CUSTOMER SERVICE SIMULATION WITH VOLUNTEER WORK IN THE DISCIPLINE OF MEDICAL SEMIOLOGY: A NEW WAY TO INITIATE CONTACT DOCTOR-PATIENT

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Abstract - The Semiology is the discipline that promotes the introduction of the medical student to the clinical phase of graduation and, thus, the initial contact with the patient. For this purpose it may be necessary, for a better approach to the patient and the student teaching, the search for new proposals for teaching and learning, in which the anticipation of exposure of students to practice scenarios has been advocated. In College Santa Marcelina in the discipline of Medical Semiology the realization of the first two case histories is made with members of volunteering at the Hospital Santa Marcelina, São Paulo. We count with the participation of 12 people volunteering to perform the first simulated clinical stories with 49 students and two groups evaluated as good experience. Only 6.1% of students reported knowing someone who had experience with simulated service previously. We conclude that the simulated training before the initial contact with the patient is a didactic method that should be encouraged.

Keywords - Semiology, simulated attendance, community service and volunteering

I. INTRODUCTION

The word semiology or, more properly, semeyologia, originates from the Greek semeion: signs and logos: speech, which means the study of the signs. According to Hahmad and Valdes¹ is the chapter of General pathology which deals with the study of the signs and symptoms of the disease or the branch of medical science that teaches you the correct technique to investigate signs or symptoms of a particular condition by inspection, palpation, percussion and auscultation.

It is therefore the discipline that provides the introduction to the clinical phase of graduation and thus the initial contact of the medical student with the patient. This is an important moment of construction of a theory and practice capable of preparing the student for the care to the patient, addressing key aspects of the medical art. In this way, has as main objective to train medical students in basic techniques of interview and physical examination of patients based fundamentally on the relationship doctor-patient².

This post, and seen the advancement of Medicine and changes in health policy, with significant implications for the curriculum of medical schools, it is necessary to search for new education proposals- learning³, in which the exposure of students to practice scenarios has been advocated and applied in different institutions, having received great momentum⁴. In this way, the early exposure of medical students to the procedures and competencies of the profession makes it easier and gives meaning to learning, being one of those methods, the health simulation.

Furthermore, after the introduction of the simulated patients, 40 years ago, has enhanced the teaching by means of simulation in medical education, since these “patients” constitute a pedagogical strategy that helps in the development of communication, clinical procedure and still allows the student to your analysis performance⁵,⁶ in addition to being an instrument that ensures a certain degree of autonomy to the student through a controlled environment and insurance⁷.

In the interim, and somewhat more widespread, one can observe the implementation of the laboratories of skills in curriculum of medical students. The Skills Lab represents thus an alternative pedagogical support, acting as an anticipatory practices activity skills training with simulated patients, preparing the student for the technical and intellectual exercise of your future profession, based on the precepts of bioethics⁸.

Objective this article reporting the experience of students of medical school Faculty of Medicine Santa Marcelina (FASM) and volunteers from the Hospital Santa Marcelina (HSM) analysis of initial contact and precocious of the students in the discipline of Semiology and Medical Propaedeutics.
II. MATERIALS AND METHODS

During the first semester of medical school of FASM students already are in their curriculum the discipline of Semiology and Medical Propaedeutics and aiming for a better introduction to the course and medical patient contact in the discipline were held the first two case histories with members volunteering at the Hospital Santa Marcelina, São Paulo.

To do so, the students were divided into groups between 4 and 5 students and a volunteer for application of history after lectures in which he teaches about the history with your key items, namely: identification, Chief complaint and duration, pathological history of current disease, questioning symptomatological of the various appliances, physiological and pathological progression of history, family history, habits and addictions.

In order to always be a complaint referred to by the Group of volunteers, teachers assist in reporting about your chronic disease, such as arthritis, hypertension or cancer, or, in the absence of disease, are requested to refer to an event which has already presented Algiers at some point in their lives, such as headache, epigastralgia or outrageous that are common symptoms.

After the interview, a questionnaire was applied to students and other volunteers that have been filled without prior knowledge on the part of the group.

III. RESULTS

The group composed of the students presented 49 students, being 36 (73.5%) female and 13 (26.5%) male (graph 1). The age group of 18 to 31 variations presented years with an average of 20.6 years and only 3 students (6.1%) reported knowing someone who had experience with simulated service previously.

