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Research Article

E-EDUCATION AMONGST MEDICINAL PUPILS: ASSESSMENT AMONG MEDICINAL INSTITUTIONS OF TWO URBAN CITIES IN PROVINCE OF PUNJAB

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Abstract:

Background: Info also communiqué technology remains very novel method to education also knowledge procedure, nowadays extensively recognized as the essential instrument for accomplishment of developing aims. From old-style chalkboard in addition speeches, teaching has stimulated to e-knowledge. E-education is the supple word that mentions to development in data and routine over usage of computer in addition internet skills.

Objective: The main objective of our current research is to associate e-learning in medicinal scholars of medicinal schools of 2 urban cities of province Punjab.

Methodology: Our research was a short-term research which was led for last year MBBS scholars of King

Edward Medical University, Lahore (KEMU) also Khawaja Muhammad Safdar Medical College, Sialkot (KMSMC) starting from February 2015 to January 2016. the five demined legalized form remained experienced. Scholars remained comprised through non-possibility oportune sample. The form remained sent in email to 220 research applicants. The whole of 150 participants (70% answer proportion) as of together institutions answered to survey. Information remained arrived in SPSS 21 for numerical investigation. Sovereign model t-test was practical wherever information stood standard whereas Mann Whitney U test remained useful wherever information remained not usually dispersed.

Results: In the current research, the total of 150 scholars contributed. The average scores for apparent practicality for e-knowledge, comfort of e-learning, e-learning stressor in addition e-detachment usage of e-learning remained statistically similar in KEMU in addition KMSMC pupils. Though, score for meaning

to accept for e-learning had statistically developed average in scholars of KEMU. (p-value = 0.005)

Conclusion: Medicinal scholars from together organizations of urban capitals identify practices of e-knowledge in medicinal teaching also remain observant to approve this.

Key words: E-education, Medicinal pupils, Health teaching.

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INTRODUCTION:

Info also communiqué knowledge is the novel method to education also education procedure nowadays extensively recognized as the compulsory instrument for accomplishment of developing purposes. Starting from old-style chalkboard also addresses, teaching has encouraged to e-knowledge [1]. E-knowledge is very supple period that mentions to development in information in addition presentation over usage of computer also internet knowledges. From our current research, it remains obvious that scholars contemplate e-knowledge to remain identical valuable also they remain eager to accept it. The research associated scholars in Gulf originate comparable outcomes [2]. Comparable consequences remain described through Ali et al [1] in nursing medicinal teaching. The current research has compared e- information in 2 medicinal institutions of urban cities. The average nicks for apparent helpfulness for e-knowledge, ease of e-knowledge, e-knowledge stressor also e-distance usage of e-knowledge remained statistically identical in together institutes [3]. Though, score for meaning to accept for e-knowledge had statistically developed mean in scholars of KEMU (p-value = 0.005). E-knowledge is very supple period that mentions to development in information in addition presentation over usage of computer also internet knowledges. E-knowledge might be well-defined as “the usage of internet, intranets/extranets, audio also video, cable transmission, communicating TV, also CD-ROM, not solitary for gratified distribution, but then again likewise for communication amongst contributors [4]. Here remains a growing alertness that scholars remain manufacture usage of its own skill. Institutes require remaining alert of their scholar's computer literateness also its arrogances in the direction of e-education, in order to regulate syllabus so that scholars remain sufficiently ready also to make the most of them knowledge involvement over the practice of novel knowledges [5]. E-knowledge might be well-defined as “the usage of internet, intranets/extranets, audio also video, cable transmission, communicating TV, also CD-ROM, not solitary for gratified distribution, but then again likewise for communication amongst contributors. Here remains a growing alertness that scholars remain manufacture usage of its own skill. Institutes require remaining alert of their scholar's computer literateness also its arrogances in the direction of e-education, in order to regulate syllabus so that scholars remain sufficiently ready also to make the most of them knowledge involvement over the practice of novel knowledges [6]. E-knowledge suggests sum of compensations, that comprise occasions for elastic coaching also education, occasion

for self-directed knowledge, overwhelmed physical limits, also improved volume for communicating education also teaching, in addition price operative. Emerging nations comparable to our country Pakistan may remain the specific recipient from E-education. WHO has similarly recognized the e- knowledge as the valuable instrument to discourse instructive requirements in healthcare subdivision in emerging nations. Founded on the current assessment, our research remained prearranged to associate e-knowledge in medicinal scholars of medicinal schools of 2 urban cities of province Punjab.

