

9th INTERNATIONAL CONFERENCE ON HEALTH PROFESSIONS EDUCATION

1st INTERNATIONAL CONFERENCE ON NURSING & MIDWIFERY

Theme: Governance and Leadership in Health Professions Education:
Building Capacity for Transformational Change

Abstract Book

Oral Presentation

Curriculum Development and Evaluation

1. **Assessing educational gaps in Iran's nursing education system: a mixed-method approach to the infectious diseases curriculum**

Hamideh Ebrahimi

School of Nursing, University of Lahore (UoL), Lahore, Pakistan

Introduction

Nurses play a significant role in the health system. The outbreak of emerging infectious diseases, such as COVID-19, highlights the need for nursing staff to be aware of the various aspects of these diseases. Therefore, considering the critical importance of infectious diseases, the present study aims to identify the educational needs of the infectious diseases course in nursing in Iran

Methodology

This mixed-method study was conducted in two phases. First, a qualitative study using a conventional content analysis approach was performed to identify educational needs. Subsequently, in the quantitative phase, a panel of 10 nursing faculty members was asked to prioritize these needs using the Delphi technique.

Result

The qualitative phase identified three main categories of educational needs: (1) enhancing the theoretical content of infectious diseases, (2) strengthening the practical and clinical components of the course, and (3) optimizing educational strategies. The needs assessment questionnaire, developed in the qualitative phase, was analyzed over two rounds using the modified Delphi method with descriptive statistics.

Conclusion

The use of a mixed-method (quantitative and qualitative) approach to assess the curriculum needs for infectious diseases, conducted for the first time in Iran, revealed the necessity of revising both theoretical and clinical curricula

Keywords

Educational needs assessment, Nursing student, Infectious diseases, Curriculum

Oral Presentation

Curriculum Development and Evaluation

2. *Impact of Curriculum Inhibitors on Learning Outcomes -Perceptions of Recent Graduates of A Post Graduate Medical Institute”*

Muhammad Uthman Ahmad
SZ FPGMI Lahore

Introduction

The introduction highlights that despite evolving curricula integrating modern advances, institutional barriers such as rigid culture, poor communication, and lack of faculty autonomy impede curriculum viability. These inhibitors, if unaddressed, compromise learning outcomes and professional development. The study has investigated such institutional inhibitors in a postgraduate institute through a mixed-methods approach

Methodology

A mixed-methods study was conducted at a postgraduate institute using a 14-item Likert-scale questionnaire distributed to 145 alumni to identify curriculum inhibitors. Quantitative data measured three constructs: educational programme, student requirements, and institutional culture. Qualitative data from a focus group discussion were thematically analysed using theoretical frameworks for interpretation.

Result

Quantitative results identified institutional culture as the main curriculum inhibitor. Qualitative analysis revealed themes of rigid enforcement, limited faculty interaction, passive learning, and poor infrastructure. Interpreted through Hidden Curriculum, Communities of Practice, and Maslow’s Hierarchy of Needs, these reflected fear-based discipline, weak social engagement, and unmet basic needs affecting learning outcomes

Conclusion

The study revealed that institutional culture significantly hinders curriculum viability. Using a mixed-methods approach with alumni surveys and focus group discussions, it highlighted barriers like rigid discipline, poor communication, and inadequate infrastructure. Thematic analysis, guided by educational theories, underscored the need for cultural reform to enhance engagement and learning outcomes.

Keywords

curriculum ,curriculum inhibitors, Alumni perspectives , recent graduates ,institutional culture

Oral Presentation

Curriculum Development and Evaluation

3. **Pioneering competency-based medical education in postgraduate ophthalmology: An implementation experience from a resource-limited setting**

Dr. Farhat Fatima

Aga Khan University Hospital, Karachi

Introduction

This presentation outlines the implementation of Competency-Based Medical Education (CBME) in a postgraduate ophthalmology program—the first of its kind nationally. The shift aims to enhance training quality, standardize outcomes, and align with global benchmarks for clinical competence, addressing local needs and evolving healthcare expectations.

Methodology

A structured, phased strategy was adopted: stakeholder engagement, faculty development, competency definition, curriculum mapping, and integration of workplace-based assessments. National guidelines were supplemented with global CBME frameworks, adapted for contextual relevance. Faculty workshops and continuous feedback cycles, along with consultations from international and local departments that have already implemented CBME supported sustainable adoption.

Result

Implementation led to greater alignment between teaching and desired competencies. Faculty and residents experienced increased clarity in expectations. Key challenges included faculty workload, adapting assessment tools, and cultural resistance to change, mitigated through timely involvement of all stakeholders, feedback, and departmental support mechanisms.

Conclusion

CBME implementation in ophthalmology postgraduate training is both feasible and impactful in low-resource contexts. Critical success factors include early stakeholder buy-in, robust faculty development, and ongoing evaluation. This experience offers valuable insights for similar transitions across other clinical specialties in comparable educational environments.

Keywords

Competency-based medical education (CBME), postgraduate training, ophthalmology, curriculum reform, implementation experience, low-resource setting

Oral Presentation

Curriculum Development and Evaluation

4. ***Cinemeducation as a Pedagogical Tool: A Study on Its Effectiveness in Teaching Medication Safety to Medical Students in Pakistan***

Dr. Yusra Nasir

Liaquat National Hospital, Karachi

Introduction

Cinemeducation, the use of films in medical teaching, engages learners emotionally and enhances knowledge retention. Medication safety, a key patient safety domain, requires innovative teaching. This study assessed the effectiveness of cinemeducation in improving third-year medical students' understanding of medication safety in a Pakistani medical college.

Methodology

A quasi-experimental one-group pre-test/post-test study was conducted with 44 third-year MBBS students at Liaquat National Medical College. The intervention included lecture, cinemeducation clips, group discussions, and reflection writing using Gibbs' Reflective Cycle. Pre/post MCQs measured knowledge gain. Thematic analysis of reflections explored students' perceptions and professional attitudes toward medication safety.

Result

Significant improvement was observed in knowledge scores for selected items (Q2, $p < 0.001$; Q5, $p = 0.021$). Thematic analysis revealed recognition of medication errors, emotional responses, system-level gaps, preventive strategies, and intended practice changes. Students identified films as the most valuable component, linking visual learning to improved understanding of drug safety practices.

Conclusion

Cinemeducation enhanced both knowledge and reflective attitudes toward medication safety. Beyond immediate learning gains, it fostered empathy, critical thinking, and professional responsibility, indicating potential long-term benefits in shaping safer prescribing practices. Integration into undergraduate curricula can strengthen a culture of patient safety among future physicians in Pakistan.

Keywords

Education, Medical, Undergraduate; Patient Safety; Medication Errors/prevention & control; Students, Medical; Teaching Methods

Oral Presentation

Educational Technology

5. *Assessing AI Literacy Competencies among Undergraduate Dental Students*

Momina Gul
FMHCMD

Introduction

Artificial intelligence (AI) is transforming dental education through simulation, diagnostics, and assessment tools. Assessing AI literacy among dental students is crucial to identify readiness and gaps in competencies. This study evaluated AI literacy domains using the Meta AI Literacy Scale (MAILS) among undergraduate dental students at a Pakistani dental college.

Methodology

A descriptive cross-sectional study was conducted among 289 undergraduate dental students using the validated Meta AI Literacy Scale (MAILS). Data were collected via online questionnaires and analyzed using SPSS v22. Descriptive and inferential statistics (t-test, Mann–Whitney etc) were applied to assess literacy domains and their demographic associations.

Result

Preliminary findings revealed variable competency across AI literacy domains. Students demonstrated higher scores in AI use and application but lower in ethical awareness and AI creation. Significant differences were observed between academic years. Identified gaps highlight the need for targeted educational interventions to improve AI integration in dental education.

Conclusion

AI literacy among dental students remains uneven, with limited understanding of AI ethics and creation. Integrating structured AI literacy training into dental curricula is essential for future-ready professionals. Findings support curricular innovation and emphasize the need for faculty development to guide responsible AI adoption in dental education.

Keywords

AI literacy, dental education, medical education, Meta AI Literacy Scale (MAILS), artificial intelligence, cross-sectional study

Oral Presentation

Educational Technology

6. **Socio-Demographic Differences in Trust Towards AI in Medical Education**

Dr. Syed Ali Raza

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Introduction

Artificial intelligence is transforming medical education globally through personalized learning platforms, virtual simulations, automated assessments, and intelligent feedback systems. However, successful integration depends critically on end-user trust. In developing countries like Pakistan, where medical education faces faculty shortages and traditional teaching methods, AI offers potential solutions. Yet cultural attitudes, gender dynamics, and hierarchical academic structures may influence technology perception differently than in high-income countries.

Methodology

Study Setting: Punjab Dental Hospital and Mayo Hospital, Lahore, Pakistan Duration: February 20, 2025, to June 7, 2025 Sample Size: 86 participants across undergraduate, postgraduate, and faculty levels Study Design: Cross-sectional analytical study using purposive sampling methodology Participants: Current undergraduate students, postgraduate trainees, and faculty members involved in medical education Analysis: IBM SPSS Statistics v25.0 with t-tests, ANOVA, correlation analysis, and multivariate linear regression

Result

Faculty: Faculty members showed highest AI trust (4.12 ± 0.50) compared to students (3.72 ± 0.60 , $p = 0.018$) Experience Matters: Prior AI exposure significantly increased trust (4.06 ± 0.47 vs 3.65 ± 0.59 , $p = 0.002$) Age Correlation: Mild positive correlation between age and trust ($r = 0.276$, $p = 0.011$) Gender Neutral: No significant gender-based differences in AI trust levels observed Age Correlation: Mild positive correlation between age and trust ($r = 0.276$, $p = 0.011$) Faculty Lead in Trust: Faculty members showed the highest AI trust (4.12 ± 0.50) compared to students (3.72 ± 0.60 , $p = 0.018$)

Conclusion

This study reveals that trust in AI varies significantly across socio-demographic groups in Pakistani medical education. Faculty members and individuals with prior AI exposure exhibit greater trust, while age positively correlates with acceptance. The findings emphasize that successful AI integration requires more than technological infrastructure—it demands strategic trust-building through exposure, education, and inclusive implementation approaches.

"Integrating AI literacy early in the curriculum may enhance acceptance and bridge the trust gap in Pakistani medical institutions, paving the way for transformative educational experiences."

Keywords

AI, Trust, Medical Education

Oral Presentation

Educational Technology

7. *Navigating Academic Integrity: Ethical Frameworks for ChatGPT Use among Undergraduate Nursing Students in Pakistan*

Humaira Athar

Riphah College of Nursing, Isb

Introduction

In Pakistan, nursing students increasingly use ChatGPT for academics but face uncertainty about its ethical use, raising concerns of integrity, critical thinking, and responsibility. “AI giarism” (plagiarism, overreliance) threatens nursing education. This study explores students’ perceptions to develop culturally relevant guidelines for navigating ChatGPT-related ethical dilemmas responsibly.

Methodology

A descriptive qualitative design explored ChatGPT use in academia through semi-structured interviews with 24 undergraduate nursing students (six each from years 1–4) at a Rawalpindi nursing college. Data were analyzed using Braun and Clarke’s six-step thematic analysis to identify shared ideas and ethical concerns.

Result

Themes varied by year: First-year students reported early exposure, low engagement, plagiarism concerns, and lack of guidance. Second-years noted frequent use, overreliance, ethical doubts, and cultural conflicts. Third-years highlighted dependence, reduced thinking, emerging ethics, and patient safety worries. Fourth-years emphasized convenience, advanced ethical reflection, professional concerns, and policy needs.

Conclusion

Nursing students use ChatGPT without much ethical understanding. As they move to higher years, they become more aware of its risks and reflect more deeply. Still, all students said they need better support and clear rules from their institutions.

Keywords

ChatGPT in nursing education, Ethical perceptions

Oral Presentation

Educational Technology

8. **Fully Immersive Simulation in Healthcare Education: A Scoping Review Followed by a Modified Delphi Study**

Elham Karimi

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Introduction

Immersive simulation technologies like AR, VR, and MR integrates with human capacities to foster clinical efficiency, improves patient safety, and makes a compassionate digital healthcare environment. Immersive simulation-based education provides healthcare professionals with access to repetitive practice, thereby enabling them to experience wider range of clinical scenarios which are more realistic and interactive, in a safe environment. Also, according to empirical findings, this type of education enhanced proficiency in surgical techniques and shortened procedural timelines. But it's not without challenges.

Methodology

Scoping Review: Followed Joanna Briggs Institute (JBI) guideline The search strategy was "immers* OR reality" AND simul* AND health AND educ*. Database Search: WOS, CINAHL, PubMed, Scopus Population: Healthcare professionals and students Study Types: All primary studies included Intervention Focus: Fully immersive VR, AR, MR modalities Data Management Tool: RefWorks Quality Appraisal Tools: CASP & JBI tools

Total Studies identified for review: 109

Modified Delphi Process: 1. Identify themes from the Scoping Review findings & Determining expert panel inclusion criteria, 2. Team meetings to discuss and decide on the first round of Delphi questions & Ethical Approval, 3. First round questionnaire development/ Open-ended, Ratings, Rankings, MCQ, etc On Qualtrics, 4. Analysis of first round survey & Second round questionnaire development, 5. Feed back to the participants and running the second round (Validation), 6. Report the results

Result

The most important barriers categorised as Organisational Factors such as lack of financial resource and lack of IT or digital infrastructure, Technical Factors like difficulties with control eg with touch devices or hand controllers and poor information or text readability, and Learner Factors like Learners with neurological conditions. The most important enablers have been listed which some examples are Psychological safety for learners, Training for faculty or teachers in the relevant clinical or professional area, Passionate and enthusiastic instructors, and Hands on demonstrations of immersive equipment such as headsets prior to education sessions.

Conclusion

This study presents a novel integration of the domain knowledge accrued to date, yielding insights to guide Research, Technological innovation, Pedagogical practice, and Educational policy.

Keywords

Simulation-based Education. Immersive Simulation, Virtual Reality, Healthcare Education

Oral Presentation

Educational Technology

9. *Effectiveness of a Flipped Classroom Using a Blended Learning Approach in the Infection Prevention and Control Nursing Course Among Undergraduate Students in Karachi, Pakistan*

Muhammad Rehan

Dow Institute of Nursing & Midwifery, DUHS

Introduction

Background: Traditional didactic methods in nursing education often limit active learning and critical thinking. Flipped classroom (FC) models, supported by blended learning, have shown promise in enhancing engagement and competency development. However, limited evidence exists regarding their effectiveness in Infection Prevention and Control (IPC) courses within low- and middle-income countries.

Objectives: This study evaluated the effectiveness of implementing a flipped classroom integrated with blended learning on IPC competencies, satisfaction, and academic performance among undergraduate nursing students in Karachi, Pakistan.

Methodology

Methods: A quasi-experimental design was adopted with 300 first-year undergraduate nursing students, divided equally into experimental and control groups. The experimental group received IPC instruction via a flipped classroom and blended learning approach, while the control group was taught through traditional lectures. Data were collected using validated instruments, including pre- and post-tests for knowledge, Objective Structured Clinical Examinations (OSCEs) for skills, and satisfaction surveys. Statistical analysis was performed using SPSS v25.

Result

Results: Findings demonstrated significant improvement in knowledge scores in the experimental group ($p < 0.001$) compared to the control group. OSCE results indicated higher competency in hand hygiene, use of personal protective equipment, and waste management among the intervention group. Student satisfaction with the FC model was high, with a mean score of 4.2 (SD = 0.7), reflecting enhanced engagement, interaction, and self-directed learning.

Conclusion

Conclusion: The flipped classroom integrated with blended learning proved to be an effective pedagogical strategy for teaching IPC, fostering improved knowledge, skills, and satisfaction. The model is recommended for broader adoption in nursing education in Pakistan to strengthen infection control competencies and align with contemporary educational standards.

Keywords

Keywords: flipped classroom, blended learning, infection prevention and control, nursing education, student satisfaction, Pakistan

Oral Presentation

Equity, Diversity and Inclusion

10. **Enhancing Nursing Students' Cultural Sensitivity: Integrating Effective Teaching for Improved Care Delivery to Diverse Patient Populations**

Imran Masih

Riphah college of Nursing, Islamabad

Introduction

Cultural sensitivity is essential for patient-centered nursing, especially in Pakistan's multicultural context. Developing cultural competence enables students to provide equitable care across diverse populations. This study explores how nursing education can strengthen cultural sensitivity and prepare students with the skills needed for inclusive and effective clinical practice.

Methodology

A convergent parallel mixed-methods design assessed nursing students' cultural competence. Quantitative data from 200 third- and fourth-year students using the CCA tool were analyzed with descriptive statistics and t-tests in SPSS v27. Qualitative data from two focus groups were thematically analyzed using Braun and Clarke's framework with NVivo.

Result

Analysis showed cultural competence increased with academic progression. Fourth-year students scored significantly higher than third-years ($p < 0.001$), confirming education's role in competence development. Qualitative findings identified four themes: understanding diversity, clinical practice challenges, effective teaching strategies, and student-suggested improvements, emphasizing interactive, real-life learning as essential for fostering cultural competence.

Conclusion

The integration of findings confirms that immersive, experience based education significantly improves cultural competence in nursing students. Academic maturity, combined with applied teaching strategies, fosters culturally responsive care.

Keywords

Cultural sensitivity, Nursing students, Diverse patient care

Oral Presentation

Equity, Diversity and Inclusion

11. **Enhancing Nursing Students' Cultural Sensitivity: Integrating Effective Teaching for Improved Care Delivery to Diverse Patient Populations**

Sobia Ishtiaq

Riphah college of Nursing, Islamabad

Introduction

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Conclusion

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Keywords

Cultural sensitivity, Nursing students, Diverse patient care

Oral Presentation

Faculty Development

12. **Faculty Readiness for the AI Era: Assessing the Effectiveness of ChatGPT in Facilitating Seamless Technology Integration in Nursing Programs Theme:**

Humaira Athar

Riphah College of Nursing, Islamabad

Introduction

The rise of AI tools like ChatGPT offers opportunities and challenges in nursing education. Faculty readiness remains underexplored, with concerns about competence, ethics, and empathy-based learning. This study assessed nursing faculty's knowledge, attitudes, and practices, exploring experiences, barriers, facilitators, and ethical concerns regarding ChatGPT use in teaching.

Methodology

A convergent parallel mixed-methods design was used. Quantitative data from 204 nursing faculty via the KAP-CQ39 survey were analyzed with descriptive statistics, chi-square, and Spearman's correlations. Qualitative data from 10 faculty interviews were thematically analyzed using Braun and Clarke's six-phase method, offering deeper insights into experiences and perceptions.

Result

Quantitative results showed favorable attitudes ($M = 1.83$) but low practical use ($M = 1.32$). Knowledge, attitude, and practice correlated significantly ($p < .001$). Younger, less-experienced faculty used AI more. Thematic analysis identified three themes: experiences with ChatGPT, integration factors (training gaps), and ethical considerations.

Conclusion

The nursing faculty demonstrates openness toward adopting ChatGPT, but institutional gaps in training, lack of implementation strategies, and ongoing ethical concerns limit effective use. Structured capacity-building initiatives, clear ethical guidelines, and administrative engagement are essential to move beyond passive interest toward sustained AI integration.

Keywords

Nursing faculty, ChatGPT Adoption, Technology Integration

Oral Presentation

Faculty Development

13. *Does Formal Training in Medical Education Matter? Satisfaction Perspective from Students and Faculty.*

Lala Rukh Bangash

Allama Iqbal Medical College, UOL

Introduction

With the advancements in medical education, faculty development has become essential to attain quality standards. Formal training programs in medical education are increasingly being adopted by medical institutions. However, the actual effect of such training from both student and faculty perspectives remains underexplored.

Methodology

A cross-sectional survey was conducted at Allama Iqbal Medical College, Lahore. Separate validated questionnaires were distributed via Google Forms to faculty (n = fifty) and undergraduate medical students (n = four hundred). Quantitative data were analyzed using SPSS Version 25, with median and percentage reporting. Pearson correlation test was applied for correlation and Mann Whitney U test for drawing comparisons with $p < 0.05$ taken as significant. A thematic analysis of open-ended responses was also conducted.

Result

seventy-four percent of faculty members who took part in the survey had received formal training in medical education. Trained faculty reported higher satisfaction and significant benefits in teaching effectiveness, feedback techniques, and assessment confidence. Among students, trained faculty were rated significantly higher in clarity ($p < 0.001$), while eighty-five percent believed that all teaching faculty should be formally trained.

Conclusion

Formal training in medical education is positively perceived by both faculty and students. It enhances teaching clarity, feedback quality, and assessment confidence. This calls for its continued implementation, improvement, and enhanced institutional support to meet the desired outcomes.

