The Application of Distance Education Technology in Standardized Training of Resident Physicians in Primary Orientation Training

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Abstract: This paper explores the application of distance education technology in standardized training of resident physicians in primary orientation training. With the rapid development and popularization of distance education technology, the special needs faced by primary medical institutions in resident physician training are becoming increasingly prominent. By analyzing the current application state, it is found that distance education technology can effectively promote the sharing of high-quality educational resources, improve the flexibility and coverage of training, moreover, it also faces challenges such as technological equipment limitations and insufficient teacher-student interaction. To optimize the application effect, this paper proposes strategies such as strengthening technical support, optimizing teaching content and form, and establishing a sound training evaluation system. This study not only helps to improve the training quality of primary resident physicians, but also has important significance for improving the level of primary medical services. Looking to the future, distance education technology will play a greater role in the training of primary resident physicians, which is of great significance for improving the level of primary medical services.

Keywords: Distance Education Technology; Resident Physician; Application.

1. Introduction

With the rapid development and popularization of distance education technology, its application in the field of education is becoming increasingly widespread. Especially in primary medical institutions, the demand for standardized training of resident physicians is becoming increasingly urgent, and distance education technology provides a new solution. This paper aims to explore the current application state of distance education technology in primary orientation training of resident physicians at the primary level, analyze its advantages and challenges in improving training quality, promoting resource sharing, and improving medical services, and propose corresponding optimization strategies. This not only helps to enhance the professional skills of primary resident physicians, but also has important significance for building a more balanced and efficient medical training system.

2. Development and Popularization of Distance Education Technology in Resident Physician Training

2.1. Technological Development History

2.1.1. Initial Stage: Video Conferencing and Online Courses

The earliest application of distance education technology in medical education mainly relied on video conferencing and online courses. Video conferencing technology allows distant teaching and online discussions, making resident physicians scattered across different regions to receive homogeneous training [1].

Early online course platforms provided basic course management and content publishing functions, supporting resident physicians to learn theoretical knowledge anytime, anywhere.

2.1.2. Interactive Learning Platform

With the development of Internet and multimedia technology, distance education platform gradually introduces more interactive functions, such as real-time question answering, online testing and forum discussion, which enhances the interaction between teachers and students.

These platforms not only provide video courses, but also integrate e-books, mock exams, and virtual laboratories, enriching learning resources and experiences.

2.1.3. Modern Stage: Virtual Reality and Artificial Intelligence

In recent years, virtual reality (VR) and augmented reality (AR) technologies have gradually been applied in medical education, especially in surgical simulation and clinical skill training, providing a highly realistic operating environment.

Artificial intelligence (AI) technology has also begun to play an important role in personalized learning, intelligent evaluation, and teaching assistance, further improving training efficiency and effect.

2.2. Popularization Situation

2.2.1. Domestic Popularization Situation

China has vigorously promoted the strategy of "Internet + medicine", and the application of distance education technology in medical education has been rapidly promoted. Various medical schools and hospitals have established distance education platforms to provide rich online courses and resources. National policy support and financial investment have significantly accelerated the popularization of distance education technology in primary medical institutions, especially in remote and resource scarce areas. Distance education technology has significantly improved the coverage and quality of training [2].

2.2.2. Popularization Situation Abroad

In developed countries, distance education technology has
become an important component of medical education. Medical schools and hospitals in countries such as the United States and the United Kingdom widely adopt online courses, virtual internships, and distant guidance to promote the continuous education of resident physicians. Developing countries are gradually beginning to attach importance to distance education technology, improving their own medical education level through international cooperation and technology introduction, and compensating for the shortage of teaching staff and educational resources.

3. Application State of Distance Education Technology in Standardized Training of Resident Physicians in Primary Orientation Training

3.1. Application of Existing Distance Education Technologies in Standardized Training of Resident Physicians in Primary Orientation Training

The application of distance education technology in standardized training of resident physicians in primary orientation training is becoming increasingly widespread, greatly improving the quality and efficiency of training. In recent years, with the development and popularization of Internet technology, distance education technology has become an important means for primary medical institutions to train residents. Currently, technologies such as video conferencing systems, online learning management systems (LMS), virtual reality (VR), and augmented reality (AR) are widely used in training, significantly improving the coverage and effect of training. The real-time interactive function of video conferencing not only enhances the sense of participation in learning, but also enables resident physicians to ask questions and discuss in real-time, improving learning effect [3].