With respect to the opinion of the initial interview with the volunteer group, all students assessed how well the question that could have an answer good, bad or indifferent. In addition, 100% of the students also believe that the interview with the volunteers will help your performance and initial contact with the patients in the hospital environment for the making of history.

When questioned why students thought it was a good experience with the interview with the volunteers, 85.7% replied that they contribute to the beginning of their medical training, 67.3% were satisfied with the attention of volunteers and 38.8% liked the touch because they believe that the simulation can lower your inhibitions while having contact with the patient in the hospital environment (graph 2).

On the other hand, the group formed by voluntary people consisted of 12 women with a variety of ages between 50 and 79 years with an average of 62.1 years. In this group, 7 (58.3%) had complete elementary school volunteer, 4 (33.3%) and a high school (8.4%) complete higher education (graph 3). The average time to volunteering in this group was about 5.75 years with 3 variations for 10 years.

All the volunteers also found good experience and, when asked the reason, 9 (75%) answers that the volunteers if showed happy with the attention of students, 8 (66.7%) assigned for his contribution in medical training, 7 (58.3%) responses reported satisfaction with the presence of younger people and 4 (33.3%) responded that they considered have collaborated to reduce the inhibition of the pupil (graph 4).

When asked if they would participate in another simulation framework and aid in the arrival of the medical students in the practice of anamnesis was unanimous in the affirmative. In addition, all the volunteers reported that they didn't care about the number of students per group.

IV. DISCUSSION:

The work of Volunteers of Hospital Santa Marcelina existed 15 years and currently has 150 people, with 140 female using pink aprons and 10 male people who dress of blue apron, which carry out their activities in the various sectors of the hospital and love (specialty Physician Clinic). Over the years have contributed to the fundraising for the hospital, acted as artisans, besides the constant commitment of an integration between patients, families and health professionals.

Although structured in each educational institution in different ways, the simulation has become established as an instrument that ensures a certain degree of autonomy to the student through a controlled and safe environment. Also promotes practical opportunities that promote the acquisition of psychomotor skills and psychological.

In other hospitals in São Paulo incorporated practical proof tests to measure the performance of the theatrical candidates in situations that require more careful, as well as the simulation of tragic situations with the doctor patient relationship, solidarity and humanism are also employed.

Thus, it was possible to demonstrate in our study that the early introduction of medical students in the discipline of Semiology and Propaedeutics with the teaching of the doctor-patient relationship and initial contact through simulation with volunteers obtained an impression by both parties. In a study conducted at the Federal University of Minas Gerais, it has emerged as a bright spot the early introduction of student learning in the practice of the doctor-patient relationship.

Munhôz et al2 in a recent study at the Federal University of Paraiba involving 105 medical students aged between 20 and 24 years old at the time of semiology, demonstrated that the vast majority reported difficulty in initial clinical approach (84.6%) and 68.6% reported insecurity or fear. This lack of preparation felt by the student makes this moment, so waited – the first contact with the patient – an experience evaluated as negative and frustrating for student1.

In a study in New Zealand was, in that sense, comparing two groups in the realization of physical probe in females. For both groups composed of 11 people watched a video and the other group comprised of 10 individuals, and both groups received training on mannequins. It was observed that the group who had access to the videos obtained highest rates of competence and self-confidence1. It should be noted, therefore, that the aid in the teaching-learning process can introduce greater benefits if used over a pedagogical instrument, as referred to in that made use of mannequins and videos.

For Varga et al7 the use of simulated patients creates a protected environment which allows the student error and the opportunity that they learn with their own difficulties and failures. In addition, the authors consider the method a powerful instrument for the development of student competence.
We note, for example, that in our study, more than a third of the students liked the initial contact with volunteers because they believe that the simulation can lower your inhibitions while having contact with the patient in the hospital environment. Similarly, a equal percentage (33.3%) of the volunteers responded that attempted to decrease the inhibition of the student through the simulation of medical care.

V. CONCLUSION

In our evaluation in an isolated class of medical school you can verify that the simulated training before the initial contact with the patient is a didactic method that should be encouraged with full acceptance by students and volunteers.

REFERENCES