USE OF STANDARDIZED PATIENT IN NURSING EDUCATION:

A SYSTEMATIC REVIEW

HEMŞİRELİK EĞİTİMİNDE STANDARDİZE HASTA KULLANIMI: SİSTEMATİK İNCELEME

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Abstract

Introduction: Nursing students' education begins in the classroom prior to clinical training. The use of standardized patient during the education process is an alternative to traditional teaching methods. By enhancing the interaction between classroom and clinics, standardized patients in nursing education may contribute to the learning process by providing a realistic clinical learning experience in the classroom prior to actual clinical education.

Aim: This systematic review was intended to investigate the studies that have evaluated the outcomes of standardized patient use in nursing education.

Methods: A literature review was conducted by searching the databases of "CINAHL Plus", "Medline", "Health Source: Nurse/Academic Edition (EBSCO host)", "Sciences Direct" and "Google Scholar" through 573 articles. Articles were selected from a pile of full text studies that were written in Turkish or English, released in the last decade (January, 2015 – April, 2015) and found by entering the keywords of "simulated patients", "standardized patients", "nursing education", "simulated patients in nursing" and "standardized patients in nursing". Of these studies, 23 matching the research criteria were included in this study.

Results: The selected studies were divided into two groups of which one group evaluated the cognitive abilities and the other evaluated the psychomotor skills of the students. Selected articles were assigned to be used in experimental, quasi-experimental, descriptive and mixed research designs. In 7 of the studies, it has been determined that training with a standardized patient helps students to acquire communication skills. In addition, 7 of the studies reported an increase in students' satisfaction, self-efficacy, and self-confidence levels after training with a standardized patient. Students evaluated the use of standardized patient in nursing education as a beneficial and positive experience as it provides a realistic case presentation.

Conclusions: Although training with standardized patients in nursing education can be expensive and time consuming, it is considered an effective teaching method that contributes to students' satisfaction, self-efficacy and self-confidence, and improves their communication and motor skills.

Key words: standardized patient, nursing education, systematic review.

Özet

Giriş: Hemşirelik öğrencilerinin beceri öğretimi sınıfta başlayıp klinik uygulamayla devam eden bir süreci kapsar. Bu eğitim sürecinde Standardize hasta kullanımı geleneksel öğretim yöntemlerine alternatif olan bir yaklaşımdır. Standardize hasta kullanımı sınıfla klinik arasındaki engeli kaldırarak, öğrencinin gerçek klinik ortama gitmeden önce sınıf ortamında gerçekçi bir klinik öğrenme deneyimini yaşayarak öğrenmesine katkı sağlamaktadır.

Amaç: Bu sistematik inceleme, hemşirelik eğitiminde standardize hasta kullanımının sonuçlarını değerlendiren çalışmaları sistematik olarak incelemek amacıyla planlanmıştır.

Yöntem: Çalışmanın evrenini Aralık 2014 -Nisan 2015 tarihinde "CINAHL Plus", "Medline", "Health Source: Nurse/Academic Edition(EBSCO host)" "Sciences Direct " veri tabanları ile "Google Scholar" kaynaklarından taranarak ulaşılan 573 makale oluşturmuştur. İnceleme "Simulated Patients", Standardized Patients", "nursing education", "Simulated Patients in nursing" ve "Standardized Patients in nursing" anahtar kelimeleriyle son on yılda yayınlanmış (Ocak 2005- Nisan 2015), yayın dili Türkçe ya da İngilizce olan ve tam metni bulunan makaleler seçilmiştir. Bu makalelerden araştırma kriterlerini karşılayan toplam 23 çalışma incelemenin örneklemini oluşturmuştur.

Bulgular: Hemşirelik eğitiminde standardize hasta kullanımına ilişkin çalışmaların sistematik incelemesi, bilişsel becerileri ve psikomotor becerileri değerlendiren araştırmalar olarak iki grup altında gerçekleştirilmiştir. Çalışmaya dahil edilen makalelerde deneysel, yarı deneysel ve tanımlayıcı ve mix araştırma tasarımlarının kullanıldığı saptanmıştır. Araştırmaların 8'inde, iletişim becerilerinin kazandırılmasında standardize hasta ile eğitimin etkili olduğu belirlenmiştir. Ayrıca 7 araştırmada da standardize hasta ile eğitimden sonra öğrencilerin, memnuniyeti, öz etkililik ve öz güven düzeylerinde artma saptanmıştır. Öğrenciler standardize hasta ile çalışmayı gerçekçi vaka sunumu nedeniyle yararlı ve olumlu deneyim olarak algılamışlardır.

Sonuç: Hemşirelik eğitiminde standardize hasta ile çalışma pahalı ve zaman alıcı bir eğitim yöntemi olmasına karşın öğrenciye iletişim ve motor becerilerinin kazandırmasının yanı sıra öğrenci memnuniyeti, öz etkililik ve öz güvenin de gelişmesine katkı sağlayan bir öğrenme yöntemi olduğu görülmektedir.

