### МІНІСТЕРСТВО ОХОРОНИ ЗДОРОВ'Я БУКОВИНСЬКИЙ ДЕРЖАВНИЙ МЕДИЧНИЙ УНІВЕРСИТЕТ

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# МАТЕРІАЛИ З НАУКОВО-ПРАКТИЧНОЇ КОНФЕРЕНЦІЇ З МІЖНАРОДНОЮ УЧАСТЮ "МЕДИЧНА СИМУЛЯЦІЯПОГЛЯД У МАЙБУТНЄ"





Simulation-based learning holds great promise for dental students and plays a crucial role in preparing future professionals in the field. The application of modern simulation technologies enables students to gain practical experience in a safe and controlled environment, enhancing their skills and confidence. It allows effective modeling of various clinical scenarios, refining instrument techniques, and making critical decisions in real-time. This is particularly crucial in dentistry, where precision and dexterity play a vital role in successful patient treatment.

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# THE ROLE OF SIMULATION TECHNOLOGIES IN CONSOLIDATING PRACTICAL SKILLS BY STUDENTS OF THE 4TH COURSE WITH THE SPECIALTY "MEDICAL PSYCHOLOGY"

## IN THE TEACHING OF SURGERY Hyrla Ya.V.

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The future profession of a doctor requires a high level of training and is associated with high responsibility for the life and health of patients.

In the 4th year of the medical university, the subject is "surgery", in the process of training students in the specialty "medical psychology", there are certain peculiarities of training with psychologists. The duration of the subject "surgery" in the 4th course is limited to 40 hours. There is not much time, therefore, for the "theoretical" stage of training, the same number of hours is allocated for independent preparation for classes, and in practical classes, the main emphasis is placed on the discussion of clinical manifestations of surgical diseases and methods of their diagnosis.

Today, this problem can be solved by innovative pedagogical methods using simulation technologies, which are widely implemented at all stages of medical education. This made it possible to shift the emphasis on the quality of education, from the amount of simply learned information, to the readiness of a person to

act in various situations, to the ability to quickly make decisions and impeccably perform the necessary actions in one's professional activity.

Main part.

The literature has repeatedly noted that the use of simulation technologies has many positive aspects. Learning practical skills with the help of simulation training eliminates the risk to the life and health of the patient. This allows you to conduct classes according to an individual educational program without taking into account the working hours of the clinic and the work schedule of the teacher, as well as, it provides an opportunity to repeatedly practice skills and bring manipulation to automaticity.

Practical skills in surgery are primarily manual skills. Practicing these skills should not harm the patient. But, on the other hand, without inevitable mistakes, without practice, mastery cannot be achieved. Simulation technologies can help in solving this issue.

The main tasks of using simulator mannequins in surgical training of psychologists are consolidation of theoretical knowledge in surgery and acquisition of basic practical skills.

Today, among the simulation simulators and mannequins used in the educational process, we can name such low-cost devices as a mannequin for digital examination of the rectum and breast, a mannequin for local anesthesia, a mannequin for dissection and suturing of tissues and primary surgical treatment of a wound, etc.

The use of simulators and phantoms allows you to repeatedly repeat and bring to automatism certain manipulations, techniques and research. The evaluation obtained on the simulator is presented as objective and independent, and the result of simulation training is acquired, solid, practical experience.

It should be noted that when working on phantoms and mannequins of various levels of complexity, a certain transformation of the participants of the pedagogical process takes place: the active participation of the teacher moves to the background. At the same time, in teacher-student communication, the control function is changed to a consultative one, replaced by an equal productive dialogue.

Conducted studies, in particular meta-analyses, mostly confirm the effectiveness of such simulation trainings for doctors who will work outside the conditions of clinical inpatients. It showed that students who underwent such simulation trainings had better performance and mastery ratings, as they were more careful and attentive when performing manipulations, and had a higher scale of accuracy in conducting simulated diagnostic procedures.

Thus, simulation training can be considered a means for forming and consolidating practical skills in the diagnosis of a patient's surgical pathology, and complements traditional teaching methods. Allows, if not solving, to significantly reduce the existing problems of forming and consolidating practical skills among students of the 4th year of the specialty "medical psychology" in a short time, during the course of the subject "surgery".

Thanks to these technologies, there is an increase in the emotional saturation of the lesson and motivation; the effectiveness of the educational process increases - a large amount of practical material is learned in a relatively short period of time; a certain individualization of education is observed; the "survival" of knowledge and practical skills increases.

Conclusions. The use of simulation technologies in the training of students of the 4th year of the medical university majoring in "medical psychology" for the formation and consolidation of basic practical skills in the diagnosis of surgical diseases organically complements the best traditions of the higher medical school.

Developing the necessary practical skills and abilities enables a psychologist to carry out his multidisciplinary medical and diagnostic activities within the limits of his qualifications.

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## ORGANIZATION OF THE PEDIATRIC STATION AND PERFORMANCE OF SKILLS BY STUDENTS-GRADUATES OF BSMU DURING OSCE Khlunovska L.Yu.

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Objective Structured Clinical Examination (OSCE) is a modern method of assessing practical knowledge and skills, designed to verify the acquisition of clinical skills and competence that cannot be assessed by traditional forms of examinations. Each station assesses one or more clinical competencies (eg, patient questioning skills, communication skills, physical examination skills, etc.). Conducting an exam in this format involves a standardized approach, in particular, the involvement of standardized patients, the use of standardized assessment tools, and standardized logistics of the exam day.

In 2023, the final exams for graduates of the Bukovinian State Medical University (BSMU) were held in the format of the OSCE international exam. This final exam was preceded by a lot of work done by teachers, trainers of the BSMU Simulation Center, university departments, the educational department and the students themselves. The entire exam included 10 stations of various profiles. Each student was given 5 minutes to complete any task. Before the main exam for students of the 6th year, a training OSCE was held during April 3-28, 2023 on the basis of the Simulation Center of BSMU. This contributed to familiarizing students with the new format of the final exam, improving the organization of the exam process, improving exam materials, and reducing the stress of both students and teachers.

A Station Passport was previously developed for each station, which includes detailed information on the progress of the task. The passport of the pediatric station "Standardized patient in the clinic of pediatric diseases, emergencies in pediatrics and pediatric surgery" included 10 tasks, instructions for a student, instructions for a standardized patient, instructions for an examiner, an algorithm for performing practical skills, and a checklist. The tasks of the pediatric station were of different directions: somatic conditions in pediatrics (4 tasks), children's surgery (3 tasks) and emergency conditions in pediatrics (3 tasks).

The instructions for the student were on the door of each classroom, where the performance of the task was demonstrated, the student had 1 minute to familiarize himself before entering the station. The role of a standardized patient