

## Premedical school orientation course: A new initiative

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### ABSTRACT

Jeju National University Medical School, Korea, conducts a week-long orientation program for the newly admitted students, called Jeju Pre-Medical School (PMS) course. The aim of this course is to harmonize the relationship among students themselves and between professors and students and give them a chance to get exposed to the hospital and learn some basic fundamentals of medical studies. Student feedback survey was conducted right after the PMS course in the year 2011 and repeated an year later on the same students who attended the program, with the intention of understanding the student-satisfaction level with the current PMS course. The student satisfaction level dropped considerably in 2012 as compared to 2011.

**Key Words:** Medical education, orientation, satisfaction

### Introduction

There is a wide variation in the medical education system worldwide, and the system is drastically evolving [1]. New medical education delivery methodologies and techniques are being developed on a day-to-day basis and are indigenous to every medical school. Korean medical education system, learning from the western world, is going through massive transformation. Many medical schools are developing different methods of teaching medicine and orienting students to follow the modern trend.

In February every year, Jeju National University Medical School, Korea, conducts a week-long orientation course (Jeju Pre-Medical School [PMS] course) for the forty newly admitted students. The PMS course, managed by the student council and medical school professors, is intended to help students who come from a variety of backgrounds, to understand the practicalities of life in the medical school. PMS program helps to harmonize the relationship among students themselves and between professors and students. During the program, students get a chance to get exposed to the hospital and learn some basics of emergency resuscitation courses, such as cardiopulmonary resuscitation (CPR) which has been stressed on by many schools [2]. This study was conducted with the intention of understanding the student-satisfaction level with the current PMS course.

### Methodology

In 2011, the PMS program was managed by 20 professors, 40 freshman students, five assistants, and three administrative

workers. Incentives as awards and recognition were given to encourage students to participate. Contents and time distribution of the PMS course over a week's time were as follows: (i) Student introduction (1 h), (ii) Medical school introduction (2 h), (iii) Exposure to medical terminologies (30 h), (iv) Diary writing (2 h), (v) Exposure to local culture (4 h), (vi) Athletic meets (3 h), (vii) Emergency Resuscitation Program and CPR (3 h), (viii) Hospital tour (4 h), (ix) Minnesota Multiphasic Personality Inventory (MMPI) test to get to know the students better (2 h), (x) Self-management (1 h), medical school life management course (1 h), personal healthcare (1 h), and 5 km marathon, (xi) Interpreting medical documents such as medical newspapers or medical disquisitions and leading professional discussions (2 h), (xii) Medical article discussion (2 h), and (xiii) Socials and interaction with seniors (2 days).

We conducted a student feedback survey right after the PMS course and repeated it a year later on the same students who attended the course in 2011, with the intention of understanding the student-satisfaction level with the current PMS program. In 2011, 40 freshmen participated in the survey. In 2012, 39 students (1 absent) who participated in the survey year before, took the survey afresh. The survey consisted of same five questions in both the years 2011 and 2012. The questions were as follows: (1) Was PMS course helpful? (2) Was PMS course scheduled properly? (3) Which program did you like the most during PMS course? (4) What should be stressed on in the PMS course? and (5) Did you participate in PMS course actively?

### Results

We found that in 2011, 98% of the freshmen agreed that PMS program was helpful whereas 2012 witnessed a disagreement by 59%. Survey in 2011 showed that 69% believed that PMS course was scheduled properly, while in 2012, the score lowered to a 30%. In both the years hospital experience followed by sports meets were liked the most. Visiting medical facilities, friendly

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## SHORT COMMUNICATION

athletic meetings, cultural activities, and socializing with seniors were the areas, the students believed that more emphasis can be put upon. Finally, vast majority of the students (93%) thought that they actively participated in the PMS course, but an year later only 76% believed that they had active participation the previous year.

## Discussion

The 2011 survey results prompted the medical school to make short-term plans, while it drew a long-term conclusion based on the 2012 survey results. The student satisfaction level dropped considerably in 2012 as compared to 2011. Our study showed that in 2011 most students felt that the PMS program was extremely important and helpful for them to get oriented to the medical school and medical education. It also showed that appropriate time was given for the orientation, although a small number of students were not satisfied by the schedule and thought that it was too tightly scheduled. A large number of students thought that the hospital experience was the most important component of the PMS course, followed by sports meets. Most of the students in 2012 wanted more time to be given for hospital exposure.

The various components of the PMS course were designed in such a way that they prove informative and interesting at the same time, and provide a hands-on experience of events to be tackled in coming days. The various components, their uses and the way they were utilized in our PMS course are hereby discussed in brief. (a) Introduction to the school and medical center: this helps the students to understand the school itself, its organization, the aims and visions of the school, the course details, grading system, and graduation requirements. (b) Exposure to medical terminology and procedures: this form one of the main programs in the PMS course, helping the students to test and develop an interest in the basic understanding of medical terminologies. (c) Medical ethics: new students learn the basics of medical ethics which are not as strongly stressed on in all medical schools as is required. (d) Interpretation of medical articles: this part should be conducted to improve students' basic medical knowledge. Our school gave random medical articles to students, who then had to make presentations on the topic concerned. The best presentations were awarded. (e) Understanding the medical services: our school provided the student to work on outpatient registration. Groups of four were made to register as patients in the outpatient department and visit the doctors in clinics to present their complaints as patients. This helped the students understand what the patient might go through and what problems she/he might face in the process of visiting a doctor. The students in teams of eight, each helped in moving beds in and out of the operating and recovery rooms. This gave the students a chance to look around the emergency room, ICU, operating rooms, rehabilitation clinics, imaging and diagnostics room, nurses' stations, the mental health-care center, and the general checkup room. (f) Exposure to local culture: the students were made to visit museums and "April 3 Park" on Jeju island to understand the culture and traditions of the people living on the island.

(g) Personal management: to understand students and to choose a suitable professor for each student, the school held an MMPI test. In addition, the school delivered stress management and self-management lectures. These are important considering the high stress that is seen in the medical students [3-5].

## Conclusion

Course such as the PMS program can be a useful tool for newly admitted medical students, helping them to get oriented to their new milieu. However, the relevance of such tools must be assessed on regular basis.

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## Authors' Contributions

SHP conceptualized and designed the study. SHP, YSC, and KBS were involved in data collection and analysis. Literature search and first draft was done by VH. All the authors edited the article and gave approval to final draft.

## Competing Interests

The authors declare that they have no competing interests.

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