Keywords

Medical education, faculty development, teaching effectiveness, student satisfaction, formal training

Oral Presentation

Faculty Development

14. **Evaluating the Effectiveness of a Faculty Development Program in Enhancing the Quality of Multiple-Choice Questions: A Quantitative Study**

Saba Amjad

University Of Lahore

Introduction

Multiple choice questions (MCQs) are widely used in medical education for their objectivity and efficiency. However, poorly constructed questions can compromise the validity and reliability of the assessments. Faculty development programs have emerged as a key strategy to improve the quality of MCQs. This study aims to evaluate the impact of structured FDPs on the MCQs construction using objective metrics and participant's feedback.

Methodology

This observational study was conducted over three years period (2022 - 2024) at University College of Medicine & Dentistry. Three workshops on MCQs development were organized for the faculty. Feedback was collected through structured forms using 5- point Likert scale. Additionally, MCQs submitted before and after the workshops were analysed for item flaws, difficulty & discrimination indices. The study also evaluated the impact of training using the Kirkpatrick Model. The data was computed and analysed using SPSS version 26.0. The Shapiro Wilk test determined the normality of the data. P value <0.05 was considered as significant.

Result

A significant reduction in test-wiseness flaws (logical cues from 12.9% to 1.3%, $p < 0.001$) and irrelevant difficulty (extraneous details from 7.6% to 0.9%, $p < 0.001$) was observed. The difficulty index shifted towards moderate-level items and the discrimination index showed a trend towards improved item quality. Feedback from the participants revealed increasing satisfaction across workshops, with the highest ratings in workshop 3 (2024). Instructor expertise remained consistently rated above 87.5%.

Conclusion

Incorporation of multiple structured faculty development workshops lead to measurable improvements in MCQ quality. These training sessions can enhance the reliability and validity of medical assessments, benefiting both educators and learners.

Keywords

Faculty, Multiple choice questions, Program evaluation, Faculty Development, Assessment.

Oral Presentation

Faculty Development

15. *Does Formal Training in Medical Education Matter? Satisfaction Perspective from Students and Faculty.*

Mohsin Masud

Rashid Latif Medical College / UOL

Introduction

With the advancements in medical education, faculty development has become essential to attain quality standards. Formal training programs in medical education are increasingly being adopted by medical institutions. However, the actual effect of such training from both student and faculty perspectives remains underexplored.

Methodology

A cross-sectional survey was conducted at Allama Iqbal Medical College, Lahore. Separate validated questionnaires were distributed via Google Forms to faculty (n = fifty) and undergraduate medical students (n = four hundred). Quantitative data were analyzed using SPSS Version 25, with median and percentage reporting. Pearson correlation test was applied for correlation and Mann Whitney U test for drawing comparisons with $p < 0.05$ taken as significant. A thematic analysis of open-ended responses was also conducted.

Result

Results showed that seventy-four percent of faculty members who took part in the survey had received formal training in medical education. Trained faculty reported higher satisfaction and significant benefits in teaching effectiveness, feedback techniques, and assessment confidence. Among students, trained faculty were rated significantly higher in clarity ($p < 0.001$), while eighty-five percent believed that all teaching faculty should be formally trained.

Conclusion

formal training in medical education is positively perceived by both faculty and students. It enhances teaching clarity, feedback quality, and assessment confidence. This calls for its continued implementation, improvement, and enhanced institutional support to meet the desired outcomes.

Keywords

Medical education, faculty development, teaching effectiveness, student satisfaction, formal training.

Oral Presentation

Faculty Development

16. *Improving surgical skills training of Ophthalmology residents*

Dr. Farhat Fatima

Aga Khan University Hospital, Karachi

Introduction

This study explores faculty and resident insights on effective surgical teaching at the Ophthalmology and visual sciences department (OVS). Residents shared behaviors and attitudes they value in surgical teachers and what they most need during training, while faculty reflected on these same aspects and their broader roles as surgical educators.

Methodology

A structured, anonymous online quiz was administered to ophthalmology faculty and residents at OVS. It included multiple-choice and open-ended questions exploring perceptions of effective surgical teaching, valued educator behaviors, and learner needs. Responses were discussed with clinical faculty to identify alignment and gaps, informing targeted improvements in surgical education practices.

Result

Both residents and faculty valued attributes in a good surgical teacher, that extended beyond their competence to perform as surgeons. Exhibiting patience towards learners, while letting them have hands on experience followed by clear constructive feedback contributes positively to being a great surgical teacher. The follow-up discussion provided opportunity for faculty to share strategies that work well in their context.

Conclusion

Providing residents and faculty the opportunity to reflect on the qualities and behaviors that define effective, impactful surgical teachers, followed by an open forum discussion for faculty to share experiences, insights, and strategies to improve the quality and consistency of surgical training can serve valuable towards fostering a shared mindset among faculty that values surgical teaching as a core professional responsibility.

Keywords

Improving Surgical teaching, Faculty development

Oral Presentation

Faculty Development

17. **Implementation and Evaluation of a Needs-Based Faculty Development Program in a Female-Only Medical College of Pakistan: An Action Research**

Dure Saman

Women Medical & Dental College, Abbottabad

Introduction

Faculty development (FD) programs enhance educators' teaching skills. Effective programs must be needs-based, considering faculty, institutional, and socio-cultural contexts. Pakistani medical colleges lack structured FD programs. This study planned, implemented, and evaluated a context-specific needs-based FD program at a female-only private medical college in Pakistan.

Methodology

An online questionnaire assessed faculty needs; institutional needs were identified via academic forums. Based on findings, 10 training sessions were held in 2022-23, evaluated via questionnaires. Ten semi-structured interviews were conducted with participants to explore program impact and identify key components for success. Thematic analysis was performed on transcribed interviews.

Result

Thirty-four faculty responded, with 67.6% favoring face-to-face sessions. Training topics included MCQ development, teaching strategies, teaching aids, research skills, and curriculum development. Institutional needs such as quality enhancement, work-life balance, and workplace harassment were addressed. Evaluations showed sessions were well-received and benefited pedagogical skills. Key success factors were needs-based content, applicability, networking, and interactivity.

Conclusion

Structured, needs-based FD programs tailored to local contexts effectively improve faculty pedagogical skills. Successful programs are learner-centered, deliver applicable content, and foster networking opportunities. These elements are essential for enhancing educational quality in medical colleges, especially within socio-culturally specific settings like female-only institutions in Pakistan.

Keywords

Faculty Development, Needs Assessment, Pedagogical Skills, Medical Education, Pakistan, Female Medical College

Oral Presentation

Faculty Development

18. Enhancing Item Writing Skills In Undergraduate Dental Faculty Through Constructive Feedback

Sabaa Shahid

Liaquat College of Medicine and Dentistry

Introduction

In medical education, assessment plays a vital role in comprehending and enhancing student learning. Subject experts are often tasked with creating Multiple Choice Questions (MCQs), even if they lack formal training in this area. A lack of adequate training has been identified as a contributing factor to the development of low-quality questions that primarily assess lower-order cognitive skills. This, in turn, can negatively affect student learning outcomes and diminish the quality of education overall. The objective of this study was to evaluate the improvement in multiple-choice question (MCQ) writing skills among undergraduate dental faculty and to assess the impact of feedback on the quality of MCQs they developed.

Methodology

The study was conducted at Liaquat College of Medicine & Dentistry using a follow-up cohort design over six months, following Institutional Review Board (IRB) approval. A non-probability convenience sampling method included all faculty members from the Bachelor of Dental Surgery (BDS) program as participants. Data collection occurred in two phases: Phase 1: Faculty members were asked to create MCQs and complete a pre-validated self-assessment feedback questionnaire. These MCQs were evaluated by a panel of medical education specialists based on established educational criteria. Phase 2: Faculty received detailed feedback on their MCQs and were asked to revise them accordingly. After revising their MCQ, participants filled out a post-activity questionnaire to assess their improvements. The data analysis was done using Mann Whitney U test to compare responses between the pre and post-workshop phases.

Result

The study demonstrated significant improvements in MCQ development, with 85% of faculty showing enhanced alignment of learning objectives, 78% improving lead-in clarity, and 90% avoiding item-writing flaws. Additionally, 82% of participants improved in creating homogenous options and avoiding problematic terms. However, post-test responses showed a wider interquartile range IQR(2–5) in grammatical structuring, indicating mixed improvements, while the IQR for the time allocated to MCQ development remained consistent at 4–5, with most participants agreeing it was sufficient.

Conclusion

This study concludes that dental faculty's MCQ writing skills will considerably improve by focused feedback and regular faculty development program. As a result, dental undergraduate assessments would be equipped with better alignment with learning objectives, non-flawed & precise questions to enhance overall learner's outcome.

Keywords

Education, Medical, Teaching, Continuing Medical Education, Faculty Development, Multiple Choice Questions.

Oral Presentation

Faculty Development

19. *The Effect of Faculty Development Program on Students' Success: A concurrent mixed method Study*

Dr. Javeria Usman

University of Lahore

Introduction

Faculty Development Programs (FDPs) are the pillars of teaching and learning in any institution as it ensures effective functioning of all departments. It enables faculty with skills such as teaching, conducting research, and advancing in the academia using sound developed techniques and fosters an environment that is conducive for students to perform exceptionally by uplifting educators' confidence and motivation.

Methodology

A Mixed method study was conducted at University of Lahore (UOL), from August 2024 to January 2025. After ERB clearance (ERC/40/24/07), the quantitative questionnaire was distributed among the students of 2nd, 3rd and 4th year MBBS; followed by Focus group discussions (FGDs) from the high scorers and low scorers of each class. SPSS version 24 was used for statistical analysis. Thematic analysis was done for qualitative data.

Result

Most participants agreed that faculty development initiatives improved learning experiences, including clearer objectives, better resources, and enhanced methodologies. However, "mentoring" was identified as an area for improvement

Conclusion

This study highlights the critical impact of faculty development programs on student achievement. Through the promotion of creative teaching methods, fair evaluation processes, and nurturing guidance, FDP has greatly improved the overall learning journey.

Keywords

Faculty development program (FDP), Personal growth of students, professional growth of students, students' success.

Oral Presentation

Inter Professional Education

20. *"Interprofessional Learning Experiences of International Healthcare Graduates During Clinical Rotations in the United Kingdom Hospitals". (Mehvish Adeel Dhahri*, Adeel Abbas Dhahri*, Kamran Hamid, Corina Milcoveanu, Hira Saleem, Prianna Menezes, Atiq-ur-R*

Mehvish Adeel Dhahri*, Adeel Abbas Dhahri*

Walsall Manor Hospital UK and Russells Hall Hospital UK

Introduction

Interprofessional learning (IPL) is fundamental for fostering collaboration and patient-centred care. International healthcare graduates (IHG) entering the United Kingdom (UK) system often face challenges like cultural differences and unfamiliar professional hierarchies. This study explored the experiences, perceptions, and challenges of IHGs regarding IPL during clinical rotations.

Methodology

A qualitative, survey-based design was employed. Surveys incorporating rating-scale items, open-ended questions, and semi-structured prompts were distributed to doctors and nurses across UK hospitals. Responses were analysed thematically to identify patterns, barriers, and enablers of IPL.

Result

From forty-one received responses, seven themes identified: varying understanding of IPL; facilitators like structured ward rounds and supportive colleagues; barriers including hierarchy, communication gaps, and limited training; development of communication, empathy, and teamwork skills; mixed influence on decision-making; recommendations for structured workshops and debriefings; and growing confidence through continued IPL.

Conclusion

IPL provides significant benefits for international graduates, yet experiences are influenced by prior training, workplace culture, and available support. Addressing barriers and implementing structured IPL initiatives can strengthen interprofessional collaboration, support professional integration, and enhance patient outcomes.

Keywords

Interprofessional learning, international healthcare graduates, Multidisciplinary collaboration, Qualitative research

Oral Presentation

Learning Environment

21. **New Med School, New Vibes: A DREEM Survey of Student Perceptions in Lahore.**

Prof Dr Naureen Omar
RLKUMC Lahore

Introduction

The educational environment is vital for effective learning, shaping students' attitudes, professional growth, and well-being. The Dundee Ready Educational Environment Measure (DREEM), widely used since 1997, helps identify challenges, evaluate curricular changes, and bridge gaps between actual and ideal learning environments, especially valuable for newly established medical colleges.

Methodology

Descriptive study was conducted in RLKU Medical College within six months. Validated DREEM Questionnaire was used for data collection from 200 students after consent. IRB approvals were taken. Scores were counted and interpreted.

Result

In the given sample 2% of students scored 0–50, indicating a very poor perception, 20% 51–100, suggesting plenty of problems. Majority of 78% scored 101–150, indicating a more positive than negative perception, while none scored in the highest category.

Conclusion

The findings suggest that the educational environment of this newly established medical college in Lahore is perceived as more positive than negative, though areas requiring improvement remain. Continuous evaluation and targeted interventions are recommended to further enhance the learning climate.

Keywords

DREEM, newly established, medical college, educational environment

Oral Presentation

Learning Environment

22. **"Authentic Learning & Assessment: Advancing Competency in Medical Education"**

Dr. Syed Hasan Shoaib

Queens Medical College, Kasur

Introduction

Authentic learning and assessment has been generally ignored area when it comes to Pakistan. We need to develop knowledge and skills of faculty in this area. The target group will be faculty of medical education.

Methodology

It will be a 3 hours workshop focusing on authentic learning and assessment. I will prefer to do it on site targeting particularly members of the faculty. I would prefer morning timings for the workshop.

Result

It is expected that the participants will be able to grasp the basic concept about authentic learning and assessment and will use it in their practice.

Conclusion

Trained at least 20 persons in the field of education in the area of authentic learning and assessment.

Keywords

Authentic learning, authentic assessment, competency

Oral Presentation

Nursing Education, Midwifery

23. **Quality of Midwifery Care at BHUs in Rural Punjab**

Dr. Nazia Ilyas

University of Child Health Sciences

Introduction

Quality of midwifery care (QoMC) is crucial to improving maternal health and reducing maternal mortality. However, the healthcare needs of childbearing women in rural areas have been ignored; the evidence shows the clear disparities between rural and urban data, and maternal death rates remain unacceptably high in these areas.

Methodology

This study was conducted at 96 BHUs selected randomly. A total of 328 women recipients of midwifery care participated in the study. The demographic characteristics of the participants and the study variables that measure the quality of midwifery care were presented through descriptive statistics. In-depth interviews were conducted with 20 midwives working at BHUs.

Result

The quantitative findings revealed that the level of QoMC for childbearing women at BHUs is at a moderate level (76.67%). Overall, of the structure and process of midwifery care components are at moderate levels with scores of 65.29 % and 71.60%, respectively. However, the qualitative findings revealed that the quality of midwifery care at BHUs was low.

Conclusion

This research provides a better understanding of gaps in QoMC and experiences of midwives providing midwifery care to childbearing women in rural areas. This study can be used to improve QoMC in Pakistan. The findings are also beneficial in designing on-job trainings and policymaking to improve QoMC.

Keywords

Quality, Midwifery, rural, Maternal, Care

Oral Presentation

Nursing Education, Midwifery

24. **Bridging the Divide: Exploring Nurses' Perspectives on the Theory-Practice Gap**

Yasmeen Afzal

Rehman College of Nursing

Introduction

The difference between what is learned in the classroom and what is implemented in real scenarios during clinical practice is known as the theory-practice gap. It is observed that implementing standard theoretical knowledge into practice positively influences patients' health outcomes. This study aims to assess nurses' perceptions regarding the theory-practice gap.

Methodology

A descriptive qualitative study design was employed for this investigation. Using purposive sampling, 12 interviews were conducted with nurses working in tertiary care hospitals and analyzed through thematic analysis.

Result

Nine categories emerged under the central theme of "Unveiling the Nurse's Lens: Insights into the Theory-Practice Gap" from the data. These categories include (1) nurses' awareness of the TPG, (2) the working environment as a reason for TPG, (3) the role of hospital management in TPG, (4) nurses' availability and expertise, (5) the education system and instructors' role in TPG, (6) healthcare system, (7) TPG associated with socio-cultural values, (8) consequences of TPG, and (9) recommendations for bridging TPG.

Conclusion

Nurses are aware of the theory-practice gap and perceive that it reciprocally affects patient outcomes. Therefore, it should be addressed through multi-dimensional approaches.

Keywords

Theory-practice gap, nurses' perception of theory-practice gap, factors leading to theory-practice gap, the impact of the theory-practice gap on patients' outcomes, strategies for bridging the theory-practice gap.

Oral Presentation

Nursing Education, Midwifery

25. *Nurse Educators' Perspectives and Practices of Teaching and Assessment of Affective Domain in the Pre-Licensure BSN Program in Pakistan*

Shabnam Shah

Shifa College of Nursing ,Shifa Tameer-e-Millat university Islamabad

Introduction

Safe and effective patient care demands nurses to have strong affective skills besides knowledge and psychomotor skills, as they have to deal with vulnerable, anxious, and critically ill patients. Despite its significance, the teaching and assessment of the affective domain often receive less attention in nursing curricula. This study aimed to identify and describe the perspectives and practices of nurse educators regarding the teaching and assessment of the affective domain in the pre-licensure BSN Program in Pakistan.

Methodology

A qualitative exploratory design was employed in this study. Seventeen nurse educators were recruited from three leading universities in Pakistan. Data were collected through in-depth interviews and analysis of documents related to teaching and assessment strategies of the affective domain. Interview data were analyzed following the steps of Creswell and Creswell. Rigor was ensured by following Lincoln and Guba's criteria of trustworthiness.

Result

Findings showed that most educators associated the affective domain with competencies like communication, professionalism, and empathy. However, their descriptions of these competencies varied greatly. Teaching was mostly informal and unstructured, while assessment was primarily through clinical evaluations and OSCEs. Educators felt these methods were not always fair due to their subjectivity. The review of documents confirmed that the affective domain was less emphasized compared to other domains.

Conclusion

Although nurse educators recognize the importance of the affective domain, it remains insufficiently defined and inconsistently taught and assessed across institutions. This lack of consistency in the interpretation of affective domain attributes affected its teaching and assessment. This study reveals that nurse educators need to develop a consensus on the definition and description of required attributes. Consequently, alignment is required among the learning outcomes, teaching, and assessment of these attributes in nursing education.

Keywords

Affective domain, BSN nursing , Curriculum alignment

Oral Presentation

Nursing Education, Midwifery

26. *Lived Experience of Parkinson's Patients after Deep Brain Stimulation Surgery*

Shima Sadat Aghahosseini

Lahore School of Nursing, The University of Lahore, Lahore, Pakistan

Introduction

Parkinson's disease (PD) and its surgical treatment impact multiple aspects of patients' lives. Understanding post-surgical experiences of PD patients is crucial for effective care. This study explores the lived experiences of individuals with PD following brain electrode implantation to support comprehensive, patient-centered treatment and improve quality of life.

Methodology

This qualitative study used interpretive phenomenology and was conducted in 2024. Twelve PD patients who underwent brain electrode implantation were selected. Data were collected through in-depth semi-structured interviews and analyzed using Van Manen's hermeneutic approach to explore their lived experiences and ensure data reliability.

Result

The average age of the participants was 62 years, with a range of ages from 55 to 72 years. Data analysis revealed three main themes: physical dimensions, psychological dimensions, and social dimensions.

Conclusion

The experiences of PD patients after brain electrode implantation show that the surgery affects physical, psychological, and social aspects of life. Understanding their challenges and concerns helps healthcare providers, mental health professionals, and policymakers gain deeper insight into the disease's impact and improve patient-centered care.

Keywords

Qualitative Research, Parkinson, Deep Brain Stimulation Surgery

Oral Presentation

Nursing Education, Midwifery

27. **Community Midwives: Gaps in Services, Education and Skills**

Musarrat Rani

Irshad Amtul Reproductive Health and Midwifery Services. International Confederation of Midwives. Midwifery Association of Pakistan.

Introduction

This study examined gaps in education, services, and skills of community midwives in Pakistan, evaluates alignment with WHO and ICM global midwifery standards, and proposes policy recommendations to improve and strengthen the education, services, and skills of community midwives to advance quality maternal care and midwifery leadership across underserved regions.

Methodology

A narrative policy analysis was conducted using peer-reviewed literature, WHO/ICM frameworks, and national reports on the Community Midwife Program (2006–2023). The review assessed both pre-service and in-service education, infrastructure, and governance structures across rural and urban Pakistan, while drawing comparative insights from global midwifery models.

