

The Significance of Teacher-Training Education in the Cultivation of Clinical Competence and Academic Literacy of Academic Postgraduates in Chinese Medicine

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Abstract: As a core mechanism for training talents in Chinese medicine, a follow-up study has constructed a unique Chinese medicine education model through the in-depth intermingling of teacher-training mode and clinical practice. In the process of teacher training, the tutor transfers the implicit knowledge such as identification thinking and medication experience in the form of “oral transmission and clinical instruction,” so that the academic postgraduates of Chinese medicine can understand the holistic view of the correspondence between heaven and man, the methodology of identification and treatment, and the internal logic of rationale, methodology, prescription and medicine in the clinical diagnosis and treatment. This kind of transmission not only strengthens the students’ basic clinical skills of combining the four diagnoses and analyzing the evidence, but also fosters their academic innovation ability of applying classical theories to solve complex clinical problems through the in-depth analysis of typical medical cases. In this paper, we discuss the significance of teacher-training education in the training of academic postgraduates in Chinese medicine, and propose an optimization path for the reference of higher education in Chinese medicine.

Keywords: Teacher training; Chinese medicine education; Follow-up study; Academic postgraduate students of Chinese medicine; Clinical practice of Chinese medicine

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1. Introduction

Since ancient times, Chinese medicine has taken the “teacher-training system” as the core inheritance mode, and the question and answer between Qibo and Huangdi in the *Yellow Emperor’s Classic of Internal Medicine* embodies the teaching characteristic of “teaching by word of mouth and heart.” As one of the main methods to cultivate Chinese medicine talents, teacher-training education is generally inherited by the family and

masters, and the medical theories and clinical experiences of famous doctors are passed down from generation to generation through learning by ear^[1], and famous doctors of the past generations have accumulated clinical experiences by following the masters to form the unique thinking of the masters in the identification of evidence and the use of medicines in the clinical practice. Teachers follow the study to teach the theoretical knowledge of Chinese medicine and emphasize clinical practice and medical ethics, and cultivate students' evidence-based thinking by teaching them by example and listening to them, which has the advantage of teaching students according to their aptitude^[2,3]. However, the current training model for academic degree students in Chinese medicine places a strong emphasis on scientific research and experimentation, while clinical competence is not included among the core assessment criteria. Over time, this inevitably leads to the neglect of clinical practice, resulting in the awkward situation where academic postgraduates “only conduct experiments but do not see patients.” The practice of following a teacher in clinical settings can help address this shortcoming by enabling students to balance both clinical practice and scientific research. Since academic postgraduates do not participate in standardized residency training, they can allocate time for clinical observation and practice alongside their research activities. Therefore, it is recommended that academic postgraduates engage in clinical practice early on, integrating theoretical research with clinical experience. By emulating their mentors' traditional diagnostic and treatment approaches, students can cultivate clinical diagnostic thinking in Chinese medicine. This not only enables them to identify problems arising from clinical practice but also allows them to apply modern scientific methods and technologies to conduct innovative research^[4]. This paper analyzes and summarizes the significance of teacher-guided clinical training in enhancing both the clinical competence and academic literacy of postgraduate students in Chinese medicine, as outlined below.

2. Bridging the gap between theory and practice

At present, postgraduate education in Chinese medicine is mostly based on university education, aiming at cultivating high-quality Chinese medicine talents with “broad knowledge, thick foundation, strong ability and high quality,” so as to ensure the cultivation of Chinese medicine talents with systematic and professional knowledge of Chinese medicine theories and skills^[5]. With the popularity of institutional education, the traditional teacher-training system has been gradually replaced by standardized curricula, but the disadvantage of “focusing on theory but not practice” has been highlighted. Modern traditional Chinese medicine (TCM) education needs to “return to the essence of teacher-training” and restore the clinical thinking training of “teacher-training” through follow-up learning. As a bridge connecting TCM theory and clinical practice, it has become an important means to make up for the insufficiency of education in colleges and universities. There is a tendency to “focus on theory but not practice” in Chinese medicine education. Institutional education focuses on the teaching of classical theories, while follow-up learning can transform abstract knowledge into concrete clinical skills. Clinical scenarios are the best environment for knowledge internalization. By observing the actual operation of pulse diagnosis, tongue diagnosis, and other diagnostic techniques by the teacher, students can break through the textual limitations of the books and master clinical diagnostic skills.

