Simulation in Medical Education: A Review

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J. Lindsey Lane Jefferson Medical College, Philadelphia Stuart Slavin environment and include business skills, administration skills, and leadership skills. Undergraduate medical education, in general, focuses more on the patient and process skills and less on the environment-centered skills. The need to focus more on the environment-centered skills increases as physicians differentiate and expand their role in the wider medical community.

patient-related and non-patient-related issues in the medical environment, such as the meaning of illness, cultural context, teamwork, management, and negotiation (Simpson, 1985). It can also be used to develop the skills needed to deal with emotionally charged situations such as distressed or angry patients, families, coworkers, and

Performance assessment using SPs. SP simulators are widely used for assessment

Grol, & Aretz, 1999). Whether this methodology will supplant the use of SPs for post-graduate assessment remains to be seen.

Curriculum assessment using SPs. SP simulation is also used to evaluate the success of a curriculum even when the curriculum has been taught by other means than SP methodology (Ali, Cohen, Gana, & Al-Bedah, 1998; Campbell, Weeks, Walsh, & Sanson-Fisher, 1996; Constanza, Greene, McManus, Hoople, & Barth, 1995; Haponik

Physical examination and dynamic processes. A number of videotape series dem-

Early simulators

imperative of training competent physicians but also to comply with licensing guidelines, many medical schools have completed or are in the process of completing curricular reform. New teaching and evaluation methodologies, many of which incorporate simulation, have been introduced to increase introduces spinion to the complete of the complete

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