Anahtar kelimeler: Standardize hasta, hemşirelik eğitimi, sistematik inceleme

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Introduction

The training of nursing students begins in the classroom and continues with clinical practice. However, current changes in health care such as the rising awareness about medical errors and the concerns regarding these errors complicate the clinical training of health professionals (Ryan et al., 2010). In addition, clinical practices can be even more difficult and troublesome for nursing students due to fear of harming the patient, having difficulty in transferring the theoretical knowledge into clinical practice and lack of supportive relationships (Flynn, 2012). Despite all these problems, educators are expected to well prepare the students for ever-changing health environment and acute clinical problems (Rauen, 2004). In order to overcome these challenges encountered in clinical practice, the use of simulation in nursing education has been initiated and become widespread (Metcalfe, Hall & Carpenter, 2007).

Simulation education facilitates learning for students without posing certain risks to patients, allows them to gain experience without feeling anxiety and provides a safe learning environment (Rhodes & Curran, 2005). Simulation is defined as imitation of

actually existing tasks, relationships, equipment, behaviors or some cognitive activities (Gaba, 2004). A variety of simulation strategies are used in nursing education such as video recording, DVD playback, computer based simulations, computer controlled simulators, interactive patient simulators and interaction with simulated/standardized patients (Alinier, 2007).

SP was first used by Howard Barrows as a simulation approach in 1963 (Levine & Swartz, 2008). An SP is an actor or actual patient who is trained to show true history and examination findings related to a certain disease (Dikici & Yarış, 2007; Levine & Swartz, 2008). They are trained to simulate a particular case precisely and repeatedly and they can provide feedback on the process of interview about a patient's perspective by evaluating the skills and performances of the learner based on the goals set by the instructor (Beullens, Rethans, Goedhuys & Buntinx, 1997; Vu and Barrows, 1994, Churchouse & McCafferty, 2012). SPs have been given many descriptive names in the literature in relation to their roles like "programmed patient", "prepared patient", "trained patient", "standard patient", "actor", and

"pseudo-patient". 'simulated However, patient' and 'standardized patient' are currently the most used terms. Although these two terms are different from each other, today the abbreviation SP is used to refer to both (Sarıkoç, Özcan & Elçin 2016; Barrows 1993). Beigzadeh et al. (2016) conducted a study in which they reviewed the literature in order to determine whether there was a difference between the terms of SP and simulated patient. The findings suggested that there were differences between these two modalities. Accordingly, a simulated patient, directed by a facilitator, is a person who is given a history to portray and acts a role in the clinical encounter with a medical student. On the contrary, an SP is not an actor but a patient who presents his or her personal, physical, social, and psychological history (Beigzadeh et al., 2016). Therefore, an SP is a real patient who does not act, and is a layperson who must be trained and coached carefully for portraying the patients, but a simulated patient is someone who portray a real patient (Beigzadeh et al., 2016).

The use of SP in nursing education is an alternative approach to traditional teaching methods. The SP application is an innovative, popular and learner oriented method of education by which the student can learn in a more controlled and motivated manner through the facilitation of an instructor, and which brings the

clinical and theoretical knowledge and experience together (Bland, Topping & Wood, 2011; Shin, Ma, Park, Ji & Kim, 2015). The SP contributes to the learning process by representing a realistic clinical case in the classroom prior to a clinical education and removing the barriers between the classroom and clinics. (Dikici & Yarış, 2007; Levine & Swartz 2008; Sarmasoglu, Dinç & Elçin 2015). Studies evaluating the outcomes and efficiency of SP use in nursing education are increasing day by day. The SP use in nursing education and its outcomes can guide the nursing educators. However, the number of systematic review studies that investigate exhibit the outcomes of these researches is limited. One such study covering all the health professions in the period 1996-2005 was a review study carried out by May et al. (2009), another was a meta-analysis (Oh, Jeon and Koh, 2015) which investigated the studies conducted on the SP use mainly in Korea. In this context, this paper presents an analysis of the studies investigating the SP use in nursing education and provides researchers with some actual data.

Research Questions

Throughout the study, answers to two questions were sought:

-What are the situations where SP is used in nursing education?

-How does the use of SP affect the knowledge and skills of students?

Method

The research was performed by two independent reviewers in accordance with the published protocol corresponding to the PRISMA statement (Moher, Liberati, Tetzlaff, Altman & Group, 2009) and the Cochrane Handbook of Systematic Reviews of Interventions (Higgins & Green, 2011). No ethical approval was required, since no human subjects were used in the experiments.

Sources of Data and Research Strategy

Following the databases of "CINAHL Plus". "Medline". "Health Source: Nurse/Academic Edition (EBSCO host)", "Sciences Direct" and "Google Scholar" were used to search the relevant articles from January 1, 2005 to April 1, 2015. The keywords were used in various combinations: "simulated patients", "standardized patients", "nursing education", "simulated patients in nursing" and "standardized patients in nursing". Then, original articles were retrieved from their sources.

