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EDUCATIONAL ENVIRONMENT OF THE DEPARTMENT OF PEDIATRIC SURGERY AS A SPACE FOR FORMING PROFESSIONAL AND VALUE ORIENTATIONS OF A PHYSICIAN

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Introduction. Modern medical education in Ukraine is undergoing a fundamental transformation, shifting its focus from the simple accumulation of knowledge to the formation of a holistic worldview of the physician. For a pediatric surgeon, this issue carries not only a didactic but also a deeply existential dimension. The specificity of our specialty has always resided in the extremely high cost of error and the psychological strain of working with the child's body. However, today, under the conditions of full-scale invasion and martial law, these challenges have reached a point of critical urgency.

Professional and value orientations take on particular significance for us – the faculty and students working in the front-line zone, in the city of Zaporizhzhia. Our educational environment today is not merely composed of clinical wards and operating rooms,

but is a space of constant readiness to provide aid for blast injuries, working amidst air raid sirens, and enduring the persistent pressure of proximity to the front line. In such realities, the traditional "technocratic" model of training proves insufficient. A pediatric surgeon in Zaporizhzhia today is a specialist whose worldview must be based on unwavering ethical resilience, the ability to make instantaneous decisions in crisis situations, and deep empathy for small patients affected by the war.

In this process, the Department of Pediatric Surgery becomes a unique educational environment where theory is integrated with harsh practical experience. It is here, at the boundary between civilian life and military challenges, that the value matrix of the future physician is formed. The worldview of a medical student at our university is tempered by immediate proximity to real tragedies and, simultaneously, by the realization of the importance of every child saved for the future of the nation.

The relevance of this study is driven by the need for a theoretical understanding of how the front-line educational environment influences the development of a medic's personality. The purpose of this article is to analyse the mechanisms of forming the worldview of specialists at the Department of Pediatric Surgery under martial law, where professional mastery is inseparable from civic stance and moral duty.

MAIN RESULTS OF THE STUDY

The transformation of the educational space at the Department of Pediatric Surgery in Zaporizhzhia has evolved far beyond traditional academic boundaries, morphing into an environment of heightened moral and clinical responsibility. In the current context, the front-line status of our region acts as a powerful catalyst for the rapid worldview maturation of future specialists. We observe that the educational process is no longer just about transferring surgical techniques; it is about forging a resilient professional identity under

the pressure of compressed decision-making time. Working in a city that faces the daily realities of war, students internalize the direct correlation between the depth of their theoretical knowledge and the survival of a child with complex blast injuries. This "realism of education" elevates the value of every clinical hour, turning surgical algorithms into deeply held internal convictions.

Central to this formation is the concept of surgical mentoring, which in extreme conditions transcends the simple roles of teacher and student. As a pediatric surgeon and educator, I observe that the mentor's personal example becomes the primary ethical compass. When students see their professors remaining at the operating table despite air raid sirens or the psychological weight of regional instability, they absorb a worldview rooted in professional loyalty and civic duty. This silent transmission of values – fortitude, discipline, and unwavering focus on the patient – serves as the foundation for the future physician's ethical framework. It is through this immersion in clinical culture that the student learns to navigate the thin line between technical precision and human empathy.

Furthermore, the integration of bioethics and deontology into daily surgical practice helps prevent the professional detachment often seen in high-stress specialties. We have identified a multi-layered approach to value formation: on the micro-level, the surgeon-child relationship emphasizes the fragility of the young organism, where minimally invasive techniques are taught not just as a technological trend, but as a philosophy of non-maleficence. On the meso-level, communicating with parents in a war-torn environment becomes a test of the surgeon's humanity and psychological maturity. Finally, on the macro-level, the student begins to perceive their role as a guardian of the nation's genetic fund, recognizing that every child saved is a contribution to the country's future recovery.