3. Better grasp of research directions

Academic postgraduates need to take into account both scientific research ability and clinical skills training in TCM, but in the current training mode, the two are often separated: for academic postgraduates, their research direction is mostly focused on molecular biology and other basic areas of research, and the problem

orientation is often out of touch with the actual clinical problems; and for professional postgraduates, most of their time is spent on clinical rotation, which results in a lack of long-term and systematic targeted training of scientific research ability, making it more difficult to produce high-quality research results. For professional postgraduates, most of their time is spent on clinical rotations, thus lacking long-term, systematic, and targeted training in scientific research ability, and it is more difficult to produce high-quality research results. According to the current research, the scientific problems of academic postgraduates in TCM are less relevant to clinical practice, less innovative, and provide little guidance to clinical problems ^[6]. Western medicine helps to achieve the integration of clinical and scientific research through the “clinical rotation-scientific feedback” model (e.g., “problem-oriented learning”). TCM followers can learn from this model and build a closed loop of “clinical problem-scientific research-clinical application” to drive high-quality research topics with clinical problems. Clinical reflection is the core of thinking improvement, and “follow the teacher–perception–innovation” is the three-step path of TCM inheritance. From the typical cases or difficult cases observed in the follow-up consultation (e.g. chronic gastritis, systemic lupus erythematosus, etc.), we can think about why the diseases are cured or recurring, and even refine scientific questions from the clinical phenomena that are difficult to overcome in the process of the occurrence and development of certain diseases. Academic inheritance is the driving force of clinical, scientific research, and talent cultivation. Professor Wang Qiaochu, a national famous veteran Chinese medicine practitioner, put forward the idea of Chinese medicine research on “empirical prescription drugs–clinical research–drug coarse screening–clinical re-study–pharmacodynamics, pharmacological research–preparation development–transformation of the results,” which provides inspiration for his students to make innovations in the field of new Chinese medicine research ^[7]. Based on the evaluation of the efficacy of follow-up cases (e.g., the clinical efficacy study on the treatment of a certain disease by a prescription drug), we explore the research mechanism of the action of the prescription drug on the disease, find out the problems from the clinical practice of Chinese medicine, and rethink the existing clinical interpretations through the in-depth study of the scientific research and the application of the research results, so as to further enhance the clinical ability of the physicians, improve the clinical efficacy, and cultivate the talents with the ability of innovation for the benefit of the patients and the society ^[8].

4. Inheriting the experience and academic characteristics of famous doctors

Chinese medicine has been inherited for thousands of years because of the excellent traditional thought of continuous inheritance and development. Only by doing a good job of inheritance can we maintain the characteristics and advantages of Chinese medicine, and only on the basis of inheritance can we realize the innovation and development ^[9]. Follow-up is the core carrier of Chinese medicine experience inheritance, and the education of famous and old Chinese medicine teachers is a kind of teaching method to inherit the clinical experience and academic development ideas of famous and old Chinese medicine experts, and its purpose is to inherit the diagnostic thinking method and academic research characteristics of famous and old Chinese medicine experts. Learning from famous and veteran Chinese medicine experts in the process of understanding the thinking process of evidence identification and treatment, and its speculation, understanding, and summary, can deeply comprehend the essence of their academic, through long-term exposure to the unique charm of Chinese medicine knowledge, which is difficult to be presented in the classroom ^[10]. Beijing University of Chinese Medicine integrates the national teacher succession work with undergraduate training, postgraduate training, and young teachers’ training work, and effectively improves the quality of students’ and young

teachers' training through outpatient clinics to follow famous doctors, salons to learn the path of growth of famous doctors, reading and feeling the classics of Chinese medicine, regular academic lectures on the topic of famous doctors, and wards to assess the competition of classic diagnostic and treatment programs of famous doctors, etc., and makes full use of the advantages of the academic experience inheritance work of the national veteran Chinese medicine experts. The advantages of the academic experience inheritance work of Chinese medicine experts have laid a solid foundation for the training of famous doctors ^[11].

