

MEDICAL EDUCATION: FEATURES OF LEARNING PRACTICAL SKILLS DURING THE COVID 19 PANDEMIC

Abduraximova L.A.,

Gadaev A.G.,

Raximova M.E.

Tashkent Medical Academy, Uzbekistan

The COVID-19 pandemic has led to the largest disruption to education systems in history, affecting nearly 1.6 billion students in more than 190 countries and all continents. At the same time, it should be noted that the crisis served as a stimulus for innovation in the field of education. Innovative approaches are being taken to ensure the continuity of education and training, from radio and television broadcasts to the provision of home study kits. Distance learning solutions have been developed as a result of the rapid response measures taken to ensure a seamless learning experience by governments and partners around the world. [2] The COVID-19 pandemic has become a major challenge for higher medical education, creating challenges, especially for teaching clinical subjects and clinical skills, as this process requires contact teaching of students.

Simulation technologies complement and improve the process of forming professional skills, studying at the preclinical level. The use of simulation technologies allows you to gain clinical experience without risk for the patient, to implement a controlled situation at a convenient time to develop the skills of providing medical care. For our republic, the widespread introduction of simulation education is still new and requires the improvement of curricula, taking into account the conduct of classes in the simulation center [1].

In response to the COVID-19 pandemic, it was believed that education can play a critical role in protecting public health, ensuring child safety, ensuring continuity of learning, and promoting mental health and psychosocial well-being. The main task of training is to achieve an educational effect, to achieve those competencies that a graduate of a higher medical education program should possess. Many higher education institutions did not have a sufficiently well-functioning infrastructure and the necessary conditions for effective online learning [4].

At the Tashkent Medical Academy, teachers in a short time underwent targeted training in online learning and adapted for distance learning. Seminars at the Department of Internal Medicine were conducted in a hybrid mode - online, as well as in contact mode, taking into account and fulfilling all regulatory requirements imposed during the COVID-19 pandemic. For students of the Tashkent Medical Academy, a

distance learning system MOODLE was introduced on the Internet site, where the necessary handouts and theoretical materials, presentations, as well as videos on all training programs were posted. In addition, in the simulation center, online broadcasts of step-by-step practical skills were carried out [3].

At the Department of Internal Medicine, the MOODLE distance learning system included the following materials on all topics of the discipline: theoretical part, an overview of the topic, presentations in cycles (basics of family medicine, cardiology, pulmonology, gastroenterology, rheumatology, nephrology, geriatrics), lecture materials in the form of a brief overview and video filming, situational tasks for various syndromes, simple and complex test questions, interesting and informative videos.

The curriculum of the VI course includes the basic clinical skills - interpersonal communication, objective examination, peak fluometry, inhaler use, ECG registration and decoding, ophthalmoscopy, otoscopy, rhinoscopy, pharyngoscopy, neurological examination and other communication skills. For training, the teachers used various online learning platforms and the academy's website. The technology of simulated and standardized patients was used to study communication skills. Communication with these patients took place online. The students studied the skills of collecting a rational anamnesis, the skills of solving different situations, they studied various skills that in the future can be applied in the practice of a family doctor. Demonstration of practical skills was carried out by a hybrid method - the teacher remotely explained and demonstrated basic skills, and when students returned to the clinical base and to the simulation center, they mastered only the practical component. In the classroom, the teachers conducted a briefing, debriefing, and at the end of the cycle, an online survey was conducted, a verification process.

The Moodle system used was the optimal solution for organizing distance learning, within which training participants could independently select the schedule and sequence of studying the material. Moreover, we were able to control the assimilation of the material of each of the students and identify their strengths and weaknesses. The main advantages of this process: psychological comfort and security, activity in self-preparation, absence of time and financial losses. The COVID-19 pandemic's online distance learning and hybrid approach will become an integral part of medical education.

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