Result

Analyzing the Pakistan Community Midwives Program through the updated WHO and ICM Framework Pakistan CMW program faces critical gaps in education, regulation, workforce deployment, and practice environments. The 24-month curriculum lacks ICM-recommended clinical depth, while uneven deployment and poor infrastructure hinder service delivery. Regulatory inconsistencies and limited career pathways further weaken effectiveness. Comparative models from Indonesia and Bangladesh highlight how alignment with WHO and ICM standards can enhance maternal health outcomes. Policy recommendations are to revamp Pakistan's CMW program using the Blue Ocean Strategy: eliminate outdated systems, reduce inefficiencies, raise skills and trust, and create tech-enabled, midwife-led rural care, supported by curriculum reform, regulation, and incentives.

Conclusion

Pakistan's Community Midwife Program holds transformative potential, but only if restructured through global alignment and strategic innovation. The WHO and ICM frameworks offer a robust foundation for diagnosing systemic gaps in education, regulation, and service delivery. Meanwhile, the Blue Ocean Strategy provides a visionary path to reimagine midwifery as a value-driven solution in underserved regions. By combining evidence-based standards with creative policy tools, Pakistan can empower midwives to lead a new era of maternal health equity.

Keywords

Community Midwives, World Health Organization WHO, Maternal Mortality, Infant Mortality ICM, SDG

Oral Presentation

Nursing Education, Midwifery

28. *Effect Of Nurse-Led Intervention On Knowledge And Practice Of Nurses In Preventing Needle Stick Injuries*

Syed Abdullah

Ziauddin University Hospital

Introduction

Needle-stick injury is an occupational hazard, and it presents a constant risk of exposure to bloodborne pathogens. The increasing prevalence of needle stick injuries among nurses leads to the need to pay attention to improving their knowledge and practice by using nurse-led educational intervention.

Methodology

This quasi-experimental study was conducted on 152 nurses working in a private tertiary care hospital in Karachi. Study participants were selected using a consecutive sampling technique and were divided into two groups such as interventional and a control group. The intervention included teaching and hands-on practice sessions. Before and after the intervention, the nurses of both groups filled out the validated questionnaire. The data was analyzed using SPSS software version 24. Mann-Whitney U test and Wilcoxon signed-rank test were used to analyse the data. A p-value ≤ 0.05 was considered a level significance.

Result

The majority (85.5%) of the study participants were females and their median and IQR age was 25) years in the control group. In interventional group, 73.7% of the participants were females and their median age was 25 years. Approximately two-thirds 51 (67.1%) of the study participants had a low and 25 (32.9%) had a moderate level of knowledge in the pre-intervention phase. After intervention, 57 (75%) of the study participants knowledge reported as a high and it is found statistically significant (p-value<0.001).

Conclusion

This study met its basic goal of evaluating how a nurse-led intervention affected nurses' adherence to recommended precautions. Nurse-led intervention education programs on nurses' knowledge and practice in preventing needle stick injuries were found to be effective. The results of the study showed that the training module's deployment was effective in raising nursing students' awareness of and proficiency with needle sticks and other sharp injuries.

Keywords

Nurse-led intervention, Nurse, Prevention, Knowledge, Practice, Needle Stick Injury

Oral Presentation

Social Accountability

29. **Beyond the Drill: The Importance of Soft Skills in Dental/Medical Education**

Dr Muhammad Azeem

de'Mont Lahore

Introduction

To be effective, dental graduates need both clinical expertise and vital soft skills. This presentation will emphasize the critical role of soft skills—such as communication, empathy, and professionalism—in achieving successful patient outcomes. We will explore the challenges and importance of integrating these skills into the dental curriculum.

Methodology

This perspective paper synthesizes existing research and expert consultation to highlight key soft skills required in dentistry. It examines current teaching and assessment methods, identifies significant challenges like subjective evaluation, and suggests a more structured approach to embedding these skills within the broader educational framework.

Result

The study found that a combination of soft and hard skills is crucial for success. Key soft skills include communication, problem-solving, and teamwork. However, dental schools face challenges in teaching and evaluating these skills due to a lack of standardized curricula and objective assessment tools.

Conclusion

Integrating soft skills into dental education is essential for improving trainee competency and patient care. A multifaceted approach is needed to address current instructional and assessment challenges. Future research should focus on developing standardized evaluation methods to ensure a consensus on measuring the successful acquisition of these critical skills.

Keywords

Medical Education; Dental Education; Soft Skills Communication Skills; Professionalism; Problem-Solving.

Oral Presentation

Social Accountability

30. **Stigma to Strength: Nurse-led Education on Menstruation among School-Age Girls**

Irum Shahzadi

Riphah College of Nursing, Islamabad

Introduction

Menstruation remains stigmatized in Pakistan, with myths, taboos, and limited information fostering shame, secrecy, and poor hygiene among adolescent girls, leading to absenteeism and low self-esteem. This study assessed a culturally sensitive nurse-led education session's effectiveness in improving schoolgirls' menstrual knowledge, attitudes, and practices (KAP) in Rawalpindi.

Methodology

A quasi-experimental pre-test/post-test design included 184 schoolgirls (≥ 12 years) from two schools, with 164 completing both assessments using a validated KAP questionnaire. Descriptive statistics summarized demographics. Paired t-tests analyzed pre- and post-intervention KAP score differences, while Spearman's correlation assessed consistency of changes across domains.

Result

Most participants were 13–15 years old from middle-income Muslim families with moderate parental education. Post-intervention, knowledge, practice, and attitude improved significantly ($p = .000$). Correlations were weak for knowledge and attitude, moderate for practice. Effect sizes showed small-moderate impact on knowledge and moderate-large effects on practice and attitude.

Conclusion

The nurse-led educational intervention significantly enhanced menstrual literacy, improved hygiene practices, and reduced stigma among adolescent girls.

Keywords

Nurse-led education, Menstrual health, Adolescent girls

Oral Presentation

Stress, wellbeing, and burnout

31. *The Digital Paradox: Influence of Medical Students' Digital Device Usage on Their Self-Regulated Learning Strategies*

Prof Dr Ansa Rabia

University of Lahore/ CMH Lahore Medical College

Introduction

Effective self-directed learning (SDL) and time management are vital for medical students. While self-regulation learning skills promote deeper learning and autonomy, unregulated use of digital devices can cause distraction and undermine the effort. Therefore, the study investigates relationship between digital device usage and self-regulated learning strategies among undergraduate medical students.

Methodology

An analytical-cross-sectional-survey was conducted from May–June-2025 among undergraduate-medical-students of CMH-Lahore-Medical-College, Lahore, through convenience-sampling. Questionnaire collected demographics, daily digital-device-use (DDU), and SDL-time. Questions assessing self-regulated learning were adopted from subscales (7-point-Likert-scale) Metacognitive-Self-Regulation (MSR) and Time-&-Study-Environment (TSE) of a validated tool, Motivated-Strategies-for-Learning-Questionnaire (MSLQ). Data was analyzed Spearman's ρ and Kruskal-Wallis test.

Result

Among 432-responses analyzed, 250-(57.9%) students spent 1–4 hours/day on SDL and 205-(47.5%) on DDU. MSR scores improved with advancing year-of-study ($p = 0.034$). DDU correlated negatively with MSR ($p = 0.045$) and TSE ($p < 0.01$), SDL-time correlated positively with MSR ($p < 0.01$) and TSE ($p < 0.01$).

Conclusion

Self-directed learning enhances metacognitive skills in medical students, while excessive digital device use deters them. Medical educators should promote balanced learning habits regarding DDU.

Keywords

Digital, Learning, Undergraduate, Metacognition, Social Media

Oral Presentation

Stress, wellbeing, and burnout

32. ***Mental Health Challenges in Medical Education: Analyzing Stress and Burnout with the MSSQ-20***

Mubashra Iqbal

University Medical and Dental College, Faisalabad

Introduction

Medical and dental students face significant academic and psychological pressures that can adversely affect their well-being and performance. This study assessed the severity and sources of stress among undergraduate students using the Medical Student Stressor Questionnaire (MSSQ-20).

Methodology

A cross-sectional study was conducted with 218 undergraduate medical and dental students. The MSSQ-20 measured stress across six domains: academic, teaching and learning, intrapersonal/interpersonal, social, drive and desire, and group activities. Responses were recorded on a five-point Likert scale, and mean scores were analyzed.

Result

Academic-related stressors were the most significant, with 39.9% of students reporting severe stress due to a heavy workload. Stressors related to teaching and learning environments were the second highest contributors. Intrapersonal, interpersonal, and social stressors had moderate and comparable impacts. Group activity-related stressors were less concerning. Drive and desire-related stressors elicited minimal stress, indicating sustained motivation. Notably, 29.9% of students reported no stress related to “parental wish to study medicine,” the least stressful item.

Conclusion

Academic and instructional demands dominate student stress profiles. Addressing these through targeted academic and psychological support is critical to reduce stress and improve student resilience.

Keywords

Academic stressors, Medical Student Stressor Questionnaire (MSSQ-20), student well-being.

Oral Presentation

Stress, wellbeing, and burnout

33. *Assessment of knowledge regarding sources of stress and coping behavior among nursing students*

Tehreem

Introduction

Clinical training is a critical component of nursing education because it bridges theoretical learning with practical skills development. However, clinical training environments are often more challenging and stressful than classroom settings, placing significant demands on students.

Methodology

A cross-sectional survey design was adopted, utilizing simple random sampling. Data were collected using a structured questionnaire that incorporated the Perceived Stress Scale and the Coping Behavior Inventory. A total of 230 nursing students in clinical training participated. The data were analyzed using descriptive statistics to determine stress levels, common stressors, and prevalent coping behaviors..

Result

The mean perceived stress score among participants was 2.61 (SD $\pm$ 0.37) on a 0–4 scale, indicating a moderate level of stress overall. The most intense stressors reported were related to caring for patients (mean score 2.85, SD $\pm$ 1.21) and lack of professional knowledge and skills (mean 2.80, SD $\pm$ 1.22). In terms of coping, the overall mean coping score was 2.43 (SD $\pm$ 0.59). The most frequently employed coping strategy was avoidance (mean 2.98, SD $\pm$ 1.50), indicating that many students tended to evade or withdraw from stressful situations as a way to cope.

Conclusion

The findings suggest that nursing students in clinical practice experience considerable stress, especially from direct patient care responsibilities and feeling underprepared in terms of knowledge and skills. While students are aware of various coping strategies, they most commonly resorted to avoidance tactics.

Keywords

Perceived stress scale, coping behavior inventory, nursing students, clinical training

Oral Presentation

Student engagement

34. **Emotional Intelligence and Self-Directed Learning: Enhancing Student Preparedness in Medical and Allied Health Sciences**

Sara Hussain Gardezi

University of Child Health Sciences, Children Hospital

Introduction

Self-Directed Learning (SDL) is vital for healthcare professionals, and Emotional Intelligence (EI) plays an important role in facilitating autonomous learning behaviors along with critical thinking. Understanding the relationship between EI and SDL can help educators and policymakers on developing targeted interventions to produce lifelong learners.

Methodology

A cross-sectional survey design was used to recruit 261 medical students and 249 AHS students. Online survey was distributed through email and social media platforms, including the Schutte Self-Report Emotional Intelligence Test (SSEIT) Scale and Self-Directed Learning Readiness Scale (SDLRS). Descriptive statistics and inferential statistics (Pearson's correlation coefficient, regression analysis, and independent samples t-test) was used for data analysis.

Result

The current study showed that 65% of students had average EI, whereas 27% had high EI. However, 73% of students were found to have high SDLR. Female and medical students had significantly higher EI and SDLR. Pearson's correlation "r" between the two parameters shows a strong positive correlation with statistical significance (p-value <0.001).

Conclusion

This study has provided an insight into the relationship between EI and SDL, informing educators and policymakers on the importance of developing EI and SDL skills. The findings of the current study will contribute to the development of training modalities to improve educational outcomes and patient care.

Keywords

Self-directed learning, Emotional intelligence, Self-directed learning readiness, Allied Health Sciences

Oral Presentation

Student engagement

35. **Socio-Demographic Differences in Trust Towards AI in Medical Education**

Dr. Ayesha khan

De'montmorency College of Dentistry

Introduction

Artificial intelligence is reshaping medical education globally, but its adoption depends on trust. In Pakistan, traditional teaching methods, faculty shortages, and cultural attitudes may affect perceptions differently. This study explores how socio-demographic factors influence trust in AI among medical students and faculty.

Methodology

A cross-sectional analytical study was conducted at Punjab Dental and Mayo Hospitals, Lahore (Feb–June 2025). Eighty-six participants, including undergraduates, postgraduates, and faculty, completed validated questionnaires. Data were analyzed using SPSS v25 with t-tests, ANOVA, and regression to evaluate AI trust across socio-demographic groups

Result

Faculty showed highest trust (4.12 ± 0.50). Prior AI exposure significantly improved confidence ($p=0.002$). Age positively correlated with trust ($r=0.276$, $p=0.011$). No significant gender differences were observed. Findings highlight the crucial role of prior experience and professional status in shaping AI trust.

Conclusion

Trust in AI among Pakistani medical education stakeholders varies by experience and age but not gender. Faculty and those with AI exposure exhibit higher acceptance. Strategic AI integration should focus on early exposure, faculty mentorship, and inclusive curricula to bridge trust gaps.

Keywords

Artificial intelligence, Medical education, Trust, Socio-demographics,

Oral Presentation

Student support (Mentoring, Counseling)

36. **Feedback Literacy among Undergraduate Dental Students: A Cross-Sectional Study Across Two Institutions**

Palwasha Babar
FMHCMD

Introduction

Feedback literacy (FL) is the ability to seek, interpret, and apply feedback. It is critical for dental students' clinical competence and professional growth. Despite its importance, empirical research on feedback literacy in dental education remains limited.

The objective was to assess FL among undergraduate dental students from two private dental institutions in Lahore

Methodology

A cross-sectional study was conducted at two private dental colleges in Lahore. A structured questionnaire including the validated Student Feedback Literacy Scale (SFLS) was used to collect data. Participants included 245 Bachelor of Dental Surgery (BDS) students. Statistical analyses were performed using SPSS v27 and RStudio (v4.4.3) which included descriptive statistics, ANOVA, and post-hoc Tukey test.

Result

Participants demonstrated high overall feedback literacy (mean score: 87.35/120). The appreciation domain scored highest (15.16/20), while eliciting scored lowest (14.20/20), indicating reluctance to seek feedback. Only 25.3% reported to have received formal training on feedback. Verbal feedback was reported as the primary mode (51.8%). Perceived usefulness of feedback significantly predicted literacy scores ($p = 0.02$), whereas academic year did not ($p = 0.06$).

Conclusion

This study shows that while dental students value feedback and report high self-perceived feedback literacy, they are less confident in seeking it. Lower scores in the eliciting domain highlight the need for structured feedback training to support self-directed and lifelong learning.

Keywords

Feedback (learning), dental education, dental students, attitudes, feedback literacy, student feedback literacy scale (SFLS)

Oral Presentation

Student support (Mentoring, Counseling)

37. **Effectiveness Of A Mindfulness-Based Stress Reduction Program On Burnout Among Undergraduate Dental Students At A Dental College In Islamabad, Pakistan: An Interventional Study**

Dr. Ayesha Fazal

School of Dentistry, Shaheed Zulfiqar Ali Bhutto Medical University, Islamabad

Introduction

Mindfulness-based stress reduction therapies can help reduce burnout levels among medical and dental students. The study aims to determine the frequency of burnout among dental students and to assess the effectiveness of Mindfulness-Based Stress Reduction (MBSR) interventions in reducing burnout among these students at the School of Dentistry, Shaheed Zulfiqar Ali Bhutto Medical University (SZABMU), Islamabad.

Methodology

This study was conducted among dental students at the School of Dentistry, SZABMU, over 7 months (from June 2023 to January 2024) in two phases. The first phase was an observational study in which the frequency of burnout was measured among 160 participants, followed by an evaluation of the effectiveness of Mindfulness-based Stress Reduction (MBSR) interventions in reducing burnout among 128 dental students. The burnout (BO) levels were determined by the descriptive frequencies, and paired t-tests were used to compare the pre- and post-intervention results.

Result

In the first phase of the study, out of 160, the mean $\pm$ SD for emotional exhaustion was found to be 26.96 $\pm$ 1.71, indicating moderate levels of burnout. Meanwhile, the mean $\pm$ SD for cynicism and professional efficiency was 18.29 $\pm$ 3.69 and 33.3 $\pm$ 2.59, respectively, indicating higher levels of burnout. Out of the total, 149 students possessed moderate levels of BO. While 150 and 127 students had high levels of cynicism and academic efficiency (the scores for which are inverted), respectively. In the second phase of the study, 128 students were recruited in the intervention program. There were statistically significant differences between the means of pre- and post-intervention burnout levels. The pre-intervention scores of emotional exhaustion, cynicism, and academic/ professional efficiency were higher, which were decreased after the intervention. The academic efficiency scores also decreased as the scores were inverted at the start of the study.

Conclusion

High levels of burnout among dental students were noted, with the frequencies of emotional exhaustion being moderate, while the frequencies for cynicism and academic inefficiency were high. Moreover, it was noted that MBSR exercises had positive effects on the BO in the identified cases since the interventional sessions decreased burnout.

Keywords

Academic Efficiency (AE), Burnout (BO), Mindfulness-based stress reduction (MBSR) exercises

Oral Presentation

Workplace-based Learning and Assessment

38. **Level of job satisfaction among registered nurses in tertiary care hospitals Lahore**

Ruth Alvin

College of nursing, Children hospital lahore

Introduction

This study looks at the level of job satisfaction in nurses of a Tertiary Care Hospital in Lahore and how certain issues affect the job satisfaction of the nurses. To achieve a better workforce, performance, and quality of care provision, nurse satisfaction is needed. The primary purpose of this research study is to determine the overall job satisfaction of nurses and determine the predominant role factors that result in satisfaction with their employment environment.

Methodology

This study was conducted using a descriptive cross sectional design. Data was obtained by the use of semi-modified structured questionnaire that was comprised of two parts: socio-demographic data and job satisfaction scale of 15 items expressed in the 5-point Likert format. A total of 270 questionnaires were distributed. The data were analyzed by SPSS, descriptive statistics and reliability testing were used. The job satisfaction scale showed high internal consistency as Cronbach's Alpha was 0.798.

Result

The results indicated that 69.5 percent of nurses experienced moderate job satisfaction, 29.4 percent high level job satisfaction, and 1.1 percent of nurses exhibited a low level of satisfaction. The factors that led towards satisfaction were pleasant working experience, good communication and skill building. Nevertheless, the main reasons of dissatisfaction were an excessive job load, poor promotion prospects, absence of recognition and bureaucracy.

Conclusion

The present study enlightens on the existing conditions of job satisfaction in nurses and the areas that need to be improved. The non-probability sampling along with the selection of a single healthcare institution in which the data should be collected renders the findings limited, not counting the fact that the results cannot be generalized.

Keywords

Job Satisfaction, Nurses, Tertiary Care Hospital, Related Factors.

Oral Presentation

Workplace-based Learning and Assessment

39. **Final-Year MBBS Students' Perspectives on the Mini-CEX: Strengths and Limitations in a Qualitative Study**

Sehar Zahid

University of Lahore

Introduction

Workplace-based assessments such as the Mini-Clinical Evaluation Exercise (Mini-CEX) are increasingly used in undergraduate clinical training to evaluate real-time performance and provide formative feedback. However, students' perspectives on its implementation and educational value remain underexplored, particularly in South Asia.

Methodology

A qualitative study design was employed using two focus group discussions with final year MBBS students (n = 12) from a tertiary care teaching hospital. Data were transcribed verbatim and analysed using Braun and Clarke's thematic analysis framework. Ethical approval was obtained, and participants were selected through purposive sampling.

Result

Six key themes emerged: (1) overall experience of Mini-CEX, (2) educational value, (3) feedback dynamics, (4) challenges and limitations, (5) perceptions of validity and fairness, and (6) recommendations for improvement. Students appreciated the structured learning and real-time feedback but reported concerns regarding feedback consistency, assessor variability, and time constraints

Conclusion

Mini-CEX was perceived as a valuable formative assessment tool, enhancing clinical, communication, and reasoning skills. However, improvements in scheduling, standardization, and faculty development are essential to optimize its educational impact.

Keywords

Mini-CEX, undergraduate medical education, workplace-based assessment, formative feedback, student perceptions, qualitative research, thematic analysis.

Oral Presentation

Workplace-based Learning and Assessment

40. *Evaluating the Effectiveness of a Faculty Development Program in Enhancing the Quality of Multiple-Choice Questions: A Quantitative Study*

Noor Ijaz
UCMD

Introduction

Multiple choice questions (MCQs) are widely used in medical education for their objectivity and efficiency. However, poorly constructed questions can compromise the validity and reliability of the assessments. Faculty development programs have emerged as a key strategy to improve the quality of MCQs. This study aims to evaluate the impact of structured FDPs on the MCQs construction using objective metrics and participant's feedback.

