## Practice and Instructional Method Innovation of the Reform of Basic Medical Curriculum System in Undergraduate Nursing Majors under the Background of New Medical Sciences

## Zhengmei Zhou<sup>1,a</sup>, Ye Lin<sup>2,b</sup>, Yan Li<sup>2,c,\*</sup>

<sup>1</sup>School of Petrochemical Engineering, Changzhou University, Changzhou, 213164, Jiangsu, China
<sup>2</sup>School of Medicine and Health Engineering, Changzhou University, Changzhou, 213164, Jiangsu, China
<sup>a</sup>751682764@qq.com, <sup>b</sup>1452310806@qq.com, <sup>c</sup>liyan37@mail3.sysu.edu.cn

### \*Corresponding Author

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Abstract: It is the goal of undergraduate nursing education to cultivate clinical practical nursing talents and make nursing students have strong clinical nursing ability. Basic medical courses are very important basic courses for nursing majors. In order to thoroughly implement the requirements of "training applied undergraduate nursing talents" and improve the quality of talent training, the reform of curriculum system is imperative. In the teaching of nursing specialty, the basic medical course is essential as a basic bridge course, so how to make the basic medical course better reflect the combination of basic nursing theory and practice and conform to the characteristics of nursing specialty is an important topic facing the instructional reform of nursing specialty. The instructional content and curriculum system directly reflect the educational purpose and training goal. This article discusses the current situation of basic medical curriculum system of undergraduate nursing specialty under the background of new medicine, analyzes its advantages and disadvantages, and provides relevant countermeasures and suggestions, so as to provide ideas and directions for the reform practice and instructional method innovation of basic medical curriculum system under the background of new medicine.

## 1. Introduction

Clinical competence is the skill and ability to solve patients' problems formed through clinical practice, and is usually defined as the synthesis of knowledge, skills and professional behavior. The teaching of basic medical courses is the starting point and important stage of cultivating high-quality skilled and applied talents[1]. In the teaching of nursing specialty, the basic medical course is indispensable as a basic bridge course, so how to make the basic medical course better reflect the combination of basic nursing theory and practice and conform to the characteristics of nursing specialty is an important topic facing the instructional reform of nursing specialty[2]. In the current undergraduate nursing colleges, basic medical courses are generally regarded as the preliminary courses for nursing students to learn nursing specialty. The talent training mode and curriculum system of undergraduate nursing education are still a three-stage talent training mode of basic-clinical-internship, which has some problems, such as repeated and scattered contents, students' forgetfulness and one-sided thinking, and the disconnection between theory and practice[3]. For undergraduate nursing students, nursing clinical ability includes not only the basic ability that a nurse must have, but also the ability of nursing communication, health education, clinical research, clinical teaching and clinical management that a high-quality nurse must have. The traditional nursing education model has been difficult to meet the needs of cultivating modern applied nursing talents, and the reform of undergraduate nursing education is imperative.

With the rapid development of medical technology and the transformation of medical nursing mode, nursing plays an increasingly important role in ensuring people's health, and the demand for high-level professional nursing talents is increasing. Teaching content and curriculum system

directly reflect the educational objectives and training objectives, and are the core links to improve the quality of talents and education[4]. Nursing talents are in short supply in China, but there is still a certain distance between the higher nursing education in China and the social needs and the advanced nursing education concepts abroad. Whether the instructional content, curriculum system and training methods are advanced and scientific plays a decisive role in whether the knowledge structure, quality structure and ability structure of talents can meet the needs of the future[5]. For nursing professionals, clinical ability is also reflected in the ability to accurately identify nursing problems, formulate appropriate nursing plans and correctly carry out nursing interventions[6]. The traditional "subject-centered" instructional model emphasizes the integrity and independence of the knowledge system of this discipline, which is unfavorable for students to understand normal human body and diseases and the formation of clinical thinking. There are too many overlaps and repetitions among disciplines, resulting in a lot of class hours being wasted[7]. This article discusses the current situation of basic medical curriculum system of undergraduate nursing specialty under the background of new medicine, analyzes its advantages and disadvantages, and provides relevant countermeasures and suggestions.