The Online Learning Management System (LMS) has been widely used in primary healthcare institutions. These systems provide functions such as course management, resource sharing, online testing, and progress tracking, allowing resident physicians to learn and evaluate anytime, anywhere. Through LMS, training institutions can systematically manage course content, monitor learning progress, and adjust training plans based on feedback to ensure continuous improvement of training. Virtual reality (VR) and augmented reality (AR) technologies are gradually playing an important role in surgical skill training. These technologies provide a highly immersive and interactive learning experience, allowing resident physicians to repeatedly practice complex surgeries in a virtual environment and gain valuable operational experience. VR and AR technologies not only improve the safety and effect of operational skills training, but also promote the improvement of practical operational capabilities.

3.2. Setting of Distance Education Courses

The setting of distance education courses is crucial in the standardized training of resident physicians for orientation training at the primary level, and its rationality and scientificity directly affect the effect and quality of training. These courses mainly include course content, teaching methods, and evaluation methods, with the aim of comprehensively enhancing the theoretical knowledge and clinical skills of resident physicians.

The course content emphasizes systematicity and practicality. Distance education courses typically cover multiple fields such as basic medicine, clinical medicine, and public health to meet the comprehensive development needs of resident physicians. In terms of basic medicine, courses include anatomy, physiology, pathology, etc., and online explanations and multimedia materials help resident physicians consolidate their basic knowledge. In terms of clinical medicine, the focus is on setting up courses in major clinical subjects such as internal medicine, surgery, pediatrics, and obstetrics and gynecology. Detailed explanations are provided based on actual cases to help resident physicians master clinical diagnosis and treatment skills[4].

The diversification of teaching forms is the key to the curriculum design of distance education. In order to improve learning effect, the course adopts various forms such as video lectures, online discussions, virtual laboratories, and simulated training. Video teaching is conducted through live or recorded broadcasting, and resident physicians can watch it anytime, anywhere, making it convenient and flexible. The online discussion and Q&A session utilizes forums and chat tools to enhance interaction between teachers and students, and timely solve difficult problems in learning. Virtual laboratory and simulation training utilize virtual reality (VR) and augmented reality (AR) technologies to provide a realistic operating environment, allowing resident physicians to perform surgical simulations and skill exercises in the virtual environment, enhancing their practical operational abilities.

Finally, the scientificity and diversity of evaluation methods are important factors in ensuring the effect of training. Distance education courses offer various evaluation methods, including online testing, course assignments, case studies, and practical operations. Online testing provides timely feedback on learning outcomes through real-time monitoring and automatic scoring; Course assignments and case studies require resident physicians to conduct in-depth thinking and analysis based on practical problems, in order to improve their problem-solving abilities; Practical operation evaluation is conducted through virtual laboratories or clinical internships to test the practical operation level and comprehensive ability of resident physicians.

4. Advantages and Challenges of Distance Education Technology in Standardized Training of Resident Physicians in Primary Orientation Training

4.1. Advantages

Distance education technology has shown significant advantages in the standardized training of resident physicians for orientation training at the primary level, including resource sharing and balance, improved training coverage, and convenient and flexible learning methods.

4.1.1. Resource Sharing and Balance

Resource sharing and balance are one of the important advantages of distance education technology. Through distant education platforms, high-quality medical education resources can cross geographical limitations and be open to primary medical institutions and resident physicians. This resource sharing model enables the dissemination of expert
lectures, cutting-edge research, and teaching materials that may have been difficult to obtain to remote and resource scarce areas, greatly narrowing the urban-rural medical education gap and promoting the balanced distribution of educational resources [5].

