

Improvement of Clinical Practice Teaching Management Mode for Treatment of Anorectal Diseases with Integrated Traditional Chinese and Western Medicine

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Abstract: The Department of Traditional Chinese Medicine of the First Affiliated Hospital of Dalian Medical University has been carrying out the teaching work of the internship of Chinese and Western medicine for many years. It has a comprehensive understanding of the cognitive characteristics and characteristics of the students of integrated Chinese and Western medicine, and has carried out case teaching in the clinical teaching of TCM in integrated Chinese and Western medicine. Based on the big data environment, establishing the big data consciousness, developing the big data resources, using the big data method and constructing the big data platform, colleges and universities have become the only way to do a good job in Ideological and political education of College students. This paper reveals the connotation and challenges of Ideological and political education with big data, and explores the new direction of Ideological and political education development under the background of network big data era. It is of great significance for college counselors to carry out ideological and political education for college students.

1. Introduction

Since the 20th century, the field of medical education has expanded dramatically, from micro-educational teaching process to macro-educational teaching planning, from the internal relationship of education to the external relationship of education, from basic education to higher education, from the school classroom. Education has extended to the clinical teaching and education of trainee students, and the foundation and mode of medical education research has also shown a diversified trend. Integrative Chinese and Western medicine anorectal disease is a special subject. On the basis of theoretical study, the major emphasizes the practical and brain-taking ability of clinical practice. [1] That is to say, the combination of traditional Chinese and Western medicine anorectal disease is an applied science that is based on the characteristics of traditional Chinese medicine, highlights and emphasizes the combination of syndrome differentiation and disease differentiation, and is supported by flexible and diverse practical skills. In view of this, under the premise that the students accurately grasp the anatomy, physiology, pathology, TCM syndrome differentiation and treatment of the anorectal, the clinical teaching teacher should strengthen the training and training of the students' comprehensive clinical skills, thus achieving a complete medical education process. [2]

That is to say: theoretical teaching and practical teaching are mutually infiltrated and mutually supportive organic education system. Clinical internship is an indispensable stage for nursing students to realize the transformation of theoretical knowledge into practical work ability. It is an important enlightenment education stage for understanding the role of nurses. It is a crucial period for cultivating nurses to regulate nursing behaviors, and plays a pivotal role in nurse training. However, in the current clinical practice teaching, clinical practice teaching is regarded as an emergency task, which is not included in the scope of normal management, neglecting the real-time control of teaching quality, waste of teaching resources and insufficient tapping potential, which directly leads to the disconnection between practice teaching and clinical work. Not only was the time spent internship in the hospital, but also the workload and pressure of the new nurse training in the department. [4]

2. Construct Teaching Management Organization

2.1 Improve the teaching management organization

Construct the “three-level teaching management of the nursing department teaching group-the total teaching of internal surgery - the general teaching of the department” and the horizontal three-level teaching management of “the head nurse - department chief teaching-department division teaching”. The three-dimensional teaching management organization structure has laid a foundation for ensuring clear teaching objectives, implementation of teaching plans, and monitoring of teaching quality.[5]

2.2 Standardized teaching management

Establish and improve the teaching management system, formulate the criteria for admission to clinical teachers, the teaching duties of personnel at all levels, the regulations on the technical operation and teaching management of clinical practice nurses, the selection criteria for excellent teachers, the management system for intern nurses, and the accommodation management system. Timely update the annual internship teaching notice, rationally arrange the internship rotation Table, etc., strictly control the entry of teachers, quality assessment, strict reward and punishment, make the internship work normal, standardized, institutionalized, and ensure that the clinical teaching teacher is in the belt.[4]The teaching process is well documented and evidence-based, providing strong guidance and guarantee for ensuring the quality of teaching.

Internship files mainly include: 1) Internship General information of nursing students: name, height, weight, specialty, position in school, awards, grades, etc. 2) Internship materials: training records, assessment results, unsafe incident records, and teacher evaluation, patient feedback, etc.

