Summary of results: Around 65% of faculties perceived inssuficient the current examination written examination method form. Similar perception was also made by the participants (34%). However, most of participants (66%) appreciated the items as comprehensive clinical competence assessment. As all medical schools have implemented clinical skills program, there was high demand on the OSCE implementation (93.5%).

Conclusion and take home message: Further data concluded the need for revised overall management policy in term of institution, introduction of paper-less written examination, multi-level item bank administration and integrated dual role of examination as output standardization and competence certification. Latest policy will be beneficial for school mapping, remediation process for re-taker and administrative effectiveness.

3 U 9

Evolution of traditional Chinese medicine education in Taiwan <u>SC Liao</u>, W Chen, MJ Chen, JG Lian (China Medical University, 91, Shueh-Shih Road, Taichung 404, Taiwan)

Background: Chinese Medical (CM) education in Taiwan began as a skill passed on from master to apprentice. It wasn't until 1958 that China Medical University first established a Chinese Medicine department, sixty years after the formalization of Western Medical education. We will discuss the CM education evolution in Taiwan and future struggles it may be facing.

Summary of work: Historical and literature review.

Summary of results: CM education has evolved from only apprenticeship teaching to being solely university education. Therefore four exams are now constricted to only one. Difficulties faced by CM education include the shortage of faculty and clinical teaching hospitals and government restrictions on the use of Western Medicine instruments and approaches in CM diagnosis. Also, those who graduate with both medical licenses can only choose one specialization to practice.

Conclusions: CM education development in Taiwan is similar to the way that Western medicine developed. But Chinese Medicine movement is hindered by government restrictions. Chinese Medicine and Western Medicine also has very much overlapped teaching materials but because of restrictions in approaches, this may lower the students' interest during their education.

Take home message: How Chinese Medicine can retain its own uniqueness within the future revolution and conglomeration of medical fields is a key component in its future development.

3 U 10

Effect of PBL implementation: students' perspective

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Background: Based upon its available teaching resources and conditions, a parallel PBL session has been developed and implemented at Shanghai Medical College, Fudan University as a supplementary part of its existing MD curriculum.