4.1.2. Improving the Coverage of Training

Distance education technology has significantly improved the coverage of training. Traditional face-to-face training is limited by the venue and teaching staff, making it difficult to implement on a large scale. However, distance education technology has overcome these limitations and can simultaneously cover a large number of students through online platforms. Resident physicians can participate in various training courses, lectures, and seminars through the internet, greatly expanding the audience of training and ensuring that more primary medical personnel can receive high-quality education and training.

4.1.3. Convenient and Flexible Learning Methods

Distance education technology provides convenient and flexible learning methods. Resident physicians can choose suitable study times and locations based on their own schedule for learning. Various forms of learning, such as online courses, recorded videos, and virtual laboratories, enable students to independently arrange their learning progress and utilize fragmented time for efficient learning. This flexibility not only enhances the enthusiasm and efficiency of learning, but also enables resident physicians to continuously improve their professional abilities without affecting their daily work.

4.2. Challenges

Although distance education technology has significant advantages in the standardized training of resident physicians for orientation training at the primary level, it also faces many challenges, including limitations in technical equipment, limitations in teacher-student interaction, and network stability and security issues.

4.2.1. Limitations of Technical Equipment

Firstly, the limitations of technological equipment are a major challenge in the application of distance education technology. Due to limited funds and resources, primary medical institutions may lack advanced distance education equipment, such as high-quality video conferencing systems, virtual reality (VR), and augmented reality (AR) devices. The lack of such equipment will affect the effect of distance education, making it difficult for resident physicians to obtain high-quality training experiences. In addition, the maintenance and updating of equipment are also challenges that primary organizations need to face.

4.2.2. Limitations of Teacher-Student Interaction

Secondly, the limitations of teacher-student interaction are particularly prominent in distance education. Although distance education technology can achieve distance teaching and discussion, the effect of distance communication is often not satisfactory compared to face-to-face interaction. Due to the lack of immediate on-site feedback, teachers find it difficult to fully grasp the understanding of students, and students may not be able to receive timely answers when encountering questions. The quality of interaction between teachers and students directly affects learning outcomes, and how to enhance interactivity in distance education has become an important issue.

4.2.3. Network Stability and Security

Network stability and security are also major challenges faced by distance education technology. The network infrastructure in primary areas may not be complete enough, and problems such as unstable network connections and insufficient bandwidth often occur, seriously affecting the smooth progress of online courses. In addition, network security is also an issue that cannot be ignored. The risk of leakage of educational data and personal information increases, and effective network security measures need to be taken to protect data privacy and system security.

5. Application Strategy of Optimizing Distance Education Technology in Standardized Training of Resident Physicians in Primary Orientation Training

5.1. Strengthening Technical Support and Guarantee

In order to better promote the effect of orientation training for resident physicians at the primary level, it is necessary to strengthen technical support and guarantee, especially in the following two aspects: providing a stable network environment and updating and maintaining technical equipment.

First, providing a stable network environment is crucial. A stable network connection is the foundation of distance education, which can ensure the smooth progress of online courses and the normal learning experience of students. Primary medical institutions should strengthen the construction of network infrastructure, improve bandwidth and network coverage, and ensure the stability and efficiency of network connections. In addition, to address network failures and issues, it is necessary to establish a sound emergency mechanism, promptly resolve network failures, and ensure the continuity of training.

Updating and maintaining technical equipment is also crucial to ensuring the smooth operation of distance education technology. Primary medical institutions should regularly update and maintain the technical equipment required for distance education, including computers, cameras, audio equipment, etc. Maintaining the normal operation of equipment and ensuring its stable and reliable performance is an important guarantee for the smooth implementation of distance education courses. In addition, it is necessary to strengthen the technical training of medical personnel, improve their application and operational skills of distance education technology, in order to cope with possible technical problems and challenges[6].

5.2. Optimizing Teaching Content and Format

In order to improve the effect of orientation training for resident physicians at the primary level, it is necessary to optimize the teaching content and form. This includes designing courses based on practical needs, increasing interactivity and engagement, and utilizing multimedia and virtual reality technologies.

Curriculum should be combined with practical needs. Training courses should be carefully designed based on the actual situation of primary medical institutions and the needs of resident physicians. This means that the course content should be closely aligned with primary medical practice,
emphasizing practicality and pertinence. By analyzing the characteristics and needs of primary medical services, determine the training content, and ensure the effect and operability of the training.

