

SIMULATIONS IN MEDICINE THROUGH PARTICIPANTS' OPINIONS

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In the context of the Millennium Development Goals, the national target of the Moldovan government is the decrease of the level of maternal mortality. This goal can be achieved by increasing the theoretical and practical skills of the medical personnel, including the simulation method. 564 specialists of the Perinatal Centers of level I, II and III from the Republic of Moldova and abroad have participated in the trainings of the Center of Simulation in Obstetric Emergencies PMSI IMșiC. All participants were distributed to a multidisciplinary team involving specialists in obstetrics and neonatology intensive care (senior medical staff). 9 theoretical modules were prepared in obstetric and neonatology emergencies and there were organized work scenarios by medical simulations.

The training cycle lasted 3 days and it included: participation in medical simulation scenarios, debriefing based on video recordings and on national or international protocols and relaxing moments in the game. The interdisciplinary team of trainers offered a number of practical scenarios, while the competent work of the bioengineer made the virtual tasks real by using contemporary possibilities of the mannequin. A good quality debriefing was assured by providing the scenarios with audio and video recordings.

The evaluation of the results of Simulation Center in Emergency Obstetric at the end of the course was carried by investigating 48 participants in obstetric modules. 41 of interviewees ($81.25 \pm 5.63\%$) have mentioned that the training hall corresponded with the real workplace. The attitude towards the mannequin: 25 people ($52.08 \pm 7.21\%$) initially had a negative feeling or were disinterested in the "patient", forgetting later in the emergency scenarios that they were working with a mannequin and showing absolutely real emotions. All participants have assessed with good grades the instructors' skills of the medical simulations. Self-assessment of initial training for obstetric emergencies was very good or good in 25 ($52.08 \pm 7.21\%$) people, poor - in 12 participants ($25 \pm 6.25\%$), unsatisfactory – in 11 ($22.91 \pm 6.07\%$) of those surveyed. After finishing the course 40 people ($83.33 \pm 5.38\%$) remained satisfied with their preparation and only 8 ($16.67 \pm 5.38\%$) evaluated themselves as weak-prepared. 42 people ($87.5 \pm 4.77\%$) believed that the simulation training is an effective tool for training highly qualified specialists in medicine and 47 ($97.92 \pm 2.06\%$) were willing to use the practical skills achieved within the training at the workplace. If initially only 22 people ($45.83 \pm 7.19\%$) showed a positive attitude for this kind of training, then, at the end of the course 42 participants ($87.5 \pm 4.77\%$) emphasized the need to repeat annual medical simulations.

Conclusions:

1. Simulations in medicine are an effective tool in the training of a qualified personnel by providing the necessary theory and practical skills.
2. The collaboration of the medical trainers and the bioengineer is essential for a continuous qualitative activity.