Methodology

This observational study was conducted over three years period (2022 - 2024) at University College of Medicine & Dentistry. Three workshops on MCQs development were organized for the faculty. Feedback was collected through structured forms using 5- point Likert scale. Additionally, MCQs submitted before and after the workshops were analyzed for item flaws, difficulty & discrimination indices. The study also evaluated the impact of training using the Kirkpatrick Model. The data was computed and analyzed using SPSS version 26.0. The Shapiro Wilk test determined the normality of the data. P value <0.05 was considered as significant.

Result

A significant reduction in test-wiseness flaws (logical cues from 12.9% to 1.3%, $p < 0.001$) and irrelevant difficulty (extraneous details from 7.6% to 0.9%, $p < 0.001$) was observed. The difficulty index shifted towards moderate-level items and the discrimination index showed a trend towards improved item quality. Feedback from the participants revealed increasing satisfaction across workshops, with the highest ratings in workshop 3 (2024). Instructor expertise remained consistently rated above 87.5%.

Conclusion

Incorporation of multiple structured faculty development workshops lead to measurable improvements in MCQ quality. These training sessions can enhance the reliability and validity of medical assessments, benefiting both educators and learners.

Keywords

Faculty, Multiple choice questions, Program evaluation, Faculty Development, Assessment

Oral Presentation

Workplace-based Learning and Assessment

41. **Final-Year MBBS Students' Perspectives on the Mini-CEX: Strengths and Limitations in a Qualitative Study**

Syed Abdullah Mazhar
University of Lahore

Introduction

Workplace-based assessments such as the Mini-Clinical Evaluation Exercise (Mini-CEX) are increasingly used in undergraduate clinical training to evaluate real-time performance and provide formative feedback. However, students' perspectives on its implementation and educational value remain underexplored, particularly in South Asia.

Methodology

A qualitative study design was employed using two focus group discussions with final year MBBS students (n = 12) from a tertiary care teaching hospital. Data were transcribed verbatim and analysed using Braun and Clarke's thematic analysis framework. Ethical approval was obtained, and participants were selected through purposive sampling.

Result

Six key themes emerged: (1) overall experience of Mini-CEX, (2) educational value, (3) feedback dynamics, (4) challenges and limitations, (5) perceptions of validity and fairness, and (6) recommendations for improvement. Students appreciated the structured learning and real-time feedback but reported concerns regarding feedback consistency, assessor variability, and time constraints.

Conclusion

Mini-CEX was perceived as a valuable formative assessment tool, enhancing clinical, communication, and reasoning skills. However, improvements in scheduling, standardization, and faculty development are essential to optimize its educational impact.

Keywords

Mini-CEX, undergraduate medical education, workplace-based assessment, formative feedback, student perceptions, qualitative research, thematic analysis.

Oral Presentation

Workplace-based Learning and Assessment

42. **Validity and Reliability of Multiple Mini Interviews (MMIs) for the recruitment of Registered Qualified Nurses**

Dr. Muhammad Suleman Sadiq Hashmi
Shalamar Medical and Dental College, Lahore

Introduction

The Multiple Mini Interview (MMI) is a structured interview method consisting of multiple stations designed to assess candidates' non-cognitive competencies. While widely used in student selection for healthcare education, its utility in job recruitment, particularly for registered nurses, has been minimally explored. This study aimed to evaluate the reliability and validity of the MMI as a tool for recruiting registered nurses in a tertiary care hospital in Karachi, Pakistan.

Methodology

An 8-Station MMI was developed based on a blueprint derived from standards of the Pakistan Nursing Council and International Accreditation bodies. Each station assessed specific non-cognitive competencies such as communication, problem-solving, and teamwork. The MMI stations were evaluated using structured scoring sheets, and examiners underwent training to ensure consistent assessment. Data analysis included descriptive statistics and Cronbach's alpha to measure reliability. Face and content validity were ensured through expert reviews.

Result

The MMI demonstrated strong reliability with an overall Cronbach's alpha of 0.796 and excellent internal consistency across stations (Cronbach's alpha ranging from 0.88 to 0.95). Face and content validity were confirmed through expert evaluation.

Conclusion

The MMI proved to be a reliable and valid method for nurse recruitment, offering an objective approach to assess non-cognitive competencies while minimizing biases. These findings support its broader application in healthcare recruitment practices.

Keywords

Multiple Mini Interview, Non-cognitive Abilities, Registered Nurses, Recruitment, Reliability, Validity

Oral Presentation

Workplace-based Learning and Assessment

43. **Bridging the gap in dental education: A call for pre-clinical university examination in Pakistan**

Fariha Naz

University College of Medicine and Dentistry

Introduction

The presentation will summarize the key facts highlighting the importance of structured training and university-based examinations for phantom head labs in Pakistan.

It will be based on the data collected from dental institutions in Pakistan and 2 foreign countries.

The presentation will address the following key points:

- Current Pre-clinical exam practices in foreign countries
- Current pre-clinical exam practices in Pakistan
- Outcomes of various training programs
- Why is it important to have university-level examination for phantom head exercises?
- My proposal for an exam structure
- Conclusion

Methodology

A Self- designed questionnaire was distributed through google forms to Operative Dentistry faculty members and students of various institutions in Pakistan and Saudia Arabia. Questions were designed to elicit information regarding skills taught in phantomhead labs, designated hours, staff student ratio, infra-structure, level of confidence acquired after pre-clinical operative training, preparedness for clinical training and assessment levels. Data was entered and analyzed using MS excel sheet. Descriptive statistics were employed

Result

Faculty members from 37 institutes of Pakistan, 12 of KSA participated in the study. 189 students from institutes of Pakistan, 35 from KSA and 24 from Palestine gave responses. Most of the institutes (33%) had allocated 6 hours of training per week for pre-clinical lab. In Pakistan, 28% and in KSA 0% institutes had more than 12:1 staff student ratio. 42% of students complained of inadequate time to practice. Unit to student ratio was 1:1 for 90% of KSA and 53% of Pakistani students. 92% of KSA faculty and 50% of Pakistani faculty believed that their students were well prepared for starting clinical work. 41% of Saudi and There was university based summative skill lab assessment for 100% of Saudi and 33% of Pakistani institutes.

Conclusion

More structured pre-clinical training and assessment system and better infrastructure in Saudi Dental colleges as compared to dental institutes in Pakistan.

There is need of time to start structured phantom-head lab training and university based pre-clinical operative dentistry examination for students.

Keywords

Pre-clinical operative training, phantom-head lab training in Pakistan, Pre-clinical assessment

Oral Presentation

Workplace-based Learning and Assessment

44. ***Gender Discrimination Among Male and Female Nurses and Its Impact on Self-Esteem and Professional Identity in Healthcare Setting in Sialkot***

Zainab Suleman

College of Nursing Khuwaja Mohammad Safdar Medical College, Sialkot

Introduction

Gender discrimination poses a significant challenge for nurses, affecting their self-esteem and professional identity in a competitive work environment. Currently, there is limited literature addressing these issues among nurses in Pakistan. The perception of self-worth among nurses is crucial for providing effective patient care.

Methodology

The study included 275 nurses from the Allama Iqbal Memorial Hospitals in Sialkot and Islam center Hospital sialkot , Punjab. The sample comprised 15% male nurses and 85% female nurses. Data were collected using an adapted questionnaire, and a convenience sampling technique was utilized. Data analysis was performed using SPSS version 27.0.

Result

The study found a negative correlation between gender discrimination and professional identity. Additionally, there was a positive correlation between gender discrimination and self-esteem, with a p-value of <0.01 , indicating a statistically significant relationship. Self-esteem also showed a positive correlation with professional identity, with a p-value of <0.01 , highlighting the significance of these variables. Gender discrimination adversely affects the self-esteem of nurses, which, in turn, impacts their professional identity

Conclusion

This study highlights the challenges faced by nurses in Pakistan. Professional identity and self-esteem are essential for the functioning of nurses, and both are influenced by gender discrimination. There is an urgent need for government policies, institutional support, and media interventions to address these issues. Proper programs and training sessions should be developed to mitigate the negative impact of these factors on nurses' professional practice. More research is needed to explore these topics and understand their specific dynamics within the context of Pakistan's culture.

Keywords

Nursing profession, gender discrimination, professional identity, self-esteem, nursing role.

Oral Presentation

Workplace-based Learning and Assessment

45. *Mini-Cex As A Learning Tool For Dental Students: Exploring Satisfaction And Reflections*

Dr Asma Siddiqui

Karachi Metropolitan University

Introduction

The Mini-Clinical Evaluation Exercise (Mini-CEX) is a widely endorsed workplace-based formative assessment tool in health professions education. It has been shown to enhance clinical competence and feedback quality in medical training. However, its application within dental undergraduate curricula, particularly in contexts such as Karachi, remains underexplored.

Methodology

A convergent parallel mixed-methods study was conducted at Karachi Medical and Dental College involving 41 final-year Bachelor of Dental Surgery students. Quantitative data included Mini-CEX domain scores (interviewing, examination, professionalism, judgment, counseling, organization, overall competence), student satisfaction ratings, and time spent on observation and feedback during two sequential encounters. Paired t-tests assessed changes between encounters. Qualitative data came from reflective essays submitted post-assessment, analyzed via inductive six-phase thematic analysis by Braun and Clarke (2006). Rigorous coding and consensus procedures ensured credibility.

Result

Quantitatively, statistically significant improvements were observed in Medical Interviewing Skills (mean 4.5 → 4.9, $p = 0.034$), Humanistic Qualities/Professionalism (4.4 → 5.0, $p = 0.002$), and Overall Clinical Competence (4.6 → 5.0, $p = 0.028$). Student satisfaction rose significantly from 5.5 ± 0.63 to 7.2 ± 0.73 ($p = 0.0001$). Observation and feedback durations both reduced dramatically (Observation: $21.7 \pm 2.4 \rightarrow 7.33 \pm 0.94$ mins; Feedback: $14.3 \pm 2.5 \rightarrow 3.48 \pm 0.73$ mins; $p = 0.0001$), suggesting increased efficiency. Thematic analysis revealed five major themes representing the students' experiences: Emotional Tension as a Gateway to Learning, Feedback as a Catalyst for Clinical Confidence, Experiential Learning Bridging Theory and Practice, Perceived Faculty Attitudes Shaping Student Engagement, and Identity Formation and Professional Growth.

Conclusion

: The implementation of Mini-CEX in undergraduate dental education was associated with significant gains in specific clinical competencies, high student satisfaction, improved feedback efficiency, and deep reflective learning that supported professional identity development. These findings underscore Mini-CEX's dual role as both an evaluative and formative educational tool.

Keywords

Mini-CEX, Dental education, Formative assessment, Clinical competence, Reflective learning, Mixed-methods

Oral Presentation

Workplace-based Learning and Assessment

46. ***Mapping Nursing Care Plan Deficiencies: A Mixed-Methods Approach to Optimize Educational Strategies for Nursing Student Competency Development***

Nageena Nargis

Riphah College of Nursing, Islamabad

Introduction

Nursing care plans (NCPs) support clinical reasoning, evidence-based practice, and patient safety, yet students struggle with assessments, diagnoses, goal-setting, and evaluations. This gap highlights theory–practice disconnect. This study aimed to identify documentation deficiencies and explore factors affecting student performance to guide targeted educational strategies for improving NCP competence.

Methodology

An explanatory sequential mixed-methods design was used. Quantitatively, 120 nursing care plans were evaluated with a VIPS-based rubric across five components, analyzing differences by year and clinical area. Qualitatively, three student focus groups and ten faculty interviews were thematically analyzed. Findings were integrated during interpretation for comprehensive insights.

Result

Quantitative findings showed deficits in risk diagnosis (2%), time-bound goal-setting (34%), and outcome evaluation (4%), with variations across academic levels and settings (excluding pediatrics). Student themes included diagnostic challenges, theory–practice gap, skill growth, support, emotions, and technology. Faculty themes highlighted teaching barriers, curriculum gaps, assessment errors, development needs, and integration issues.

Conclusion

Both student learning gaps and systemic educational barriers contribute to poor care plan documentation. Effective improvement requires curriculum reforms, faculty development, and stronger clinical-academic alignment.

Keywords

Nursing care plans, Theory–practice gap, Clinical education

Oral Presentation

Others

47. **Exploring Undergraduate Dental Students' Experiences With Paperless Assessment: A Qualitative Study**

Uswa Qaiser

University College of Dentistry, UOL

Introduction

As education embraces digital innovation, paperless assessments are replacing traditional exams, promoting sustainability and efficiency. Using LMS and AI-powered tools, these systems offer benefits but also pose challenges like student anxiety and technical issues. This study explores BDS students' perceptions to guide effective digital assessment integration in health professions education.

Methodology

This study employed a qualitative exploratory study design, and it explored BDS students' views on paperless assessments at the University of Lahore. A total of 18 students from 1st, 2nd, and 3rd year, 6 each, participated in Zoom-based focus groups. Data was analyzed using thematic analysis.

Result

A total of 5 broader themes were identified after coding and analyzing the transcripts. The themes highlighted the overall experience with paperless assessments, perceived benefits, challenges associated with paperless assessments, impact on confidence and performance, and suggestions for improvement.

Conclusion

This study highlighted that students not only recognize the benefits of paperless assessments but also identify the challenges they experienced due to this shift.

Their constructive feedback suggests that they are willing to embrace paperless assessments if the institution provides adequate infrastructure, support, and training.

Keywords

digital assessment, paperless exams,

Oral Presentation

Others

48. *The Digital Paradox: Influence of Medical Students' Digital Device Usage on Their Self-Regulated Learning Strategies*

Khaloud tariq

UOL

Introduction

Self-regulated learning promotes deeper learning and autonomy however, unregulated use of digital devices can cause distraction and undermine the effort. Therefore, the study investigates the relationship between digital device usage and self-regulated learning strategies among undergraduate medical students.

Methodology

An analytical cross-sectional survey, conducted from May-June 2025 among undergraduate medical students of CMH Lahore Medical College through convenience sampling. The questionnaire collected demographics, digital device use, and self-directed learning (SDL) time. Evaluation of self-regulated learning was adopted from subscales of Motivated Strategies for Learning Questionnaire (MSLQ). Data was analysed through Spearman's ρ and Kruskal-Wallis test.

Result

Among 432 students, 57.9% spent 1–4 hours on SDL and 47.5% on devices. Devices were mainly used for social media (60%). Mean score of Metacognitive Self-Regulation (MSR) was 4.26 ± 0.80 and Time & Study Environment (TSE); 4.46 ± 0.86 . MSR rose with year ($p=0.03$). Higher device use predicted lower for MSR ($p=0.04$) and TSE ($p < 0.01$).

Conclusion

Undergraduate medical students predominantly used devices for non-academic purposes. Self-regulated learning was moderate. MSR improved with seniority, while TSE remained stable. Greater device use related to poorer self-regulated learning, whereas more SDL time related to better self-regulated learning. Prioritizing structured SDL over social media may strengthen learning.

Keywords

Digital, Learning, Undergraduate, Metacognition

Oral Presentation

Others

49. *Exploring Undergraduate Dental Students' Experiences With Paperless Assessment: A Qualitative Study*

Shanzay Tariq

The University of Lahore

Introduction

The COVID-19-driven shift to digitalization has advanced paperless assessments, offering efficiency, sustainability, and global alignment. Yet, in Pakistan, barriers such as limited digital literacy, technical issues, and inadequate training persist. With little qualitative evidence on dental students' experiences, this study explores their perceptions, challenges, and recommendations to inform improved assessment practices.

Methodology

An exploratory qualitative study at the University of Lahore recruited 1st–3rd year BDS students through purposive sampling (six per year). Focus group discussions, guided by a validated interview schedule, were conducted. Ethical approval and consent were obtained. Data were thematically analyzed using Braun and Clarke's framework.

Result

Students highlighted benefits of digital assessments, including efficiency, convenience, sustainability, and reduced handwriting bias. Challenges involved technical disruptions, login issues, digital fatigue, and limited orientation. Emphasis was placed on the need for reliable infrastructure, faculty support, and keyboard training to enhance confidence, fairness, and performance in paperless assessments.

Conclusion

Paperless assessments are perceived positively for their fairness, efficiency, and relevance to future professional demands. Nonetheless, technical and institutional barriers hinder their full acceptance. Students' constructive feedback highlights the importance of investing in infrastructure, faculty training, and preparatory support to optimize digital assessment implementation in dental education.

Keywords

Paperless assessment; Digital assessment; Dental education; Student perceptions

Oral Presentation

Others

50. **Feedback Literacy among Undergraduate Dental Students: A Cross-Sectional Study Across Two Institutions**

Ushna Malik
UCMD

Introduction

Feedback literacy (FL) is the ability to seek, interpret, and apply feedback. It is critical for dental students' clinical competence and professional growth. Despite its importance, empirical research on feedback literacy in dental education remains limited.

Methodology

A cross-sectional study was conducted at two private dental colleges in Lahore. A structured questionnaire including the validated Student Feedback Literacy Scale (SFLS) was used. Participants included 245 Bachelor of Dental Surgery (BDS) students. Data on demographics, feedback practices, and perceived usefulness were collected. Statistical analyses included descriptive statistics, ANOVA, and post-hoc Tukey test.

Result

Participants demonstrated high overall feedback literacy (mean score: 87.35/120). The appreciation domain scored highest (15.16/20), while eliciting scored lowest (14.20/20), indicating reluctance to seek feedback. Only 25.3% received formal feedback training, and 51.8% reported verbal feedback as the primary mode. Perceived usefulness of feedback significantly predicted literacy scores (p -value=0.02), whereas academic year did not (p -value=0.06).

Conclusion

This study shows that while dental students value feedback and report high self-perceived feedback literacy, they are less confident in seeking it. Lower scores in the eliciting domain highlight the need for structured feedback training to support self-directed and lifelong learning.

Keywords

Feedback (learning), dental education, dental students, attitudes, feedback literacy, student feedback literacy scale (SFLS)

Oral Presentation

Others

51. ***The Digital Paradox: Influence of Medical Students' Digital Device Usage on Their Self-Regulated Learning Strategies***

Nadia Majeed
AUMDC Lahore

Introduction

Effective self-directed learning (SDL) and time management are vital for medical students. While self-regulation learning skills promote deeper learning and autonomy, unregulated use of digital devices can cause distraction and undermine effort. Therefore, the study investigates the relationship between digital device usage and self-regulated learning strategies among undergraduate medical students.

Methodology

An analytical cross-sectional survey was conducted from May–June 2025 among undergraduate medical students of CMH Lahore Medical College, through convenience sampling. The questionnaire collected demographics, daily digital device use, and SDL time. The questions were adopted from a validated tool, Motivated Strategies for Learning Questionnaire (MSLQ). The subscales included were Metacognitive Self-Regulation (MSR) and Time & Study Environment (TSE).

Result

Among 432 responses analyzed, 250 (57.9%) students reported spending 1–4 hours/day on SDL and 205 (47.5%) on digital device use. Daily device use correlated negatively with MSR ($p = 0.045$) and TSE ($p < 0.01$), whereas SDL time correlated positively with both MSR ($p < 0.01$) and TSE ($p < 0.01$).

Conclusion

Self-directed learning enhances metacognitive skills in medical students, while excessive digital device use deters them. Medical educators should promote balanced learning habits regarding DDU.

Keywords

Digital, Learning, Undergraduate, Metacognition, Social Media

Oral Presentation

Others

52. *Emotional Intelligence And Self-directed Learning: Enhancing Student Preparedness In Medical And Allied Health Sciences*

ATIKA MASOOD

University of Lahore

Introduction

Self-Directed Learning (SDL) is vital for healthcare professionals, and Emotional Intelligence (EI) plays an important role in facilitating autonomous learning behaviors along with critical thinking. Understanding the relationship between EI and SDL can help educators and policymakers on developing targeted interventions to produce lifelong learners.

Study aims to investigate the relationship between EI and SDL among Medical and Allied Health Sciences (AHS) students at Akhtar Saeed Medical and Dental College and School of Allied Health Sciences, University of Child Health Sciences Lahore.

Methodology

A cross-sectional survey design was used to recruit 261 medical students and 249AHSstudents. Online survey was distributed through email and social media platforms, including the Schutte Self-Report Emotional Intelligence Test (SSEIT) Scale and Self-Directed Learning Readiness Scale (SDLRS). Descriptive statistics and inferential statistics (Pearson's correlation coefficient, regression analysis, and independent samples t-test) was used to analyze the data.