METHODOLOGY:

Our research got accepted through moral appraisal panels. King Edward Medical University located in urban city of Lahore also Khawaja Muhammad Safdar Medical College situated in urban city of Sialkot. Our research was a short-term and review remained led for final year MBBS pupils of King Edward Medical University, Lahore also Khawaja Muhammad Safdar Medical College, Sialkot starting from February 2014 to January 2015. The authenticated survey covering 6 spheres in addition 60 elements stayed cast-off. Scholars remained encompassed through non-possibility suitable sampling. The scholars remained clarified about research procedure also its consensus remained attained. Comparable consequences remain described through Ali et al [1] in nursing medicinal teaching. The current research has compared e-information in 2 medicinal institutions of urban cities. The average nicks for apparent helpfulness for e-knowledge, ease of e-knowledge, e-knowledge stressor also e-distance usage of e-knowledge remained statistically identical in together institutes. Though, score for meaning to accept for e-knowledge had statistically developed mean in scholars of KEMU (p-value = 0.005). This alteration might remain owing to alteration in reply degree as of equally the institutions. Detached knowledge might remain cast-off in condition ascending as of pressure of breathing in distant parts through extended reserve as of home to knowledge institution. The scholars decide that operational teaching would remain existing so that scholars might absorb as of home evading portable connected pressure also may endure researches afterward departure organization. Generally, our research displays promising insolences of medicinal scholars in the direction of e-knowledge also displays meaning to accept it, notwithstanding of pressure issues complicated. This research through Olango R in addition Gurdeep V displays that scholars remain unsure in the direction of by means of computers for knowledge also for patient maintenance. The form

remained transmitted to 220 research applicants. The entire of 150 scholars (68% answer degree) from together colleges replied to survey. Information remained arrived in SPSS 21 for arithmetical investigation. Sovereign example t-test remained practical anywhere information remained standard whereas Mann Whitney U test remained practical anywhere statistics remained non regular.

RESULTS:

In our current research, the entire 150 scholars contributed. Available of whole, 104 (70%) form KEMU also 46(30%) remained contributed as of KMSMC. The average nick for apparent utility for e-knowledge in KEMU also, KMSMC researchers persisted 4.53 ± 0.49 also 3.54 ± 0.61 respectively,

though not any substantial variance (p -value = 0.864). The average meaning groove to accept for e-knowledge in KEMU scholars remained 2.78 ± 0.59 also in KMSMC scholars stayed 2.51 ± 0.56 through statistically advanced mean in scholars of KEMU. (p -value = 0.005). The average score for comfort of e-knowledge remained similarly statistically identical in scholars of KEMU (2.81 ± 0.79) also KMSMC (2.57 ± 0.81) (p -value 0.078). The average e-knowledge stressor score stayed 2.7 ± 0.67 in KEMU scholars also 2.52 ± 0.81 in pupils of KMSMC through not any numerical consequence (p -value 0.07). The average score for e-reserve usage of e-knowledge in scholars of KEMU remained 3.96 ± 0.91 also in KMSMC scholars as 3.95 ± 0.75 , by irrelevant numerical alteration (p -value = 0.873). (Table 1)

Table I: E-knowledge Spheres & Average scores:

