

МІНІСТЕРСТВО ОХОРОНИ ЗДОРОВ'Я УКРАЇНИ  
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and the use of information technology as a mechanism for implementing educational programs, ensure the integration of higher medical education in Ukraine to the European educational space.

#### References.

1. Kolodii I. (2018). Vprovadzhennia systemy vnutrishnoho zabezpechennia yakosti u zakladi vyshchoi osvity [Introduction of the internal quality assurance system in a higher education institution] // Molod i rynok - Youth and the market, 3(158), 69–74. [in Ukrainian].

2. ISO 9001:2015, IDT. (2016). Systemy upravlinnia yakistiu. Vymohy [Quality management systems. Requirements]. Retrieved from: <https://khoda.gov.ua/image/catalog/files/%209001.pdf> [in Ukrainian].

3. Standarty i rekomendatsii shchodo zabezpechennia yakosti v Yevropeiskomu prostori vyshchoi osvity ESG. (2015). [Standards and Guidelines for Quality Assurance in the European Higher Education Area (ESG)]. Retrieved from: [http://www.britishcouncil.org.ua/sites/default/files/standards-and-guidelines\\_for\\_qa\\_in\\_the\\_ehea\\_2015.pdf](http://www.britishcouncil.org.ua/sites/default/files/standards-and-guidelines_for_qa_in_the_ehea_2015.pdf) [in Ukrainian].

## THE VIRTUAL PATIENT AS A METHOD OF INTERACTIVE TEACHING IN MEDICAL UNIVERSITIES

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**Introduction.** The classical medical education of the XX cent was based on traditional teaching methods - direct transfer of knowledge from teacher to pupils and teaching «in bed» of the patient, unfortunately, today does not fully satisfy the requirements of modern education [1, 2, 3]. The use of interactive teaching methods is widespread every day in the pedagogical process of higher medical school, so, the introduction of virtual patients and simulation technologies into the educational process is a main pedagogical innovation.

**Results.** The term “virtual patient” in medical education is used to describe the interactive computer simulations. In particular, instead of a clinical case on paper, a special computer program is used during the lesson, which allows students to determine the tactics of diagnosing and treating a patient and immediately track the results of their actions. Cases are thus ramified and allow for a plurality of treatment and diagnostic options, including students making mistakes. This technology allows, along with

obtaining theoretical material, to master the skills of clinical thinking from the very beginning of training at a medical university, and also instills in future doctors the responsibility for making decisions. The virtual patients make it possible to increase the accessibility and possibility of teaching medical students, bringing the pedagogical process closer to the options of a real situation. Students have the ability to access and repeat learning over and over again while exploring different options and strategies. The virtual patient can be designed to solve a very wide range of problems, in particular, rare or unusual cases can be simulated. The students acquire, along with the skills of clinical thinking, the experience of collective work on solving a specific practical problem in the process of working with a virtual patient. The learning process becomes active in its content - students themselves determine which elements of the discussion are most important, which issues require additional study and should be included in the list for independent work, and what sources of information they will use to find the necessary material.

**Conclusions.** Thus, the use of virtual patients in the learning process allows one to get closer to a real situation, to practice the skills of problem solving and making decision, to increase the efficiency and productivity of teaching medical students. Modern virtual simulation models allow simulating clinical cases. The training of future doctors is based on continuity, considering the level of complexity of education and previously acquired practical skills. Thus, is formed a stepwise system of phantom-simulation education.

### References

1. Ахмадьярова Б.С. Опыт внедрения алгоритмизированного «Виртуального пациента» в педагогическую практику по дисциплине «Офтальмология» / Б.С. Ахмадьярова, Ю.А. Шустеров, В.П. Риклефс [и др.] // Медицинское образование и профессиональное развитие. – 2017. – №. 2-3 (28-29).
2. Graffam B. Active learning in medical education: strategies for beginning implementation. / B. Graffam // Med. Teach. – 2007. – V. 29 (1). – P. 38–42.
3. Karakitsiou D.E. The good student is more than a listener — the 12+1 roles of the medical student, / D.E. Karakitsiou, A. Markou, P. Kyriakou [et al.] // Med. Teach. – 2012. – V. 34(1). – P. e1–e8.