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The Role of Simulation Training in the Dentist Training Program

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TOPICALITY

The latest dental technologies and methods of treatment require the highest manual skills from future dentists, which, due to objective reasons, cannot be mastered only at clinical dental departments when receiving patients. The modern ideology of training dentists today dictates the requirements for the creation of additional structural units directly involved in the process of training practical skills. One of the solutions to this issue may be the creation of Interdepartmental Phantom Centers at the dental faculties of universities.

The aim of research. The aim of the work is to analyze simulation training at the clinics of the dental faculty of Andijan State Medical Institute, which directly involves the level of mastering the practical skills of students of the dental faculty.

Materials and research methods. Simulation training, which is currently being actively implemented in the medical education system, is an educational process in which a student consciously performs actions in the environment that simulates a real one, using special means. Throughout the training, 2nd, 3rd, 4th and 5th -year students of the Faculty of Dentistry are practicing and reinforcing manual skills in the sections "Cariesology", "Endodontics", "Periodontology", "Emergency care at the dental appointment", training in methods of tooth extraction, outpatient surgical operations, clinical stages of the manufacture of fixed and removable dentures, acquaintance with the latest technologies in dentistry, including implantation followed by prosthetics.

Stages of the system of mastering practical skills:

1. Mastering practical skills (basic level):

- ➤ preparation of carious cavities of I V classes according to Black on phantoms and jaw models;
- > filling of carious cavities of all classes on phantoms and models with various filling materials;
- \succ restoration of teeth on phantoms;
- carrying out the necessary endodontic measures on phantoms;
- implementation of all clinical stages of the manufacture of various orthopedic structures on phantoms;
- \succ tooth extraction;
- tooth-preserving and periodontal surgery on native preparations;
- > rendering assistance in case of emergency conditions at a dental appointment;
- Work with an assistant in four hands.
- > restoration of all groups of teeth with modern photopolymerization materials;
- endodontic treatment of any complexity;
- > Prosthetics with any types of orthopedic structures, including metal-free ceramics;

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> Dental implantation with further prosthetics.

The practical skills training program for students of the Faculty of Dentistry consists of theoretical (lecture course) and practical training and is part of the educational program for the discipline sections. In turn, practical training is divided into work with phantom equipment and with living people (in practical classes of dental departments, as well as in practical training).

Education in the simulation training center on phantoms is conducted for nine semesters (the period of teaching the discipline "dentistry" at various departments) and includes classes at least twice a semester for each section of the discipline.

Research results. There is an opinion that the result of the development of simulation technologies should be the creation of multifunctional educational complexes in universities. However, the simulation equipment of the dental discipline is very different from any general surgical, and the phantom center itself must closely interact with the dental departments. In this regard, the existence of a dental center for the development of practical skills is advisable, in which all the competencies of the discipline "Dentistry" will be worked out.

The advantage of interdepartmental centers is the ability to minimize duplicated equipment when performing practical skills from various sections of the discipline "Dentistry".

The amount of equipment will vary and will depend on the number of trainees in each course. The number of audiences is determined by the number of groups simultaneously engaged in this area.

Experience shows that simulation centers must be autonomous and have their own human resources. The inclusion of a center in the department can lead to one-sided use of it, at the same time, if we talk about the teaching staff, then in the staffing table of universities there is no position "teacher of the center", there is only the teaching staff of departments, as a result, the centers have to work teachers of departments, which does not allow to be a completely independent unit. The teaching staff should be from the center staff, and it is necessary to allocate wage-rates for them.

Conclusions. Thus, based on the results of the work in the phantom dental section of the simulation center of Andijan Medical Institute, the following conclusions can be drawn:

- 1. The most optimal form for teaching practical skills are interdisciplinary simulation or phantom centers at the dental faculties of universities.
- 2. High-quality simulation training requires not only phantoms, but also the most modern dental instruments, equipment and materials.
- 3. The number of practical skills on phantoms should be measured not by tens or even hundreds per year, but by tens of thousands of manipulations per year, which requires minimizing the cost of consumable phantom equipment (the most affordable sets of teeth should be used, at least for practicing basic skills).
- 4. In addition to phantoms, in the work of simulation centers, native drugs and virtual training must be used, which will maximize the list of skills being trained.
- 5. Simulation centers should be autonomous, with their own teaching staff, administration and technical support staff.

It is in the conditions of a specially equipped center, and not a department, that the content of training can be aimed not only at mastering individual skills, but also at interdisciplinary training, teamwork, developing standards of professional behavior, and communicating with patients. However, such training should in no way replace any of the training stages, but only supplement real clinical practice, c ontributing to the increase in the quality of mastering practical skills.



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REFERENCES:

- 1. CooperJ.B.TaquetiV.R.A brief histori of the development of mannequin simulators for clinical education and training// Pjstgrad Med j 2008 №84(997)-P-563-570
- 2. Clinikal simulation: importance to the internal medicine educational mission/P.E.Ogden ,L.S.Cobbs,M.R.Howel,S.J.Sibbitt, D.J.Mtd.-2007.№120(9)-P.820-824.
- 3. National Growth in Simulation Training within Energency Medicine Residency Programs/Y.Okuda et.al.//Acad.Em.Med.-2008.-№15.-P.1-4.
- 4. Med Teach London/S.Barry Issenberg et al.-2005-Vol.27.Iss.1.-P.10