Domain	Institute	Mean	S.D	Minimum	Maximum	P - value
Professed Helpfulness	KEMU (n=100)	1.80	0.78	0.00	4.00	0.872 b
	KMSMC	1.56	0.80	0.00	3.50	
	(n=45)	2.57	0.53	0.71	4.00	
	Total (n =145)					
Meaning to Accept	KEMU (n=100)	1.80	0.78	0.00	4.00	0.079a
	KMSMC	1.56	0.80	0.00	3.50	
	(n=45)	1.73	0.79	0.00	4.00	
	Total (n =145)					
Ease of Knowledge	KEMU (n=100)	1.79	0.57	0.71	4.00	0.004a
	KMSMC	2.86	1.50	0.54	0.14	
	(n=45)	1.70	0.58	0.14	4.00	
	Total (n =145)					
E-Learning Stressor	KEMU (n=100)	1.79	0.57	0.14	4.00	0.060a
	Total	1.50	0.54	0.14		
	(n =145)	1.70	0.58			
E-distant usage of E- Knowledge	KEMU (n=100)	2.57	0.49	1.18	4.00	0.863a
	KMSMC	2.58	0.61	0.71	4.00	
	(n=45)	2.57	0.53	0.71	4.00	
	Total (n =145)					

DISCUSSION:

The current research talked about e-knowledge in medicinal scholars on the 5 area Likert scale, speaking apparent expediency, meaning to accept, comfort of knowledge, e-knowledge stressor also reserves usage e-knowledge. From our current research, it remains obvious that scholars contemplate e-knowledge to remain identical valuable also they remain eager to

accept it [7]. The research associated scholars in Gulf originate comparable outcomes. Comparable consequences remain described through Ali et al [1] in nursing medicinal teaching. The current research has compared e- information in 2 medicinal institutions of urban cities [8]. The average nicks for apparent helpfulness for e-knowledge, ease of e-knowledge, e-knowledge stressor also e-distance usage of e-

knowledge remained statistically identical in together institutes. Though, score for meaning to accept for e-knowledge had statistically developed mean in scholars of KEMU (p -value = 0.005). E-knowledge is very supply period that mentions to development in information in addition presentation over usage of computer also internet knowledges [9]. E-knowledge might be well-defined as “the usage of internet, intranets/extranets, audio also video, cable transmission, communicating TV, also CD-ROM, not solitary for gratified distribution, but then again likewise for communication amongst contributors [10]. Here remains a growing alertness that scholars remain manufacture usage of its own skill. Institutes require remaining alert of their scholar's computer literateness also its arrogances in the direction of e-education, in order to regulate syllabus so that scholars remain sufficiently ready also to make the most of them knowledge involvement over the practice of novel knowledges. E-knowledge suggests sum of compensations, that comprise occasions for elastic coaching also education, occasion for self-directed knowledge, overwhelmed physical limits, also improved volume for communicating education also teaching, in addition price operative [11]. Emerging nations comparable to our country Pakistan may remain the specific recipient from E-education. This alteration might remain owing to alteration in reply degree as of equally the institutions. Detached knowledge might remain cast-off in condition ascending as of pressure of breathing in distant parts through extended reserve as of home to knowledge institution. The scholars decide that operational teaching would remain existing so that scholars might absorb as of home evading portable connected pressure also may endure researches afterward departure organization. Generally, our research displays promising insolences of medicinal scholars in the direction of e-knowledge also displays meaning to accept it, notwithstanding of pressure issues complicated [12]. This research through Olango R in addition Gurdeep V displays that scholars remain unsure in the direction of by means of computers for knowledge also for patient maintenance. Our research remains also braced through the study as of Jawed *et al* from Pakistan similarly Nihau *et al* from Tanzania recommended that regardless of incomplete admittance to skills, scholars have optimistic insights around by means of e-knowledge skills. The research has restraint of reply degree then practice. To additional assess e-knowledge in medicinal scholars,

multicenter measurable also qualitative researches would remain led.

CONCLUSION:

Researchers achieve from the current research that medicinal scholars from together institutes of urban cities identify usages of e-knowledge in medicinal teaching also are sensitive to approve it. Though, stressors require to remain condensed to support its usage.

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