2.3 Exploring new teaching methods

Classroom teaching has a clear plan, while clinical practice teaching varies from department to department, from patient to patient, and random. In addition to the designated teaching departments to complete the clinical teaching of common and typical cases related to the department in the decentralized teaching, refer to the internship target, break the boundaries of the department, cancel the departments to the internship group must arrange one per month internship teaching.[6] The requirements for ward rounding and theoretical teaching, integrating the teaching resources of the whole hospital, and arranging all the intern nursing students to participate in the nursing teaching rounds and theoretical lectures organized by the hospital. The centralized teaching effectively avoids the waste of resources caused by the repeated teaching of the same content in the same department, avoids the disadvantages of the enthusiasm and effectiveness of the teaching, and ensures the balance of the internship content of the nursing students.

With the gradual improvement of relevant laws and regulations, the patient's awareness of rights protection is improved, and the practice opportunities for clinical skills of intern nurses are becoming less and less, but the employer's requirements for the nursing skills of nursing graduates are not reduced. Traditional clinical nursing teaching mode can no longer meet the training goal of nursing talents [7]. Therefore, we introduced standard patients to participate in internship teaching, formulate various realistic clinical nursing simulation environments and related teaching and investigation processes, standard patients around teaching points, and study the knowledge of nursing students through language and physical movements, as well as criticality. At the same time, the recognized and commonly used teaching methods in vocational education such as Problem Based Learning (PBL), discussion-based teaching method, action-oriented teaching method, case analysis teaching method and theoretical practice integration method are incorporated into clinical nursing teaching. It not only stimulated the interest of students in the internship, but also promoted the teaching ability of the teacher.

2.4 Improve the dynamic evaluation of teaching

The teaching evaluation can reflect the internship performance and teaching quality of the nursing students [8]. For this reason, we have implemented the two-way evaluation and dynamic

evaluation of teachers and students to grasp the objective and real clinical teaching situation.

1) Two-way assessment of teachers and students. The original faculty evaluation of one-way assessment of nursing students was changed to teacher-student mutual evaluation. Through the comprehensive performance evaluation form of clinical nursing practice department and the evaluation form of departmental teaching, the teacher and student were unanimously evaluated. The effect of both teaching and learning is easy to grasp the first-hand information of clinical teaching, make relevant adjustments in time, and effectively realize the quality monitoring of teaching and learning.

2) Dynamic evaluation method. The concept of “process management” was introduced in the practice teaching, and the original final evaluation was evaluated as the evaluation mode with both dynamic evaluation and final evaluation. In the clinical teaching, the implementation of monthly planning, weekly focus, individualized assessment, comprehensive coverage, the implementation of the weekly plan based on the mastery of the situation of the internship of the real-time dynamic adjustment.

3) The evaluation of the teaching management. Component of the nursing department shall review and evaluate the implementation of the internship plan of each department and the quality of teaching, and incorporate relevant information into the evaluation of the comprehensive responsibility system of the department, and link it with the bonus to ensure the implementation of the teaching task.

2.5 Evaluation of effects

Compared with the pre-examination scores of the nursing students who were internships in our hospital before the implementation of the nursing clinical practice teaching reform, the scores were scored by the percentage system. The nursing students in the two groups were all enrolled in the national college entrance examination. There was no statistically significant difference in the academic system, age, and internship examination results ($P>0.05$), which was comparable.

2.6 Statistical methods

SPSS11.0 statistical software package was used. The count data was expressed by frequency and percentage. The measurement data was expressed by mean and standard deviation. The t test was used before and after the teaching reform. The specific flow of teaching management system is shown in Figure 1.