Eligibility criteria and study selection

The following criteria were taken into account in the selection of articles that were included in the study:

 The study should investigate the outcomes of standardized/simulated

- patient use (SP) in nursing education.
- SPs must be selected from humans so that a face to face interaction can take place,
- The students must be selected from undergraduate and graduate level nursing students,
- Articles must be written in Turkish or in English,
- Articles must be published between January 1, 2005 and April 1, 2015, and
- Full text versions of the studies should be accessible.

The articles which were not published in English or Turkish languages and which focused on the virtual patients like computerized cases and simulators like mannequins were not included in this study.

Data Extraction, Analysis and Synthesis

The titles and abstracts of all related articles found through database search were evaluated three times different by researchers independently. If the title or abstract was not clear, the full-text version of the study was reviewed to understand whether it matched the inclusion criteria of the study or not. The reasons for exclusion of some articles were recorded and given in Table 1. The reviews were compared and 550 studies out of 573 were eliminated based on the inclusion criteria. As a result, the full texts of 22 studies were determined as the source material for the systematic review (Table 1). Each of the selected articles included studies that were conducted on nursing education and SP use. The authors declared no conflicts of interest.

An in-depth analysis of the selected articles was performed for the possible risk of bias. Critical and quality appraisals of the related studies were carried out using the appropriate tools. Systematic reviews were appraised using the ROBIS assessment tool (Whitinging et al., 2016).

Limitations of the Study

The literature review was carried out with limitations because some case studies that present valid findings for the research were not accessible. In addition, some limitations were encountered regarding the data analysis because of insufficiency of sample sizes in certain research investigated.

Results

This systematic review included 22 studies released between January 2005 and April 2015. Table 2 presents the type of the investigated studies, sampling characteristics, findings and results. The studies covered in the review were categorized into three main groups of working structure: setting and design,

cognitive skills and psychomotor skills of students.

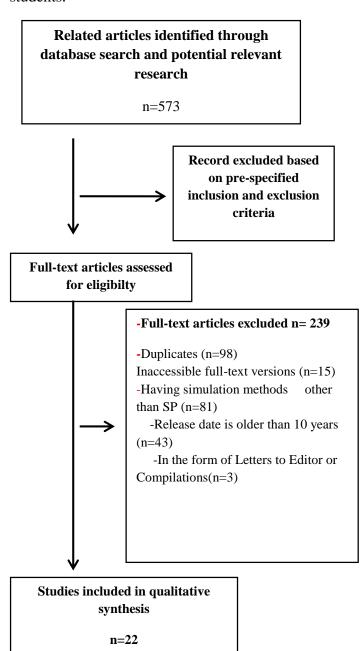


Fig 1. Summary of the study selection process (PRISMA flow chart).

Setting and Design

Setting: 10 out of total 22 studies (45.45 %) were conducted in the USA. The rest were carried out in the UK, Turkey, Canada, Ireland, Singapore, South Korea and Taiwan.

Sample Size: A total of 1709 subjects participated in the 22 studies. The sampling size varied between 7 and 348.

Study Design: 10 studies (45.45 %) were experimental design; 6 (27.27)%), 3 descriptive; (13.63)%), quasiexperimental; 3 %), (13.63)mixed (Randomized controlled and qualitative). 7 of the experimental studies (31.81 %) were randomized controlled, pre-/post-test was implemented in 4 of them, and post-test was conducted in 3 of them. In 3 of the experimental studies, control group was formed, however, the control experimental groups were not randomized, and a post-test was implemented.

Population: 5 of the studies (22.72 %) were conducted with senior students; 4 (18.18 %), with freshmen, juniors and graduates; and 1 (4.54 %), with both junior and senior students, and only sophomores. One of the studies was conducted with both nursing and medical students; another study was carried out with nursing, medical. pharmacy, occupational physical therapy, and audiology students. Characteristics of the student groups were not specified in 2 of the studies.

Teaching / Learning Issue: In 15 of the studies (68.18 %) included in the review, cognitive skills of the students were evaluated; and psychomotor skills were assessed in 7 (31.81 %) of them.

Role of SPs: SP patients acted out their roles according to the scenario specified by the teaching staff. In 2 of the studies (9.09 %), SP gave feedback to the students.

