

INTERACTIVE TEACHING METHODS IN THE INTERNAL MEDICINE DEPARTMENT**Syniachenko Oleg***DM, professor,**corresponding member of National Ukrainian Academy of Medical Sciences (NAMS of Ukraine), Honorary Scientist and Technician of Ukraine,**head of the Department of Internal medicine 1,**Donetsk National Medical University of Health Ministry of Ukraine, Lyman Lyman, Ukraine***Khaniukov Alexey***DM, associate professor, head of the Department of Internal medicine 3 SE "Dnepropetrovsk Medical Academy of Health Ministry of Ukraine"***Yehudina Yelizaveta***PhD, associate professor of the Department of Internal medicine 3 SE "Dnepropetrovsk Medical Academy of Health Ministry of Ukraine"***Yermolaeva Maya***DM, professor, Department of Internal medicine 1,**Donetsk National Medical University of Health Ministry of Ukraine, Lyman***SUMMARY.**

Experience of teaching of internal medicine is generalized for the students of medical faculties with the use of different innovative methods. Innovative technologies promote motivation of students at mastering of clinical discipline. Possession of practical skills in assessing and classifying the severity of the patient's condition reduces the risk for the future physician of the possibility of errors in the diagnosis and treatment. Innovative technologies increase the motivation of students in the development of clinical discipline.

Keywords: teacher, student, medical university, interactive, education.

"Interactive" means to cooperate, to be in the mode of conversation, dialogue with someone. Interactive and active methods have much in common. Unlike as active methods, interactive ones are focused on a wider interaction of students not only with the teacher, but also with each other and on the dominance of students' activity in the learning process.

Currently, the concept of "interactive teaching methods" is filling with new content, the priority role in it is assigned to: interaction; development of communication skills; development and implementation of social experience of people; educational and pedagogical cooperation between participants in the educational process [1].

Discussion, heuristic conversation, brainstorming, role-playing, "business" games, trainings, case-method, project method, group work with illustrative material, discussion of video films, etc. can be included to the interactive methods [2].

Internal medicine is actually department that gives the student professional training, and forms his clinical thinking. The therapist is in constant communication with the patient and his family.

When studying internal medicine, diagnostic issues are examined in two more general aspects. Firstly, it is a symptom diagnosis based on knowledge of the research methods and pursuing the goal of ascertaining the presence of a symptom of pathology, and secondly, it is syndrom diagnostics, i.e. a statement of the pathophysiological connection between several symptoms of the disease and the reflection in this connection of the functional insufficiency of this physiological system. The task of the course of propaedeutics is also students' mastery of the technique of patients' care.

To implement such goals as the ability to collect anamnesis, to master the survey technique by skills of analyzing the data obtained from the patient's examination and determining priorities when assigning a survey plan, the formation of the skill of processing medical and biological data on the basis of modern computer technologies, at the department of the internal medicine in practical classes use the method of work in groups, case method, business games.

1. Work in small groups (team) - the joint activity of students in a group led by a leader, aimed at solving a common problem by creative addition of the results of individual work of team members with the division of authority and responsibilities.

2. Case study - analysis of real problem situations that occurred in the relevant field of professional activity, and search for better solution options.

3. Role-playing and business games - role simulation by students of real professional activity with the performance of the functions of specialists in the workplace.

One way to implement interactive learning is to work students in small groups. The work of students in small groups implies the achievement of the intellectual autonomy of the person and the possibility of developing social competence through the interaction of the five main components.

The first component is a positive interconnection. It manifests in the following: each student, receiving some part of the task, should understand that the achievement of a good result is possible only if the one who is nearby will also achieve a good result. And of getting a good joint result, of course, everyone will benefit individually. In small groups, there should be up to four people (more complicates the receipt of a qualitative result). Everyone in the group receives such a task,

the fulfillment of which, on the one hand, complements the activities of others, and on the other hand, it is significant for everyone individually. So there is a sense of involvement of everyone in a joint activity - positive interdependence is formed.

The second component is a structured individual responsibility. The activity of each student is assessed by:

- a) individual testing of each student;
- b) explaining by each student the content of the material learned by him to his classmate;
- c) monitoring each group and documenting the personal contribution of each student.

The aim of the student work in small groups is to make each student individually stronger in his own position. Students study together what they can later use individually.

The third component of students' work in small groups is to provide students with mutual success (helping, facilitating, supporting, stimulating and encouraging each other's efforts). The emphasis is on how to solve problems, how to teach the knowledge of their classmates, how to relate what is being studied at the moment to what was studied before. This makes the cognitive process verbally explanatory. Verbal and non-verbal reactions of the members of the group provide important feedback of the student's activities. Students get an opportunity to get to know each other and on a personal, and professional level.