Curriculum should increase interactivity and engagement. In distance education courses, various interactive forms such as online discussions, group activities, case studies, etc. are used to stimulate students’ interest and increase learning activity. Teachers can ask questions, guide students to think and discuss, and promote knowledge exchange and sharing. At the same time, in order to increase student engagement, group projects or practical tasks can be designed to encourage active participation in the learning process and improve learning outcomes.

Curriculum should utilize multimedia and virtual reality technology. Multimedia and virtual reality technology can vividly showcase medical knowledge and clinical operation processes, improving the fun and effect of learning. By using multimedia forms such as videos, animations, and charts, abstract medical knowledge can be presented more vividly, which helps students understand and remember. Meanwhile, utilizing virtual reality technology for clinical simulation and operational training can provide a more realistic practical experience, helping students master clinical skills and operational points.

5.3. Establishing and Improving the Training Effect Evaluation System

It is crucial to establish a sound training effect evaluation system to ensure the effect and quality of standardized training for resident physicians in primary orientation training. This includes developing scientific evaluation standards, adopting diverse evaluation methods, and providing real-time feedback and improvement.

First, scientific evaluation standards should be established. The evaluation criteria should be specific, clear, and objectively reflect the training effect. These standards can include knowledge level, skill mastery level, clinical practice ability, etc., which should consider both the baseline level before training and the improvement situation after training. Through scientific evaluation criteria, the effect of training can be objectively evaluated, providing a basis for subsequent improvement.

Second, diverse evaluation methods should be adopted. The evaluation methods should be diversified, including questionnaire surveys, exam evaluations, clinical operation evaluations, and other methods. Different evaluation methods can evaluate the training effect from different perspectives, providing a more comprehensive understanding of the learning situation and training effect of the trainees. At the same time, combining qualitative and quantitative evaluation methods can better identify problems and improve directions.

Finally, real-time feedback and improvement should be provided. Training effect evaluation not only requires regular training, but also timely feedback of results and improvement based on the evaluation results. Based on the evaluation results, adjust the training content and methods in a timely manner, strengthen the training focus, solve the problems existing in the trainees, and ensure continuous improvement and enhancement of the training.

5.4. Enhancing Teacher Training and Capacity Building

In order to ensure the effect and quality of standardized training for resident physicians in primary orientation training, it is necessary to focus on improving teacher training and capacity building, including strengthening distance education technology training for teachers and establishing specialized technical support teams.

We first need to strengthen distance education technology training for teachers. The ability and level of teachers in distance education technology directly affect the quality and effect of training. Therefore, it is necessary to strengthen the training of distance education technology for teachers, enhance their teaching skills and operational abilities in distance education. The training content can include the operation of distance education platforms, online teaching methods and skills, course design and management, etc., aiming to help teachers better utilize distance education technology for teaching, improve teaching effect and student satisfaction.

Additionally, a dedicated technical support team should be established. In the application process of distance education technology, various technical problems and difficulties may arise, and a dedicated technical support team is needed to solve them in a timely manner. This team can be composed of technical experts and instructional designers, responsible for maintaining and updating distance education platforms, developing and managing teaching resources, as well as providing technical support and training for teachers and students. By establishing a dedicated technical support team, timely technical support and services can be provided to ensure the smooth operation of distance education technology and the improvement of teaching effect.

6. Conclusion

Distance education technology has important application value and promotion prospects in the standardized training of resident physicians in primary orientation training. By fully utilizing distance education technology, it can promote the sharing of high-quality educational resources, improve the flexibility and coverage of training, and thus enhance the professional level and service ability of primary resident physicians. However, the application of distance education technology also faces some challenges, such as limitations in technological equipment and insufficient interaction between teachers and students. In order to optimize the application effect of distance education technology, it is necessary to strengthen technical support, optimize teaching content and form, and establish a sound training effect evaluation system. I believe that with the continuous progress of technology and the continuous support of policies, distance education technology will play an increasingly important role in primary medical institutions, making greater contributions to improving the level of primary medical services.

Acknowledgments


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