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The importance of medical education on health care

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DESCRIPTION

The teaching curriculum must be created with the society of the near future in mind. This is the discipline of medical education. The program is the outcome of a careful assessment of societal needs and has the potential to affect the characteristics of care in the future. The program will teach new healthcare professionals who will play a crucial role in resolving complicated issues in healthcare systems. The art of medical education involves challenging ingrained notions about how to interact with various healthcare institutions. This shift will cause resentment and opposition. Science in education offers a number of critical insights that aid in determining the best format for the programme. The ideal programme must include a strong assessment and feedback system, good role models, a learning environment that exemplifies the desired positive workplace interactions, learning by doing, simulation programme, educational materials like e-learning systems and an investment to document and discuss professional progress. Numerous scientific paradigms can be used to approach the delivery of healthcare. On the other side, it is advantageous economically to prevent or quickly address worker health issues. Doctors and other healthcare professionals often form professional societies inside health care systems to safeguard their independence. The organizational culture of medicine emphasizes advancements in individual patient care and scientific research. In order to effectively solve complicated issues, patient representatives and other potentially significant participants should be involved. The next step is to develop a plan for using medical education once the objectives for management of health systems have been made clear. It's possible to have wonderful ideas, but it's practically impossible to see them through to completion. science of change management is the art of turning ideas into reality. This science will assist you in setting priorities, identifying key individuals to deal with, identifying societal trends and identifying elements that may contribute to processing success or failure. The

knowledge, abilities and attitude necessary for your new doctor may be specified retrograde planning, depending on the objectives set during your strategic planning. These end terms need to be included in the medical curriculum. Theoretical and practical learning are combined in medical education. The difficulty lies in balancing a programme so that theoretical instruction and simulation training provides the best possible support for learning by doing. The most effective learning strategy is learning, should pursue blended learning, combines e-learning with simulated learning and training. To improve learning at the workplace, several forms of e-learning such as webinars or serious gaming, may become crucial. The best way to manage medical education is to give students and trainees the right amount of clinical experience at different stages of their careers. At the very least, patients with obvious cases of common illnesses should be presented to clerks. Before moving on to more complicated obstetrics, obstetrics residents should start by becoming experts in the standard delivery. Final year students should spend less time coaching routine deliveries and more time learning about complicated operations and general issues like assessment during peak patient exposure. Many clinical challenging to run in a way that makes education ideal for the trainee. Most of the time, the art is in presenting the learner to clinical situations that range from being somewhat challenging to almost being impossible. There are many different determinants of the quality of medical education. The treatment given on the wards where the training is organized might be evaluated professionally in terms of quality. Although last year's students are frequently aware of the professional worth of the content presented in various training sites, this quality could also be evaluated by the attendance of representatives from the professional society. The level of quality could also be evaluated from the perspective of educators. An internal audit and improvement system would include enough data from measurements of the educational climate, educational performances.