#### 2. Present Situation of Basic Medical Course Teaching

With the formation of a new concept of health, the aging of population, the change of disease spectrum, the change of medical model, the application of new medical knowledge and technology and the continuous improvement of health care system, nursing talents have become a shortage of talents in China. In recent years, the instructional mode of nursing has not fundamentally changed, the pertinence of basic medical courses is not strong, and the course content fails to reflect the professional characteristics of nursing. Basic medical course is a compulsory basic course for nursing specialty. As the main course of nursing education, it is the first medical course that nurses contact. Traditionally, most basic medical courses are taught separately on the basis of disciplines, and there is no organic connection between courses, and there is unnecessary repetition of course content; There is a lack of reasonable connection between basic medical courses are all taken as the preliminary courses for nursing students to learn nursing specialty. Whether the setting of basic medical courses is reasonable or not directly affects the study and practice of professional courses for nursing students.

Due to the continuous development of nursing discipline and the emergence of new disciplines, the instructional content of various courses is expanding day by day. It is necessary to complete the heavy instructional content within the limited curriculum plan, which leads to the teachers' indoctrination and teacher-centered teaching, without giving full play to the students' main role and initiative, ignoring the development of students' intelligence and creative spirit[9]. Teachers of clinical nursing courses often spend a lot of time reviewing the knowledge of basic medical courses during the instructional process, which invisibly increases the learning burden of students and the teaching burden of teachers and reduces the efficiency of personnel training. There are many overlapping contents among the courses, and teachers who cross the content shirk each other or compete for teaching. As a result, there are too many hours and contents, and many contents have exceeded the actual needs of nursing work. Due to the long-term lack of horizontal connection between disciplines, comprehensive and designed experiments are rarely offered, which ignores the main task of experimental science in training students' basic techniques and methods and overall skills, and there is a general phenomenon that theory is emphasized rather than practice.

### 3. Basic Principles of Reform

In the arrangement of instructional plan, the basic medical course, as a complete discipline system, pays attention to the systematicness and integrity of the course, but ignores the relevance and practicability with the specialty. As a result, there are competing classes among the courses,

shirking the overlapping contents among the courses, and some contents are competing for teaching. The reform of instructional content and curriculum system involves theoretical and academic issues, as well as practical and methodological issues. It is a systematic project of school instructional reform. At present, in the basic medical courses, because each course is self-contained, there is a phenomenon of too much content without breaking the boundaries of disciplines[10]. In the adjustment, we should take the knowledge system of nursing specialty as the main line, and make reasonable adjustments to the contents, some of which can be merged, some of which can be deleted, and some of which can be taught in professional courses. Reducing the disadvantages of repeated teaching and lack of content integration in traditional nursing teaching is helpful for students to master nursing knowledge systematically and effectively improve the instructional effect. At the same time, in the instructional process, instructional practice is carried out according to the system, which improves students' practical ability and realizes the zero-distance docking between classroom teaching and clinical needs. According to the characteristics of nursing specialty, we should appropriately reduce the proportion of basic medical courses, delete those contents that have no guiding significance in nursing practice, compress some contents that are necessary for doctors but not important for nurses, merge the overlapping contents among disciplines, and increase the knowledge points that have guiding significance for nursing operation.

# 4. Reform and Innovation of Basic Medical Curriculum System for Undergraduate Nursing Specialty

## 4.1 The Transformation of Teaching Concepts in Basic Medical Courses

The new curriculum system of basic medicine takes the knowledge system of nursing specialty as the main line, breaks the boundaries between disciplines, and comprehensively optimizes, reorganizes and integrates the instructional content according to the needs and characteristics of nursing specialty, permeates some basic knowledge into clinical professional courses, and learns basic knowledge in clinical instructional activities[11]. Figure 1 is a practical classroom integrating clinical instructional activities.