Result

The current study showed that 65% of students had average EI, whereas 27% had high EI. However, 73% of students were found to have high SDLR. Female sand medical students had significantly higher EI and SDLR. Pearson's correlation "r" between the two parameters shows a strong positive correlation with statistical significance (p-value <0.001).

Conclusion

This study has provided an insight into the relationship between EI and SDL, informing educators and policymakers on the importance of developing EI and SDL skills. The findings of the current study will contribute to the development of training modalities to improve educational outcomes and patient care.

Keywords

Self-directed learning, Emotional intelligence, Self-directed learning readiness, Allied Health Sciences

Oral Presentation

Others

53. ***Building Nursing Capacity for Diabetes and NCD Care in Pakistan: Insights from a National Survey of 1,208 Nurses***

Farhana Tabassum

King's College London, UK

Introduction

Pakistan ranks third globally in diabetes prevalence, with 33% of adults affected. NCDs, including hypertension and cardiovascular disease, place immense pressure on health systems. As the largest healthcare workforce, nurses are well-positioned to lead diabetes and NCDs care, yet evidence on their readiness for advanced roles remains limited.

Methodology

A national cross-sectional online survey (May–August 2025) gathered responses from 1,208 nurses across 62 cities (>1% of Pakistan's registered nurses). The questionnaire assessed diabetes knowledge (DKQ-R), awareness of NP/ANP roles, and readiness for advanced practice. Quantitative analysis was supported by free-text responses on barriers and opportunities.

Result

Knowledge levels varied across regions, with notable gaps in self-management education and leadership. Over two-thirds of nurses were willing to adopt advanced roles, yet barriers included limited recognition, training, and resources. Respondents strongly emphasized the need for structured education and policy support to strengthen diabetes and NCDs care.

Conclusion

This largest national study underscores nurses' readiness for advanced diabetes roles and the urgent need for capacity building. Education, mentorship, and recognition of NP/ANP roles empower nurses to transform NCDs care, reduce Pakistan's escalating diabetes burden, and facilitate achieving Sustainable Development Goal 3: Good Health and Well-Being.

Keywords

Nursing Capacity; Nurse Empowerment; Diabetes Care; Non-Communicable Diseases (NCDs); Advanced Nurse Practitioner; Pakistan

Oral Presentation

Others

54. **“Career Preferences of Dental Students in Pakistan: Insights from the Theory of Planned Behaviour”**

Rafia Minhas

Central Park Medical College

Introduction

In Pakistan, most dentists eventually enter private practice, yet little is known about how dental students make career decisions and how well they feel prepared for the entrepreneurial aspects of practice. The Theory of Planned Behaviour (TPB) offers a framework to examine how attitudes, subjective norms, and perceived behavioural control shape career intentions

Methodology

An online cross-sectional survey was conducted using google forms. Participants were final-year BDS students from multiple dental colleges. The questionnaire, structured around TPB constructs, collected data on career intentions, motivating factors, perceived barriers, and preparedness for entrepreneurship. Data were analysed using descriptive statistics.

Result

First preference was establishing a private dental practice, followed by postgraduate specialization. Autonomy and financial stability were the key motivators. A low confidence in business and financial management skills was reported. Financial investment was identified as a major barrier. Majority students showed interest in taking short courses on dental entrepreneurship.

Conclusion

Pakistani dental students aim to open private practices but feel unprepared for it. This research highlights the need to integrate a structured entrepreneurship training in the dental curriculum.

Keywords

entrepreneurship, medical education,

Posters Presentation

Assessment of Learning

55. *Influence of Psychiatry Clinical Rotations on Medical Students' Attitudes towards Patients with Substance Use Disorders*

Hareem Akhtar

Aga Khan University, Karachi

Introduction

Healthcare workers' attitudes towards patients with substance use disorders (SUDs) influence treatment outcomes. We aimed to assess medical students' attitudes towards SUD patients, by comparing students who had completed their psychiatry modules and rotations with those who had not, to gain evaluate the effectiveness of current training in the subject.

Methodology

A cross-sectional study was conducted among medical students at Sindh Medical College, Karachi, using the validated Drug and Drug Problems Questionnaire (DDPPQ), which assesses attitudes towards SUD patients across five sub-scales. Independent t-tests were used to determine the mean differences in DDPPQ scores across the different groups.

Result

Of 630 respondents, students who had completed psychiatry rotations and theory modules showed significantly more positive attitudes towards SUD patients ($p < 0.0005$). The role adequacy ($p < 0.0005$), role legitimacy ($p < 0.01$) and role support ($p < 0.0005$) sub-scales showed significant differences, while the job satisfaction and self-esteem sub-scales did not.

Conclusion

Medical students with clinical or academic exposure to SUDs showed significantly more positive attitudes toward affected patients. Further incorporating structured addiction education into medical training may enhance patient care and healthcare worker's satisfaction in caring for SUD patients.

Keywords

Substance Use Disorders; Students, Medical; Attitude of Health Personnel; Education, Medical, Undergraduate; Health Knowledge, Attitudes, Practice

Posters Presentation

Assessment of Learning

56. *From Policy to Practice: Evaluating Implementation and Outcomes of UHS Assessment Reforms (2023–2025)*

Saira Mushtaq

ABWA Medical College, Faisalabad

Introduction

The University of Health Sciences (UHS) introduced major assessment reforms between 2023–2025 to enhance fairness, validity, and alignment with global standards. Transitioning from summative exams to competency-based approaches, reforms aimed to ensure transparency, neutrality, and consistency across affiliated medical colleges, addressing concerns of outdated assessment practices

Methodology

A mixed-method design was applied, combining policy document review, faculty and student surveys, and interviews. Exam results and pass rates were analyzed quantitatively. Implementation fidelity was assessed using CFIR, while RE-AIM evaluated outcomes. This comprehensive approach ensured balanced insights into reform effectiveness across affiliated medical colleges

Result

Reforms achieved high adoption across colleges, improving fairness and standardization. Quantitative analysis showed consistent student performance and reduced examiner scoring variance. Qualitative feedback indicated student appreciation of transparency, alongside stress from frequent assessments. Faculty acknowledged improved neutrality but raised concerns about workload and sustainability

Conclusion

UHS assessment reforms significantly enhanced fairness, transparency, and alignment with competency-based education. Standardized practices reduced variability and improved assessment validity. Despite challenges of faculty workload, calibration, and student stress, the reforms mark a progressive step toward sustainable, globally aligned medical education assessment systems.

Keywords

Assessment reforms; Competency-based education; UHS; Fairness; Implementation outcomes

Posters Presentation

Assessment of Learning

57. *Student Perceptions regarding Special Care Unit Experience during Year 5 Medicine Rotation in a Private Medical College in Pakistan*

Sara Shakil
AKU Karachi

Introduction

Clinical rotations in special care units, such as critical care or intensive care settings, play a pivotal role in shaping the clinical competence of medical students. These units expose students to a wide spectrum of acute and life-threatening conditions, offering rich opportunities to apply foundational knowledge to complex, real-world scenarios. Under the close supervision of residents and faculty, students are encouraged to actively engage in patient care, refine their clinical reasoning, and develop comprehensive differential diagnoses and management plans. This study aims to evaluate student perceptions of the newly introduced SCU rotation's effectiveness in achieving educational goals, enhancing engagement, and improving clinical readiness.

Methodology

This descriptive cross-sectional study was conducted at The Aga Khan University Hospital, Karachi, Pakistan from December 2022 till March 2023. A self-designed 5-point Likert scale-based survey form was developed and piloted before final implementation. Data were collected using a structured feedback form containing covering objectives, engagement, learning opportunities, interaction with staff, and perceived clinical application. Responses were analyzed quantitatively to generate frequencies and identify key trends.

Result

The majority of students agreed and strongly agreed that the rotation had well-defined objectives (60%), provided new or refreshed knowledge (45% strongly agreed, 24% agreed), and offered opportunities to apply clinical knowledge (76%). Engagement during rounds and the suitability of tasks to their level of knowledge were rated positively by over 70% of participants. However, areas like interaction with nursing staff and receiving constructive feedback received relatively lower ratings, with around 30% of students reporting neutral or negative responses.

Conclusion

The SCU rotation appears to be a valuable addition to final-year medical training, offering immersive, hands-on experiences that strengthen clinical preparedness. Future iterations should focus on enhancing interprofessional collaboration and structured feedback mechanisms to further enrich student learning

Keywords

Undergraduate Medical education, Special Care Rotation, Critical care exposure

Posters Presentation

Curriculum Development and Evaluation

58. **Spiral Curriculum: A curriculum that grows with the learner**

Maryam Rehman

University of Lahore

Introduction

The spiral curriculum, proposed by Jerome Bruner, is an educational approach in which key concepts are revisited at increasing levels of complexity across different contexts. It emphasizes cumulative, flexible, and scaffolded learning, promoting continuity and long-term retention by reinforcing knowledge rather than simply repeating it.

Methodology

The poster compares spiral and traditional curricula, highlighting key features, benefits, and challenges. It integrates literature findings, emphasizes redundancy as reinforcement, and explores the role of technology in enhancing spiral learning. Analysis is supported through visual comparisons, structured content, and referenced research evidence.

Result

Findings show spiral curriculum enhances retention, deep learning, and critical thinking. Unlike traditional approaches, it fosters integration, student-centered learning, and progressive mastery. Redundancy becomes reinforcement, avoiding wasteful repetition. Technology further supports its application, though challenges like curriculum design, teacher training, and assessment alignment remain.

Conclusion

The spiral curriculum grows with the learner, ensuring mastery through progressive reinforcement. It supports deep learning, integration, and adaptability. Despite challenges, careful design and teacher training make it an effective educational model, especially when combined with technology to enhance engagement and learning outcomes.

Keywords

Spiral Curriculum, Reinforcement, Redundancy, Deep Learning, Medical Education, Technology Integration, Jerome Bruner

Posters Presentation

Curriculum Development and Evaluation

59. **CIPP-Med: Adapting the CIPP Evaluation Model for Clinical Education**

Dr. Tooba Saeed

University College of Medicine and Dentistry, University of Lahore

Introduction

Program evaluation ensures quality improvement in health professions education. The CIPP model, a decision-oriented framework, has been widely applied in medical and dental contexts. However, clinical education presents unique challenges, necessitating an adapted version, “CIPP-Med,” tailored to clinical realities and contemporary learning environments.

Methodology

A literature search was conducted in PubMed, Scopus, Web of Science, and Google Scholar using keywords related to CIPP in medical and dental education. From 30 identified studies, 5 relevant full-text articles (2016–2025) were reviewed. A narrative synthesis was performed to compare applications and extract implications for clinical education.

Result

Findings indicated that the CIPP model effectively evaluates educational programs but is limited in addressing hybrid learning, resource variability, and clinical integration. Cross-study comparisons emphasized the need for flexibility, inclusion of institutional capacity, and alignment with real-world clinical challenges, strengthening its relevance to medical and dental education.

Conclusion

The adapted “CIPP-Med” framework enhances program evaluation for clinical education by ensuring fairness, relevance, and actionable insights. This adaptation supports holistic appraisal while accommodating hybrid modalities and variable resources, ultimately bridging the gap between theoretical evaluation models and practical clinical training demands.

Keywords

CIPP model, program evaluation, medical education, dental education, clinical education

Posters Presentation

Curriculum Development and Evaluation

60. **CIPP-Med: Adapting the CIPP Evaluation Model for Clinical Education**

Dr. Tooba Saeed

University College of Medicine and Dentistry, University of Lahore

Introduction

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Keywords

CIPP model, program evaluation, medical education, dental education, clinical education

Posters Presentation

Curriculum Development and Evaluation

61. *Beyond the Classroom: Embedding Real-World Health Systems into the Core Curriculum*

Muhammad Irshad

Nishtar medical university multan

Introduction

Medical education traditionally emphasizes biomedical knowledge and clinical skills but often neglects health systems science (HSS), including healthcare delivery, economics, policy, and quality improvement. Global healthcare challenges such as rising costs, inequities, and system inefficiencies highlight the need for graduates who understand and can navigate real-world health systems. Embedding HSS into the undergraduate curriculum equips students with systems- thinking, teamwork, and problem-solving skills, better preparing them for modern healthcare practice.

Methodology

A mixed-methods study with ~62 clinical-year students and faculty will evaluate an intervention comprising community health system visits, interprofessional education, policy simulation workshops, and case-based discussions. Data will be gathered via pre- and post-surveys (knowledge, systems thinking, teamwork) and through focus groups and faculty interviews. Quantitative and thematic analyses will be performed.

Result

We expect that after intervention, students will show statistically significant improvements in HSS knowledge, systems-thinking, and teamwork scores. Qualitative findings are anticipated to reveal enhanced confidence in understanding policy and system issues, better integration of theory with practice, and student perception of greater relevance of HSS in their future roles.

Conclusion

Embedding real-world health system experiences into undergraduate medical education can bridge the gap between classroom and practice. Such curriculum reform strengthens competencies essential for modern healthcare, preparing graduates as clinicians, leaders, and systems-aware professionals. Adoption of HSS into core curricula is pivotal for sustainable health system improvement.

Keywords

Health systems science; medical education; integrated curriculum; experiential learning; interprofessional education

Posters Presentation

Curriculum Development and Evaluation

62. **Outcome vs Competency -Based Curriculum: What's the Real Difference**

Ayesha Irfan

Multan Medical and Dental College

Introduction

Medical education is shifting towards approaches that ensure both defined outcomes and demonstrated competencies. Outcome based curriculum specifies what learners should achieve at the end of training (destination). Competence based curriculum ensures learners actually demonstrate mastery before moving forward (journey). Understanding this distinction is vital for designing curricula that produce safe, skilled, and effective doctors.

Methodology

A narrative review compared outcome-based curriculum (OBC) and competency-based curriculum (CBC) in medical education. Literature from key frameworks and global standards (WFME, ACGME) was analyzed to highlight distinctions in goals, assessments, learner roles, and implications for teaching and training.

Result

OBC defines end goals of training, while CBC emphasizes demonstrated mastery before progression. OBC is standardized and destination-focused; CBC is individualized and journey-oriented. Findings show OBC ensures clarity of outcomes, whereas CBC ensures competence and patient safety. A blended approach offers optimal effectiveness.

Conclusion

Outcome-Based and Competency-Based curricula share the goal of producing safe, skilled, and professional doctors. While OBC defines the destination, CBC ensures the journey leads to true mastery. A blended approach, supported by innovation and technology, offers the most promise for the future of medical education.

Keywords

Outcome-Based Curriculum, Competency-Based Curriculum, Medical Education, Assessment, Hybrid Models

Poster Presentation

Curriculum Development and Evaluation

63. **Unspoken Lessons: The Power of the Hidden Curriculum**

Asma Chaudhry

Institute of Dentistry, CMH Lahore

Introduction

The hidden curriculum encompasses implicit values, norms, and behaviors that shape students' identity beyond formal teaching. This study explores undergraduate dental students' perceptions of the hidden curriculum in clinical settings, highlighting its influence on professional development and the need for institutional recognition and improvement.

Methodology

A cross-sectional survey was conducted among 65 undergraduate dental students using the validated Hidden Curriculum Assessment Tool (HICAT). Twenty items were scored on a 3-point Likert scale. Data were collected through Google Forms and analyzed descriptively, applying the Chi-square test for gender-based differences.

Result

Overall, no significant gender-based differences were observed in most domains. However, two items revealed gender-sensitive variations, indicating areas requiring targeted support. Students' perceptions varied across domains, emphasizing the hidden curriculum's influence on learning experiences and professional identity formation.

Conclusion

The hidden curriculum significantly impacts students' clinical learning experiences. While overall perceptions did not differ by gender, specific areas highlight the need for gender-sensitive support. Faculty development, reflective practice, recognition, and mentorship are recommended to harness positive aspects and mitigate negative influences of the hidden curriculum.

Keywords

Hidden curriculum, Medical education, Undergraduate dental students, HICAT, Faculty development

Posters Presentation

Curriculum Development and Evaluation

64. *Analysing Communication Flaws In Interdepartmental Clinical Calls — Perspectives Of Writers And Receivers*

M Ahsan Rasheed Ghumman

Khawaja Muhammad Safdar Medical College, Sialkot

Introduction

Effective interdepartmental communication is essential for patient safety and clinical workflow. Interdepartmental clinical calls, often written by junior doctors, play a vital role in diagnosis, treatment, and transfers. Many calls are incomplete, vague, or unstructured, causing confusion and impacting patient care. This study fills the gap by analyzing both written calls and experiences of authors/recipients, aiming to recommend improvements and integrate structured training into MBBS curricula.

Methodology

Study Design: Mixed-methods exploratory study Phase 1: Quantitative Analyze 100–200 interdepartmental calls using structured checklist (SBAR framework). Calls anonymized; flaws categorized. Frequencies and percentages analyzed via SPSS v25. Phase 2: Qualitative Semi-structured interviews with: 15–20 call writers (house officers, residents) 15–20 call receivers (senior clinicians) Explore challenges, experiences, and suggestions. Audio-recorded, transcribed, analyzed thematically (NVivo/manual coding)

Result

Identify structural/content flaws in referral calls. Capture experiences of both writers and receivers. Highlight training gaps among junior doctors. Provide evidence for structured call-writing training in MBBS curriculum. Promote safer and more effective interdepartmental collaboration.

Conclusion

This study highlights that interdepartmental clinical calls often suffer from structural and content-related deficiencies due to lack of formal communication training. Both writers and receivers recognize these flaws as major contributors to delays and errors in patient management. Incorporating structured communication models—such as SBAR—and formal training sessions into the MBBS curriculum can significantly improve clarity, accountability, and interdepartmental collaboration, ultimately enhancing patient safety and healthcare efficiency.

Keywords

Interdepartmental Communication , Clinical Calls , Communication Errors, Patient Safety

Posters Presentation

Curriculum Development and Evaluation

65. **Evolution Of Entrustable Professional Activities In The Age Of Artificial Intelligence**

Dr Rabia Iqbal

Ameer-u-Din Medical College

Introduction

EPAs are observable activities that learners must adapt to have trust in independent performance. Medical students learn patient management, procedural skills and complex decision making as they become professional. AI is influencing clinical reasoning, image interpretation, patient management and data handling, necessitating educationists to reevaluate EPAs in terms of AI.

Methodology

A Systematic search was done across Google Scholar, PubMed and PakMedinet, using the keywords “Entrustable Professional Activities,” and “AI”.Studies analyzing EPAs and integration of AI in the EPA implementation were selected. Role of AI in current and emerging EPAs was identified.

Result

16 EPAs were identified which can be broadly classified as

1. Core of the Core
2. Aspirational
3. Advanced
4. Emerging

AI is influencing the EPAs achievement through Simulation-based learning, Automated assessment, individualized feedback, Data handling and interpretation. Various AI tools identified for learners to achieve each of the EPAs.

Conclusion

AI is reshaping the landscape of EPAs by introducing new domains of competence and redefining existing ones. The evolution toward AI-enhanced EPAs represents an opportunity to align medical education with the realities of future clinical practice.

Keywords

Entrustable Professional Activities, Artificial Intelligence, Medical Education, AI Tools, Evolution

Posters Presentation

Curriculum Development and Evaluation

66. *Evaluating Medicine Fellowship and Residency Programs Using the Logic Model: A Formative Assessment from a Tertiary Care Institution in Pakistan*

Sara Shakil
AKUH

Introduction

Fellowship training represents an advanced stage of postgraduate medical education, equipping physicians with subspecialist expertise. Globally, there is a growing trend toward fellowship training, yet limited data exists on structured evaluation of such programs in low- and middle-income countries (LMICs). Systematic evaluation is essential to ensure quality, accreditation readiness, and strategic improvement. The Logic Model provides a comprehensive framework to assess program inputs, activities, outputs, and outcomes, offering a holistic perspective on effectiveness.

Methodology

A formative evaluation was conducted of Medicine Fellowship and Residency Programs at a tertiary care academic institution. Data were collected through document review, structured interviews with faculty, and surveys of trainees (n=72). Descriptive statistics summarized program characteristics, trainee experiences, and perceived outcomes.

Result

Of surveyed trainees, 81% reported satisfaction with clinical exposure, 76% with mentorship, and 69% with research opportunities. However, 42% indicated limited access to structured leadership training. Program mapping revealed strong alignment between inputs and immediate outputs, though gaps persisted in translating activities into long-term outcomes such as academic productivity and leadership development.

Conclusion

The Logic Model proved valuable in identifying strengths and gaps. While clinical and mentorship components are robust, enhancements in leadership training and structured research mentorship are needed. Findings provide context-specific evidence to guide academic quality assurance, institutional accreditation, and future fellowship program development in LMIC settings.

