
Letter to the Editor

The Compatibility of Diagnoses Presented in Morning Reports of Pediatrics Department and Educational Curriculum of Medical Students

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Dear Editor

Morning report is an educational process in which participants try to solve a diagnostic problem by discussing the patients (1). In spite of this fact that morning report is one of the most practical, clinical, and educational methods in the world, there is no special paradigm for it (2). Thus, it is necessary to assess it for students' educational planning.

Because there was no reference about the compatibility between the diagnosis reported in morning reports and educational curriculum, all the recorded information about the patients in morning reports between 2006 and 2010 was selected as research population. All of the information was recorded in information sheets. Then, the compatibility between diagnosis presented in morning report and educational curriculum of pediatrics department was assessed. Data were analyzed by SPSS software (version 16) using chi-square, independent t-test and, analysis of variance (ANOVA).

Findings showed that most of the cases were recorded in 2007 (29% of all cases). Fewest cases were recorded in 2008. 57.3% of all patients were male. 72.4% were compatible with educational curriculum and 27.6% were not included in educational curriculum. Most reported diseases were toxicity, seizures, fever seizures, and icterus, respectively.

In this study, the compatibility of patients and educational curriculum (72.4) was compatible with the findings of the study conducted by Durning et al. (2003) in which they compared the content of morning reports with principles of standard guidelines and showed that they were in line with each other (3). Further, the findings of this study indicated that the compatibility of patients and educational curriculum has decreased during the recent years. Spickard et al. (2000) in a research titled "Outpatient Morning Report: A New Conference for Internal Medicine Residency Programs" showed that residents choose morning report topics in most cases (73%) while just 20% of medical students share the topic selection (4). The results of Spickard's study are

compatible with the findings of the present study indicating the morning reports are being more specialized.

Most reported diseases in the current study were toxicities, seizures, and icterus, respectively, while the results of Westman's study entitled "Factors Influencing Morning Report Case Presentations" showed that most reported cases were cardiac (20.3%), infectious (13.2%), gastro-intestinal (11.5%), lung (11%), hematologic (10.1%), and general medicine (6.2%) diseases (5). Because in the current study only the pediatrics wards were assessed, differences are reasonable. In the end, since 51 cases in morning reports were not compatible with educational curriculum, we suggest more studies be conducted to analyze whether to add theoretical curriculum to the educational program or not.

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