The fourth component is the training of students in necessary social skills and ensuring their use. The success of cooperative efforts requires the formation of a number of social skills. As well as academic skills, and leadership skills, decision-making, confidence building, communication and conflict management should be trained purposefully.

The fifth component of the student work in small groups is to ensure that students have time to join the group process (identifying ways to improve the learning processes used by students). Students focus on the continuous improvement of group work processes by describing what actions each trainee has been most useful for ensuring effective working relationships and whether all members of the group have achieved their learning goals. Students decide what patterns of behavior should be developed further, and which ones need to be changed.

The result of the group work process can be:

- a) direction of the educational process along the way of its simplification (reduction of complexity);
- b) getting rid of unprofessional and inappropriate actions (a process protected from errors);
- c) constant improvement of teamwork skills.

Providing all of these components can contribute to the emergence of cooperative learning effects.

"Case-study" method or method of concrete situations - the method of active problem-situational analysis, based on learning by solving specific problems - situations (cases` solution). The method of concrete situations (case-study method) refers to non-game simulation active methods of training and is considered as a tool that allows applying theoretical knowledge to solving practical problems [3].

Analysis of specific learning situations (case-study) is a method of instruction designed to improve skills and to acquire experience in the following areas: identifying, selecting and solving problems; work with information - understanding the meaning of the details described in the situation; analysis and synthesis of information and arguments; evaluation of alternatives; making decisions; listening and understanding of others - group work skills.

This method is represented by the following types of situations:

- Situation - estimate describes a situation, the exit from which has already been found. The goal of the trainees is to carry out a critical analysis of the decisions taken, give a reasoned conclusion about the situation presented and the ways to solve it.

- Situation - illustration represents the situation and explains the reasons for its occurrence, describes the procedure for its solution. The goal of the trainees is to assess the situation as a whole, analyze its solution, formulate questions, and express agreement-disagreement.

Initially, the case method was contrasted with the traditional lecture method and was associated, first of all, with open discussion. In the case method, it is assumed that the teacher guides the discussion of the problem presented in the case, and the cases themselves can be presented to students in a variety of forms: printed, video, audio, multimedia.

Case activates students, develops analytical and communicative abilities by leaving trainees one-by-one with real situations. The most actual is to use illustrative learning situations in the work - cases, the purpose of which is to teach students the algorithm of making the right decision in a particular situation in a certain practical example. Such cases are convenient for mastering the skills of emergency care to the patient, the technique of caring for the patient.

If the department currently does not have patients with a particular pathology, knowledge of which is required by the program, or if you want to give a task to a student who missed a cycle in discipline, it is convenient to contact "case-studies". You can apply the "case-studies" method when organizing students' independent work with the subsequent discussion on the employment of the features of analyzing this clinical situation by different students.

Business (imitational, operational, educational, didactic) game is a method of teaching professional activity by means of its modeling, similar to real conditions, with obligatory ramified dynamic development of the situation being solved, a task or problems in strict accordance with subsequent events with the nature of decisions and actions taken by the players at the previous stages [4].

The first type of game is "the doctor and the patient." This is the main form of the clinical game that simulates the conditions for the intellectual professional activity of the doctor, aimed at recognizing the diseases and treating the patient. This form is the simplest, it is the basis of all clinical games. The educational game " the doctor and the patient" is organizationally and methodically extremely broad, mobile and

can be applied in a range from a single student playing with a teacher before applying this technique to a lecture when the lecturer conducts a game with students of a whole faculty or even the whole course.

Business games in medicine immerse students in the atmosphere of the intellectual activity, extremely close to the professional practical work of the doctor in the recognition of symptoms and lesion`s syndromes; create a dynamically changing picture, depending on correct and erroneous actions and decisions; form the optimal psychological climate of communication with patients and colleagues at work.

Work in small groups is the students` joint activity in a group led by a leader, aimed at solving a common problem by creative addition of the results of individual work of team members with the division of powers and responsibilities [5]. Lessons in small groups allow students to acquire cooperative skills and other important interpersonal skills. In addition, these classes help students learn how to resolve dispute between them.

As the range of opportunities, experience and skills of its participants increases, it also expands. The probability of the appearance of a participant whose special knowledge will be useful for the performance of a group task increases. Small groups are more effective, because organizations are faster suited, they work faster and every student has more opportunities to contribute.

The use of interactive methods allows to acquaint students with the etiology, pathogenesis and clinical

symptoms of diseases, teaches the principles of diagnosis and treatment, teaches basic principles of prevention, teaches the assessment of the severity of the patient's condition, develops the skill of effective cooperation with other people, improve interpersonal skills, develops personal qualities of a specialist, forms and develops the skill of effective communication between the doctor and the patient.

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