

Editorial

Different strategies have been developed to educate and evaluate medical students more effectively and more successfully in undergraduate and post graduate medical education for their practice in their patients care. Challenges is that medical education reflect the evolving knowledge and ideas of contemporary research and ever changing of society standing against firm and resisting values of professionals practice. In this issue, four articles proposed the result of the research to sensitize and aware the concerned stakeholders to overcome these challenges.

Jobaida Sultana et al has shown that Physical environment of bedside teaching including temperature, noise, space, light and teacher-student ratio in the ward were not consistent for teaching in both the public and medical college in Bangladesh. Student took consent without explaining anything. Half of students did not maintaining privacy. Patient's comfort and attitude toward patients were low in this study. Most of the cases teachers did not supervise the students during taking history and during physical examination. Teaching skill can be acquired if the teachers are provided adequate training in medical education.

Fahmida Zabin et al evaluated OSPE exam in FCPS part II students at department of Obstratics and Gynae of Bangladesh College of Physicians and Surgeons (BCPS). In their study, students strongly agreed that this assessment system of FCPS exam is a comprehensive and assessed wide range of knowledge and clinical competencies. However student felt that it was a strong anxiety producing experience and some questions were in ambiguity, in languages or in instructions and given inadequate time for tasks done in some stations. They agreed that this system was different from the traditional method.

In Bangladesh, MCQs, SOE, OSPEs, OSCEs and formative assessment of item test, card final, term final, bloc posting etc have introduced in MBBS curriculum in 2002. The numbers of these exam were included with summative examinations in final. **Nazma Begum et al** carried out a research to delineate the students' view of the impact of formative assessment on summative assessment over 300 intern doctors of Medicine and Paediatrics department of government and private medical colleges in Bangladesh. This study revealed that formative assessment to the students was important to supplement and modify traditional teaching system by the teachers. VIVA/SOE and OSCE/OSPE and formative assessment greatly improves the results of summative assessment. Students opined that to

improve the formative assessment the number of teachers should be increased, teachers should be trained up, teachers should give more time to the students and optimum feedback should be provided to the students.

The 'hidden' curriculum are taught outside the “declared” curriculum to make student enthusiasm and interest in the subject. Hidden curriculum usually deals with attitude, values, beliefs and behaviors. It has profound influence on the behaviours of the practicing physicians, because it shapes the students to understand what are “acceptable” and what are “unacceptable” in medical practices. Hidden curriculum are culturally influenced. Differences between the declared and the hidden curriculum challenge students with distressing emotional and ethical dilemmas. **Tahmina Nargis et al** conducted a study to find out the perceptions of the students regarding hidden curriculum in undergraduate medical education. They found mix perceptions of the respondents on different aspect of hidden curriculum. It is important to sensitize and aware the concerned teachers/ authorities for valuing the importance of hidden curriculum.

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