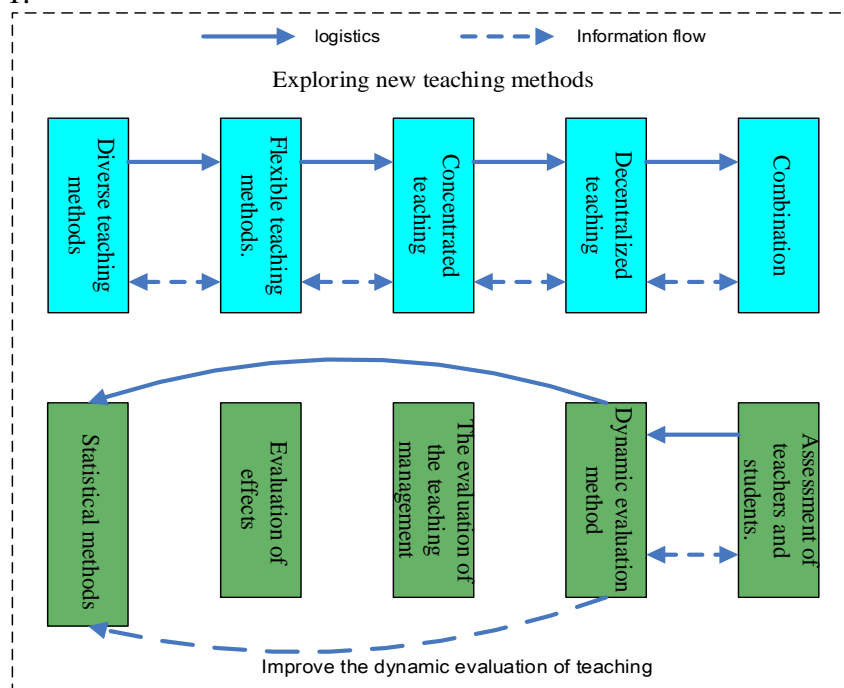


Figure 1. Teaching management organization

3. Result and analysis

In the 15th session, the number of nursing students in the hospital was 126, and the success rate of recruitment was 94.0%. In the 16th session, 62 students were successfully recruited, and the recruitment success rate was 46.3%. The recruitment success rate of the 17-year nursing students was higher than that of the 16-year nursing students. The success rate of the two groups of nursing students was statistically significant ($\chi^2=72.99$, $P < 0.01$). The theoretical achievement and practical achievement of the 17th nursing students were better than those of the 16th nursing students, and the difference was statistically significant ($P < 0.05$), as shown in Table 1.

Table 1 Comparison of assessment results of observation and control group

Group	N	Practice score	Theoretical achievement
Observation group	134	95.4±3.6	94.6±3.8
Control group	134	85.8±1.6	86.7±4.8

3.1 Clinical practice questionnaire survey

In order to understand the current situation of the internship and analyze the influencing factors, random interns were selected in the hospital, and a closed questionnaire was conducted by anonymous method. A total of 135 questionnaires were distributed, 130 valid questionnaires were returned, and the effective recovery rate was 96.3%. The statistical analysis questionnaire was used to draw the conclusions. The questionnaires are issued as follows: basic information, self-evaluation of the internship, evaluation of clinical teaching, evaluation of internship management, 50 multiple-choice questions, and 2 open-ended questions; including students, schools, hospitals, and social dimensions.

3.2 Analysis of the results of the questionnaire survey

(1) Analysis of the status of practice

Analysis of the results of the questionnaire survey and symposium, concluded that clinical interns have insufficient clinical thinking, poor psychological coping ability, less internship opportunities, lack of communication skills with patients, low satisfaction with hospital internships, and hospitals. The internship management with the teaching department is not satisfied enough, and is not satisfied with the evaluation system of the hospital and the school. Overall, the quality of clinical internships is declining.

(2) Main factors affecting the quality of clinical practice

According to the statistical results of the questionnaire survey, the main factors affecting the quality of clinical practice are selected: internship and postgraduate study ,employment conflicts, limited teaching resources, completeness of teaching evaluation system, teacher awareness and teaching level, internship management organization and system, doctor-patient relationship, university expansion, medical system reform, internship evaluation system, clinical internship management.

3.3 Clinical internship quality evaluation

The Department of Science and Education is separated by one year, and random sampling teachers and interns conduct two-way evaluation of clinical internship quality. The results of first evaluation are shown in Table 2 and Figure 2. The results of second evaluation are shown in Table 3 and Figure 3. Participants make objective evaluations based on their own work or internships, and require the assignment of individual or hospital teachers and internships. The evaluation is as follows.