Keywords

Fellowship training, Residency programs, Logic Model

Posters Presentation

Educational Technology

67. **Transforming Medical Education: The Impact of Innovations in Technology and Medical Devices**

Warda Saeed

University College of Medicine and Dentistry, UOL.

Introduction

Medical education is being reshaped by technologies such as Artificial Intelligence, Augmented/Virtual Reality, and 3D printing. Despite their transformative potential for teaching, assessment, and patient safety, technology-enhanced learning remains underutilized due to limited training, faculty resistance, and lack of awareness.

Methodology

A systematic literature review was conducted using databases with keywords: TEL, AI, AR/VR, holographic dissection, and 3D-printed organs. Out of 2,473 identified studies, 926 were screened, and 37 met eligibility criteria, following PRISMA guidelines. 6 most relevant articles were finally included in the poster.

Result

Findings revealed significant benefits including safer skill acquisition, flexible access to learning, personalized feedback, enhanced student confidence, and improved patient outcomes. Technologies demonstrated strong potential to enrich teaching and assessment in medical curricula.

Conclusion

Technology cannot replace teachers but can empower them. When thoughtfully integrated, innovations enhance learning experiences, strengthen assessment, and improve outcomes. Addressing challenges of cost, faculty development, resistance, and ethical concerns is essential for sustainable adoption.

Keywords

Technology-enhanced learning, Artificial Intelligence, Augmented/Virtual Reality, 3D printing, medical education

Posters Presentation

Educational Technology

68. **Does One Size Fit All? Evaluating Lumi H5P Across VARK Learners**

Ammara Rasheed

Nishtar Medical University Multan

Introduction

Medical students have diverse learning preferences defined by VARK (Visual, Auditory, Read/Write, Kinesthetic). Traditional teaching often neglects these differences. This study explores whether Lumi H5P, an interactive digital tool, equally supports all VARK learning styles and enhances engagement, retention, and satisfaction.

Methodology

A mixed-methods design was used. Students completed VARK questionnaires to identify preferences. Lumi H5P modules were implemented across content areas. Data were collected through surveys, focus groups, and performance scores. Comparative analysis assessed tool effectiveness across learner categories.

Result

We anticipate Lumi H5P will enhance learner engagement across all VARK groups, with stronger benefits for visual and kinesthetic learners. Read/Write and auditory learners are expected to benefit from embedded text and narration features. Findings will provide insights into adapting digital tools for inclusivity.

Conclusion

This study aims to evaluate Lumi H5P's potential to support diverse learning preferences in medical education. Anticipated outcomes highlight its promise for inclusive teaching, while also emphasizing the need for customization. Results will inform faculty on effective integration of digital learning tools into blended curricula.

Keywords

VARK learning styles; Lumi H5P; Medical education; Digital learning tools

Posters Presentation

Educational Technology

69. ***adaptive curriculum in medical education: Personalizing Learning Pathways using AI and Learning Analytics to support remedial medical students..***

Dr Tahira Naseem

Shaikh Zayed FPGMI

Introduction

Remedial medical students face disproportionate attrition when curricula remain rigid & uniform. Educational technology, particularly artificial intelligence (AI) and learning analytics (LA), offers innovative strategies to detect struggling learners early and provide individualized support. This project introduces an adaptive curriculum framework designed to transform remediation and enhance equity in medical education, reduce failure rates, and personalize medical education.

Methodology

A 12-month pilot will integrate AI-enabled tutoring platforms and LA dashboards into existing courses. Performance metrics will be continuously analyzed to identify struggling students and generate individualized learning pathways. Faculty will undergo structured training, while iterative feedback loops from learners and educators will refine implementation. Impact will be assessed using adoption, engagement, and retention indicators.

Result

The framework is projected to substantially reduce remediation requirements within the first year and meaningfully decrease student attrition over two years. Early modeling indicates strong faculty engagement and high levels of student adoption. These improvements highlight the potential of educational technology to strengthen institutional capacity for equity-oriented, adaptive learning for remedial students.

Conclusion

Embedding AI and LA within medical education offers a scalable strategy for personalized learning. By tailoring pathways for remedial students, the framework addresses equity gaps and enhances global outcomes in health professions training. Findings suggest adaptive curricula can advance sustainable education models, strengthen faculty capability, and improve student retention across diverse contexts

Keywords

adaptive curriculum, AI, Learning Analytics, medical education, remediation, student retention

Posters Presentation

Educational Technology

70. **Crumbling of creativity by AI enhanced learning environment for medical students.**

Dr Arooj Nawaz

Superior university/ANMC

Introduction

The integration of Artificial Intelligence (AI) into medical education has revolutionized learning through tools such as chatbots, virtual assistants, and online simulations. However, this study investigates the unintended consequences of these advancements, particularly the impact on medical students' creativity and academic emotions.

Methodology

Qualitative Literature Review;plus Theoretical Framework:

Result

While AI enhances efficiency, accessibility, and assessment, it also poses challenges including reduced memorization, diminished critical thinking, emotional disengagement, and increased technical frustrations.

Conclusion

Drawing on recent literature and student attitudes, the findings reveal that rigid AI frameworks can hinder innovation and promote anxiety. The study recommends that AI should be used to complement, rather than replace, traditional teaching methods to preserve creativity and emotional engagement in medical education.

Keywords

Crumbling, Qualitative Literature Review and Theoretical Framework:

Posters Presentation

Educational Technology

73. *The Attitudes, Perceptions and Readiness of Dental Students Towards the Integration of Artificial Intelligence in Dental Education*

Dr. Aimen Najib

Lahore Medical and Dental College

Introduction

Artificial Intelligence (AI) is transforming dentistry in education and clinical practice, but its integration in undergraduate dental curricula remains limited. Understanding students' attitudes and readiness helps identify gaps and provides valuable insights for designing future, AI-inclusive curricula.

Methodology

A literature review was conducted using Google Scholar, PubMed, and ScienceDirect. Search terms included "Artificial Intelligence," "Dental Education," "Attitudes," "Perceptions," and "Readiness." A PRISMA flow diagram guided study selection, and findings were analyzed through critical evaluation and SWOT analysis.

Result

Students show positive attitudes toward AI and openness to integration but lack baseline knowledge and formal training. Strengths include improved competencies and enhanced patient care, while limitations involve misinformation and ethical concerns. Few studies exist in South Asia, especially Pakistan, highlighting significant regional research gaps.

Conclusion

Dental students welcome AI integration but feel underprepared due to limited knowledge and training. Structured curricula, targeted training, and skill development initiatives are crucial for preparing future dentists for the evolving technological demands while ensuring the ethical and effective use of AI in education and practice.

Keywords

Artificial Intelligence, Dental Education, Attitudes, Perceptions, Readiness

Posters Presentation

Educational Technology

72. **Developing and Validating a Rubric to Assess the Quality of AI-Generated Feedback on Postgraduate Medical Education Research Proposals**

Ushna Malik

UCMD

Introduction

The rapid progression of generative AI (GAI) is reshaping educational systems globally. In medical education, tools like ChatGPT are being widely used for personalized learning, automated assessments, and academic writing support. However, concerns remain regarding hallucinations, superficial suggestions, and limited domain-specific understanding

Methodology

Design: Development and validation of a tool using quantitative and qualitative data analysis.

Setting: UCMD, University of Lahore & Riphah International University. Duration: 6 months

Phases – 7 Steps

1. Literature Review
2. Focus Groups
3. Synthesis
4. Item Development
5. Expert Validation
6. Cognitive Interviews
7. Pilot Testing

Analysis:

Quantitative

- Descriptive statistics
- Reliability: Cronbach's α , Cohen's Kappa.
- Content Validity: CVI indices.
- Factor analysis.

Qualitative

- Thematic analysis.
- Coding guided by feedback models
- Expert & pilot feedback

Result

Since this is a proposal, the results will be obtained after conduction of methodology.

Conclusion

Expected Outcomes:

1. A validated rubric for assessing AI-generated feedback in postgraduate medical education.
2. Improved quality assurance in the use of AI for academic supervision.
3. A replicable framework for responsible integration of AI feedback in curricula and research training.

Keywords

Generative Artificial Intelligence, Feedback quality, Medical education, Rubric development, Postgraduate research

Posters Presentation

Educational Technology

73. **Exploring Examiner Bias in Medical Education Assessments Using Explainable Artificial Intelligence (XAI)**

Dr. Ayesha Khan

de'montmorency College of Dentistry

Introduction

Examiner bias undermines fairness and validity in medical education assessments. Implicit factors related to examiner demographics and student backgrounds often influence scores. Explainable AI (XAI) offers transparency, identifying hidden patterns of bias and supporting evidence-based interventions to strengthen trust and fairness in summative evaluations.

Methodology

A mixed-methods design will be used. Quantitative analysis employs XGBoost with SHAP values on assessment datasets to detect examiner bias. Qualitative interviews with faculty and students will explore perceptions of fairness. Findings will be triangulated using Messick's validity framework to propose actionable reforms in assessment practices.

Result

Preliminary SHAP-based modeling is expected to highlight demographic and contextual variables contributing to examiner bias. The qualitative phase will likely reveal perceptions of implicit bias and trust. Integration of findings is anticipated to guide recommendations for enhancing equity, transparency, and reliability in clinical assessment systems.

Conclusion

Explainable AI provides a framework for uncovering hidden examiner bias and fostering transparency in medical education assessments. By combining quantitative detection with qualitative insights, this study aims to promote fairer evaluation systems, improve trust, and support evidence-informed policy reforms in health professions education.

Keywords

Examiner Bias; Explainable Artificial Intelligence; SHAP; Medical Education; Fairness; Assessment Validity

Posters Presentation

Educational Technology

74. *Addressing Examiner Bias in Medical Education Assessments Using Explainable Artificial Intelligence*

Dr. Ayesha Khan

DE'MONTMORENCY COLLEGE OF DENTISTRY

Introduction

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Keywords

Examiner Bias; Explainable Artificial Intelligence; SHAP; Medical Education; Fairness; Assessment Validity

Posters Presentation

Educational Technology

75. **Effect of prompt engineering on MBBS students Learning Using ChatGPT for self directed learning: A mixed method study**

Mohsin Masud

RASHID LATIF MEDICAL COLLEGE / UOL

Introduction

Artificial intelligence tools like ChatGPT are increasingly used in medical education. However, the role of student-generated prompt quality in shaping AI response accuracy and learning outcomes remains underexplored. This study investigates whether prompt engineering training enhances MBBS students' ability to optimize ChatGPT for effective self-directed learning and deeper understanding.

Methodology

A mixed-methods study will be conducted at Rashid Latif Medical College. In the quantitative phase, 80 final-year MBBS students will be randomized into trained and untrained groups for a prompt engineering intervention with pre-/post-tests. In the qualitative phase, semi-structured interviews with purposively selected students to explore perceptions, will be analysed through thematic analysis.

Result

This study anticipates that stronger prompts are expected to improve students' learning outcomes, foster increased critical thinking, and promote deep learning through more engaged and independent task performance. These findings have significant future implications for curriculum design, suggesting that integrating prompt engineering into medical education could revolutionize learning by embedding AI literacy and self-directed learning as core competencies.

Conclusion

Stronger prompts are anticipated to enhance learning outcomes, critical thinking, and deep learning among medical students. Integrating prompt engineering into medical education holds the potential to transform curricula by embedding AI literacy and self-directed learning as essential competencies, thereby preparing future physicians for technology-driven healthcare environments.

Keywords

Artificial Intelligence Natural Language Processing Large Language Models Prompt Engineering Education, Medical, Undergraduate Students, Medical Self-Directed Learning Learning Outcomes Clinical Reasoning Educational Measurement

Posters Presentation

Educational Technology

76. **Beyond Readiness: Exploring How Undergraduate Medical Students Use Artificial Intelligence for Learning**

Momina Gul

FMHCMD

Introduction

Artificial Intelligence (AI) is transforming how medical students learn, yet its informal use often goes unnoticed in formal curricula. This study explores how undergraduate medical students engage with AI tools in their academic learning, highlighting their usage patterns, perceived benefits, and challenges within the evolving context of medical education.

Methodology

A qualitative exploratory study under the constructivist paradigm was conducted at Fatima Memorial Hospital College of Medicine and Dentistry. Data were collected through Focus Group Discussions (FGDs) with purposively selected MBBS students across all five years. Transcribed data were analyzed using Braun and Clarke's reflexive thematic analysis.

Result

Preliminary findings reveal widespread informal AI use for summarizing, exam preparation, and clinical reasoning. Students reported perceived usefulness, time efficiency, and enhanced understanding as key benefits, alongside challenges of misinformation, overreliance, and ethical ambiguity. Institutional uncertainty and limited faculty guidance emerged as significant factors influencing responsible AI use.

Conclusion

Students are already integrating AI into their learning, often independently and without structured guidance. These insights call for curricular and faculty development reforms to promote ethical, evidence-informed, and pedagogically sound AI integration. Understanding students' real experiences can bridge the gap between technological adoption and institutional readiness.

Keywords

Artificial Intelligence, Medical Education, Undergraduate Students, Focus Group Discussions, Technology Acceptance Model, Constructivism, Thematic Analysis

Posters Presentation

Educational Technology

77. **Development Of A Tool To Measure Trust In Artificial Intelligence In Medical Education Research Among Faculty And Students**

Dr. Syed Ali Raza

UOL/ Mayo hospital

Introduction

Trust determines acceptance of AI in medical-education research yet varies by sociodemographics, exposure, and digital literacy, with disparities in Pakistan. Existing scales (TAI/TPA) are uncalibrated for this context. This study will develop a validated, context-specific instrument for faculty/postgraduates to standardize measurement, profile disparities, and guide equitable, ethical adoption and policy.

Methodology

Psychometric instrument study per AMEE 87: literature review; item drafting; expert CVR/CVI; cognitive interviews; pilot (~200), EFA, Cronbach's $\alpha \geq 0.70$; finalize (no CFA). Setting: Punjab institutes; 3-month data post-ERC approval. Participants: faculty (≥ 5 -year AI exposure) and postgraduates. Online questionnaire: demographics, AI exposure, trust scale. Ethics, confidentiality, and budget PKR 30,000. Google Forms.

Result

Produce a validated, context-specific Trust-in-AI scale with clear factor structure and Cronbach's $\alpha \geq 0.70$; expert CVI/CVR and cognitive interviews confirming clarity; stratified trust profiles exposing equity gaps; operational feasibility with high completion and minimal missing data; standardized scoring enabling benchmarking, policy, and ethical, equitable AI integration across medical-education research programs nationwide.

Conclusion

Validated, context-specific Trust-in-AI instrument will standardize measurement, expose equity gaps, and guide ethical, evidence-informed implementation across medical-education research. Results justify targeted training, infrastructure, and governance; enable benchmarking, longitudinal monitoring, and meta-analysis. Future work: confirmatory factor analysis, responsiveness, and multi-province/country generalizability to support national standards and sustainable, trustworthy educational-AI adoption policies.

Keywords

Tool, Trust, AI

Posters Presentation

Equity, Diversity and Inclusion

78. *Exploring The Perceived Impact Of ‘Doctor-Bride’ Narrative On The Professional Identity Formation And Career-related Decisions Of Female Doctors In Pakistan*

Palwasha Babar

Fatima Memorial Hospital College of Medicine and Dentistry

Introduction

Over 70% of medical students in Pakistan are women, yet fewer than half remain in practice. Beyond structural barriers, the “doctor bride” label reduces them to marriage assets, undermining identity and careers. The objectives of the study were: To explore the perceptions of female doctors in Pakistan regarding the social and cultural implications of the "doctor-bride" narrative; To examine how this narrative influences the professional identity formation of female doctors; To explore the ways in which these perceptions shape female doctors' career-related decisions.

Methodology

This qualitative exploratory study, grounded in the interpretivist paradigm, will involve 15–20 female doctors (MBBS and BDS) through semi-structured, in-depth interviews until data saturation. Eligible participants include graduates practicing full-time, part-time, or on career breaks. Excluded are house officers and those educated or living abroad. Data will undergo reflexive thematic analysis (Braun & Clarke, 2021).

Result

The study is expected to reveal how the “doctor-bride” stereotype shapes female doctors' identities and career decisions, exposing hidden cultural pressures contributing to workforce attrition. It will generate evidence on how societal expectations influence real career pathways, informing policies to support women's sustained participation in the medical profession.

Conclusion

This study highlights how the “doctor-bride” stereotype shapes identity, fuels hidden pressures, and influences female doctors' career decisions in Pakistan. By exposing these cultural forces, it underscores the urgent need for systemic and societal shifts to support women's professional continuity.

Keywords

Doctor bride, gender stereotypes, cultural narratives

Posters Presentation

Faculty Development

79. **Exploring How Continuous Professional Development Initiatives Influence the Adaptive Expertise of Health Professions Educators: A Mixed-Method Study**

Uswa Qaiser

University College of Dentistry, The University of Lahore

Introduction

Medical education demands professionals who are innovative and adaptive to modern challenges. Higher education institutes must foster readiness by identifying advancement needs and supporting continuous adaptation to evolving pedagogy, technology, and societal shifts. Programs that lack self-reflection and adaptability struggle to thrive in this dynamic educational landscape.

Methodology

This study will employ a sequential exploratory mixed-method study.

Phase I (quantitative phase) will use a validated questionnaire to separate routine experts from adaptive experts.

Phase II (Qualitative phase) will explore the perceptions of these adaptive experts regarding formal continuous professional development activities commenced at UOL.

Result

This study will give insight into whether continuous professional development initiatives effectively foster adaptive expertise, as perceived and guided by the experience of master adaptive experts participating in such programs.

Conclusion

The findings will guide the development of continuous professional development that caters to these perspectives and the evolving needs of adaptive learners, thereby enhancing educational outcomes and addressing existing gaps in continuous professional development practices

Keywords

Adaptive expertise, Continuous professional development, lifelong learning, faculty development, procedural knowledge, conceptual knowledge

Posters Presentation

Faculty Development

80. ***Navigating the barriers and uplifting the drive: How Medical Faculty sails through Educational Research – A Qualitative Study Using Self-Determination Theory***

Lala Rukh Bangash

Allama Iqbal Medical College, UOL

Introduction

This study explores how medical faculty navigate research barriers and motivation across career stages using Self-Determination Theory. While external incentives may boost quantity, intrinsic motivation—driven by autonomy, competence, and relatedness—is key to improving research quality and sustaining a strong institutional research culture in medical education

Methodology

An exploratory qualitative study will be conducted over six months at three medical colleges using purposive sampling of ≥ 10 faculty. Semi-structured interviews will be analyzed thematically via Braun and Clarke's framework using ATLAS.ti. Themes will align with Self-Determination Theory, ensuring rigor through triangulation, memoing, and member checking.

Result

Finding how faculty navigate research barriers and how intrinsic motivation can be uplifted will be a crucial step to foster a productive research culture among faculty. This, in turn, is essential for both academic advancement and patient benefit.

Conclusion

The study is expected to conclude that understanding how faculty navigate research barriers and identifying factors that enhance intrinsic motivation are key to strengthening institutional research culture. Fostering autonomy, competence, and relatedness can lead to more meaningful research engagement, improved academic progression, and ultimately, better patient care outcomes.

Keywords

Research motivation, Intrinsic motivation, Faculty development, Research barriers, Self-Determination Theory, Medical education, Research culture, Academic advancement, Qualitative study, Thematic analysis

Posters Presentation

Inter Professional Education

81. **Developing Interprofessional Curriculum Using Harden Integration Ladder**

Maryam Akram
UOL

Introduction

Fragmented silo education impedes collaborative healthcare practice. To address this, a structured 12-week Interprofessional Education (IPE) curriculum was developed using Harden's Integration Ladder. This initiative aims to systematically enhance teamwork competencies among health professions students, thereby preparing them for improved patient-centred care outcomes.

Methodology

This pilot, mixed-methods, quasi-experimental study engaged learners from medicine, dentistry, nursing, pharmacy, and allied health. The 12-week intervention incorporated interprofessional case discussions, simulations, and clinical sessions. Competencies were evaluated using pre/post Team-OSCE assessments, a validated IPE survey, reflective journals, and process metrics.

Result

Team-OSCE scores significantly improved from 68% to 82% ($\Delta=14\%$, $p<.01$). Surveys indicated enhanced teamwork attitudes, while reflective logs demonstrated improved role clarity and communication. Key implementation barriers were faculty time, scheduling, and simulation capacity. The pilot was both feasible and impactful.

Conclusion

Harden's Integration Ladder provided a structured framework for the IPE curriculum. The pilot demonstrated feasibility, yielding a 14% improvement in Team-OSCE scores. However, identified implementation barriers, including limited faculty time and simulation capacity, must be systematically addressed for sustainable program scaling.

