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## **SIMULATION TRAINING USING THE "STANDARDIZED PATIENT" METHOD IN TEACHING THE DISCIPLINE OF INTERNAL MEDICINE**

### **Abstract.**

*The rapid development of science, in particular medical science, the development of new high-precision technologies, requires the training of highly qualified specialists who must possess the latest technologies and must be able to combine their theoretical knowledge and practical skills into one integrated system. The article describes the features of using a simulation program for training medical students using the "Standardized Patient" method. This educational game process with the participation of a doctor (student) and a patient allows, on the one hand, to develop and practice practical skills, on the other hand, to conduct a comprehensive assessment of the student's knowledge and skills, to develop team interaction and coordination, to increase the level of performance of complex medical manipulations and to evaluate the effectiveness own actions.*

**Key words:** *simulation training, standardized patient, medical education.*

International standards in medical education, which were adopted by the World Health Organization and the World Medical Association [1], were developed to create guarantees of the quality of medical care and training of health care specialists. These standards formulate the following requirements for modern medical training programs:

– training should be based on the principles of evidence-based medicine;

- it is necessary to teach understanding of the formation of scientific knowledge and critical thinking;
- teaching methods should be based on evidence-based principles of effective knowledge acquisition;
- actively use information and communication technologies;
- intensively teach practical skills in real conditions.

In this regard, a shift in the priorities of the educational process from the acquisition of knowledge to the formation of professional competences has recently been noted. The competence approach in higher education is aimed at the formation of professional competences as the ability of students to use the acquired fundamental knowledge, skills and abilities to solve practical and theoretical tasks arising in their professional activities. It is time to move from education that informs to active forms of education that model and shape future professional activity. The activation of training allows training a specialist who can quickly adapt to changing industrial and economic conditions, see problems and trends in the field of health care, develop and professionally make optimal alternative solutions [2].

In recent years, active implementation of world experience in the field of simulation teaching methods has been observed in Ukraine, medical universities are fulfilling the requirements specified in the national educational standards and aimed at introducing simulation courses into the educational process. A feature of the domestic model of medical education has always been the possibility of free access of the student to the clinical base, communication with the patient. But in today's conditions, the classical system of clinical medical education is not able to fully solve all the problems of high-quality practical training of a doctor. The main obstacles are the impossibility of practical illustration of all the variety of clinical situations, as well as moral-ethical and legal restrictions in the communication of educationalists with the patient. When studying a specific topic, the teacher is not always able to demonstrate a relevant clinical case. Therefore, ways of creating other ways of transferring medical experience and skills are necessary, which should ensure high professional training and the ability to work flawlessly in rather characteristic and typical conditions [3-5]. Such methods include simulation training, educational modeling using diagnostic and therapeutic tasks, problem situations and especially business games. Simulation training (from Latin *simulatio* — imitation, pretense) is a method of training based on the imitation of any physical process using an artificial (for example, mechanical or computer) system. Teaching clinical skills through the use of manikins, simulators, and standardized patients has been the "gold standard" of medical education in the developed world for over 10 years. That is why in Ukraine, following world trends and guided by the Law of Ukraine "On Higher Education" No. 1556-VII dated July 1, 2014, they began to attach significant importance to the development of simulation training as one of the ways to create and implement new competitive technologies to ensure innovative development of society and training of innovative specialists [6]. According to the "learning cone" of the American teacher Edgar Dale, a theatrical performance, imitation of a real activity and performance of a real action ensure the assimilation of up to 90% of the material [7]. In addition, simulation training excludes fear and a psychotraumatic component from the negative result of the student's first experience, which significantly improves the learning of educational material [3].

At the Bukovinian State Medical University, a simulation center for practical training of medical students and more has been created and is operating. On the basis of the simulation center, various master classes are held for the training and improvement of doctors of various profiles. In the simulation center, training rooms have been created and equipped with mannequins, in which students have the opportunity to practice practical skills and work with simulated patients while studying propaedeutics, surgery, orthopedics and traumatology, pre-medical care, anesthesiology and resuscitation, emergency and emergency medical care, obstetrics and gynecology, pediatrics, therapy, ophthalmology and otorhinolaryngology.

The "standardized patient" methodology is used to study internal medicine. The use of the "standardized patient" as one of the methods of teaching medical students, as well as improving the qualifications of doctors and nurses, began as early as 1963 at the University of South Carolina, USA. For the first time, actors were used instead of real patients to teach the skills of taking an anamnesis and preliminary diagnosis of diseases. By actors in this case, we mean people who have previously been introduced to the script, which describes their health status, complaints, and life history data. Using these data, the actors simulated the symptoms of one or another disease, and the student had to recognize the disease, determine the preliminary diagnosis [6]. In contrast to a real patient, who may be dissatisfied with the use of his case to teach cadets, a standardized one has the following advantages: a large range of nosologies that can be demonstrated; relative ease of systematic involvement in the educational process; the possibility of receiving detailed constructive feedback for educational purposes [8]. Actors who play the role of patients are most often senior students of medical universities, interns or teachers. The teacher provides information to a standardized patient about the disease, a scenario is drawn up for him, which he must follow in order to answer the questions. The standardized patient has specific instructions from the teacher-instructor, who is forbidden to improvise on the main storyline, the formulated information must be given clearly according to the script developed for it. Complaints, history can be detailed only in the case of relevant specific questions from the student. The pathology present for one or another task is formed not only due to staged verbal images, but also through the demonstration by a standardized patient of certain symptoms during an objective examination (for example, imitation of pain of different localization). An additional contribution to the creation of a realistic image of a sick person is made by the use of materials with functional indicators, the results of additional research methods. Physical examination, examination of organs and systems can be performed on a standardized patient.

In the process of learning according to the "standardized patient" method, it is mandatory to review and discuss the student's tactical behavior in various clinical situations, his ability to carry out differential diagnosis, make a preliminary diagnosis, which, in turn, increases the amount of knowledge and at the same time forms work skills in medical team. The entire process of

learning according to this method and the certification of students is documented and recorded on video, which allows you to objectively assess the knowledge and skills of students.

During the activity of the center, teachers and students clearly saw that practicing practical skills by mastering the algorithm of each manipulation based on the use of training simulators and dummies, working with a simulated patient, working in a team using modern mannequins significantly improve the level of practical training. Simulation training is one of the components of the educational process and provides perfect practical training of doctors.

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