Table 2 Summary of the first clinical interns assessment score

Number	Medical ethics	Basic knowledge	Basic skills
1	20	20	60
2	19	17.2	56
3	19	17	50
4	19	18	53
5	17	17.6	42
6	17	16.6	48
7	17	16	46
8	16	14	44
9	16	16.2	38
10	12	12	37
Average	17.2	16.46	47.4

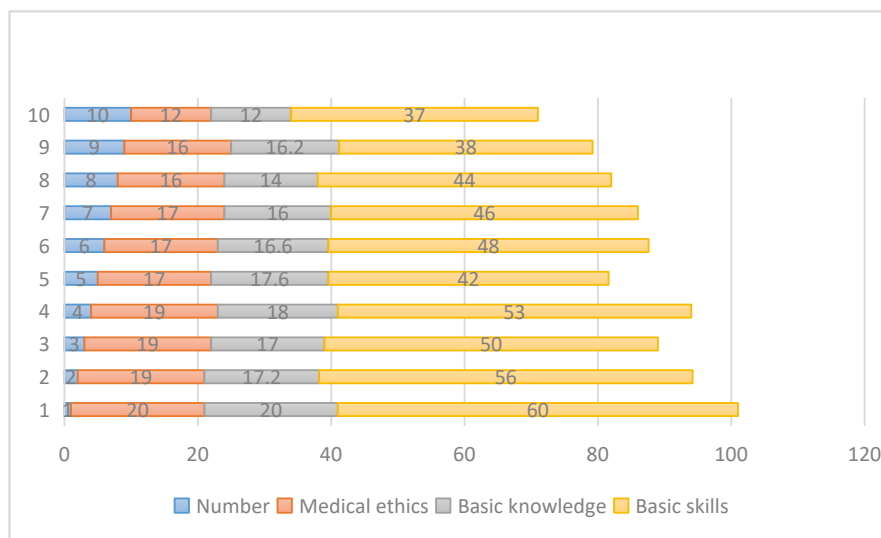


Figure 2 Summary of the first clinical interns assessment score

Table 3 Summary of the second clinical interns assessment score

Number	Medical ethics	Basic knowledge	Basic skills
1	20	20	60
2	20	19	57
3	19	18.2	58
4	17	16.8	49
5	18	16	50
6	20	14	48
7	14.8	17	47
8	14	16	44
9	16	14.2	38
10	14	14.4	36
Average	17.28	16.56	48.7

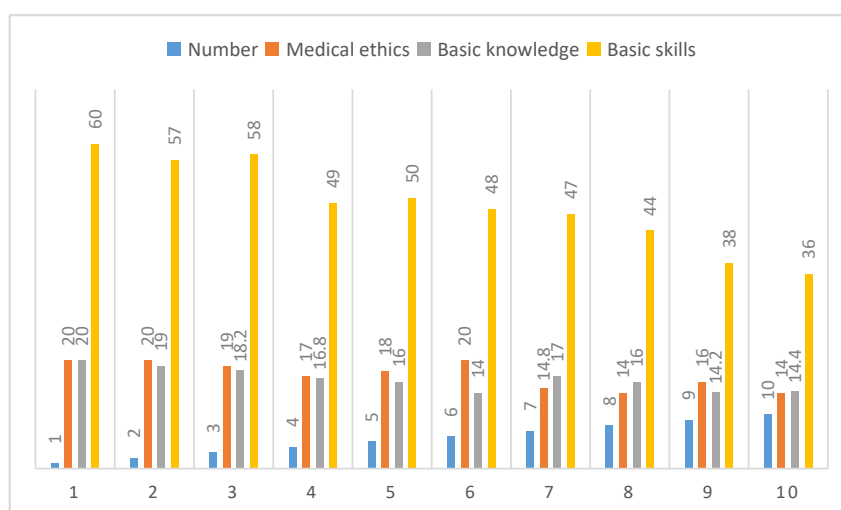


Figure 3 Summary of the second clinical interns assessment score

3.4 Teaching method

The teaching method is a method for teachers to use the spoken language to systematically teach students knowledge and concepts according to the requirements of educational content. It is an ancient, traditional method of education and one of the most widely used and widely used methods in the world to date. From the perspective of teacher teaching, it is a method of teaching; from the perspective of student learning, it is an accepted learning method. The advantage of the teaching method is that it can enable students to acquire a large amount of systematic knowledge in a relatively short period of time, which is conducive to giving play to the leading role of teachers, and is conducive to educational activities with purpose and planning. In the field of integrated Chinese and Western medicine anorectal disease, the teaching method requires the clinical teaching teacher to organize the language, use the blackboard or multimedia appropriately, and revisit the knowledge in the theoretical class. The content of the lecture should be scientific, systematic, and ideological. The lecture process should focus on inspiring students to think positively. The theoretical knowledge and clinical practice should be closely combined to fully mobilize the enthusiasm and initiative of students to accept knowledge, and strive to overcome the shortcomings of the teaching method.

