

A Unique Evaluation of Medical Undergraduates in Viva Exams

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ABSTRACT

The medical analysis of the patients trusts on perfect physical checks plus history questionnaires, which are the regular assignments of the doctors. So, the head academic preceptor scrutinizes the medical undergraduates on their capabilities in the teaching hospitals. I, Hazim Abdul Rahman, am a medical school lecturer at the University of Fallujah; appointed an evaluating form to gauge the clinical mastery of the medical undergraduates. Ordinarily, my evaluation form evaluates the skills of the medical undergraduates in their viva exams.

Keywords: Unique Evaluation; Medical Undergraduates; Viva Exams

Introduction

The lecturers in the academies of medicine utilize new strategies during viva exams in the medical branches for their medical undergraduates. Ordinarily, the medical tutors desire the best of the different specialties during the undergraduate exercises in the teaching hospital departments. Notwithstanding, the deans of the colleges of medicine worldwide aim for acceptable clinical policies reasonable to show their undergraduates' skills in clinical exercises. Hence, any college of medicine authenticated the most recent visionary approaches to license their undergraduate

The medical undergraduate symbolizes an individual entering a certified college of medicine. So, this undergraduate should finish the demanded six-year college by obtaining the expected clinical certifications with the consent of a satisfied approach as a doctor. Ordinarily, an undergraduate should follow the country's laws for medical, professional, plus the honest standards.

In the clinical examinations in any academic pedagogy, the efficient medical mentor reckons the candidate's information and affirms his

expertness in practicing the medical tricks. Besides, the instructor's inquiries enclosed well-known academic techniques: an oral skill analysis, an electronic quiz, or a written assessment. Thus, the undergraduate acquires the scores when he answers the questions in standard keys.

The medical undergraduates assume standard clinical steps by direct communication with their patients to conduct presumed differential diagnoses, then reach the conclusive diagnosis. Afterward, the medical mentor reckoned the medical undergraduates on their medical mastership on a comprehensive basis in the teaching hospital. Thus, the medical supervisors train their undergraduates to acquire the clinical diagnosis on the history handling and Physical tests [1].

Medical learning attains reasonable advancements after the year 2000. Furthermore, the medical academies devoted to virtual techniques plus medical video applications encourage the undergraduates to be in charge with hands-on modalities on surgical simulators. Moreover, diligent knowledge enhances a more acceptable undergraduates' clinical aptitudes.

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At present, Medical colleges use a diverse and comprehensive scope of clinical pedagogy practices for updated strategies guiding medical schooling. Hence, there are many academic programs for undergraduates' skills. Consequently, these are short-case judgment, mock patients, video surgeries, self-charge applications, teaching video demonstrations, plus model simulators.

One of the most proper techniques to assess the medical proficiency of the medical undergraduates in many medical colleges are the "Direct Observations of Medical

Skill" as a systematized academic scale to furnish the chief supervisor with the most satisfactory check of the undergraduates' medical skills. Consequently, the ascertained dexterity of mastery mandates a format that possesses the undergraduates' familiarity with the procedure, scenario practice, and face contact. [2].

I, Dr. Hazim Alhiti, am an academic instructor in a medical college-University of Fallujah; designate a special skills scale to reckon the clinical mastery of the medical undergraduates. Moreover, this hierarchy scale calculates the implementation of the medical knacks of the medical undergraduates in their distinct official departments (Table 1).

Individually, every tutor holds a list paper then documents the impression about the undergraduate's mastery in the viva task. Consequently, each instructor provides a digital scale from zero-10 in a related column. Hence, the feeble undergraduate's implementation owns zero-4. The medium candidate's skill retains 5-7, while the proper undergraduate's enactment has 8-10. Henceforward, the instructor is the main decider because he recognizes and evaluates the undergraduate's mastery (Figure 1).

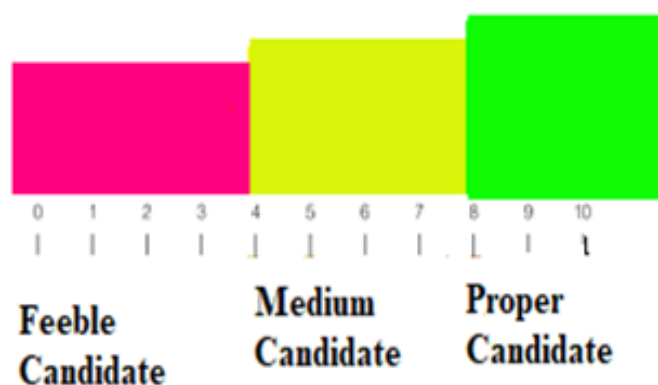


Figure 1: Dr. Hazim Alhiti Score for assessment of the medical undergraduates in viva exam.

Table 1: Dr. Hazim Alhiti's evaluation sheet for the medical undergraduates in viva exams.

S.No.	Checklist of the candidate's skills	Undergraduate's name	Instructor	Degree
1	The skill of history taking			
2	The skill of clinical examination			
3	The skill of demonstrating the data			
4	The skill of clarifying the data			
5	Language ease			
6	self-assurance			
7	Self-guard			
8	Medical data			
9	Intelligence judge			
10	Physician ethical principles			

Discussion

Nowadays, the universities in developed countries utilize extensively developed means to organize their undergraduates in on-charge physician events. Henceforth, the medical undergraduates must satisfactorily succeed in every exam. Besides, the tutor assigns the undergraduates to a fundamental medical decision.

The rank scale of medical undergraduates in various medical academies trusts the candidate's practice plus wisdom. Further, these rankings infrequently accomplish ethical aspects, like the candidate's confidence or defense. Moreover, the consequences of this ranking ascertain an undergraduate who harbors the best distinguishable developments of medical wisdom. Furthermore, this is expected in the tutors' purpose in their standard examinations to focus on the medical facts only [3].

To the observer, you can see that in this unique

form, I arranged numerous factors of the expected knacks from the medical undergraduate in the viva exams. Likewise, I assume the medical candidate shows organized medical skills that satisfy every superintendent in the clinical evaluation. Subsequently, the superintendent assesses the undergraduate's knacks on a zero-10 ranking in his approach during the viva exam.

Hence, in my prepared form, each tutor arranges the most convincing integer of ranking in a detailed analysis counting on the medical undergraduate's skills. Also, the routine workout of the undergraduate would not be rude. Moreover, the superintendent does not disturb the hospital word nor annoy the room adherence.

Conclusion

The unique "Dr. Hazim Alhiti's ranking form" evaluates the Medical undergraduates in the viva Exam is a reasonable strategy.

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