Fig.1 Practical Teaching Classroom

The content of the examination should not only include the regular assessment of classroom content, but also attach importance to students' ability to cross-use knowledge between different disciplines, focusing on the ability of students to analyze and solve problems. The new curriculum system of basic medicine is guided by the national practical nurse Qualification Examination, which focuses on practical teaching, strengthens students' practical skills and improves their comprehensive quality. Organ-system-centered instructional mode can cultivate students' comprehensive and multidimensional thinking mode, and coordinate with the nurse practice examination, which will play a positive role in cultivating applied talents, strengthening students' professional ability and improving the employment rate of graduates. The integrated curriculum teaching also puts forward higher requirements for teachers' comprehensive knowledge level, which requires teachers not only to have multidisciplinary knowledge and comprehensive application ability, but also to have rich clinical knowledge.

### 4.2 Innovating Instructional Methods of Basic Medicine

The focus of basic medical teaching should be to optimize the curriculum structure as a whole, dilute the boundaries of disciplines and attach importance to the interrelationship between courses. Strengthen the integrity and practicality of knowledge, so that the instructional content of basic medical courses should echo the nursing specialty. In the teaching of nursing specialty classes, the instructional content of basic medical courses should correspond to nursing specialty. Because some basic medical theories are closely related to nursing specialty, this part can be integrated with professional courses, and satisfactory instructional results can be achieved through the cross-infiltration of basic and professional. Adjust the experimental instructional content according to the requirements of the training objectives of nursing specialty, and selectively weaken the knowledge that is not related to nursing application. For example, the relevant content of human surface anatomy can be appropriately added in anatomical experiments, and the clinical nursing application knowledge can be added to realize the organic combination of systematic anatomy content and nursing application anatomy content. The composition of nursing information system under the new medical background is shown in Figure 2.

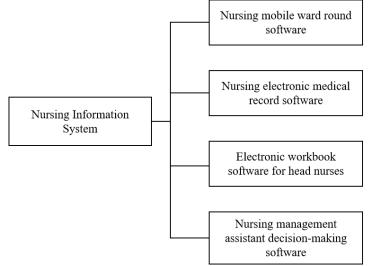


Fig.2 Composition of Nursing Information System under the Background of New Medicine

After the adjustment of basic medical courses, the proportion in nursing instructional plan has been reduced, but the setting will be more reasonable. According to the characteristics of nursing specialty and the requirements of improving quality in an all-round way, the proportion of humanities and social sciences has increased accordingly. Teachers should regard the instructional process as the stage of students' rediscovery of knowledge, create more communication space between teachers and students, and stimulate students' independent thinking and innovative consciousness. At the same time, humanistic quality, health education and corresponding social courses run through the whole stage of basic medical education, so that students' comprehensive quality can be developed comprehensively and harmoniously.

## 5. Conclusions

The curriculum reform has created an active learning environment and teaching scene for nursing students. Nursing students are the center of teaching, and they need to rely on their own knowledge reserves and cooperation between nursing students to explore ways to solve problems. It is one of the important contents to deepen the reform of nursing teaching to highlight the characteristics of nursing specialty and reform the basic medical curriculum. The new curriculum system of basic medicine takes the knowledge system of nursing specialty as the main line, breaking the boundaries between disciplines, comprehensively optimizing, reorganizing and integrating the instructional contents according to the needs and characteristics of nursing specialty, infiltrating some basic knowledge into clinical professional courses, and learning basic knowledge in clinical instructional activities. Teachers should regard the instructional process as the stage of students' rediscovery of knowledge, create more communication space between teachers and students, and stimulate students' independent thinking and innovative consciousness. Teachers can cross-infiltrate basic medical theory and nursing specialty courses through reasonable curriculum setting, integration and optimization, optimize instructional content and improve teaching quality in an all-round way. Although there are still many problems in the reform of integrated curriculum system, as long as we continue to explore and sum up experience in practice, I believe that the integrated curriculum system of basic medicine will be continuously improved and play an important role in the training of nursing talents.

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