

Education Support System for First-year Residents in the General Surgery Program

Maryam Kouhestani Parizi¹ , Mohammad Shafiee², Afsane Emami Pour³

¹Assistant Professor of Surgery, Department of General Surgery, School of Medicine, Afzalipour Hospital, Kerman University of Medical Sciences, Kerman, Iran.

²Assistant Professor of Liver Transplantation, Department of General Surgery, School of Medicine, Research Center for Hydatid Disease, Afzalipour Hospital, Kerman University of Medical Sciences, Kerman, Iran.

³PhD Student in Human Resource Management, Faculty of Management, Islamic Azad Kerman University, Kerman, Iran.

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*Corresponding author: Department of General Surgery, School of Medicine, Afzalipour Hospital, Kerman University of Medical Sciences, Iran. Email: med77_kouhestani@yahoo.com

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Dear Editor,

Fostering and training proficient and capable surgeons have long been one of the challenges of the surgical profession (1). The student support system is a combination of various academic and non-academic services designed and administered to meet educational, cognitive, social, and emotional needs, the result of which can enhance the student academic output (2). Recent definitions of professional competence highlight the necessity of clinical skills, including cognitive proficiency, emotional competence, and reflective capacity (3). Support is a critical component in the development of residency proficiency. Such support may be incorporated into the curriculum or occur informally on various occasions during education. It also plays an important role in professional development (4).

In an experimental study, Designer (2008) investigated the methods to solve educational issues and evaluated the student academic progress due to counseling services in several American universities. The findings of this study indicated that counseling significantly contributed to achieving and promoting a positive self-concept, increasing social skills, and facilitating students' academic progress (5). Given the above discussion as well as the important role played by residents in medical education, developing an efficient

education support system for residents takes on an added importance. This study, therefore, aimed to design an effective system for surgical residents' academic support.

In the surgical ward of Afzalipour Medical Education Center (hospital) affiliated with the University of Medical Sciences, interviews with experienced professors and higher-year residents of the education support comprehensive program for surgical residents were carried out based on the residency curriculum. Then the "Academic Counseling Checklist for Surgical Ward Residents" consisting of the items to determine the residents' initial status was developed in the program's first phase. The experts' opinions about the medical education field and surgery ward experts were collected to determine the content validity of this program. In this program, the most crucial areas regarding the performance of surgical residents were evaluated and classified as follows:

- Residents' educational performance, including intra-ward grades, morning reports, holding conferences, investigating ward files, and implementing educational programs for interns (medical interns) and medical trainees;
- Evaluation of residents, including logbook, DOPS, and resident disciplinary evaluation;
- Providing necessary feedback to eliminate residents' weaknesses;

- Describing potentials, professional strengths, and communication skills appropriate to various groups.

The residents' performance in each of the above areas was scored on a Likert scale: Poor (0-15), moderate (16-20), good (21-25), and excellent (26-30). The given checklist was completed for each of the surgical residents from the first year of entrance into the residency course over a three-month period, and their academic progress during this period was evaluated; when an academic failure or a dissatisfaction with the resident's performance was observed, s/he was advised and guided academically by the group members and attempts were made to eliminate the barriers.

Evaluation of the surgical residents' skills has been found necessary. The results produced after addressing this issue can be used for developing a tool for evaluation. It is worth mentioning that different tools have already been introduced by researchers in various countries. Since developing these tools and identifying these skills are totally context-dependent, the localization of the tool employed by Kerman University of Medical Sciences was likely the first step toward better management of the residency course at this university. Therefore, a decision was reached to develop an evaluation tool for this program and its effectiveness in our next study.

In order to reduce the medical errors, promote the patient safety, and improve the non-technical skills along with technical skills, it was recommended that the curriculum designers in the study fields relevant to surgery should assign the highest priority to training and evaluation of these skills in the educational programs. Residents play a special role in operating the educational and medical systems of universities, and also have a key position in the health system. Therefore, their transformation and improvement are among the serious concerns of administrative officials and experts (6). Residents are regarded as the key pillars in promoting and improving the performance of the educational and medical systems, and are

responsible for the patients' round-the-clock treatment in medical science educational centers. Our study results, in this regard, may have been effective in promoting the quality of surgical residents' education.

Supplementary Material(s): is available here [To read supplementary materials, please refer to the journal website and open [PDF/HTML](#)].

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