5. Cultivating clinical thinking patterns in Chinese medicine

During the follow-up process, students copy the prescription to follow the consultation process. Through the patient's four diagnosis, the teacher's experience with medication and the patient's medication feedback from a large number of records and learning and thinking, has accumulated a wealth of theoretical knowledge and clinical experience. In the process of constantly following the teacher, students gradually establish their own diagnostic and therapeutic ideas and discursive thinking ^[12]. Some research results show that the clinical thinking and discursive ability of the students who learnt from their teachers is significantly higher than that of the students who did not learn from their teachers in a systematic way ^[13], which is mainly manifested in the following points: firstly, the students need to observe in the clinic how their teachers integrate the information from the four diagnostic examinations into the conclusion of the diagnosis, and to learn the logic of the overall view of Chinese medicine and other clinical decision-making, which will subconsciously deepen their understanding of the holistic view of Chinese medicine. Secondly, when these students learn from the teacher's diagnostic and treatment ideas, prescription and drug delivery experience, they often avoid pure imitation and integrate independent thinking and innovation, improve their own knowledge structure, form their own diagnostic and treatment ideas, and organize, condense and improve what they have learnt from the clinic, so that they can rise to the level of academic thinking. The academic experience is embedded in daily life, and the ability of literature search and essay writing is enhanced, so that the academic ideas and the experience of using technology can be used to form academic essays, academic works, or to improve the quality of scientific research ^[14].

6. Enhancing the ability to handle complex cases

Postgraduate students in outpatient clinics will be the first contact with real patient groups, requiring physicians to make rapid judgments on the patient's situation, and based on this rational use of medication, students' clinical ability can be developed in this process ^[15]. Students follow their teachers to study cases of different types and complexity, encountering combinations of symptoms and identification difficulties rarely seen in textbooks, and through observing their teachers' diagnosis, analysis, and treatment of different conditions, they can gradually familiarize themselves with the manifestations, developmental changes, and treatments of various diseases, and accumulate rich clinical experience. In-depth analysis and discussion and differential diagnosis of similar diseases under the guidance of the teacher can provide a deeper understanding of the nature of the disease and the key points of diagnosis and treatment, which helps to develop one's ability to analyze and judge complex cases, avoid one-sided or wrong diagnosis, broaden clinical thinking, and improve the ability to accurately diagnose complex cases. For complex cases, the treatment plan usually needs to take into account a variety of factors, such as the patient's age, underlying diseases, and the severity of the disease. During the follow-up consultation, students can learn from the teacher how to formulate personalized treatment plans

according to the patient's specific conditions, including the selection of drugs, adjustment of dosage, and the timing of treatment, so as to improve their ability to formulate reasonable treatment plans.

7. Adapting to the development trend of modern Chinese medicine education

The Chinese Medicine Development Plan for the 14th Five-Year Plan issued by the General Office of the State Council of the People's Republic of China explicitly proposes to "improve the education system of teacher training in Chinese medicine, and promote the organic convergence of teacher training with institutional education, post-graduation education, and continuing education." In recent years, China's colleges and universities of traditional Chinese medicine have actively responded to the national development plan for traditional Chinese medicine, followed the laws of the development of traditional Chinese medicine education, and explored and practiced a variety of modes of teacher education. Taking the pilot class as the main focus, combining with the actual situation of their respective institutions, they have innovated the mode and form of teacher-training education, and carried out the reform and practice of integrating with the education of the institutions. The general basis of the reform is to supplement the teacher-training education without changing the basic mode of the existing education of the institutions, and to give full play to the characteristics and advantages of the teacher-training education of Chinese medicine, with the goal of cultivating the students' thinking of traditional Chinese medicine and clinical diagnosis and treatment ability.