Evaluating Cognitive Skills

Whereas SP was used for teaching communication skills in 7 of the studies (31.81 %) reviewed under "cognitive skills" title, (Becker et al., 2006; Robinson-Smith et al., 2009; Zavertnik et al., 2010; Ryan et al., 2010; Lin et al., 2013; Kameg et al., 2014; Webster, 2014), in some of the studies, it was used to investigate team work (Barnett et al., 2011), home visit (Kim-Godwin et al., 2013), spiritual care (Fink et al., 2014), evaluation of risk of falling (Beischel et al., 2014), leadership skills (Sharpnack et al., 2013), culture-sensitive care (Ndiwane et al., 2014), and learning to collect data to develop a care plan (Karadag et al., 2016). In some of the studies in this group, mental state, suicidal and depression risks, as well as communication skills were evaluated. In 2 of the studies evaluating the communication skills, SP gave feedback to students on their communication skills (Rayan et al., 2010; Lin et al., 2013). The results of the studies evaluated in this group revealed that working with the SP developed students' therapeutic communication skills (Becker et al., 2006; Robinson-Smith et al., 2009; Zavertnik et al., 2010; Kameg et al., 2014; Webster, 2014). increased self-efficacy and confidence (Becker et al., 2006; Robinson-Smith et al., 2009; Sharpnack et al., 2013; Kim-Godwin et al., 2013; Fink et al., 2014; Ndiwane et al., 2014), boosted student satisfaction (Becker et al., 2006; Robinson-Smith et al., 2009; Zavertnik et al., 2010; Lin et al., 2014; Kameg et al., 2014; Webster, 2014), reduced anxiety particularly about contacting psychiatric patients (Kameg et al., 2014; Webster, 2014), helped the students evaluate real-like medical cases and clinical problems and contributed to planning of nursing care plan (Karadag et al., 2016), developed leadership skills (Sharpnack et al., 2013), and taught team work (Barnett et al., 2011). In a study comparing the efficiency of a videorecorded SP and patient interview by Becker et al. (2006), it was determined that there was no difference between the interpersonal communication scores of experimental and control groups, but students perceived working with SP as a positive, creative and meaningful experience. Similarly, Beischel et al. (2014) reported that they did not observe a statistically significant difference between experimental and control groups in terms of students' cognitive and attitude skills, yet a 10 minute SP-patient interview increased the experimental group students' competence in monitoring the patients and taking the necessary measures for the patients' falling risk. In their study that

compares the efficiencies of SP feedback on the SP interview, group discussion and the only SP patient interview in teaching the interpersonal communication skills, Lin et al. (2013) determined that although the learning satisfaction of the students increased in both groups, there was not a statistically significant difference between the communication skills of both groups. Ryan et al. (2010) concluded that communication and counseling skills of SP patient-student could be utilized for evaluation purposes.

In a research by Barnett et al. (2011), a virtual clinical environment was created with 14 SPs, and the students from different teams made the care plans based on the interviews with the SPs. The students watched each other's interview with the SPs through the videos. Moreover, they saw how different disciplines made interviews with patients. By this way, they learned alternative techniques of interviewing. As a result, the students grasped the flow of communication with team members. Similarly, Sharpnack et al. (2013) stated that SP application allowed the students to develop their leadership skills through discussions about patient care with the doctors for the first time. Fink et al. (2014) presented a study in which the students and SPs performed an ethical conflict/dispute between a mother who was at terminal stage, and her sons and daughters who belong to three different religions. This gave the students a possibility to practice in difficult patient cases which they would not otherwise have the chance to meet. Some problems experienced in the clinical settings may not allow the students to improve their cognitive skills such as decision-making and problem-solving. Therefore, it is necessary to consult different approaches, not to jeopardize the patient safety and toensure a risk-free experience (Titzer et al., 2012; Kilgore et al., 2013).

It has been suggested that SP use in nursing education provided a realistic, positive and beneficial learning experience in term of teaching cognitive skills (Becker et al., 2006; Robinson-Smith et al., 2009; Zavertnik et al., 2010; Ryan et al., 2010; Barnett et al., 2011; Lin et al., 2013; Kim-Godwin et al., 2013; Sharpnack et al., 2013; Fink et al., 2014; Kameg et al., 2014; Webster, 2014; Ndiwane et al., 2014; Beischel et al., 2014; Karadag et al., 2016).

Evaluation of Psychomotor Skills,

Six of the studies (17.39 %) listed under the evaluation of psychomotor skills used SP method for teaching physical examination (general physical examination, respiratory examination and pelvic examination) (Theroux and Pearce, 2006; Kurz et al., 2009; Bornais et al., 2012; Luetkar- Flude et al., 2012; Schram and Mudd, 2015; Kowitlawakul et al., 2015). One study was

recorded for teaching how to measure blood pressure and subcutaneous injection (Sarmasoglu, 2015), and one study was about the care in emergency unit (wound care, nasogastric tube feeding and monitoring vital findings) (Mackey et al., 2014).

The results of the studies in this group revealed that teaching with SP was efficient in reducing the preclinical anxiety of students (Theroux and Pearce, 2006), teaching physical examination (Theroux and Pearce, 2006; Bornais et al., 2012; Schram & Mudd, 2015), and care in emergency unit (Mackey et al., 2014). Kurz et al. (2009) indicated that although the mean application scores of the research group were higher than those of control group, there was not a statistically significant difference, but that working with SP had a positive influence on the learning outcomes. Luctkar-Flude et al. (2012) have analyzed the effect of three different teaching methods (community volunteer, high fidelity human simulators (HFS) and SP) on student respiratory examination performance and self-efficacy; and they determined that although the respiratory examination performance attitude was found significantly high in HFS group, the students were not much satisfied with this method. There was no difference between the three teaching methods with regard to students' self-efficacy. However, it can be

stated that SP method was perceived as realistic and efficient for boosting selfefficacy of students. According to the findings of Kowitlawakul et al. (2015), students evaluated working with SP as very beneficial and realistic in familiarizing with the patient's history and developing communication skills. However, SP was determined inadequate in making diagnosis regarding the case of critical patient, and defining specific symptoms and findings the patient about (heart murmur, pathological lung sounds, etc.). As Schram and Mudd (2015) stated that although SP

use developed physical examination and communication skills, it was costly and taking time. Similarly, as Sarmasoglu et al. (2015) revealed, the performance score of blood pressure application was determined to be significantly high in the experimental group compared to the control group, however, their subcutaneous injection scores were found fairly close. Working with SP was found to positively affect the learning process, facilitate communication with patients, and boost the self-confidence by helping students overcome their anxiety.

