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Satisfaction Levels of Medical Students from Clinical Education in Hormozgan University of Medical Sciences.

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ABSTRACT

Improving the effectiveness of medical science and changing the medical care methods lead to increased expectations of physicians as an important element in health, the aim of this study was to examine the satisfaction levels of clinical medicine students with clinical education in Hormozgan University of Medical Sciences, This study was a cross-sectional which evaluate the satisfaction level of clinical medicine students and interns with the clinical medicine education. The target population includes students in the fifth, sixth and seventh grades in the School of Medicine of Hormozgan University of Medical Sciences in the 2012-2013 school year. The data collection method is census using a validated questionnaire among student and internship grades, The obtained data was entered into SPSS 16 and was analyzed using descriptive statistics (frequency, standard deviation, mean). A total of 49 medical students participated in the study. Their mean age was 23.9±1.54; 30 participation in the student (trainee) part and 19 subjects in the intern. Among all students,55.1% were partially or totally satisfied with the clinical education while this figure was 56.7% among interns. no student was satisfied with outpatient education. the highest satisfaction rate (complete and partial satisfaction) with sections was related to Cardiology, Obstetrics and Gynecology and Emergencies. Satisfaction with clinical education in Hormozgan University of Medical Sciences is at the intermediate level, but compared to studies in other universities, it is at a lower level

Keywords: Students, Medical, Personal Satisfaction, Education.

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INTRODUCTION

The dynamism of medical science and its role as the main pillar of health care and the fact that it is one of the most important parts of science in the today's world reflect the importance of a physician as one of the most important members in the health team and subsequently medical training method [1]. Improving the effectiveness of medical science and changing the medical care methods lead to increased expectations of physicians as an important element in health. In today's medical education system, more emphasis is put on the improvement of skills in thinking, analysis, question posing, problem solving and communication with people [2]. In teaching practical skills, a proper model must be provided to the student. It must efficiently and completely show what is expected of students, and it must include guidance and supervision accompanied by an appropriate assessment of student performance [2]. Acquisition of basic skills and so-called professionalism in medical terms is directly related to the quality and quantity of education in clinical environments [3]. In traditional methods of medical education in medical centers, the bulk of clinical activity of medical students is in specialized hospital areas and to a lesser extent in specialized clinics. It is clear that this training method does not make medical students familiar with common and widespread health problems in patients because the majority of patients refer to general and specialized clinics [4,5]. Students, as receivers of educational content, are the best and most appropriate option for identifying the problem areas of clinical training, because they have a direct relationship with this education system. Evaluation of clinical education system helps relieve or correct weaknesses and can accelerate realizing proper educational purposes, nurturing competent physicians and providing health and care services with higher quality at the community level [6]. Our goal in this research is to examine the satisfaction levels of clinical medicine students with clinical education, find the concerns and problems of students and offer a perfect solution to address a part of the clinical training deficiencies and help promote them.

MATERIALS AND METHODS

This research is cross-sectional which examines the satisfaction level of clinical medicine students and interns with the clinical medicine education. The target population includes students in the fifth, sixth and seventh grades in the School of Medicine of Hormozgan University of Medical Sciences in the 2012-2013 school year. The data collection method is census using a validated questionnaire among student and internship grades. The inclusion criteria were: the learners studying in a practicum or internship during the study; the location of practicum and internship during the study is one of the following educational fields: a) part of teaching hospitals, b) outpatient clinics in teaching hospitals, c) teaching outpatient clinics outside the hospital environment and d) teaching emergency departments. Before entering the study, a student must participate in any of the above four areas at least one month and is consent to participate in the study. Sampling was done on people who entered the clinical stage at least 3 months ago with the available method. After complete explanation of the plan to students, a questionnaire was distributed among students by the performer and collaborator. The questionnaire consists of two parts: 1. demographic information (including information such as age, gender, marital status, etc.), and 2. information about the plan (including information such as the quality of medical education, outpatient education, clinical education, theoretical education, etc.) The obtained data was entered into SPSS 16 and was analyzed using descriptive statistics (frequency, standard deviation, mean).

Findings

This study was conducted in Iran in 2013-2014 in Hormozgan University of Medical Sciences. A total of 49 medical students participated in the study. Their mean age was 23.9±1.54; 30 participation in the student (trainee) part and 19 subjects in the intern part; 23 subjects were male and 26 female. The satisfaction level of students with the clinical education is shown in Table 1.

Table-1

Degree	Satisfied	Fairly satisfied	Unsatisfied
Total	2)4.1(%	25)51(%	22) 44.9(%
Trainee student	2) 6.7%(	15) 50%(	13) 43.3%(
Intern	0) 0%(	10) 52.6%(	9) 47.4%(

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And the satisfaction level of students with the outpatient training is shown in Table 2.

Table 2

Degree	Satisfied	Fairly satisfied	Unsatisfied
Total	0) 0(%	24)49(%	25) 51(%
Trainee student	0) 0(%	6)31.6%(	13) 68.4%(
Intern	0) 0(%	18) 60%(	12) 40%(

The most important factor influencing the satisfaction with clinical education is the approach to common diseases, and the least important one is the fitness of educational environment (physical environment) and fitness of education duration.

And the satisfaction with teaching at the bedside is shown in Table 3.

