

LETTER to EDITOR

Just Trust Me: The Essential Demand of Operating Room Students

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Clinical education is the central part of medical education (1). The importance of learning atmosphere in fostering professional development and role socialization have been well documented (2, 3) The operating room (OR) is a complicated system, which coordinates the person, technology, and patient in a physical environment for achieving optimal outcomes (4). According to Sigurdsson, "OR as a functional context relies on effective multidisciplinary teamwork which makes the OR such a dynamic and challenging area in which to work" (5). The OR is a stressful learning context setting, where mistakes were not allowed. The conflict between emotion and technical responsibilities could constricts the teaching and learning process. This stressful setting has a great impact on students' self-image and their professional growth (6). In addition, the process of transforming information into action, knowledge management does not work properly in the operating room (7). Which can lead to reduced learning opportunities.

An educational environment of OR influences the teaching and learning process. Factors such as multi-professional teamwork, lack of trainer control on the clinical environment, interdisciplinary collaboration, concurrency of doing tasks (4, 6, 8, 9), stress, communication failure, different team members' activity, different skills and attitudes (4, 10) limit the training opportunities of OR for students which can lead to increasing the chance of medical errors and delivering low quality patient care (11).

Some technical teams in OR have an inflexible and not welcoming atmosphere and refuse the participation of student in teamwork because they do not like changes and believe that students are susceptible to making errors. Consequently, students' actions are only limited to surgery observation, as they feel they have been driven out of the team. That's while, it is well documented that experiencing and performing technical tasks not just observing can promote the function and ability of students (9). Many studies have reported collaboration improve patients care, doctors and nurses' satisfaction,

and reduce clinical errors, cost and patient's safety (12). So understanding communication skills, teamwork culture can be reduces distress and trusting the student. Several years of clinical education experience declared one of the most important concerns of operating room students is trusting them to gaining team membership. Successful teamwork is built on the foundation of trust. Each member of surgical team should cultivate, establish and maintain trust through his/her actions. However, some technical teams have not a good interaction skills or deliberately ignore student's educational and emotional needs (1, 2, 13). Consequently, the lack of trust can inhibit the learning with teamwork. Being inexperienced and uncertain about the teamwork orientation made operation room students feel insecure and self-reproaching. In addition, excessive expectations of surgical team from students can lead to dissatisfaction and negative feelings towards clinical environment (4, 6, 8).

In conclusion, it seems that operation room students have negative and un-pleasure experiences during their clinical education. The interactive and dynamic nature of the OR have noticeably affect the clinical training of the students. However, the factors that affect the dynamic of OR have not been fully elucidated. Therefore, to develop learning strategies that improve quality education, the effect of emotional, social and functional skills as well as professional interaction of surgical team on the OR students clinical education warrant further research.

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