Beijing University of Traditional Chinese Medicine (BUTM) has set up a five-year experimental class combining the three modes of education in Chinese medicine, namely, "institutional, teacher-training, and family-training," and has formed an on-campus "basic course stage clinical apprenticeship + clinical apprenticeship with teachers" and an off-campus "winter and summer holidays study with teachers." Clinical apprenticeship in the basic course stage and off-campus "learning from teachers during summer and winter holidays" are formed ^[16]. For example, "Tietao class," "Guowei class," "Daihan class" established by Guangzhou University of Traditional Chinese Medicine, "Guipai apricot class" of Guangxi University of Traditional Chinese Medicine, etc., these experimental classes are not only for clinical practice, but also for off-campus study during summer and winter holidays. These experimental classes all attach importance to the classics of Chinese medicine, allowing students to study the classics in depth and understand the way of thinking of Chinese medicine and the essence of identification and treatment of Chinese medicine. Each student in the experimental class is provided with a teacher to follow and learn from, so that they are exposed to clinical practice earlier than their counterparts in other ordinary classes, and are significantly better than their counterparts in the application of Chinese medicine thinking and clinical ability. Teachers teach by example, imparting clinical experience, medical ethics, and the cultural connotations of Chinese medicine. Through this mode of teacher-training education, students can more easily combine theory with clinical practice, which enables them to pass on the essence of the culture of Chinese medicine in its original form, and students can learn directly from the teacher's experience in the areas of diagnosis, treatment, and medication techniques. This phased follow-up mode effectively connects the theoretical courses, forming a virtuous cycle of "theoretical learning-clinical verification-theoretical enhancement," and realizing the organic integration of teacher training and modern academic education.

8. Integration of Chinese medicine teacher education and modern Chinese medicine talent cultivation

Although teacher education has its unique advantages, with the development of the times, teacher education also needs to keep pace with the times, optimizing the existing model on the original basis^[17]. To promote the development of teacher training education for academic postgraduate students of traditional Chinese medicine, it is necessary to combine the essence of traditional teacher training with the modern education system, and constantly explore the teacher training mode, which is of great significance to the cultivation of high-quality, high-level Chinese medicine talent team construction, as follows.

8.1. Integrating the experience of famous Chinese medicine practitioners to deepen the teaching content

The law of success of Chinese medicine talents shows that many famous and old Chinese medicine experts can only form their personal unique academic insights after they are old and experienced, and the inheritance and research of these valuable academic insights are relatively insufficient^[18]. To strengthen the inheritance of the academic experience of famous and old Chinese medicine experts, to build a number of national famous and old Chinese medicine experts inheritance studio, to apply the rich experience and technology of the elderly Chinese medicine experts to clinical practice, to explore and collate the canonical books into the improvement of clinical efficacy of the concepts and methods, and to increase the strength of the living inheritance^[19]. Teacher inheritance of famous doctors is the best way for Chinese medicine practitioners to become successful^[20], through the establishment of various forms of mentorship, follow-the-teacher system, academic succession and inheritance programs, academic thought inheritance studio of famous doctors and teachers, and other carriers and channels, constantly digging out and refining the core essence of Chinese medicine teacher inheritance education, and integrating it with the concepts of modern institutional education and the system of cultivation of talents in Chinese medicine^[21]. During this period, students should make good notes of their supervisors, follow up medical cases or practical records, and carefully understand and comprehend them, as well as write their own experience to comprehensively and systematically inherit their supervisors' academic thinking, clinical experience, or technical expertise^[22]. Explore on their own the unique identification methods that can accurately reflect the thinking characteristics of famous and old Chinese medicine experts, and master their clinical thinking patterns and ability to identify diseases, so as to lay a foundation for improving the level of clinical identification and enhancing the efficiency of Chinese medicine inheritance^[23]. We will gradually learn to understand the academic thinking and clinical skills of famous and old Chinese medicine practitioners, and pass on the torch of Chinese medicine.