Table 3

Degree	Satisfied	Fairly satisfied	Unsatisfied
Total	2) 4.3(%	26) 56.5(%	18) 37.9(%
Trainee student	1) 5.9(%	9)52.9%(	7) 41.2%(
Intern	1) 3.4(%	17) 58.6%(	11) 37.9%(

The most important factor influencing the satisfaction with teaching at the bedside is the approach to common diseases and the experience of good teachers, and the least important one is the approach to the diagnosis of rare diseases which need specialty.

And the satisfaction with theory education is shown in Table 4.

Table 4

Degree	Satisfied	Fairly satisfied	Unsatisfied
Total	1) 2.1(%	23) 48.9(%	23) 48.9(%
Trainee student	0) 0(%	7)38.9%(	11) 61.1%(
Intern	1) 3.4(%	16) 55.2%(	12) 41.4%(

The most important factor influencing the satisfaction with theory education is the approach to common and epidemic diseases and the experience of good teachers, and the least important one is the approach to the diagnosis of rare diseases which need specialty and the use of educational facilities.

The satisfaction of medical students with theoretical and practical assessment is shown in table 5

Table 5

Degree	Satisfied		Fairly satisfied		Unsatisfied	
	Theoretical	Practical	Theoretical	Practical	Theoretical	Practical
Total	1)2.2.%(	0) 0%(	20)43.5%(	19)41.3%(	25)54.3%(	27)58.7%(
Trainee student	0) 0%(	0) 0%(	5) 29.4%(	6)35.2%(	12)70.6%(	11)64.7%(
Intern	1)3.4%(	0) 0%(	15)51.7%(	13)44.8%(	13)44.8%(	16)55.2%(

Satisfaction of students in separate wards in the table below.

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Table 6: Satisfaction of students in separate wards

	ward	Satisfaction				
		Very high	High	Moderate	Low	Very Low
1	Infectious disease	1)2%(	13)26.5(%	15)30.6%(	6)12.2%(	4)8.2%(
2	Neurology	5)10.2%(	10)20.4%(	17)34.7%(	1)2%(	4)8.2%(
3	Orthopedic	5)10.2%(	11)22.4%(	12)24.5%(	8)16.3%(	12)24.5%(
4	Eye	8)16.3%(	6)12.2%(	16)32.7%(	4)8.2%(	3)6.1%(
5	Urology	5)10.2%(	11)22.4%(	19)38.8%(	3)6.1(	5)10.2%(
6	ENT	9)18.4%(	6)12.2%(	11)22.4%(	7)14.3%(	5)10.2%(
7	Psychiatric	6)12.2%(	14)28.6%(	15)30.6%(	2)4.1%(	2)4.1%(
8	Dermatology	7)14.3%(	13)26.5%(	10)20.4(	0)0%(	3)6.1%(
9	Radiology	3)6.1%(	5)10.2%(	2)24.5%(	8)16.3%(	8)16.3%(
10	Internal Medicine	5)10.2%(	12)24.5%(	19)38.8%(	8)16.5%(	5)10.2%(
11	Cardiology	6)12.2%(	15)30.6%(	15)30.6%(	7)14.3%(	5)10.2%(
12	Pediatrics	6)10.2%(	10)20.4%(	16)32.7%(	3)6.1%(	3)6.1%(
13	Obstetrics and Gynecology	5)10.2%(	16)32.7%(	10)20.4%(	2)4.1%(	4)8.2%(
14	Surgery	2)4.1%(	4)8.2%(	21)42.9%(	14)36.8%(	8)16.3%(
15	Health	2)4.1%(	5)10.2%(	16)32.7%(	4)8.2%(	12)24.5%(
16	Emergencies	10)20.2%(	11)22.4%(	9)18.4%(	2)4.1%(	1)2%(

DISCUSSION

Among all students,55.1% were partially or totally satisfied with the clinical education while this figure was 56.7% among interns. In the study of Ziaee et al. the complete or partial satisfaction with clinical education was 38.8%during the internship education [7] and in the study of Mattabnejad et al. ,students were generally dissatisfied with the clinical training [8].

While in our study, no student was satisfied with outpatient education, 49% were partially satisfied and 51% dissatisfied. In the study of Ahmadinejad et al. ,this figure was 52% [7]. In the study of Khorasani et al. in Mazandaran, the students' view was negative [9].

While in our study, the satisfaction with theoretical and practical evaluations was in such a way that only one intern was satisfied and the rest of students were partially or totally dissatisfied with clinical training (19% practical and 20% theoretical), the study of Hosseinpour et al. showed that more than 50 percent of students were satisfied with the evaluation level in the department of surgery at the University of Isfahan. (10) And the study of Ziaee et al. showed that the percentage of students satisfied with the requirements of clinical evaluation was higher than our study [7].

In our study, the highest satisfaction rate (complete and partial satisfaction) with sections was related to Cardiology, Obstetrics and Gynecology and Emergencies and the lowest satisfaction was related to surgery, health and radiology, while in the study of Zamanzad et al. the highest satisfaction was related to the ENT, infectious and psychiatric departments and the lowest satisfaction was related to urology and gynecology [2].

Overall, satisfaction with clinical education in Hormozgan University of Medical Sciences is at the intermediate level, but compared to studies in other universities, it is at a lower level. It seems that more attention to the views of students can help assess and find clinical education problems and shortcomings in a more accurate and better way, thus leading to correcting the clinical education system and nurturing more skilled medical workforce.

Among limitations of our study, we can point to the absence of some students at the time of data collection, non-participation of a large number of students in the study or non-cooperation of students infilling some questionnaires.

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