Author	Country	Design	Education Method	Sample size	Class (Content)	Measurement	Outcome (Results)
(year)							
1-Becker et al.	USA	RCT	Control group watched recorded	Total=147	Senior/therapeutic	Communication	According to research findings, there was
(2006),		(pretest-post	video of the interview. Study	Exp:58;	communication,	Knowledge Test	no difference between the scores of two
		test)	group interviewed SP.	Con:89	knowledge and	Student Self-	groups in terms of interpersonal skills,
					evaluation of	Evaluation of SP	therapeutic communication skills, and
					depression,	Encounter	knowledge of depression. Working with
							SP was perceived as a positive, creative
							and meaningful experience by the
							students.
2-Theroux &	UK	Comparative	Pelvic examination was	Total =48	Graduate nursing	1-Survey 1 focused	Both groups felt anxiety while learning
Pearce (2006)		Descriptive	performed on volunteer peers by a		programs / Advanced	on experiences	pelvic examination. However, the SP
			group and on SP by another		health	related to the	group stated their anxiety decreased and
			group. SP patient gave feedback		assessment courses	laboratory teaching	their confidence level to do examination
			to students.			strategy	increased as they received feedback. SP
						2- Survey 2 focused	group evaluated their learning experience
						on experiences	more positive and better in comparison
						during subsequent	with peer group
						clinical	
						examinations.	
3-Robinson-	USA	Descriptive	Students performed a mental	Total=112	Junior/Psychiatric	1-Satisfaction With	Students' interview with SP brought
Smith et al.		Design	status exam and suicidal risk		numing	Learning Through	about an increase in self-efficacy, critical
(2009)			assessment by interviewing SP.			Standardized Patients	thinking and learning satisfaction. It is
						2- Self-Confidence	emphasized that working with SP gave
						in Learning Through	teaching staff an opportunity to evaluate
						Standardized Patient	weak and strong sides of students'
						Care Scenarios	clinical skills.
						3- Effect of	
						Standardized	

						Patient Care	
						Scenarios on Critical	
						Thinking	
4-Kurz et al		Quasi-	Control group took traditional	Total:37	Graduate nursing	The checklist sated	Although mean score of study group for
(2009)		experimental	course and laboratory practice for	Con:11	students /Health	the students'	health evaluation application was higher
		two-group	the evaluation of health.	Exp:26	Assessment course	performance in four	than that of control group, there was no
			Experimental group completed a			categories:	statistically significant difference.
			20 minute examination			(a) history of present	However, working with SP was
			application with SP patient.			illness,	determined to have a positive influence
			All student completed traditional			(b) past medical	on student outcomes.
			didactic and lab practice and then			history,	
			the experimental group had			(c) physical	
			additional experience with SP.			examination, and	
						(d) communication	
						skills	
5-Zavertnik et	USA	Quasi-	Control group took lesson on	Total:41	Sophomore	Standardized grading	It was found that basic communication
al (2010)		experimental	Therapeutic Communication in	Con: 21,	First Clinical Course	tool	skills of experimental group was higher
		two-group	classroom. Experimental group	Exp:20	(therapeutic	evaluated students'	than those of control group, especially
		posttest	took 30 minute laboratory training		communication)	skills and abilities	data collection skill score, and that the
		design.	on communication methods			evaluated	difference was statistically significant.
			following the class training and			communication	Experimental group found SP interviews
			practiced communication skills			skills in four teaching	beneficial.
			with SP.			domains: how to	
						introduce yourself,	
						how to gather	
						information, how to	
						impart information,	
						and how to clarify	
						goals and	
						expectations.	