3.5 Demonstration method

The demonstration method is a teaching method in which teachers can demonstrate various kinds of objects, visual aids or demonstration experiments for students in the classroom, so that students can acquire perceptual knowledge through intuitive perception, and comprehensively comprehend knowledge and develop thinking. The demonstration method is widely used in various subjects, especially in clinical teaching. Integrative Chinese and Western medicine Anorectal disease is a highly clinically applied discipline. Therefore, in the teaching of anorectal diseases, clinical teaching teachers should strengthen the training and training of clinical comprehensive skills of trainees. As far as the current situation is concerned, the clinical trainees in these years have started to practice, and the practical opportunities are still relatively few. In order to strengthen the training of students in the combination of clinical and practical skills during the school, and to improve the quality of education and teaching in clinical internships, optimize the content of the course, and stimulate students' interest in anorectal disease, the idea of using human mold to reproduce anorectal disease is very feasible. The advantage of this human body mold to reproduce anorectal disease is that it is intuitive and can enable students to form a rich sensory understanding of the anorectal disease they have learned, and prepare for a deep understanding of anorectal disease knowledge. Taking acne, a common anorectal disease, as an example, we can feel the convenience of this human body mold for clinical teaching. It is well known that acne can be easily divided into three types: internal hemorrhoids, external hemorrhoids and mixed hemorrhoids, which are

frequently-occurring and common diseases on the bed. The accurate and unambiguous distinction between these three types of sores has always been the focus and difficulty of various theoretical examinations and clinical teaching practices. In the theoretical class or the clinical apprenticeship teaching class, when the teacher vividly introduces the three kinds of acne similarities and differences to the students, the majority of students can only form a preliminary concept in their respective brains. The vivid application of the teaching method is organically combined with the demonstration of the mold. Students can use various senses to fully understand the similarities and differences between the three types of acne and obtain in-depth sensible materials. The use of mold to reproduce anorectal disease avoids the inconvenience caused by many trainees, but it can focus on students' attention, stimulate students' interest, and help to motivate students to participate in teaching. The essence of this demonstration method is the crystallization of the spirit of heuristic teaching, which is conducive to the development of clinical teaching of integrated traditional Chinese and Western medicine in anorectal disease, which helps to improve the quality of teaching and enhance the practical ability of students to practice and brain. With the development of science and technology, modern educational research and educational practice are also developing in depth, and the teaching methods provided to teachers are becoming more and more abundant. I believe that there will be many teaching methods emerging in the future. Education is a creative activity, and the choice and application of clinical teaching methods for the treatment of anorectal diseases with integrated Chinese and Western medicine should also be considered in accordance with the actual situation of all aspects. This requires us all to make more efforts in the future.

4. Conclusion

With the expansion of college enrollment and the expansion of hospitals, the number of interns has increased year by year. The influx of a large number of interns has brought certain difficulties to the internship management work, and it is necessary to establish an intern management informationization model. Rotation information, intern attendance, departmental assessment, interns assessment, etc., system module management, so that interns can be managed more efficiently, scientifically and systematically, improve the hospital's clinical teaching ability, and improve the level of internship management. Play the role of high-grade and excellent teachers to build a boutique classroom. Set up a special section on the hospital website, regularly publish the time and place of the outstanding teachers of the whole school and the brothers and universities, so that young teachers in need can choose to attend the class. In summary, improving the clinical practice teaching mode of nursing can promote the combination of theory and practice, and improve the theoretical achievement and practical achievements of nursing students, transform theoretical knowledge into work ability and improve the success rate of nursing recruitment in hospitals.

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