8.2. Teacher practice and classical validation

The foundation of becoming an excellent Chinese medicine clinician is to familiarize oneself with the classics of Chinese medicine: “the classics are the foundation, and the teacher’s inheritance is the key.” The classics of Chinese medicine contain the profound relationship between heaven, earth, and human beings, and store the essence of Chinese medicine that has been used for thousands of years to treat the sick and save people’s lives, which is the source of living water for the academic development of Chinese medicine^[24]. Currently, Chinese medicine colleges and universities offer a large number of Western medicine courses, and the curriculum of classical Chinese medicine courses has been reduced. Some of them are even elective courses, which leads to medical students ignoring the importance of the four classics of Chinese medicine, having a shallow foundation in the classics of Chinese medicine, favoring the study of Western medicine, and habitually adopting the

way of thinking of Western medicine^[25]. If postgraduate students of Chinese medicine want to consolidate the foundation of Chinese medicine, they must be well versed in the classical writings of Chinese medicine, strengthen the study of the classical theories of Chinese medicine in recitation of the classics, innovate on the basis of understanding and interpreting the classics of Chinese medicine, and explore the true meaning of the classics^[26]. In the process of classical course learning and outpatient learning with teachers, one should also learn to learn by example, and internalize the knowledge of classical Chinese medicine into one's own clinical diagnosis and treatment ideas^[27], and really learn the classics and use them well. Learning to use, integrate, and strive to achieve the purpose of learning Chinese medicine classics in the classroom, and use Chinese medicine classics to solve clinical problems outside the classroom. Institutions can carry out regular lectures on TCM classics to cultivate postgraduate students' thinking in TCM and facilitate their clinical guidance^[28]. The classics of TCM are the living soul of TCM, and teacher education ensures the purity and vitality of TCM academics through the trinity model of "classics + clinical + teacher transmission." Only by taking root in the classics can we cultivate real Chinese medicine talents who have both a profound theoretical foundation and the ability to solve clinical problems flexibly.

8.3. Dual tutor system joint training

Clinical supervisors often have heavy clinical work, but the training of students' scientific research ability is relatively insufficient, and they are unable to take into account the training of postgraduate students' scientific research and clinical ability. In the "dual tutor system," clinical tutors are mainly responsible for the cultivation of students' clinical practice ability, guiding students to analyze typical cases, helping students to find clinical problems, guiding clinical practice, and strengthening the cultivation of students' clinical thinking^[22]; academic tutors are mainly responsible for the academic guidance on scientific research ideas and research methods, and are mainly responsible for graduate students' research topic selection, research method training, research process supervision and management. Guangzhou University of Traditional Chinese Medicine (GZUTM) has further innovated the integration of resources by means of a university-enterprise dual-mentor postgraduate training system to cultivate talents in the related fields in an all-round way^[29]. The implementation of the scientific research-clinical dual-tutor training model, which effectively integrates the resources of medical schools and affiliated hospitals, has fully leveraged their respective advantages and significantly improved the quality of medical postgraduate training. This model is worthy of further exploration and practice^[30].

9. Conclusion

Through the trinity model of "Clinical-Classical-Teacher-Transmission," TCM teacher-training education not only makes up for the practical shortcomings of institutional education, but also is a key path to meet the challenges of modern medical education. Teacher-training education is of great significance to the clinical and scientific research of academic postgraduates in Chinese medicine. In the clinical aspect, through the teacher training, students can follow the teacher into the clinical practice, observe the diagnosis and treatment ideas and methods from a close distance, learn from his rich clinical experience, transform the theoretical knowledge into the actual clinical skills faster, cultivate the clinical thinking and the ability to solve problems, improve the clinical skills, and learn to make accurate judgement and effective treatment of complex conditions. In the clinical follow-up, we help them to explore valuable scientific research problems and grasp the direction of scientific research, and at the same time, we pass on the academic spirit, create a good scientific research

atmosphere, cultivate their innovative thinking and scientific research quality, and promote the output of scientific research results. Through the construction of a systematic follow-up system, it injects sustainable power for the development of Chinese medicine inheritance and innovation.

Disclosure statement

The authors declare no conflict of interest.

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