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Reform and Practice of Clinical Teaching of Hematology

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Abstract: Hematology is a highly specialized subject in internal medicine, including complex theoretical knowledge and practical courses, such as Blood Testing. Clinical internship is a challenge that medical students must face, but the theoretical basis for learners , initiatives and teaching methods, quality and other requirements are quite high. The actual clinical teaching of blood diseases are facing great challenges in these areas. On the basis of analyzing the current dilemma faced by the clinical teaching of hematology, this article explores the reform of clinical practice in hematology from the aspects of optimizing content, increasing students 'practical interest, reforming teaching methods, improving teachers' quality, and using online platforms Methods and approaches.

Keywords: Hematology; Clinical Teaching; Teaching Reform and Practice

Hematology is an important professional course with many theoretical and practical teaching contents. On the basis of the basic theoretical system of hematology, there are practical teaching and clinical experimental teaching such as blood test and diagnosis and treatment. The teaching of practical skills is very important for practical medical work, and clinical practice is also very important. Cultivating students' blood testing and diagnostic skills and comprehensive quality is the key content of clinical practice. The modern medical profession develops rapidly, and the medical work is more detailed and diversified. There are higher requirements for the knowledge, ability and quality of doctors participating in blood tests and other work. Therefore, colleges and universities, as the most important and major medical talent delivery platform, should improve the clinical teaching quality of hematology and deliver more and better quality medical talents. Based on many years of clinical teaching experience, this article combines the nature and content of the hematology course and the current teaching environment of the specialty to carry out various explorations of clinical hematology practical teaching, and puts forward some exploratory suggestions for the course reform in order to be able to provide a positive and useful reference for the development of hematology.

1. Challenges in the Current Clinical Teaching Reform of Hematology

The theoretical content of the hematology course is relatively abstract, and the auxiliary examination contains many items, which are difficult to understand and remember, and it is more difficult than other internal medicine knowledge. Due to disciplinary characteristics and other reasons, the course has many quality problems in long-term theoretical and clinical practice teaching. Although TBL, PBL, CBL and other modern teaching modes have been applied successively, from the perspective of teaching effects, there is still a possibility of substantial improvement needs. Therefore, the challenges facing clinical teaching of hematology need to be further studied in order to carry out targeted teaching reforms:

1.1 Features of blood disease course

Hematological diseases are systematic and professional. During theoretical learning, students generally acquire the abstract and cumbersome basic knowledge of hematological diseases. In clinical practice, students generally believe that much of their theoretical knowledge needs to be strengthened, and practical skills can provide better guidance. Many students show fear in the clinical stage, so their own interest in learning is reduced, and they even show a lot of

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worry, fear, and escape from the future career development. The Department of Hematology of the hospital mainly uses diseases such as tumors and leukemia as examples for blood testing and diagnosis. Students will apply knowledge of interdisciplinary subjects such as hematology and biology, immunology, and genetics during internship. During the internship period, their operation is still relatively rusty. Although the work is not much, but it is relatively busy and annoying, so without good teaching and guidance methods, students cannot effectively consolidate and perfect the theoretical knowledge system at the clinical stage, nor systematically and completely link theory with clinical practice.

1.2 Learning status of students in clinical practice

At present, hospitals have higher requirements for medical students' academic qualifications and skills. Although the clinical ability of students cannot be effectively considered, students will demonstrate their theoretical and practical skills in practice. However, since the above social reality, it may cause some students to be pessimistic and hold a negative attitude to clinical learning, such as evasion. Relevant research data shows that medical students ’graduation ambitions are low; the number of people who want to take postgraduate entrance examinations, become civil servants, or enter national institutions is about 25%; the number of people who want to work in non-hospital units accounts for about 15%; the number of making adjustments on their career path is about 55%; and the rest is about 5%. According to the statistics of graduates asking for leave during clinical internship, the proportion of new job applications is as high as 70%, the proportion of considering postgraduates or civil servants is nearly 20%, and the proportion of taking related professional examinations is nearly 10%. It can be seen that many students do not correctly understand the clinical practice of hematological diseases, or are unclear about their future career planning, which results in not fully devoting in clinical learning.

