

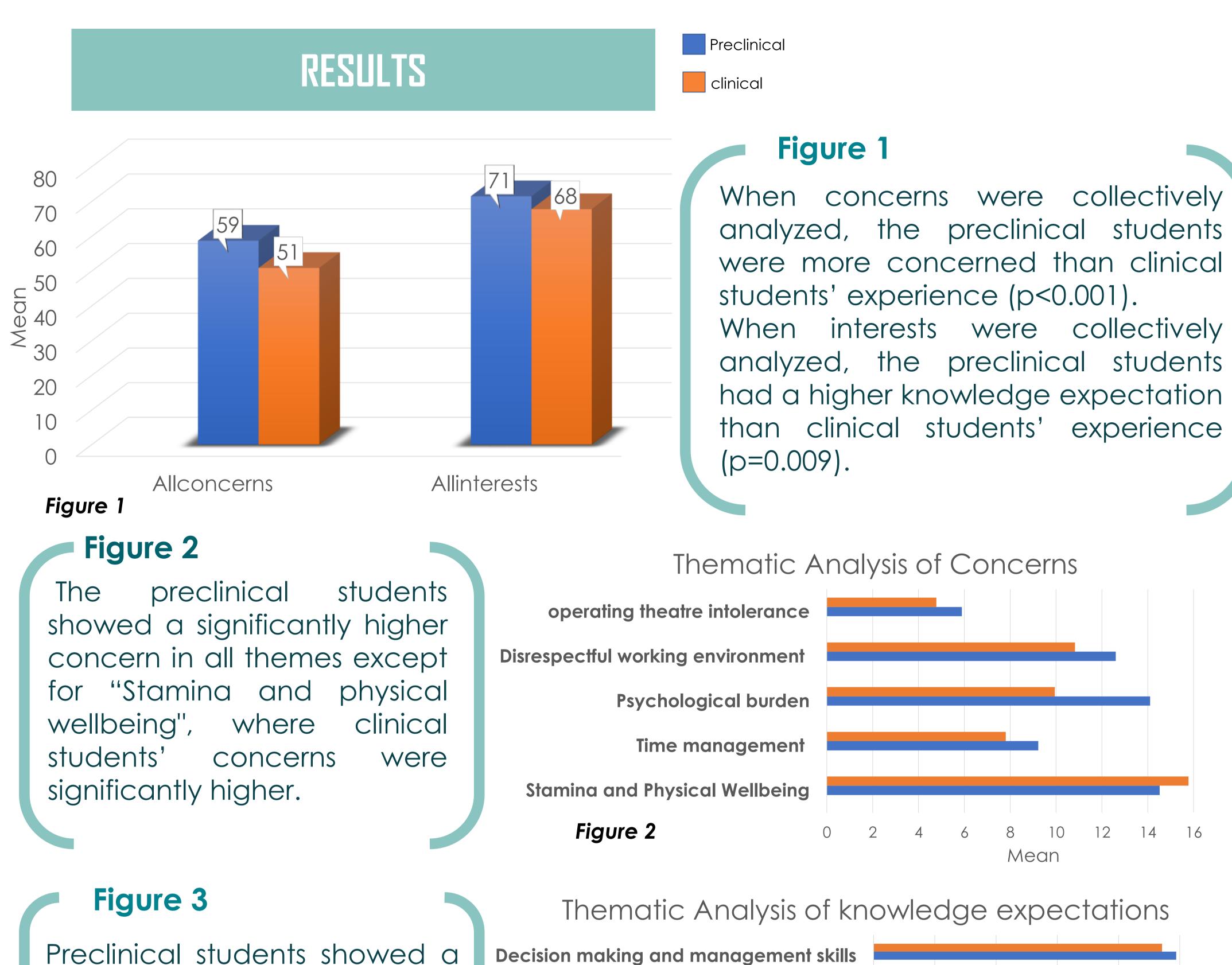
Comparing The Concerns And Perceptions Of Preclinical And Clinical Medical Students About Surgery Clerkship



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INDRODUCTION

students' transition Medical from the preclinical to the clinical phase is a wellestablished cause of stress and anxiety¹. Surgery clerkship provokes more anxiety and stress as students anticipate the use of surgical tools, exposure to blood and wounds, and standing for long periods of time². The study aims to determine a correlation between the apprehensions of preclinical students and the experiences of clinical students after their surgery clerkship. We also compared the interests and preferences of preclinical and clinical students.