communication and counseling skills. After the interview, SP patient gave students feedback on CCS. Descriptive Design Students from different disciplines interviewed SP for 10 minutes. They developed a care plan for patients as a team. They developed a care plan for patients as a team. Pharmacy = 90,	(2010)	Ireland Descriptive	ptive Standardized patient educators	Total =100	Nursing -Medical	Communication	It was determined as a result of the study
skills. After the interview, SP patient gave students feedback on CCS. Descriptive Design Students from different disciplinate interviewal SP for 10 minutes. They developed a care plan for patients as a team. Descriptive patients as a team. Design Descriptive Design Descriptive Design Descriptive Design Descriptive Design Descriptive Design Descriptive Design Total = 338 (Medical student = 100, Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry Pharmacry P		Design	were used to evaluate	(Nursing: 64	Student/	skills and attitudes	that communication skills of majority of
patient gave students feedback on CCS. Descriptive Design Students from different disciplinas interviewed SP for 10 minutes. They developed a care plan for patients as a team. Total =338 (Medical student =100, Pharmacy =90, occupational, physical thesapy, and audiology=8, Nursing student = 140) S-Bornais et al. Canada Comparative Design Control group: physical examination on peers. Control group: physical examination on peers. Control group: physical examination on peers. Control group patient Canada Comparative Design Pharmacy Control group: physical examination on peers. Control group: physical examination on peers. Control group: physical examination on peers. Control group: physical examination on peers. Control group: physical examination on peers. Control group: physical examination on peers. Control group: physical examination on peers. Control group: physical examination on peers. Control group: physical examination on peers. Control group: physical examination on peers. Control group: physical examination on peers. Control group: physical examination on peers. Control group: physical examination on peers. Control group: physical examination on peers. Control group: physical examination on peers. Control group: physical examination on peers. Control group: physical examination on peers. Control group: physical examination on peers. Control group: physical examination on peers. Control group: physical examination on peers. Control group: physical examination on peers. Control group: physical examination on peers. Control group: physical examination on peers. Control group: physical examination on peers. Control group: physical examination on peers. Control group: physical examination on peers. Control group: physical examination on peers. Control group: physical examination on peers. Control group: physical examination on peers. Control group: physical examination peers. Control group: physical examination peer			communication and counseling	Medical: 46)	communication and	holistic assessment	the students were good, and that a small
CCS. Descriptive Design Total =338 (Medical student =100, Pharmacy =90, occupational, physical therapy, and audiology=8, Nursing student = 140) S-Bornais et al. Canada Comparative Design Descriptive Design Students from different disciplinas interviewed SP for 10 minutes. They developed a care plan for patients as a team. They developed a care plan for patients as a team. They developed a care plan for patients as a team. They developed a care plan for patients as a team. Team work Team work Team work Team work Team work Team work Team work Team work Team work Team work Team work Team work Team work Total =100, Team work The standardized patient care and they developed communication skills. Students and occupational physical therapy, and audiology=8, Nursing student = 140) S-Bornais et al. Comparative Design Control group: physical examination on peers. Total =103 Total =108 Total =108 Total =108 Total =108 Total =108 Total =108 Total =108 Total =108 Total =108 Total =108 Total =108 Total =108 Total =108 Total =108 The results of the research indicated to laboratory practice and SP in the			skills. After the interview, SP		consultation skills	too	part of the students (20-25 %) needed
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8-Bornais et Canada Comparative Control group: physical Total =108 Freshmen/ OSCE score The results of the research indicated to al. Design examination on peers. Con:54 Health assessment (health history-taking laboratory practice and SP in the				Numing			class discussion was useful.
al. Design examination on peers. Con:54 Health assessment (health history-taking laboratory practice and SP in the				student = 140)			
	8-Bomais et	Canada Comparative	arative Control group: physical	Total =108	Freshmen/	OSCE score	The results of the research indicated that
(2012). Experimental group: did physical Exp:54 (health history-taking skills, evaluation of health created a signific	al_	Design	examination on peers.	Con:54	Health assessment	(health history-taking	laboratory practice and SP in the
	(2012).		Experimental group: did physical	Exp:54	(health history-taking	skills,	evaluation of health created a significant
examination on SP patient skills, infection control infection control difference on OSCE performance in			examination on SP patient		skills, infection control	infection control	difference on OSCE performance in
measures, and physical measures, and comparison with traditional methods					measures, and physical	measures, and	comparison with traditional methods.
examination physical examination					examination	physical examination	
techniques) techniques).					techniques)	techniques).	
9-Luctkar- Canada RCT A group did physical examination Total =44 Junior/Health 1-Health Assessment Although respiratory examination and	9-Luctkar-	Canada RCT	A group did physical examination	Total =44	Junior/Health	1-Health Assessment	Although respiratory examination and
Flude et al with community volunteers, (Con:16; assessment Educational Modality performance behavior was found to be	Flude et al		with community volunteers,	(Con:16;	assessment	Educational Modality	performance behavior was found to be
(2012), another group did HFS and the HFS:14; (respiratory Evaluation (significantly high in HFS group,	1		another group did HFS and the	HFS:14;	(respiratory	Evaluation (significantly high in HFS group,
other group did it with SP SP:14) assessment) assessment self- satisfaction is the lowest in this educa-	(2012),		other group did it with SD	SD-14V	assassmant)	sessessment salf.	satisfaction is the lowest in this advention.
efficacy and learners method. There was no difference betw	(2012),		other group did it with SP	SF.14)	ascondan)	appearment serr-	paristaction is the lowest in this obscarion

