Online Educational System for Medical Students Due to COVID-19

Hojouj Mohammad IM, Zavizion V, Bondarenko I, Avierin D, Prokhach A, Elhajj M

Department of Oncology and Medical Radiology, Dnepropetrovsk Medical Academy, Ukraine

*Corresponding author: Hojouj Mohammad IM, Department of Oncology and Medical Radiology, Dnepropetrovsk Medical Academy, Ukraine; +380-56-766-4805; E-mail: Hojouj[at]yahoo.com

Received: April 06, 2020; Accepted: April 12, 2020; Published: April 18, 2020

All articles published by Gnoscience are Open Access under the Creative Commons Attribution License BY-NC-SA.

Abstract

Hello, my name is Dr. Mohammed Hojouj. I am an Oncological doctor who studied and teaches here in Dnipro, Ukraine (State Establishment Dnepropetrovsk Medical Academy of Health Ministry of Ukraine, Department of Oncology and Radiology).

I, like the team of my colleagues, teach 4th, 5th, and 6th year medical students. Today, I want to talk about the Coronavirus and how it’s affecting our country and students.

At the end of December (2019), public health officials from China informed the World Health Organization (WHO) that they had a problem: an unknown, new virus was causing pneumonia-like illness in the city of Wuhan. They quickly determined that it was a coronavirus and that it was rapidly spreading through and outside of Wuhan. COVID-19 is a serious illness, and it’s more dangerous than the flu. The symptoms of COVID-19 have ranged from mild, like those in a cold, to severe. Around 80 percent of confirmed cases are mild and don’t require hospitalization — at least, 80 percent of the cases that we know about. It’s still possible that there are more mild cases of the illness that haven’t been flagged, which would shrink the percentage of cases that are severe. In about 15 percent of people, the illness is severe enough that they need to be hospitalized, and about 5 percent of cases are critical. It appears around half of the people with critical cases of the illness die from it.

Our people here in Ukraine are struggling but we have to be strong about it. The first person who was infected with the virus was on March, 3, 2020. It all started when a man travelled from Italy to Romania by plane and then arrived in Ukraine by car. So far it has infected over 1,200 citizens. On March, 11th the government had declared a state of emergency where they had to shut all schools and universities. Due to the quarantine our educational system became online.

The workload of teachers and students, the teaching environment, and the implications for education equity. Possible difficulties that the policy faces include: the weakness of the online teaching infrastructure, the inexperience of teachers (including unequal learning outcomes caused by teachers’ varied experience), the information gap, the complex environment at home, and so forth. This was not a challenge for our department because we were using online classes before the break out of the Coronavirus. We decided to convert our Oncology department to electronic form as much as possible. This is due to the rapid spread of e-learning in the world. In inclusion, the number of employers and the actual bias-factors will decrease. A website has been developed in which the 4th, 5th and 6th year students will have all the necessary materials regarding their homework and self-study. A platform has been also developed and adapted for the students and the department staff. The implementation of electronic resources significantly saves students time to study the discipline, and teachers to help assess their knowledge. At the same time, e-learning outstandingly increases the ability of the students. The assimilation tasks of the American and European level into the platform is rather a difficult duty for the department staff because of the difficulty in finding analogues like as in the public domain. Eight classes for practical lessons had been developed and corresponded to the theme of the classes with teachers. Each class will have homework with a calculation of about 150 minutes of independent work concerning each student. Each class has a format that consists of 4 main parts. The information had been designed in such a way that the need for reading textbooks is minimal, targeted search for information prevails, and it is based on the most fundamental sites of our discipline. Quarantine right now helps us to connect with our students as like we never left class by using Google classroom, Zoom, Socrative, Med-Sims and our university website. Our students also work from home to help our patients by advising them what to do and fills their medical records. They’re different arguments for online learning such as:

- The access argument: Online learning makes high quality college and university courses and programs available to those who live a significant distance from a hostel or in the city.

- Affordability argument: Online learning is significantly more affordable than campus-based courses, given the cost of travel, accommodation and the related cost of campus on a daily basis.

- Flexibility argument: Given that a great many university students are working full or part time, having access to courses and programs online gives such students a greater flexibility in planning their course completion strategy.

- Pedagogical argument: Leveraging technology enables a student by maximizes there learning potential.

- Life-long learning: Because the world is changing quickly and many new skills are needed to able these changes to achieve the social, economic and other impacts intended, online learning is a powerful way of ensuring that those who need to develop skills have access to learning anytime and anywhere.

We cannot know what will happen next with COVID-19. It’s clearly a serious challenge to all of us, especially health providers and governments. What can be sure of is 2 things: 1. COVID-19 will continue to spread and cause disruption, 2. Even when COVID-19 fades and treatments can be found, there will be a next virus or pandemic which will impact the world. The opportunity of the present moment for all engaged in online learning is to position this pedagogy not just ‘quick response’ but as a way of inhibiting the spread of this and the next communicable disease. The sooner we help learners master the specific skills of being an effective and efficient online learner, the better. Online learning is a
life-line for many students caught in the consequences of the spread of the virus, but may also be a way of coping with 14 days of self-quarantine: there is a lot that can be learned within two weeks.