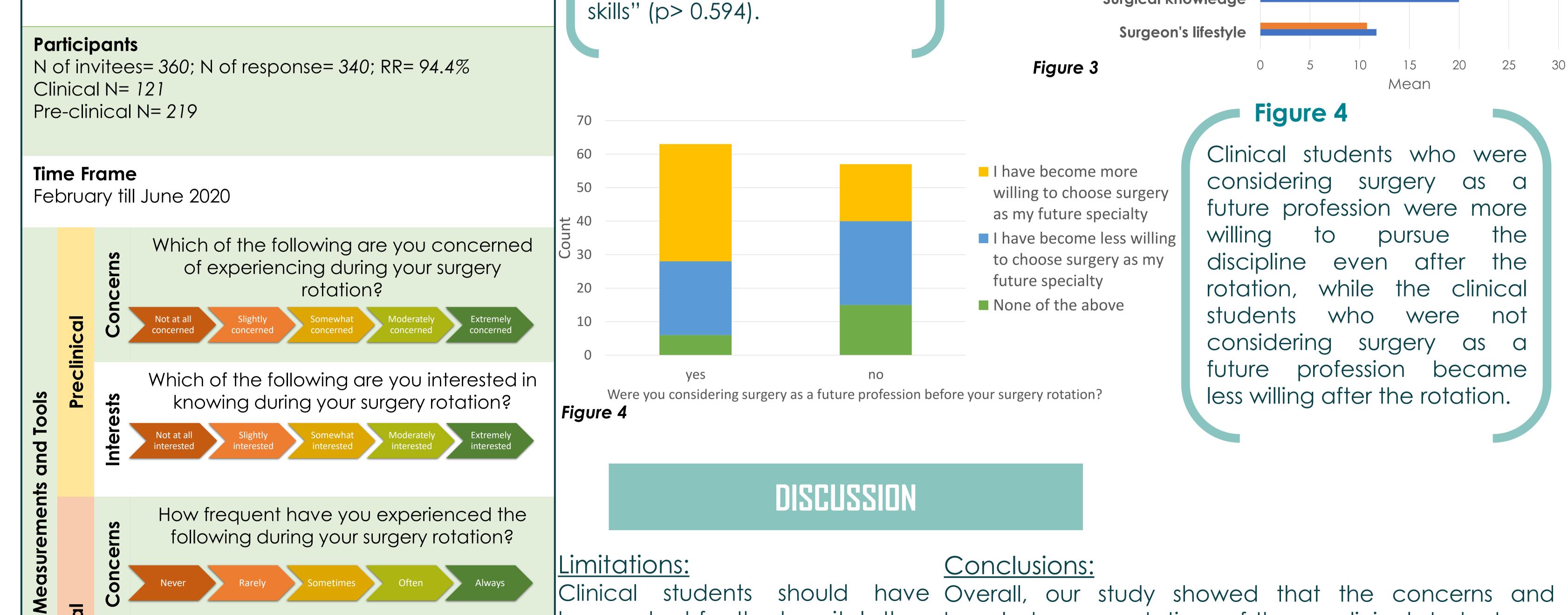
METHODOLOGY

Most students were asked to fill a paper-based questionnaire, and some were approached using an identical online questionnaire. Concerns and interests of preclinical students were compared to the expectations of clinical students.

Design Comparative Cross-sectional Decision making and management skills

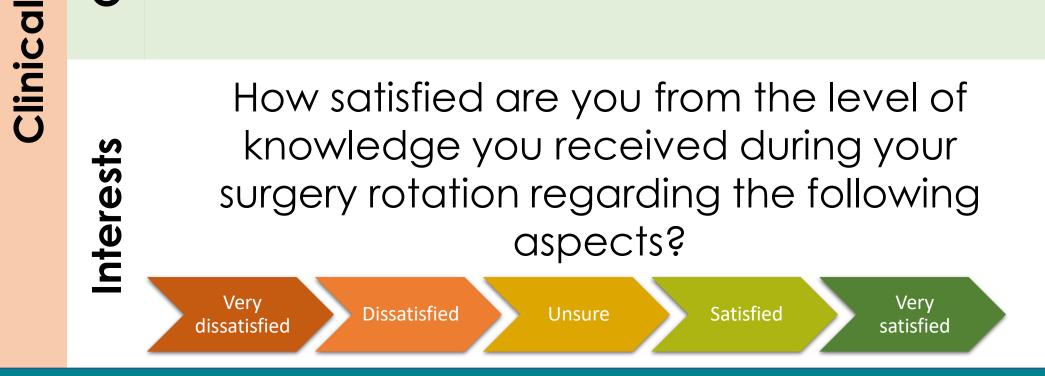
Social skills

Surgical knowledge



significant higher interest in all

themes except for "social



Sometimes

Often

Always

Clinical students should have Overall, our study showed that the concerns and been asked for the hospitals they knowledge expectations of the preclinical students are assigned in, as the over exaggerated in comparison to the experience of were experience may vary. Moreover, the clinical students, except for "Stamina and physical more clinical students should be wellbeing" where clinical students were significantly included in the study to make the higher. Preclinical population should be provided with accurate perception about the future surgery clerkship. Itwo groups more comparable.

References

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1- Linn, B. S., & Zeppa, R. (1984). Stress in junior medical students: relationship to personality and performance. *Journal of medical education*, 59(1), 7–12. 2- Pettitt B. J. (2005). Medical student concerns and fears before their third-year surgical clerkship. American journal of surgery, 189(4), 492–496. https://doi.org/10.1016/j.amjsurg.2004.09.017