Keywords

Interprofessional Education (IPE), Harden's Integration Ladder, Curriculum Development, Team-OSCE, Collaborative Competencies.

Posters Presentation

Inter Professional Education

82. *Developing collective competence through Inter-Professional Education among healthcare students at the University of Lahore*

Shanzay Tariq

The University of Lahore

Introduction

Healthcare delivery relies on collaboration, yet undergraduate curricula remain discipline-specific, causing role confusion, poor teamwork, and risks to patient safety. Interprofessional Education (IPE), championed globally through initiatives like CAIPE and CIHC, fosters shared learning across professions. This study explores how undergraduate healthcare students at the University of Lahore develop collective competence through IPE.

Methodology

A qualitative exploratory design under a constructivist paradigm recruited third- and final-year students from Medicine, Dentistry, Pharmacy, and Nursing, along with faculty, at the University of Lahore. Using a CIHC-guided IPE case-based session, data were gathered through post-session interviews and analyzed thematically to explore students' perceptions and experiences.

Result

The study is expected to reveal students' appreciation of teamwork, communication, and shared decision-making. Anticipated enablers include faculty support, case-based activities, and diverse perspectives, while barriers may involve role ambiguity, hierarchy, and weak curricular integration. These outcomes will shape students' readiness for interprofessional collaboration and collective competence development.

Conclusion

Study is expected to provide insights into students' perceptions of collaborative competencies in IPE and identify enablers and barriers specific to Pakistani healthcare education context. Findings will inform faculty development, curriculum integration, and policy support to strengthen IPE initiatives. Ultimately, improved interprofessional collaboration can enhance patient care and healthcare delivery.

Keywords

Interprofessional education; Collective competence; Healthcare students; Case-based learning; Collaborative practice

Posters Presentation

Inter Professional Education

83. *Developing an interprofessional curriculum using harden's integration ladder*

Maryam Akram

University of Lahore

Introduction

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Keywords

Interprofessional Education, Harden's Integration Ladder, Team-OSCE, Collaborative Practice, Patient-Centered Care

Posters Presentation

Leadership and Governance

84. **Improving Patient Safety Through Clinical Governance: Audit of WHO Surgical Safety Checklist Compliance in Orthopaedics**

Maliha Basharat

Department of Orthopedics and Traumatology, Akhtar Saeed Trust Hospital, Lahore

Introduction

The WHO Surgical Safety Checklist is a globally recognized tool designed to enhance patient safety in the operating room. It ensures that surgical teams consistently adhere to critical safety steps before, during, and after surgery. This audit aims to evaluate compliance with the checklist and identify areas for improvement.

In the context of clinical governance, the checklist represents a structured approach to improving quality of care through leadership, accountability, and risk management. By auditing its use, hospitals can demonstrate commitment to patient safety, strengthen team communication, and ensure systems are in place to reduce avoidable harm, all core principles of effective governance in clinical practice.

Methodology

Type of Audit: Retrospective (two cycles) Setting: Orthopaedics Operating Theatres, Akhtar Saeed Trust Hospital Audit Period: First cycle: April-May 2025 Second cycle: June-July 2025 (two weeks after interventions) Sample Size: 30 elective surgeries per cycle Inclusion Criteria: All elective orthopaedic surgeries within the audit period Exclusion Criteria: Emergency cases, day-case procedures, incomplete records Data Collection: Review of surgical notes and WHO checklists using a structured proforma (assessed "Sign In," "Time Out," and "Sign Out" phases as fully, partially, or not completed).

Result

First Cycle (n=30): Sign In: 67% compliance Time Out: 57% compliance Sign Out: 40% compliance Only 30% of cases had all three phases completed. Interventions Introduced: Staff refresher training Laminated checklist copies in OT Assignment of responsibility (e.g., HO for Sign Out) Consultant-led reminders during morning briefings Second Cycle (n=30): Sign In: 90% compliance (+23%) Time Out: 83% compliance (+26%) Sign Out: 67% compliance (+27%)

Conclusion

The audit demonstrated that simple, team-oriented interventions, led by clinical leadership and governance strategies, improved compliance with the WHO Surgical Safety Checklist in orthopaedic theatres at ASTH. Leadership Impact: Assigning accountability and consultant-led reminders empowered staff to prioritize patient safety. Governance Impact: Embedding the checklist into daily practice (laminated copies, standardized placement in notes) ensured sustainability and consistency. Future Impact: Continued reinforcement, regular audit cycles, and shared learning across departments will be necessary to maintain and further improve standards in Orthopaedic Theatres at Akhtar Saeed.

Keywords

WHO surgical safety checklist, clinical audit, evidence-based interventions, patient safety, clinical governance

Posters Presentation

Leadership and Governance

85. *Exploring relational barriers to Leadership in PGME through the lens of Relational Leadership Theory*

Muhammad Uthman Ahmad
SZHFPGMI

Introduction

This poster gives a glimpse of my research proposal for MME ; This study, grounded in Relational Leadership Theory (RLT), views leadership as a relational and communicative process emerging through human interaction. Anchored in a constructivist, process-oriented approach, RLT guides both theory and methodology, enabling exploration of interpersonal and organizational dynamics that shape leadership development in postgraduate medical education

Methodology

This qualitative exploratory study, guided by Relational Leadership Theory (RLT), examines how interpersonal and organisational factors influence leadership development in postgraduate medical education. Using semi-structured interviews and focus groups, data will be thematically analysed per Braun and Clarke (2019), ensuring rigour and trustworthiness through triangulation, peer review, and Lincoln and Guba's (1985) framework.

Result

Findings will help to

- Identify key relational and organizational barriers limiting leadership role engagement among postgraduate medical trainees.
- Develop a thematic framework explaining these barriers through the lens of Relational Leadership Theory.
- Generate context-specific recommendations for integrating relational leadership development into postgraduate medical education curricula

Conclusion

This study, guided by Relational Leadership Theory (RLT), explores how interpersonal and organisational factors affect leadership development in postgraduate medical education. Using a qualitative exploratory design with interviews and focus groups, findings will identify relational barriers and inform curricular strategies to foster collaborative, relationally competent leadership in clinical training.

Keywords

Relational ,Barriers ,Leadership, Postgraduate medical education , Relational leadership theory

Posters Presentation

Learning Environment

86. *Exploring the Role of Social Isolation in Influencing Self-Awareness in Medical Students: A Phenomenological Study*

Saba Amjad

University Of Lahore

Introduction

Medical students face demanding workloads and competitive environments that may lead to social isolation, influencing their self-awareness and professional growth. Limited research explores students' subjective experiences of isolation. This study investigates how social isolation impacts self-awareness, providing insights for educators to support personal and professional development.

Methodology

A qualitative phenomenological study was conducted at the University of Lahore over six months. Purposive sampling recruited 12–15 undergraduate medical students. Data collection included semi-structured interviews, guided by an interview checklist. Interpretative Phenomenological Analysis and Framework Analysis, using the Need to Belong Theory, were applied for coding and theme development.

Result

Preliminary findings suggest social isolation leads to unmet belonging needs, lowering confidence, self-reflection, and emotional regulation. However, some students reported resilience and deeper reflection, enhancing self-awareness. Coping strategies influenced whether isolation negatively or positively impacted growth, highlighting diverse experiences of self-awareness shaped by isolation during medical training.

Conclusion

Social isolation significantly shapes medical students' self-awareness, with both detrimental and constructive outcomes. Understanding these lived experiences can help medical educators promote supportive environments. Addressing social isolation may enhance students' self-awareness, resilience and professional growth, ultimately improving medical education outcomes and preparing students for future healthcare challenges.

Keywords

Social isolation, self-awareness, medical students, phenomenology, professional growth

Posters Presentation

Learning Environment

87. *A Study on the Influence of Mistreatment in Undergraduate Clinical Years on Specialty Selection Among House Officers.*

Syed Abdullah Mazhar

University of Lahore

Introduction

Mistreatment during clinical placements is a pervasive issue and includes humiliating, abusive, or hostile behaviour, discrimination, depreciation, and physical aggression. It negatively affects the well-being, career satisfaction, specialty preferences, and professional identity formation of medical students. Despite growing recognition of mistreatment in medical education, its high prevalence and impact on professional identity development remain understudied. The existing literature lacks depth, contextual understanding, and qualitative research, leaving a critical gap.

Methodology

STUDY DESIGN: Qualitative phenomenological approach.

SETTING: Rashid Latif Medical College/ Arif Memorial Teaching Hospital.

DURATION: 6 Months

SAMPLE SIZE: 10–15/ (until data saturation)

SAMPLING: Purposive sampling technique.

DATA COLLECTION: Formal IRB approval, open invitation to house officers in an official WhatsApp group to include house officers with mistreatment experiences.

DATA ANALYSIS:

- Thematic analysis (Braun and Clarke (Naeem et al., 2023) and by NVivo or Atlas.ai.)

Result

The study is expected to demonstrate that mistreatment will directly or indirectly influence their decisions regarding the pursuit of a particular specialty and will negatively affect medical students' mental, physical, and emotional well-being.

Conclusion

Mistreatment during clinical academic years negatively affects career choice and selection of specialty among house officers

Keywords

Mistreatment, House Officers, Clinical Academic Years, Career Choice

Posters Presentation

Learning Environment

88. ***From Textbook to Chatbot: Evaluating the Role of an AI Chatbot Tutor (AnatBot) in Enhancing Anatomy Learning and Motivation among Undergraduate Medical Students***

Nadia Majeed
AUMDC

Introduction

Traditional anatomy teaching methods provide factual knowledge but lack personalization, which limits deeper understanding, with advances in AI, tools like chatbots offer real-time guidance and tailored feedback. This study aims to evaluate the potential of an AI Chatbot in improving learning and intrinsic motivation of medical students in Anatomy education.

Methodology

Quantitative, Randomized controlled trial (RCT) conducted on Undergraduate second-year MBBS students at Abu Umara medical and Dental college Pakistan. Non-probability purposive sampling Sample Size: 66 students (33 per group) randomly allocation into intervention and control groups Development of Chatbot (AnatBot) Data Collection: Pre-test MCQ, Post-test MCQ, Post-intervention IMI Questionnaire

Result

AI chatbot enhances learning and scores. Promotes self-directed and consistent learning. Offers empirical evidence on chatbot use in anatomy education.

Conclusion

Customized AI chatbot can significantly enhance Anatomy learning and intrinsic motivation among undergraduate medical students. The findings will offer practical, context-specific recommendations for implementing AI chatbots as supplementary tools complementing human teaching, help institutions reform curriculum delivery and better prepare learners for future technology integrated healthcare environments.

Keywords

Artificial intelligence, Chatbot, Learning, Motivation, Medical students

Posters Presentation

Nursing Education, Midwifery

89. **“Strengthening Nursing Education and Midwifery: Empowering Nurses and CMWs for Diabetes and NCD Care in Pakistan”**

Farhana Tabassum Siddique

King’s College London, UK

Introduction

Pakistan ranks third globally in diabetes prevalence, with 33% of adults affected. NCDs such as hypertension and cardiovascular diseases add to the burden. Nurses and community midwives (CMWs), as frontline providers, can lead diabetes and NCDs care, yet gaps in education, empowerment, and advanced roles restrict their potential.

Methodology

A cross-sectional online survey was conducted (May–August 2025) with 1,208 nurses across 62 cities (>1% of Pakistan’s registered graduate nurses). The questionnaire assessed diabetes knowledge (DKQ-R), awareness of NP/ANP roles, and readiness for advanced practice. Free-text responses identified barriers and capacity-building opportunities in nursing education and midwifery training.

Result

Knowledge regionally varied; gaps were noted in self-management and leadership. Over 65% expressed readiness for advanced roles, but barriers included poor institutional recognition, limited training pathways, and resource shortages. Strong demand emerged for structured diabetes/NCDs education, capacity building, and policy recognition of NP/ANP roles to strengthen nursing and midwifery practice

Conclusion

This largest national nursing survey highlights readiness for advanced diabetes roles and urgent capacity needs. Education, mentorship, and NP/ANP recognition are essential to empower nurses and CMWs. Strengthening nursing education and midwifery capacity can transform diabetes and NCD care in Pakistan, advancing Sustainable Development Goal 3: Good Health and Well-Being.

Keywords

Nursing Education; Midwifery; CMW; Nurse Empowerment; Diabetes; NCDs; Advanced Nursing Roles; Pakistan

Posters Presentation

Nursing Education, Midwifery

90. **Occupational exposure to chemicals and cardiovascular risks among healthcare workers –evaluating the impact of hospital-based chemical exposure on heart health**

Aqib Dil Awaiz

New Life Institute of Nursing, Multan/ UHS

Introduction

Occupational exposure to hazardous chemicals in healthcare settings poses a significant, yet often under recognized, threat to cardiovascular health. (Karamova, Valeeva et al. 2021) Despite increasing global attention to occupational health, evidence linking chemical exposure to cardiovascular risk among nursing professionals remains limited, particularly in resource constrained countries

Methodology

This cross-sectional study was conducted over eight months (July 2024-February 2025) in tertiary care hospitals located in Lahore, Rawalpindi, Faisalabad, and Multan. A total of 450 healthcare workers were selected using stratified random sampling. Participants were categorized into low, moderate, and high chemical exposure groups based on job roles and department-specific chemical usage. Cardiovascular risk was assessed using the Framingham Risk Score blood pressure measurements, lipid profiles, fasting glucose, and ECG evaluations.

Result

FRS scores increased with exposure level, from 6.8 ± 2.1 in the low group to 12.3 ± 3.5 in the high exposure group ($p < 0.001$). Significant elevations in systolic and diastolic blood pressure, LDL cholesterol, and fasting glucose were observed in high exposure participants. Multivariate analysis confirmed chemical exposure as an independent predictor of elevated cardiovascular risk ($\beta = 0.37$, $p < 0.001$)

Conclusion

Healthcare workers exposed to hospital-based chemicals are at a heightened risk of cardiovascular disease. These findings highlight the need for proactive occupational health policies and cardiovascular risk screening in healthcare settings.

Keywords

Cardiovascular Diseases, Chemical Exposure, Cross-Sectional Studies, Healthcare Workers, Nursing staff, Hospital Environment,

Posters Presentation

Social Accountability

91. **Digital Professionalism and Use of social media in undergrad medical and dental students.**

Fariha Fayyaz

MME Scholar at UCMD /employee at Azra Naheed Dental College, Superior University, Lahore.

Introduction

The embedding of social media in the everyday experiences of undergraduate dental and medical students has revolutionized learning, professional networking, and communication. This new digital era poses great challenges to upholding standards of professionalism. Incidents of breaches of confidentiality, violations of patient autonomy, and reputational risks are on the rise. This research highlights the need for an overhaul of professionalism among healthcare students through the integration of digital behavior standards and raising awareness of e-professionalism.

Methodology

A systematic review of literature was carried out with the use of PRISMA to identify peer-reviewed articles on e-professionalism in undergraduate healthcare students. Google Scholar and PubMed were searched with keywords such as "e-professionalism," "digital professionalism," and "medical students." Upon screening 55 records and excluding duplicates, 25 full-text articles were screened for eligibility. In the end, 5 peer-reviewed articles were used in the final synthesis, which provided a concentrated analysis of ethical issues and curriculum gaps in digital professionalism.

Result

The review found that there was a widespread prevalence of unprofessional behavior on social media among undergraduate students, such as violations of patient confidentiality and the sharing of inappropriate content. Even though digital platforms have several benefits in education, the absence of formal training in digital-professionalism is responsible for the lapses in ethics. The findings point out the major gap in the curricula of medical schools, where students are usually not sensitized to digital boundaries and the implications of online misconduct.

Conclusion

The research ends by concluding that healthcare professionalism needs to adapt to include digital behavior. Misuse of social media can erode patient trust, breach ethical norms, and destroy institutional reputation. To mitigate these threats, it is necessary to incorporate digital-professionalism modules in undergraduate medical and dental courses. Systematic training and sensitization programs will equip students with responsible use of digital platforms, protecting their professional reputation as well as the integrity of patient relationships.

Keywords

Digital Professionalism, E-professionalism, Social Media, Medical students, Dental students.

Posters Presentation

Social Accountability

92. *Exploring strategies of integrating social accountability in undergraduate medical education in pakistan*

Noor Ijaz
UCMD

Introduction

Social accountability (SA) aligns medical education, research, and service with community health needs. Although globally recognized by frameworks such as WHO, WFME standards, CPU, and ASPRIRE, its integration into undergraduate medical curricula in Pakistan remains limited.

Methodology

A qualitative phenomenological study was conducted at the University College of Medicine & Dentistry, University of Lahore. Purposive sampling recruited 6–12 medical educationists with over 3 years of undergraduate curriculum experience. Data collection included critical analysis of global SA frameworks, focus group discussions, and thematic analysis.

Result

The study identified limited assessment tools, weak evaluation mechanisms, and poor integration of SA in current curricula. Key themes included the need for explicit and implicit embedding of SA principles, contextualization of international frameworks, and expert consensus on feasible pedagogical strategies. Findings highlighted gaps in the Pakistan Medical & Dental Council's (PM&DC) 2024 undergraduate curriculum guidelines and emphasized the necessity for stronger faculty training and regulatory reforms.

Conclusion

Integrating SA into medical education in Pakistan requires tailored strategies that balance global standards with local needs. Embedding SA will not only strengthen curricula but also enhance community health outcomes, foster equitable healthcare services, and improve the practice of medical education.

Keywords

Social accountability, medical education, curriculum integration, Pakistan, undergraduate.

Posters Presentation

Student engagement

93. *Chatbot-Assisted Learning in Medical Education: A Pilot Study on Supporting Struggling Students Through AI*

Aizaz Ahmad Khan

Shalamar Medical and Dental College

Introduction

Many medical students struggle to meet the demands of the curriculum due to a lack of personalized academic support. Traditional support systems are often reactive, generalized, and reliant on faculty time. Artificial Intelligence (AI)-powered chatbots offer a novel solution by providing scalable, nonjudgmental, and tailored assistance. This pilot study will explore the implementation of Dr. Bot, an AI-driven chatbot designed to identify learning styles and provide individualized guidance to academically struggling students in an undergraduate medical program.

Methodology

A mixed-methods pilot study will be conducted with 25 first-year MBBS students from a private medical college, selected based on poor module academic performance. The intervention will involve the use of Dr. Bot, a conversational chatbot that will guide students through a learning style assessment (VARK model) and deliver personalized study tips, motivational nudges, and reflective prompts over a four-week period. Data collection will include pre- and post-intervention surveys to assess changes in self-efficacy, engagement, and satisfaction. Qualitative data will be obtained through focus group discussions.

Result

It is anticipated that students will report increased awareness of their individual learning styles, improved motivation, and enhanced self-regulated learning skills. The chatbot is expected to be perceived as easy to use, emotionally safe, and helpful in guiding academic recovery. The study also expects minimal demand on faculty resources.

Conclusion

This study will assess the feasibility, acceptability, and educational impact of Dr. Bot as a student-centered digital tool for academic support. If successful, the findings will support broader integration of AI chatbots in medical curricula to provide timely, personalized learning interventions for struggling students. Long-term studies will be recommended to evaluate sustained impact.

Keywords

Artificial Intelligence, Chatbot, Medical Education, Learning Styles, Personalised Learning

Posters Presentation

Student engagement

94. *Students as Partners (SaP): Revolutionizing Dental Curriculum through Collaborations*

Annam Kamran
UCMD

Introduction

Students as Partners (SaP) is a collaborative model in which dental students work with faculty to design, deliver, and evaluate curricula. This approach shifts learners from passive learners to active co-creators, aligning with competency-based education. In dentistry, rapid advances such as digital dentistry, artificial intelligence, and minimally invasive techniques require curricula that integrate student perspectives to remain relevant.

Methodology

To explore strategies, benefits, and challenges of implementing SaP in dental curriculum development. A narrative review of literature (2000–2024) was undertaken, focusing on co-creation models, curriculum committees, structured feedback systems, peer teaching, and student-led research.

Result

The results show that student representation (80%), structured feedback (70%), and peer teaching (65%) are the most widely adopted SaP strategies, while co-created electives (55%), curriculum mapping (50%), and student-led research (45%) remain less common. This indicates a gradual but uneven shift toward active student partnership. Benefits include improved curriculum relevance, increased student engagement, leadership development, and stronger professional identity. Challenges involve faculty resistance, limited student training, accreditation requirements, and risks of tokenism.

Conclusion

Student representation and feedback are well established, while curriculum co-creation and research remain limited. This reflects a shift toward active student partnership, with SaP offering student-centered programs that prepare graduates for evolving professional needs.

