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## Medical education in Japan

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Evaluating Japan from the point of view of medical education, one very unpleasant factor catches the eye - higher education in this country is paid • There are 79 medical schools in Japan-42 national, 8 prefectural (i.e. founded by the local government) and 29 private-which is about one school for every 1.6 million people.





# What is it, medical education in Japan?

Training of doctors in Japan lasts 6 years. Then for two years there is a general training in the field of therapy, surgery, obstetrics, etc., after that – postgraduate education for three years – either therapy or surgery, and then – a narrow specialization. In total – up to 12 years. medical education in Japan is paid, the most expensive and prestigious in the country. It is important to note that in Japan there is a shortage of doctors: on average, there are only 240 specialists per 100 thousand people. For comparison, in the Russian Federation, 440 doctors account for the same number of people.



# Student's working day

The student's working day at the clinic starts at the same time as the doctor's, depending on the department, it can be either 7.30 or 8.00. In the department, students spend almost the entire day supervising patients and mastering medical manipulations with short breaks for lectures and discussion of complex clinical cases. A special feature of the training of medical students in Japan is that they, being attached to their curator (resident or doctor), follow him almost everywhere, participating in all the activities of the department, whether it is a visit to the professor, examination of the patient in the intensive care unit or discussion of the results of instrumental or morphological research.





# The equipment of the clinics

In Japan, even in the smallest hospital – a 180-bed hospital located in kitaibaraki prefecture and serving 45 thousand people, there are opportunities for mri, rct and angiography. Much attention is paid to rehabilitation issues: patients who have been treated in the cardiology department or in the vascular center are then moved to the rehabilitation department, where they are treated inpatient or outpatient. for example, in the uonoma kikan hospital (urasa station, niigata) there is a large rehabilitation department for patients after a heart attack, stroke and injuries, in the department there is an imitation of a home environment-a kitchen, a bedroom, there are also all sorts of simulators for patient recovery. The recovery of the patient, his return to a full life is given great importance in Japan.



# The care of the elderly in Japan

The average life expectancy of women in Japan is about 87 years, men-80.5. Due to the increase in the number of elderly people recorded in the country, the burden on the working population is growing. According to forecasts, by 2025, more than 36% of people over the age of 65 will be in Japan. therefore, the government of japan has developed a program to open care homes for elderly people who are unable to care for themselves and do not have close relatives who can provide the necessary assistance. Such institutions in Japan are called centers for the care of the elderly. in such a center, a person can stay either around the clock, or during 12-14 hours of daytime, teachers, speech therapists are engaged with him, and entertainment events are organized. there is a special transport that takes elderly people from the center in the evening and brings them back in the morning.





# Emergency medical care in Japan

Ambulance in Japan refers to the fire service, which employs paramedics who perform intubation, heart massage, defibrillation, conduct a blood sugar test, and inject glucose if necessary. The ambulance service in Japan receives 5.5 million calls a year. Almost all patients are brought to the hospital, because paramedics do not have the right to make decisions about further therapy. It also happens that paramedics call the helicopter service if it is necessary to quickly deliver the patient to a specialized center (according to statistics, the helicopter service receives 2-3 calls a day). The team of the helicopter center consists of 12 doctors, 8 nurses, 2 doctors and 1 nurse are involved in one flight once a week, the rest of the time they carry out activities at the main place of work.



# Changes introduced in Japanese healthcare

Since 1990, Japanese medical education has undergone significant changes, and some medical schools have introduced integrated curricula, problem-based teaching aids, and clinical clerks. In 2001, the Government proposed a model basic curriculum that outlined the basic structure of undergraduate medical education with 1,218 specific behavioral goals. In 2005, a nationwide General Achievement Test was introduced; students must pass this test in order to receive a pre-clinical medical education. This is similar to the Stage 1 medical licensing exam in the United States, although the Japanese test is not a licensing exam. The National Exam for Doctors is a 500-point exam that is held once a year. In 2006, 8,602 applicants passed the exam, of which 7,742 (90.0%) passed. The new law requires postgraduate study for two years after graduation. Residents are paid reasonably, and the working day is limited to 40 hours a week. In 2004, the approval system was launched; the percentage of matches was 95.6% (46.2% for university hospitals and 49.4% for other teaching hospitals). Steady and meaningful changes in Japanese medical education continue.





Thank you for attention