Modern educational tools, such as simulation training and digitalization, also serve as instruments of humanization within our

department. The use of high-fidelity simulators before entering the operating room fosters a profound respect for the patient's life; the student realizes that the right to make a mistake must be exercised on a mannequin, never on a child. At the same time, engaging students in international tele-consultations expands their professional horizon, demonstrating that even in a front-line city; they are part of a global medical community. Ultimately, a holistic worldview proves to be the most effective defence against professional burnout and deformation. Through collective debriefings and the rigorous intellectual pursuit of scientific circles, students develop the resilience necessary to face the tragedies of war while maintaining their dedication to the healing arts.

An essential aspect of our study involved a comparative analysis of the national model for training pediatric surgeons against leading European practices. At the heart of European medical education, particularly within the EU, lies the CanMEDS framework, where the roles of "Professional" and "Communicator" are held in equal esteem to that of the "Medical Expert." Unlike the traditional post-Soviet school, which historically focused on narrow specialization and rigid hierarchy, the modern European approach emphasizes patient-centered management and collaborative teamwork. In comparing these models, we have observed that within the frontline environment of Zaporizhzhia, our educational space is – perhaps out of necessity – effectively integrating the best European principles. Specifically, the concept of "Shared Decision Making" with a patient's parents takes on a unique dimension here: while in Europe it represents the democratization of medicine, in our clinical reality, it becomes a matter of survival and a profound bond of trust forged under crisis.

We also note a distinct divergence in the development of ideological resilience. While European programs prioritize burnout prevention through structured time management and professional psychological supervision, the resilience formed within the Ukrainian context—especially at our department – is rooted in existential

engagement and a deep realization of the physician's unique mission. Simultaneously, the rigorous implementation of European Evidence-Based Medicine (EBM) standards at the Department of Pediatric Surgery serves as more than just a methodological update; it acts as a vital worldview catalyst. It trains the future surgeon to reject authoritarianism and outdated dogmas in favor of critical thinking and objective data, aligning perfectly with the Western model of public governance in healthcare. Consequently, we are witnessing a convergence: the Ukrainian clinical school enriches European pragmatism with unparalleled experience in extreme conditions, fostering a new type of holistic professional worldview prepared for the global medical arena.

Conclusions. In summarizing the results of this study, it can be argued that the educational environment of the Department of Pediatric Surgery in a front-line region is not merely a platform for knowledge transfer, but a complex socio-cultural space that shapes the professional and value matrix of the future physician. Under the conditions of martial law, the ideological factors of specialist training are transformed: academic deontology turns into a living practice of responsibility, and clinical thinking becomes inseparably linked with civic resilience.

We have concluded that the formation of a holistic worldview of a pediatric surgeon today is based on three fundamental pillars. First is existential engagement, where the realities of a front-line city force the student to realize the value of life through the lens of their own moral choice. Second is the transformation of mentorship, where the teacher acts not only as a master surgeon but as an ethical guide, demonstrating loyalty to the profession under crisis conditions. Third is the convergence with European standards, where evidence-based medicine and a patient-centered approach serve as safeguards against professional deformation and authoritarianism.

The educational factors implemented at the department allow for the cultivation of a specialist who is capable of not only performing a technically flawless operation but also meeting the holistic global challenges of modern times. Such a physician is competitive in the global medical arena, as they combine European pragmatism with the unique Ukrainian experience of resilience. Future research prospects in this area lie in the development of specialized psychological and pedagogical support programs for future surgeons working in high-risk zones.

ПЕРСПЕКТИВИ ВИКОРИСТАННЯ ШТУЧНОГО ІНТЕЛЕКТУ ПРИ ВИКЛАДАННІ КЛІНІЧНИХ ДИСЦИПЛІН У ВИЩІЙ МЕДИЧНІЙ ШКОЛІ

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Стрімкий розвиток технологій штучного інтелекту (ШІ) та їх інтеграція в систему охорони здоров'я ставлять нові виклики перед вищою медичною школою [1, с. 1107]. Сучасний лікар повинен не лише володіти класичними клінічними навичками, але й бути компетентним користувачем цифрових інструментів. Впровадження ШІ у викладання клінічних дисциплін відкриває безпрецедентні можливості для покращення якості підготовки майбутніх лікарів, переходу від стандартизованого до