1.3 Teaching situation of clinical teachers

Hematology clinical teaching teachers are mostly clinicians. While carrying out busy clinical work, scientific research projects and facing work evaluation and promotion pressure, they need to guide medical students with no clinical experience in blood disease detection and diagnosis. This is a great challenge to the energy and ability of the teaching teachers. Some teaching teachers have weakened their teaching status, the degree of innovation in teaching is insufficient, and the students ’enthusiasm for lack of cognition and other factors has been poor It is difficult to ensure that students can complete the complicated tasks such as basic testing and medical record writing during the clinical period. At the same time, it is difficult to give interns good guidance in career development.

2. Hematology Clinical Teaching Reform and Practical Exploration

2.1 Reform of teaching content

Because hematology theory courses are more abstract and time-consuming, students have many problems in clinical practice from practice itself. Therefore, it is necessary to optimize the content of clinical practice and make more reasonable design and arrangement. First, make adjustments to the overall content, such as adjusting practical projects for the blood-related work content of clinical internship units, deleting less or outdated projects that were originally used in the experimental content, and strengthening clinical difficulties through internships, special lectures, etc., such as chromosomal examination, FISH, bone marrow disease examination and other clinical content, in order to strengthen students 'understanding of the key internship content of hematology, and to a certain extent reduce the students' practical pressure.

Secondly, integrate some content with strong applicability, such as matching the bone marrow morphology of related cases with the main chemical staining test method, through the CBL-type teaching method, to carry out comprehensive and practical clinical teaching, and deepen students' understanding of theoretical knowledge and mastery of clinical skills.

Finally, carry out design clinical teaching, and try TBL-oriented design experiments, such as hemolysis test, thrombosis test and other comprehensive projects involving multiple operating contents, so that students can create projects through independent design of experimental combinations to solve project problems and improve abilities to apply theoretical knowledge and clinical skills.

2.2 Stimulate student interest and help integrate into professional roles

Factors such as insufficient understanding and poor theoretical mastery are the main reasons why students are not interested in the clinical study of the course. The fear of students during clinical study is very detrimental to their future professional work. Therefore, psychological and behavioral needs are required. According to the students' cognition, practical operation, etc., they need to lead students to master clinical skills and work content step by step, and guide students to enhance their practical interest and cognitive depth of work to help students faster Enter the professional role.

Some grass-roots hospitals have limited conditions and no blood specialties, which is also an objective reason for students to change their employment tendency and negative clinical learning. Teaching teachers can start with routine blood tests to help students build confidence in their work and lay a solid foundation for their future wide-caliber work needs. Daily teaching can start with clinical cases and mobilize students 'initiative, encourage and support the new progress and progress made by students, and stimulate students' enthusiasm for hematology work.

2.3 Flexible application of advanced teaching methods to improve teaching quality

The teaching method of clinical teaching is very flexible. For different content, different cases and different personal needs, you can flexibly use inductive deduction, case-oriented, discussion teaching, mixed teaching and other methods. First of all, it is necessary to communicate more with students and strengthen the depth of understanding between the two sides. It is not possible to simply teach students as the center, but to help them understand the daily work and personal life of the teachers in order to help students truly integrate into the society and guide them to communicate better with colleagues and patients. Secondly, pay attention to the application of TBL, CBL and PBL teaching methods. In the design of clinical experiments, a mixed teaching mode can be combined to provide more flexible teaching, reduce part of the workload of teaching doctors, and allow students to explore clinical practice and knowledge, which helps to improve their autonomy and thinking ability.

3. Conclusion:

In summary, clinical teaching is a key link in the teaching of hematology, and clinical competence is an aspect that current medical workers need to pay attention to and improve. Based on the many problems faced in clinical teaching of hematology at present, clinical teaching teachers should begin to reform in terms of teaching content and methods, and pay attention to the subjective and objective factors faced by students to give correct psychological guidance and behavior correction to help students better perform clinical internships.

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