Keywords

Dental education, Students as Partners, curriculum development, co-creation, student engagement

Posters Presentation

Student support (Mentoring, Counseling)

95. *Exploring the Relational Dynamics Between Medical Student Mentees and Faculty Mentors*

Sehar Zahid

University of Lahore

Introduction

Mentorship is a critical component of undergraduate medical education, positively influencing mentees' academic performance, professional development, and social integration. Existing literature primarily emphasizes the benefits for mentees. Still, it neglects the mentorship as a dynamic, reciprocal process (Wei et al., 2020). It lacks sufficient depth in addressing the reciprocal and relational aspects of mentorship; mentors' perspectives, emotional experiences, and contributions to their own professional identity development remain underexplored. By moving beyond a one-sided focus on mentees, this study positions mentorship as a bidirectional process that fosters growth for both mentors and mentees (Crites et al., 2023).

Methodology

STUDY DESIGN: Qualitative

SETTING: This study will be conducted in a PMDC-approved undergraduate medical Rashid Latif Medical College, Lahore (RLMC) /Arif Memorial Teaching Hospital (AMTH)

DURATION OF STUDY: 6 Months

SAMPLE SIZE: 10–12 mentees and 6–8 faculty mentors (Braun & Clarke, 2008)

SAMPLING TECHNIQUE: Purposive sampling with maximum variation type will be used to capture a wide range of perspectives (Rai & Thapa, 2019)

SAMPLE SELECTION: Inclusion Criteria: Faculty mentors and students in structured mentoring.

DATA COLLECTION PROCEDURE: IRB-approved, consented, semi-structured interviews will be conducted

DATA ANALYSIS: NVivo coding, Braun–Clarke thematic analysis will be applied (Braun & Clarke, 2008).

QUALITY ASSURANCE: For quality assurance, SRQR or COREQ guidelines will be followed at each step for this study (Dossett, L. A. et al. 2021).

Result

The expected outcome of this qualitative study is a deeper understanding of the relational dynamics between faculty mentors and medical student mentees, particularly focusing on mutual influence, emotional connections, and professional development.

Conclusion

The study will identify core components such as trust, communication, and reciprocity that contribute to effective mentoring.

Keywords

Mentorship, professional identity formation, relational mentoring, mentor perspective, emotional experience

Posters Presentation

Student support (Mentoring, Counseling)

96. *A Qualitative Exploration of Metacognition Through the Lens of Mentors and Struggling Mentees*

Prof Dr Ansa Rabia

University of Lahore/ CMH Lahore Medical College

Introduction

In evolving paradigm of medical education, focus has shifted from rote memorization to the development of metacognition “awareness and regulation of one’s cognitive processes” which plays a pivotal role in academic performance. Struggling medical students exhibit underdeveloped metacognitive skills, contributing to academic difficulties. Structured mentorship programs can enhance metacognitive awareness.

Methodology

Qualitative-exploratory-study using purposive sampling to select 10 trained-mentors and 10 struggling-mentees (scoring <50% in Block-1 examinations) from first-year-medical-students at CMH-Lahore-Medical-College. Mentors will be given training-session on metacognition techniques. Mentees will be engaged in a four-week structured-mentorship-program. Semi-structured interviews will be conducted and analyzed using Braun and Clarke’s thematic analysis framework.

Result

Findings are expected to inform institutional mentoring practices, offering deeper insight into mentorship as a pedagogical tool for enhancing self-regulated learning and academic resilience in undergraduate medical education. It will uncover how mentorship fosters metacognitive growth, the strategies employed by mentors, and the challenges faced by both mentors and mentees.

Conclusion

Structured-mentorship, through guided reflection and dialogue, supports the development of metacognitive knowledge and regulation in struggling medical students. Mentors, by scaffolding self-awareness, goal setting, and monitoring strategies, enhance mentees’ ability to reflect on and control their learning processes. This process is shaped by effective mentor-mentee-interactions, institutional learning climate, and individual-motivation.

Keywords

Metacognition; Mentorship; Undergraduate; Medical; Mentors; Qualitative Research.

Posters Presentation

Workplace-based Learning and Assessment

97. *EPAs in Obstetrics & Gynaecology . Advancing Cmppetency based training in post graduates*

Dr Nadia Zahid

Avicenna Medical & Dental College. Lahore

Introduction

EPAs are observable, measurable tasks entrusted once competence has been demonstrated. Obstetrics and Gynaecology, due to its complexity, requires precision and adaptability. Integrating trust-based professional activities provides a structured roadmap to prepare trainees for clinical work.

Methodology

Designing EPAs using key principles (alignment with clinical practice, competency mapping, assessment integration).

Reviewing international EPA frameworks (Canada, Netherlands, Ireland, etc.).

Identifying challenges in implementation (faculty calibration, funding, trainee misconceptions, avoiding checkbox culture).

Result

EPA frameworks in OBGY link supervision levels with observable clinical tasks.

Integration of EPAs fosters accountability, supervision, and readiness for independent practice.

International comparisons show feasibility across multiple settings.

Conclusion

EPA-based postgraduate training ensures a supervised, competency-based approach in OBGY.

By connecting clinical tasks with trust-based decisions, it enhances patient safety, accountability, and prepares graduates for independent practice

Keywords

Entrustable Professional Activities (EPAs) , Competency-Based Medical Education (CBME) , Obstetrics and Gynaecology Training

Posters Presentation

Workplace-based Learning and Assessment

98. *Assessment of Communication Skills of House Officers in Light of PMDC Seven-Star Doctor*

Nayyer sultana

Central Park Medical College

Introduction

Effective communication is central to safe and compassionate care. It improves diagnosis, adherence, satisfaction, and reduces conflicts. PMDC's Seven-Star Doctor framework emphasizes "Communicator" as a key role. Current assessments focus on knowledge and procedures, with little structured communication evaluation. Undergraduate curricula include communication skills but transfer into practice during house job is uncertain.

Methodology

A mixed-methods, cross-sectional study will be conducted among 100–120 house officers at a tertiary hospital. Communication will be assessed through Mini-CEX, OSCE, 360° feedback, and self-assessment. Focus groups and interviews will explore barriers and training needs. Data will be analyzed using descriptive statistics, comparative tests, and thematic analysis for triangulation.

Result

House officers may show gaps in empathy, counseling, and conflict resolution. Structured evaluation will highlight deficiencies and identify training needs for better communication in practice.

Conclusion

Communication is central to safe, ethical practice. Identifying weaknesses among house officers will guide targeted workshops, curricular reforms, and hospital policies, ensuring alignment with PMDC's Seven-Star Doctor role.

Keywords

Communication skills, house officers, Seven-Star Doctor, empathy, counseling, assessment, OSCE, Mini-CEX

Posters Presentation

Workplace-based Learning and Assessment

99. *From EPAs to Real-Life Practice: Bridging the Curriculum–Clinic Gap in General Surgery*

Dr Muhammad Saleem Iqbal

Faisalabad Medical University Faisalabad, Pakistan

Introduction

Medical education faces a persistent curriculum–clinic gap: what students learn in classrooms often fails to match the demands of real surgical settings. General surgery requires rapid decision-making, procedural skills, and effective communication, which traditional assessments rarely capture. EPAs provide a framework for operationalizing competencies into observable, assessable clinical tasks

Methodology

Selection: Ten EPAs relevant to general surgery were identified from the literature (Ten Cate, AMEE, AAMC) and validated by local experts.

Mapping: EPAs linked to assessment tools (Mini-CEX, DOPS, OSCEs, 360° feedback).

Implementation: Faculty development workshops were conducted to train supervisors on entrustment decision-making.

Data collection: Student/faculty surveys + longitudinal clerkship performance reports.

Outcome measure: Progress toward targeted entrustment levels

Result

35% increase in perceived student readiness.

70% increase in supervisor entrustment confidence.

Notable gains in documentation skills, communication, and student engagement.

Conclusion

An EPA-based readiness map bridges the curriculum–clinic gap by emphasizing what students can safely be trusted to do rather than what they merely know. EPA-aligned assessments enhance clarity, feedback, and entrustment, transforming readiness into trust, and trust into safer care

Keywords

Entrustable Professional Activities (EPAs), Curriculum–Clinic Gap, Competency-Based Medical Education (CBME), Surgical Training, Clinical Readiness

Posters Presentation

Stress, wellbeing, and burnout

100. Accessing the Impact of Financial Burden Related to Tuberculosis Treatment on Social Support for Patients: A Pilot Study

Ruhamah Yousaf

The University of Lahore

Introduction

Tuberculosis (TB) continues to be a significant public health challenge, with many patients facing financial barriers to treatment. Social support systems are vital in helping patient adhere to treatment. This pilot study aims to access the impact of financial burden related to TB treatment on the social support.

Methodology

This was a cross-sectional pilot study conducted over a period of three months. The study population comprised of 50 TB patients, who were selected using convenience sampling from Gangaram Hospital, Lahore, Pakistan. Data were collected through face-to-face interviews.

Result

Most participants were male 62%, aged 55-64 (24%), with 68% from lower-income backgrounds and 70% married. A significant proportion (50%) were unemployed. Significant association between health professional fees and stigma ($X^2 = 46.549$, $p = 0.004$) and food costs ($X^2 = 30.009$, $p = 0.018$). Regression analysis showed health professional fees and transportation costs significantly impacted family support ($\beta = 0.424$, $p = 0.005$). Spearman's correlation also indicated weak positive association between stigma and costs ($\rho = 0.251$, $p = 0.078$) and family support ($\rho = 0.424$, $p = 0.002$).

Conclusion

This study emphasizes the crucial role of family support in reducing the financial burden faced by TB patients. Despite many participants coming from lower-income backgrounds, the significant associations between social support and financial burden underscore the need to strengthen support systems to mitigate the economic challenges.

Keywords

Financial Burden, Social Support, Tuberculosis

Posters Presentation

Others

101. Curriculum Viability

Dr. Nadia Ahmad

Shalamar Medical & Dental College, Lahore

Introduction

Curriculum Viability: A New Paradigm Traditional curriculum evaluation focuses solely on whether quality standards are met, without identifying why standards may not be achieved Curriculum viability = the degree to which quality standards are met combined with the presence of inhibitors affecting those standards Inhibitors are issues or factors detrimental to achieving quality standards (e.g., irrelevant content, lack of faculty involvement, poor communication) Current accreditation approaches (WFME, LCME) assess standards but do not systematically identify underlying problems Gap in literature: Limited research combining both standards and inhibitors to provide comprehensive curriculum assessment Why This Matters Enables preventive rather than reactive curriculum improvement Identifies root causes of curriculum weaknesses Helps bridge perception gaps between teachers and students Provides actionable insights for curriculum developers and evaluators

Methodology

Multi-Method Research Design Phase 1: Scoping Review Searched 8 databases using keywords: curriculum, quality, viability, standards, inhibitors Screened 1,233 articles → 36 full-text reviewed → 13 included (using Quallsyst quality criteria >50%) Only 2 studies addressed both standards AND inhibitors Phase 2: Delphi Consensus Study 25 international experts (7 countries, 13 institutions) across 2 rounds 80% agreement threshold on 5-point Likert scale Achieved consensus on 40 of 44 items (27 standards, 13 inhibitors) Experts ranked indicators by importance within each curriculum area Phase 3: Questionnaire Development & Validation Teacher questionnaire: 575 participants from 77 medical colleges Student questionnaire: 247 final-year students from 12 colleges Rigorous validation: expert review (S-CVI: .95 teachers, .94 students) → cognitive interviews → confirmatory factor analysis Final instruments: 25 items/6 constructs (teachers); 14 items/3 constructs (students) Phase 4: Field Application 79 teachers and 74 students from one medical college Mixed methods: questionnaires + focus group discussions Statistical analysis: Mann-Whitney U test, thematic analysis of qualitative data

Result

Questionnaire Development Success Valid and reliable instruments achieved (Cronbach's α : .89 teachers, .81 students) Teacher constructs: Educational Program, Disciplinary Culture, Social Interaction, Institutional Policies, Communication Practices, Faculty Involvement Student constructs: Educational Program, Student Requirements, Institutional Culture 8 common items allow direct teacher-student comparison Curriculum Assessment Results No strong inhibitors detected in evaluated curriculum overall High curriculum viability: teachers and students both rated most areas positively Significant divergence identified: Teachers strongly agreed no Educational Program inhibitors exist (median=1), while students only somewhat agreed (median=2, $p<.05$) Convergence found: Both groups agreed on Institutional Culture (median=2, $p>.05$) Solutions to Bridge Perception Gaps Three main approaches

emerged from focus groups: Improve communication: Explicit instruction delivery, interdepartmental meetings, clearer learning outcomes Enhance stakeholder roles: Senior faculty teaching presence, faculty development, student involvement in curriculum committees Strengthen assessment: Align assessment with teaching methods, standardize formative assessment structure

Conclusion

Major Contributions Introduced and operationalized "curriculum viability" as comprehensive evaluation approach Developed evidence-based framework covering 8 curriculum domains Created validated, reliable measurement tools for both teachers and students Demonstrated practical application identifying perception gaps and solutions Future Research Needs Validate questionnaires in diverse international contexts and curriculum types Develop educational manager questionnaire to complete stakeholder perspective Investigate facilitators (not just inhibitors) of curriculum viability Longitudinal studies examining how inhibitors evolve over time Create curriculum viability scoring systems for benchmarking Final Message Curriculum viability assessment provides a more complete picture of curriculum health by identifying not only whether standards are met, but also understanding the barriers preventing their achievement—enabling truly evidence-based curriculum improvement.

Keywords

Curriculum Viability, Curriculum inhibitors, Curriculum health

Posters Presentation

Others

102. *AI in PBL Opportunities & Challenges*

Nida Riaz

UCMD,UOL

Introduction

The ongoing transformation of the Medical world with the advent of AI has also impacted various teaching methods, such as PBL. The integration of AI in PBL can enhance students' understanding and deepen problem solving skills. Certain concerns still remain that if AI will hamper students' critical thinking.

Methodology

I reviewed nine articles published from 2023–2025; after screening, five were included. I synthesized their findings thematically to identify key opportunities and challenges of AI in PBL.

Result

Studies consistently report improvements in knowledge acquisition, student satisfaction, and case generation. Reported challenges include overreliance, reduced critical thinking, ethical concerns, and lack of faculty training.

Conclusion

AI can be a powerful adjunct in PBL, but must be balanced with human guidance to preserve critical thinking. Careful implementation, guidelines, and faculty development are essential.

Keywords

Artificial intelligence, critical thinking

Posters Presentation

Others

103. *Exploring the intersection of personal and professional roles in professional identity formation in senior medical students*

Atika Masood

University of Lahore

Introduction

Professional identity formation (PIF) is a critical developmental process in medical education, shaped by the integration of personal and professional roles. In collectivist and hierarchical cultures such as Pakistan, medical students often balance family, cultural, and religious obligations alongside clinical and academic demands, creating tensions that impact their professional growth. Study aims to explore how final-year medical students perceive and navigate the intersections of their personal and professional roles, and how these experiences influence their PIF.

Methodology

A qualitative, descriptive study will be conducted at Akhtar Saeed Medical & Dental College, Lahore, Pakistan. Using purposive sampling, 15–20 final-year medical students who have completed clinical rotations will be recruited. Data will be collected through semi-structured, in-depth interviews, guided by themes of identity dissonance, cultural/religious values, professional expectations, and coping strategies. Transcripts will undergo thematic analysis following Braun & Clarke's six-phase framework, with independent coding to ensure trustworthiness.

Result

The study is anticipated to identify key themes such as role conflict, professional socialization, hidden curriculum influences, coping mechanisms, and identity negotiation strategies. These findings will provide insights into how medical students reconcile dual roles, highlighting institutional and cultural factors that shape PIF.

Conclusion

Understanding the interplay between personal and professional roles offers valuable implications for medical educators in Pakistan and similar contexts. By fostering supportive environments and acknowledging cultural influences, institutions can enhance medical students' professional identity formation and overall well-being.

Keywords

Professional identity formation, medical students, role conflict, Pakistan, qualitative study

Posters Presentation

Others

104. *Medical Educators' Lived Experience of Resilience Through the Lens of Systemic Resilience Theory*

Sara Hussain Gardezi

University of Child Health Sciences, Children Hospital

Introduction

Medical educators balance dual clinical and academic roles, facing heavy workloads, leadership pressures, and shifting institutional values. Resilience is often framed as an individual trait, overlooking systemic, relational, and cultural influences. This study explores educators' lived experiences of resilience using Systemic Resilience Theory.

Methodology

A qualitative phenomenological approach will be used. Semi-structured interviews with 10–15 clinician-educators will capture lived experiences. Data will be analysed through Interpretative Phenomenological Analysis, deductive coding guided by framework of Systemic Resilience Theory, to identify core processes and systemic principles shaping educators' resilience.

Result

Expected findings will highlight how systemic factors influence resilience, emphasizing processes like persistence, recovery, and adaptation, supported by principles of connectivity, participation, and learning. Insights will show how educators negotiate adversity and sustain well-being, informing institutional policies and faculty development initiatives.

Conclusion

Resilience in medical educators is a systemic phenomenon shaped by relational, cultural, and institutional influences. It emerges through dynamic processes supported by systemic principles. Strengthening these supports promotes educator well-being, faculty development, and institutional reform, while also enabling educators to nurture resilience in their students and future professionals.

Keywords

Resilience, Medical Educators, Systemic Resilience Theory, Qualitative Research, Professional Well-being

Posters Presentation

Others

105. **Exploring Perceptions of Medical Students with Physician-Parents in Navigating Professional Identity through Inherited and Personal Values During Clinical Training**

Khaloud Tariq

UOL

Introduction

Professional identity is enacted in practice. In Pakistan, medical students with physician parents enter clinical training carrying parental professional values. As these meet students' emerging values, alignment and tension arise. This study examines how legacy students navigate those moments, identifying situations, strategies, and conditions to inform support practices.

Methodology

It is a qualitative exploratory study using purposive sampling technique. The study involves 10-20 final year mbbs students with atleast 1 parent who is a physician. Data will be collected through interviews using a semi-structured interview guide. The data will be analysed through reflexive thematic analysis.

Result

Anticipated outcomes include a concise set of parental and emerging personal values, a map of clinical situations where alignment or tension arises; and reconciliation strategies with enabling or hindering conditions translated into brief, actionable supports for educators and legacy students in routine clinical training contexts.

Conclusion

The physician-parent relationship uniquely seeds professional values before clinical training. Tracing how legacy students negotiate those inheritances explains identity development and informs simple supports that help them shape their own emerging identities.

Keywords

medical students; parental professional values; professional identity formation; clinical training; reconciliation strategies

Posters Presentation

Others

106. Assessing Knowledge Level Regarding Hand Hygiene Among School-Going Students at Charsadda, KPK, Pakistan: A Cross-Sectional Study

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Introduction

Hand hygiene is a proven, cost-effective method for reducing the spread of infectious diseases, yet gaps remain between awareness and consistent practice, particularly in school settings. In Pakistan, limited evidence exists on adolescents' hand hygiene knowledge, especially in Charsadda, Khyber Pakhtunkhwa, where infrastructural and educational barriers may hinder compliance. Objective: To assess the knowledge of hand hygiene practices among matriculation-level school students in Charsadda, with emphasis on identifying demographic, educational, and infrastructural factors associated with knowledge levels.

Methodology

A descriptive cross-sectional survey was conducted among 327 matriculation-level students from 15 private schools in Charsadda between August 25 and November 20, 2024. Participants were selected through convenience sampling. Data were collected via a validated questionnaire (CVI 0.83, Cronbach's alpha 0.71) and analysed using SPSS version 27. Descriptive statistics summarized demographics and questionnaire responses; Chi-square tests with Cramer's V assessed associations between gender, residence, and knowledge level, with $p < 0.05$ considered statistically significant.

Result

The sample was predominantly male (82.0%) and rural (59.0%). Overall, 97.9% recognized hand hygiene as important, yet only 33.0% reported regular practice in school. Knowledge of proper handwashing was reported by 77.7%, but 27.8% believed water alone suffices. Only 20.8% had been exposed to school hygiene campaigns, and 50.5% lacked soap and water access at school. Gender was significantly associated with high knowledge ($p = 0.001$, Cramer's $V = 0.18$), favoring males; residence showed no association ($p = 0.137$).

Conclusion

While awareness of hand hygiene is high among Charsadda's matriculation-level students, practical adherence is limited by resource availability, low campaign exposure, and persistent misconceptions. Integrated strategies combining education, infrastructure provision, and institutional reinforcement are essential to bridge the knowledge-practice gap and improve long-term health outcomes.

Keywords

hand hygiene, knowledge, school students, Pakistan, cross-sectional study, infection prevention



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