						lastic floridae)	the three education methods in terms of
						'satisfaction)	
						2-Respiratory	students' self-efficacy. SP method was
						assessment checklist	perceived to be realistic and efficient in
							increasing self-efficacy by the students
10-Sharpnack,	USA	RCT	A virtual hospital was established	Total =66	Senior/leadership	1-Nursing	Leadership evaluation scores were found
et al. (2013)		(post test)	with SP who had 8 different		course.	Leadership Content	higher in students working with SP. As a
			diagnoses. Students in this unit			Mastery	result of student evaluation, simulation
			were required to fulfill			Assessment,	application was determined to increase
			responsibilities related to				success reaching learning goals. The
			leadership positions such as				students in this application had a chance
			supervisor, charge nurse, and				to develop collaboration, patient centered
			team leader. Control group was				care, evidence based application,
			evaluated before they took				knowledge, skills and attitudes related to
			simulation scenario. Experimental				quality and safety. Students stated that
			group evaluated after simulation				they had realistic patient care experience
			experience.				with complicated patient scenario and
							they had the chance to apply leadership
							skills. In this study, student evaluations.
							suggest that complex scenarios involving.
							standardized patients provided
							opportunities for application of leadership.
							principles to realistic patient care
							experiences and that this method may.
							facilitate student transition to practice.
11-Lin, et al.	Taiwan	RCT	Con: They only interviewed SP	Total =26	Good interpersonal and	1-Interpersonal skills	Students' satisfaction of all participants
(2013),		(pretest-post	Exp: Following SP interview, SP	Exp:14,	communication skills	(IPS) assessment	found 94 %. There was a difference
		test	gave students feedback. Later	Con.12		tool.	between pre-test and post-test scores in
			students had group discussion.			2-Student learning	terms of interpersonal skills scale.
						satisfaction (SLS)	However, there was no statistical

						scale.	difference between groups.
12-Kim-	UK	Descriptive	Virtual home environment was	Total =76	Senior/community	1-Educational	The students participating in the study
Godwin, et al.		Study	created. A 30 minute home visit		health nursing course	Practice in	stated that simulated home visit provided
(2013)			was simulated with SP.		(home visit)	Simulation	effective learning, increased their self-
()			***************************************		, ,	Scale	confidence, and they found it similar to
						2-Student	real life situations. They assessed SP
						Satisfaction in	experience as meaningful and positive.
						Learning Scale,	
						3-Self-Confidence in	
						Learning	
						Scale	
						4- open-ended	
						questions about	
						experiences	
13-Kameg et	USA	Quasi-	Each student had 3-5 minute	Total =69	Senior/Psychiatric	1- the State-Trait	According to study results, SP interaction
al (2014).		experimental	interviews with SP.		mental health	Anxiety Inventory	seduced students' anxiety. Students
		design			nursing course	2- anxiety visual	evaluated SP experience positively and
		pretest-posttest				analog scale	they supported its use in nursing
						3-Simulation	education.
						Evaluation	
						Survey	
14-Fink et al.	USA	Quari-	SPs belonging to three religions	Total =54	Junior/Medical -	1-The Spiritual Care	It was determined in the study that the
(2014)		experimental	(Catholicism, Judaism, and Islam)	Exp: 30	surgical and psychiatric	at the End-of-Life	spiritual care at the end-of-life
		study	with cancer diagnosis, old, sick	Cont:24	course	Questionnaise	questionnaire scores, confidence and
		(control grup)	and their religions were			2- Student	satisfaction scores of simulated groups
		pretest-posttest	dramatized. Ethical conflict /			satisfaction survey	were higher than those of control group.
			dispute about SPs' state among				
			sons and daughters was				
							I

			performed.				
			The control group had received				
			end-of-life care content in the				
			previous semester but				
			not through a simulation				
			experience				
15-Beischel et	Not	RCT	The experimental group had 10	Total =133	Freshmen/	1-Cognitive	Although there was a significant
al (2014)	Specified	mixed	minute interview with SP to	Exp:67,	beginning-level	outcomes,	difference between the cognitive and
		methods	evaluate risk of falling in addition	Con:66	nursing courses	2-Student Safety	attitude pretest and posttest scores of both
		(quantitative	to theoretical lesson. Control			Attitudes Survey,	groups, there was not a statistically
		phase pretest-	group took only theoretical			3-Simulation Design	significant difference between control and
		post test)	lessons.			Scale	experimental group. However, 10 minute
						4-Journal Reflections	SP patient interview increased
						provided qualitative	experimental group's competences in
						data	monitoring patients and taking necessary
							measures in terms of falling risk.
16-Ndiwane et	USA	Pretest-	Students first participated in a	Total =29	Freshmen/Cultural	1-Cultural	Students evaluated interview experience
al (2014)		posttest study	didactic presentation about		assessment process	Assessment Survey	with SP as increasing their self-
		design	cultural evaluation and Latino-			2-Student	confidence for cultural evaluation.
			African-American culture. Then			Satisfaction Survey	entertaining, realistic, and a positive
			each student had a 15 minute				learning experience. Recording SP
			interview with SP, SP anident				interviews and providing feedback was
			interview was video recorded. At				found positive by the students as it gave
			the end, students were given				them a chance to evaluate themselves.
			feedback by the educator.				This experience was evaluated as
							experience permitting to increase cross
							cultural skills and self-confidence before
							the student goes to clinical application.
							the student goes to crimical apprication.

