Suggestion on Culturing Clinical Application-oriented Talents

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Abstract. On the base of problems existing in the medical education, the course of clinical teaching, the teaching model and practice should be adopted. The tutorial system can be implemented to guarantee the quality of practice teaching to correct the difference and grasp between teaching and practice to meet the requirement of the social development.

Keywords: Education, Medicine, Clinical, Medical talent.

Introduction

The education of higher medicine is the elite education, which should be reflected in quantity and quality. Based on higher medical education to cultivate talents in medical and health industry after practice is responsible to the people's health and life, human life and survival is the supremacy of human rights, therefore, higher medical education must be a high level of quality education process, must be a process of elite education, must be responsible for training to people and people's life and health of high-quality talents in the field of medicine and health care work. The education should, and must, be determined by the needs of the development of health and the capacity of the education resources of medical health to determine the size of education [1].

In the stage of the education development of the society, whether in the stage of elite education and mass education period, or the national education stage, cannot blindly expand the scale of higher medical education as the realization of popular education or part of the national education. Arising in higher medical education scale expansion, can create tension in the higher medical education resources and education quality of serious landslides and the disordered state of medicine and health care personnel employment. The end result of society will be reflected in the irresponsible behavior of human and human health.

Problems Associated with Advanced Medical Education

Problems. The problems include five items.

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Delayed Police. The third is the serious lag in the construction of the medical education law and some of the legal provisions in health. Medical education in health system backup talents training, medical and health service is an important link in higher medical education.

Implementation and Fulfillment. In the education system in the grasp of the scale of education, the reform of the education mode, etc., how to put the construction of medical education development and Chinese social and economic development, social demand and the standards of the Chinese medical education localization aspects of organic combination, need careful analysis, and implementation [2].

Underinvestment. The cost of education for all kinds of majors is not very clear, and the special consideration of the medical education is small.

Ignorance of the Major Particularity. Medical students clinical teaching only to realize the theory with practice in the medical and health care practice, medical education and medical and health services was supposed to be harmonious unification, but because of policy and law of disharmony and make the medical education in clinical teaching.

Regulation of the Job Market. The job market for medical personnel needs to be regulated. The talent demand forecast is not accurate. The mechanism of the talent entering the market is defective. But at the moment and the overall education level and quality need to be improved.

Analysis of Problems in the Medical Education

Reasons for Problems. To analyze the problems in the education of advanced medicine.

Social development. As a result of social development not mature enough, the person's value has yet to be considered first, people-oriented concept has not yet been fully established, person's survival and health has not become the basic starting point and ultimate goal of social conduct. Therefore, for close ties with the people and people's life and health of medical disciplines and the particularity of medical education has not cause the enough attention of the society, to the understanding of the particularity of higher medical education is a far cry from [3]. This understanding does not reach the designated position, especially her understanding of policy and resources does not reach the designated position, caused the social environment of higher medical education is extremely ideal, higher medical education reform and construction.

Lack of the Major Particularity. Higher medical education workers in the process of the development of Chinese society at present stage, the lack of the understanding of the particularity of China's economy, science and technology and social development, too much emphasis on the certain particularity of higher medical education, makes some development of the higher medical education from the support of the actual social needs, become a castle in the air. This understanding does not reach the designated position, especially some understanding does not reach the designated position, higher medical education workers left basic rule caused by the development of higher medical education, resulted in higher medical education reform and construction of setbacks [4].
**Suggestion**

**Changed Ideas.** Changing education idea, renewing education, change education idea, renewing education concept is the ideological basis of curriculum reform and even the entire education reform and the forerunner, the shift of focus is to establish imparting knowledge, cultivating ability, improve quality, strengthen the practice, strengthen the creative spirit and personality development. The course Settings and systems of clinical medicine professionals should be reformed under the guidance of the new education and better adapted to the social and healthcare needs of the society.

**Culturing Comprehensive Talents.** Breaking the barriers of the subject and strengthen the logic and structure of the discipline. We will improve the traditional courses in clinical medicine, strengthen practice teaching, and add new and interdisciplinary courses. Adhere to the elective courses more direction, multidisciplinary, systematic and standardized guidelines, strengthen students' self learning ability, life-long learning ability, promote the healthy development of their personality and ensure their professional development. Promote the medicine and the humanities cross system, encourage and guide the teachers medical humanities research, concise and cross-disciplinary development of medicine and humanities [5].

It sets mode to clinical medicine professional courses, internships and 1 year of hospital work cycle overlap, conducive to the hospital for internship program and process management, the implementation of the security practice effect, on time to guarantee the graduation work calmly [6]. Fully implementing the introduction, teaching arrangement, science education, teaching plan, assessment of department records, operation records, given the lecture, the attendance register, comprehensive evaluation, feedback, etc) of clinical practice in the whole process management mode, make the management of each link are according to the can depend on, for clinical practice management into standardized, scientific and institutionalized track.

**Building Community Medical Practice Base.** Developing community health and primary care reform train of thought, great importance to the development of community health care practice base and the construction, the existing campus education resources construction base extends to the use of social resources work together for the college students practice base, to meet the clinical medical science professional learning community the need of practice[7]. This understanding does not reach the designated position, especially her understanding of policy and resources does not reach the designated position, caused the social environment of higher medical education is extremely ideal, higher medical education reform and construction stumped. This understanding does not reach the designated position, especially some understanding does not reach the designated position, higher medical education workers left basic rule caused by the development of higher medical education, resulted in higher medical education reform and construction of setbacks.

**Humanities required.** Clinical medicine professional compound talents training mode optimization according to the law of cognitive law and practice in medical education, always adhere to the professional training and humanities
quality education harmonious and unified, harmonious and unified, theory and practice has realized humanistic spirit and scientific spirit and the social demand, to develop college students' humanity quality, professional quality and physical quality of harmony and health.

**Summary**

Lack of the formative assessment theory and understand. Failure to the formative assessment theory, as a kind of education through teaching: through formative assessment. The students' learning situation was evaluated. Due to stress and other reasons, they were not timely feedback and correction. When applying formative assessment to note to correct the above undesirable tendency, it makes every effort to have a purpose, in a planned way to the implementation of the evaluation activity. In order to promote the improvement of teaching quality, it completely denies or ignores the role of humanities and social science in medical education, however, did not cause enough attention to the problem of phenomenon of ordinary existence [8].

There is a lack of interconnection and overall planning between courses that have been opened, and there is a lack of comprehensive research and teaching. In terms of school management, also lack for the future development trend of modern medicine, medical talents training goal of humanities and social studies curriculum to make system needed, deep and prospective study. The status of the current medical education in the humanities and social science in China is unsatisfactory. It can not adapt to the modern medical development and the future development of cultivating high comprehensive quality, the first-class comprehensive medical talent needs and the establishment of the modern medical model for medical education reforms.

**References**


