

## ABSTRACTS

## Other

**001 How to have perfect skin and an even better workshop – our experience with organizing a cricothyrotomy workshop**


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DOI: <https://doi.org/10.26800/LV-145-supl2-001>

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**KEYWORDS:** Clinical Competence; Education; Laryngeal Cartilages; Skin

**AIM:** Our goal of this paper is to describe our derivative of cricothyrotomy model and the whole impact of the workshop on the attendees.

**MATERIALS AND METHODS:** The skin is made from gelatin, water and glycerol mixture (mixed in a 1:3:3,5 ratio), food color, and gauze. Subcutaneous tissue was made the same only without gauze. Cricothyrotomy model consist of 3D printed model of laryngeal cartilage, duct tape, and aforementioned subcutaneous tissue and skin simulation. We also used all the necessary items for performing an emergency cricothyrotomy. The educational part of the workshop was based on George and Doto's five-step method for teaching clinical skills. At the beginning and end the workshop attendees were asked to complete an exam and a survey regarding their experience with the workshop.

**RESULTS:** Workshop had 18 attendees, all of whom completed the exams and surveys. The average score on the pre-workshop exam was 4,28 (on a scale from 1 to 7) and 6,22 on the post-workshop exam. In the surveys, the attendees gave the workshop quality an average rating of 4,94, while the average rating for the educational value was 4,83. The lectures had an average rating of 4,89 and the hands-on practice session was rated with an average score of 4,89 (all ratings are on a scale from 1 to 5, with 5 being the best possible rating).

**CONCLUSION:** This kind of model used in hands-on practice and whole workshop was favorable by attendees, who displayed a statistically significant improvement in knowledge about cricothyrotomy by the end of the workshop.

**002 Anticipating Moral Injury In Medical Students**


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DOI: <https://doi.org/10.26800/LV-145-supl2-002>

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**KEYWORDS:** Ethics; Stress Disorders; Students

**INTRODUCTION:** Moral injury is an emotional and psychological distress caused by disbalance between the situation a person finds itself in and personal beliefs. Characteristics are feeling of guilt and shame, loss of trust and confidence, as well as anxiety and depression symptoms. The main research goal was to anticipate the risk of moral injury among medical students in future situations.

**MATERIALS AND METHODS:** The cross-sectional study was conducted by an online questionnaire, consisting of sociodemographic questions and 10 possible situations they could encounter in their future work. It was questioned if these situations bothered them considering their personal beliefs.

**RESULTS:** 376 students (28.2 % males, 75.8 % religious) of medical schools in Croatia, Serbia and Bosnia and Herzegovina participated in the research. In 6 out of 10 situations, more than 80 % of the participants would feel like the situation bothered them morally, while in another 4 more than 50 % felt the same. The most immoral trigger was when a colleague won a competition for specialization unfairly (92.6 %), while only 52.4 % of students felt morally injured if they witnessed inappropriate research conduct. Being religious was accompanied by higher risk of moral injury.

**CONCLUSION:** Results showed that most of the participants were at risk of developing moral injury. Some immoral situations did not cause appropriate perception. Efforts should be made to reduce the situations that render such injury. Nevertheless, medical students should be taught about ethical principles, thus they would better recognize situations that are not ethically acceptable.