

## Compounding Approach in The Application of A Simulated Teaching Method in Emergency Traumatology

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**Annotation:** There are results were analyzed: students' perception and digestibility of educational material on emergency pediatrics using simulation equipment. Simulation training is a relatively new and very rapidly developing area of medical education. This teaching method is especially important for mastering the skills of emergency and emergency care for children. High demands on the quality of training of doctors, limited opportunities to work out new practical skills on patients (especially children), increased attention to the safety of medical care for patients and medical personnel, and adherence to ethical standards led to a new paradigm of medical education - the use of simulation methods of training.

**Keywords:** higher medical education, pedagogical technologies, competence approach, simulation training

### Introduction

President of the Republic of Uzbekistan Shavkat Mirziyoyev signed a resolution on "measures for further improvement of Higher Education" on April 20, 2017[1]. This document, along with the study and in-depth analysis of the higher education system, is aimed at retraining personnel in the same Soha, that is, at the socio-economic development of our state, as well as the cultivation of specialist personnel corresponding to world standards.

Therefore, improving the quality of higher education is an urgent factor, many new technologies and methods are used in teaching, which include the method of simulation teaching.

Simulation teaching-medicine is aimed at increasing the experience of students in providing medical care in accordance with the Real state of affairs in various situations. On the basis of modern technologies at the art level, the educational goal is achieved by staging clinical situations and providing emergency medical care[2]. Training future doctors in a simulation style in any field is one of the main areas of new and rapidly developing medical education, from which it follows that its effective use further enhances its relevance. The essence and significance of this method is that at the time of emergency care in hospitals, the student learns and enhances the practice and experience without harming the patient, without fear of making mistakes, and, ultimately, in case of danger to human life in critical situations, is able to provide assistance without making mistakes. Simulation training is necessary to learn medical skills in all medical fields, especially in the practice of jarrahat[3].

The purpose of the study is to analyze the results of mastering students in the field of Traumatology and orthopedics using simulation equipment.

### Material and Methods

This article shows the methods of simulation training in the Tashkent Pediatric Medical Institute - integrated training processes in manikens. In simulation training, various modern technologies and simulation manicures are used. The American Heart Association (AHA), whose recommendations include the absorption of practical skills with the formation of specific psychomotor skills to the state of automatism in critical situations, fractures, dislocations, bleeding, cranial cavities, etc.z. it will be important for medical care in situations [4].

The scientifically established modern approach to the provision of emergency medical care in injuries is well established in the department and course of Traumatology and orthopedics.

### Results and Discussion

The training cycle teaches patients with severe illness to practice the harakats of a new scientifically based emergency medical care algorithm and to carry out the identification of critical cases in patients, stagnation of the condition, the implementation of resuscitation measures when the need arises[5]. The modeled overall realistic perception process is dependent on mechanical, physiological, environmental, and time factors. In turn, while aloxida simulation learning activities have a limited reach, when adding it to the curriculum, the student and teacher must accept it as if it were a necessary part of the teaching, only then will we achieve the necessary achievements.

In the medical education system, simulation covers a number of styles, being the study, return, evaluation and examination of clinical situations[6]. Simulation style can be performed from the initial level of verbal visibility to simulation of perfect or standard patients. Simulation has a higher educational value if applied appropriately.

In training, seminars are held on the pathogenetic basis of critical cases, an algorithm for providing emergency care is discussed, in the simulation class neither immobilization of patients who have received only jaroxat, but also emergency medical care in critical cases is carried out[7].

The teacher, together with the students, reviews the materials mastered in the simulation auditorium itself in case they evaluate the advantages and disadvantages. All students consolidate their theoretical knowledge at a high effective level together with Manual skills at the same time[8].

The main principles of operation at practical stations are as follows:

- Describe in protocols what skills and scenario (generalization) component.
- First demonstrating the skill, and then performing it in a test experiment.
- From simple to complex, that is, on the basis of enriching each learning scenario with new skills, it is achieved that complex styles reach an increased advanced level.
- Realistic-the Saxons (scenarios) show an impersonal and dry tragic situation, the end of which ends with a successful or tragic finale.
- Instructing participants on the scenario is carried out on the basis of recommendation and advice, and not on the basis of command.
- At some stages of work at stations, the student is evaluated on the basis of protocol[9].
- Mass events are imitated, and the commandos often compete among themselves
- Often mutual assessment is carried out, the guru evaluates the participant of the scenario and the team
- The fact that the scenario is performed qualitatively is judged, first the achievements, then the shortcomings are mentioned[10].
- An example of a step-by-step complex scenario:
  - primary assessment of patient axvolini is the Main Stage (1 student and patient or 1 student and mannequin).
    - transport immobilization.
    - placing ties on the stems.
    - methods of saving, lifting, moving the patient.
    - moving the patient lying on a waistboard[11].
    - together with the student team, the scenario of providing assistance to patients who have received severe injuries, lifting and moving, axvolini baxol, laying ties to the jarokhats, immobilization of the limbs, transfer to the reception unit with the waist laid on the board[12].
    - Results of assessing the effectiveness of simulation training:
      - Working in cooperation with the team has a positive effect on interpersonal relationships all the time.

- - A survey of graduates, doctors who provide emergency medical care in medical practice (ambulance doctors) note that the practice in the department is the implementation of educational materials, realistic scenarios make them an important place in their work activities.[13]

### Conclusions

Simulation training based on realistic scenarios leads to an involuntary competency approach. Simulation Training opens up the possibility of learning to take a qualified medical care course, without conflict, with confidentiality maintained, without violating the law on the birth of patient hogs[14]. Simulation training gives the opportunity to perform objective actions. Simulation training encourages the student to achieve not only practical, but also emotional goals, establish warm communication with individuals, psychological activity and stability[15]. Simulation teaching methods in assessing the situation in critical situations in children, providing effective treatment measures, providing students with not only knowledge, but also psychomotor skills in accordance with international medical care standards, providing assistance in a team manner, improving the student's efficiency in obtaining knowledge[16].

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