PROBLEMS OF THE SURGEONS TRAINING

The main task of reforming the healthcare system has always been to improve the quality of healthcare services to the population [1].

The solution to this problem is undoubtedly related to the quality of training of medical professionals. The COVID–19 pandemic and the subsequent military aggression of the Russian Federation against Ukraine have prompted the rapid development of digital educational technologies and the introduction of distance learning in all educational institutions. It is distance learning that has become a tool for implementing the educational process that ensures the continuity of medical education in wartime [2].

The use of online platforms for distance learning is relevant for many higher education institutions, and we can now see that this form of knowledge acquisition has become an indispensable part of education [3]. At the same time, along with the relevance of distance learning under martial law, it should be noted that it undoubtedly has negative aspects in addition to positive ones.

Undoubtedly, the forced transition from full-time to distance education has a negative impact on the educational process, and this is especially true for the teaching of clinical disciplines [4], the ultimate educational goals of which are to master not only the theoretical part of the material, but also practical skills and the formation of clinical thinking.

The general disadvantages of teaching clinical disciplines in a distance format are as follows: lower quality of education and overall level of training; lack of motivation; biased control of the level of knowledge; low student engagement.

Significant and important advantages of distance learning include mobility, as students have the opportunity to study anywhere they are, provided they have an Internet connection, and flexibility of the learning schedule, when students can choose synchronous or asynchronous learning.

Distance learning combines traditional teaching methods with digital technologies to some extent. Students can communicate with each other, and teachers can communicate with students through messengers (Viber, Telegram), on distance learning platforms (Zoom, Moodle, Google Meet), etc. to share their experience [3].

At the same time, innovative forms of organising the educational process and implementing effective information technologies in the pedagogical process are associated with the requirement for the distance education format not only to introduce interactive teaching methods and simulation of a particular clinical situation, but also to ensure that students deeply comprehend the information they hear with the end result of their participation in making a diagnosis or going to it.

Undoubtedly, using online tools for teaching in a distance format, teachers make the learning process effective, interesting and dynamic, especially since the departmental teams of Kharkiv National Medical University timely update materials on the Moodle platform, which contains teaching aids, lecture material, videos, case studies, tests, as well as departmental staff mailboxes that are available for communication with students. As for the use of online tools, a teacher should choose the most interesting and motivating platform rather than trying and using all platforms at once [4].

Thus, summing up the use of digital technologies in education, it should be emphasised that their introduction into medical education is of great importance, especially in quarantine and martial law, to ensure the stability of the educational and scientific process and the continuity of professional training. However, since medicine is a special field and the health and life of the patient depends on the competence of the doctor, in addition to acquiring theoretical knowledge, it is extremely important to master practical skills, which is impossible in a distance format, especially the development of clinical thinking in specialists.

And here we must not forget that, no matter what digital technologies are developed and implemented today, the quality of the educational process depends to a large extent on the teacher. It is the teacher as a teacher and educator and creative personality who has been and remains the driving force behind innovation, and who has the broad capabilities and outlook to reproduce it, as he or she can see in practice the effectiveness of a particular treatment method.

Given this, in my opinion, important perspective, how can higher education teachers improve their professional skills today when they are restricted in their medical practice in clinical institutions? After all, the orders of the Ministry of Health of Ukraine No. 174 of 05.06.1997 “On Approval of the Regulations on Clinical Healthcare Institutions” and No. 792 of 09.09.2013 “On Amendments to the Order of the Ministry
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There are several types of interactive lectures: lecture–visualisation, lecture–conversation, lecture–discussion, "lecture for two", lecture–consultation. They all differ in the way they present material, the way they formulate the problem, and the formats of communication with the audience.

The most acceptable option for teaching surgery is a lecture–visualisation. During such a lecture, photo and video materials, tables, animated videos, etc. are used for visualisation, which act as independent media or supplement the lecturer's verbal information. In my opinion, the quality and aesthetic graphic design of the demonstration material is very important, as it contributes to the perception of the visuals and the logical presentation of information.

The introduction of modern innovations in lecture material involves the full use of demonstration capabilities, computer technologies, including the Internet. An important aspect of innovative technologies in interactive lectures on surgery is the electronic demonstration of the medical history of a case patient by visualising both the patient and the results of his or her instrumental examination, the stages of surgical treatment with their step–by–step discussion. This allows the lecturer to demonstrate a specific pathology without the presence of the patient, which contributes to better retention of the material. The student can imagine the surgical aspects of the anatomical and topographic location of internal organs, as well as access to surgical intervention for the pathology under study.

Thus, an interactive lecture not only promotes student involvement in the process of providing lecture material, but also provides an opportunity to participate in a discussion with the lecturer on issues of interest during the lecture itself, thereby increasing their motivation and improving the assimilation of clinical material, establishes a connection between the lecturer and the student, which satisfies all participants in the educational process.

Thus, the widespread implementation of digitalisation in the educational and scientific process due to the COVID–19 pandemic and martial law is aimed at ensuring it and helping every student to obtain higher education. Both the development of new digital technologies and the improvement of teachers' professional skills will contribute to improving the quality of education. A highly qualified teacher must be proficient not only in knowledge and high professional skills, but also in pedagogical and digital technologies. Improving the level of professional training of medical students will be facilitated by the widespread involvement of innovative and interactive teaching technologies in the pedagogical process aimed at forming clinical forms of education and their importance in conducting differential diagnosis and timely diagnosis, as well as developing clinical thinking.

Conclusions

1. Information and digital literacy of teachers should be a central part of their daily activities so that they can constantly maintain an appropriate level of knowledge, which brings their pedagogical skills to a high professional level.

2. The professional training of teachers is an integral part of raising their professional level and responsibility for the training of higher education students. The teacher must look...
for new, more flexible and effective forms of education to help each student acquire the competencies required under martial law.

3. An interactive lecture improves students’ learning of clinical material, strengthens their feedback to the teacher and increases motivation, so it should be included in the list of modern innovations in the educational process.

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