

**МІНІСТЕРСТВО ОХОРОНИ ЗДОРОВ'Я УКРАЇНИ
ВИЩИЙ ДЕРЖАВНИЙ НАВЧАЛЬНИЙ ЗАКЛАД УКРАЇНИ
«БУКОВИНСЬКИЙ ДЕРЖАВНИЙ МЕДИЧНИЙ УНІВЕРСИТЕТ»**

**Матеріали навчально-методичної конференції
«АКТУАЛЬНІ ПИТАННЯ ВИЩОЇ МЕДИЧНОЇ
ТА ФАРМАЦЕВТИЧНОЇ ОСВІТИ:
ДОСВІД, ПРОБЛЕМИ, ІННОВАЦІЇ
ТА СУЧАСНІ ТЕХНОЛОГІЇ»**



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Актуальні питання вищої медичної та фармацевтичної освіти: досвід, проблеми, інновації та сучасні технології: матеріали навчально-методичної конференції (Чернівці, 19 квітня 2017 р.). – Чернівці, 2017. – 581 с.

У збірнику містяться матеріали навчально-методичної конференції педагогічних працівників Буковинського державного медичного університету, які висвітлюють методичні, методологічні, організаційні і психологічні проблеми додипломної та післядипломної підготовки лікарів, провізорів, медичних сестер, фармацевтів, можливі шляхи вирішення цих проблем у сучасних умовах. Окремі розділи збірника присвячені узагальненню досвіду впровадження кредитно-модульної системи організації навчального процесу, використанню інформаційно-комунікаційних технологій підтримки навчального процесу, приділено увагу питанням формування інноваційного, гуманістичного, демократично-орієнтованого освітнього простору, який забезпечить умови для всебічного, гармонійного розвитку особистості та конкурентоспроможності майбутнього фахівця.

Усі роботи представлені в авторській редакції.

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ADAPTATION PROCESS OF IMPLEMENTATION OF THE PROJECT «TAME» (TRAINING AGAINST MEDICAL ERRORS, ERASMUS+) TO TRADITIONAL PEDIATRIC CURRICULUM

N.K. Bogutska

Department of Pediatrics and Pediatric Infectious Diseases

Higher State Educational Establishment of Ukraine

“Bukovinian State Medical University”, Chernivtsi

Higher State Educational Establishment of Ukraine "Bukovinian State Medical University" participated in grant project "Training Against Medical Error" (TAME) since October 2015. Since 2016 project "TAME" with virtual patients was implemented in pediatric curriculum at undergraduate level of 6-th course (totally 54 hours, including 18 hours for self preparing). Mixed curriculum on discipline "Pediatrics, children's infectious diseases" with traditional and problem-based learning (PBL) elements has been developed within the framework of the grant project "TAME".

The aim of the study was the initial evaluation of adaptation process of project TAME implementation using new simulative modality of cases based on e-virtual patients (OpenLabyrinth platform) at undergraduate stage. To achieve this goal the peculiarities of adaptation of e-virtual patients in the study of TAME were analyzed at the undergraduate stage.

Implementation of e-virtual patients in educational curriculum needs their initial adaptation and providing further changes taking into account students' and tutors' feedback. Our experience supports the value of simulation as an educational technique; but to be effective it needs to be properly implemented into the traditional curriculum in order to stimulate transferring learnt practical skills to real clinical practice. Focus of the project of avoiding medical errors on emergency conditions, the need for closer interaction with the patient and their parents make it difficult to use in the learning process of real patients. The simulation modality which has been used in the project TAME was software for training and assessment of clinical knowledge and decision making – clinical cases based on branched and linear electronic virtual patients on OpenLabyrinth platform. Students' group working on virtual patients within simulation sessions is aimed at training on skills of taking history, clinical examination, procedure techniques, overall clinical decision making, perfecting communication skills and teamwork.

Initial adaptation of the curriculum included changes of the pediatric curriculum of discipline "Pediatrics with Pediatric Infectious Diseases" for graduate students – 12 simulative sessions with 6 clinical e-virtual cases were implemented, which were learned totally within 6 weeks, twice a week (on Mondays and Wednesdays). Typical case scenario tutorial consisted of a group of 6 to 10 students (totally 80 students, 8 groups). A hybrid mixed curriculum for module was designed to include different teaching methods (traditional and PBL educational techniques) in order to achieve the learning outcomes in knowledge and practical skills. Sufficient time was allowed weekly for students to do the required self directed learning.

Typical case scenario tutorial consisted of a group of 6 to 10 students and a tutor, each case was discussed during two sessions weekly, each group stayed together with each other and with tutor during the whole classes duration long enough to allow developing of an effective dynamics, approximately 4-5 hours daily. Students elected different roles for themselves and rotated them for each e-virtual case. Broad spectrum of medical errors was presented in varied virtual clinical cases which increase the students' learning interest and motivation. Traditional medical education is realized through auditorium seminars, practical classes and lectures, where students are mostly passive listeners and are motivated predominantly by final assessment scores but not by learning achievements. Traditional learning, as a rule, mainly provides with the information for memorizing but less often ensures the skills of use of acquired knowledge for solving of clinical problems. Traditional education is less effective in process of training professional medical staff, who every moment have to solve problems of the different levels as well as avoid medical errors. This makes actual the replacement of accentuation from teaching to learning process by implementation of the new methods of the learning clinical disciplines, which is oriented at problem solving, personal oriented and self directed learning. Education makes students familiar with different types of errors in medical practice and provide graduates with the appropriate attitude and skills how to avoid, prevent and cope with mistakes. Final group discussion on mistakes management involves understanding the nature and cause of errors in order to enhance further avoiding of mistakes using optimal communication and teamwork behavior, improving performance in knowledge, clinical skills and patient care overall.

Thus, implementation of PBL in medical curriculum requires coordinated complex approach. Students mostly have difficulties in dealing with medical errors, but PBL is more effective as compared to traditional learning in training of medical error management and prevention. The advantages of problem-based learning in medical education, as compared to the traditional approach, are personal orientation, activation of the higher levels of thought processes, stimulating motivation educational atmosphere, the formation of skills of interaction and group work.

ANATOMICAL SKETCHING AS LEARNING BY DOING METHOD OF TEACHING HUMAN ANATOMY

N.M. Navarchuk, N.B. Reshetilova, O.-M.V. Popelyuk, O.V. Guzik

M.H. Turkevych Department of human anatomy

*Department of Anatomy, Topographic Anatomy and Operative Surgery**

Higher State Educational Establishment of Ukraine

«Bukovinian State Medical University», Chernivtsi

Learning is the personal development following an experiential process, leading to a relatively stable modification of the knowledge behaviour. The large number of the terms from the anatomical nomenclature used, the huge volume of notions make the discipline "Anatomy" to be practically a foreign language for a students. By learning gross anatomy, medical students get a first "impression" about the structure of the human body which is the basis for understanding pathologic and

ІНТЕРАКТИВНІ МЕТОДИ НАВЧАННЯ СТУДЕНТІВ У ВИЩОМУ НАВЧАЛЬНОМУ ЗАКЛАДІ О.І. Юрків, О.В. Макарова, А.І. Перижняк	538
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