning interest and fulfills the basic grammatical rules of the discipline.

Conclusion
The scientific component of speech competence is an inherent quality of the future doctor, which is a constant cognitive activity in the course of training and working with medical terminology, the purpose of which is to comprehend a disease, its foresight and prevention.

References
7. Fromm E. (2008) “To have” or “to be”. Moscow, AST MOSCOW, p. 25.