	e. SP performed	nursing	Standardized Patient	
(pretest- the selected ca			STORAGE STORE FOR FOR FOR	patient use for undergraduate nursing
2	e. The student and	(therapeutic	Experiences	students in teaching and evaluating
posttest). SP had a 15-2	0 minute interview	communication skills)	Evaluation Criteria	therapeutic communication skills.
and the interv	ew was video			
recorded. Grov	ips of 6-8 students			
and the teache	r had a discussion			
on the video o	lips.			
18-Mackey et Singapore Qualitative A SP patient :	seeding care, in a Total=15	Junior and senior	focus group	It was determined that working with SP
al (2014) research virtual emerge	ncy unit. Students	/Emergency nursing (interview	was beneficial in teaching emergency
design were required.	to give case to this	wound dressing, page-	(two groups of 7 or 8	care. At the end of the study, students
SP. SP paties	t sole was performed	gastric feeding, vital	students)	stated that this helped them understand
by senior stud	ents.	signs monitoring)		what the patient was feeling, and the
				effect of verbal and non-verbal
				communication. In addition it helped
				them gain a different point of view.
19- Singapore An The student g	ot the patient's Total =7	Advanced practice	Semi-structured	Students evaluated working with SP
Kowitlawakul explorative, history, did th	e physical	nurse / Acute Care	interview	patient as beneficial and realistic in
et al (2015) qualitative examination a	nd planned the care	Track	guideline, with open-	getting the patient's history and
approach appropriate fo	r clinical case.		ended question	developing communication skills.
				However, they did not find it beneficial in
				determining a diagnosis related with the
				critical patient and planning the care
				because SP patient did not have particular
				symptoms and findings (heart murmur).
20-Schram & USA Descriptive A 30 minute of	ne to one interview Total =13	Advanced practice	Debriefing	Working with SP provided students with
Mudd (2015) study and physical e	xamination was	nurse/Primary care	Assessment	realistic ambulatory care medium, and
performed with	h the SP patient.	Nurse practitioner	for Simulation in	helped them develop skills such as getting

					program.	Healthcare (DASH)_	the patient's history, therapeutic
						student version	communication and doing physical
							examination. However, there were cost
							and time handicaps.
21-	Turkey	Quasi-		Total =87	Freshmen/	1- The Arterial Blood	
Sarmasog)u et		experimental	Students were given theoretical	Exp:44	Fundamentals of	Pressure	
al (2015)		(pretest-	lessons on taking arterial blood	Cont:43	Nursing Course	Measurement	Blood pressure application performance
		posttest).	pressure and doing subcutaneous			Performance	score in experimental group was
			injection. Control group			Observation	significantly higher than that of control
			completed assessments utilizing a			2-Subcutaneous	group. Their subcutaneous scores were
			model. Experimental group			Injection	quite close. Working with SP was found
			utilized a SP to complete the			Administration	to affect the students positively, facilitate
			assessments. In order not to give			Performance	communication with patients and boosted
			harm to SP in subcutaneous			Observation Form	self-confidence by helping overcome
			injections, a virtual injection pad			3-The Standardized	excitement.
			was placed on SP.			Patient-Student	
						Interaction	
						Assessment	
						Form.	
						4- The First Real-	
						Life Practice	
						Evaluation Form	
23-Karadag et	Turkey	RCT		Total =70	Junios/Surgical	1-Questionnaise	Students' mean score for perceiving the
al (2016)		(pretest-	After the students were given	Exp:35	Nursing Courses	form	contribution of education methods to
		posttest).	spinal cord trauma training,	Cont 35	(spinal cord trauma	2-evaluation	learning and nursing care and
			control group was given the		case)	of the nursing care	intervention to planning was \$9.7 out of
			patient case written. They were			plans prepared by the	100 in SP group and 80.57 out of 100 in
			asked to develop a care plan			students.	control group, and the difference between
			according to the written case data.				the two was determined to be statistically
			Experimental group watched the				significant. It was also determined that
			SP patient and nurse interview as				standardized patient use contributed
			groups of 7-8 students, then they				students ability to evaluate realistic
			developed a care plan.				medical cases and clinical problems and
							plan nursing care.

Discussion

Nursing education is a process which has been structured to provide students with a professional nursing identity and prepare them for professional life, and during which theoretical and practical training is offered to students as a complete teaching guide. To achieve this goal, nursing students should master their cognitive, effective, and psychomotor skills. In nursing education, the theoretical knowledge taught in the classroom is reinforced with practical studies carried out in the laboratory, and it is put into practice in clinical setting.

Although the number of studies evaluating the outcomes and efficiency of SP use in nursing education is steadily increasing, only two studies, a review (May et al., 2009) and a meta analysis (Oh, Jeon & Koh, 2015) have been found in the literature review. Although these studies report the efficiency of SP use in nursing and medical education, the research conducted in the field and their efficiency is insufficient. For this reason, this study analyzes the previous studies carried out in the last decade which investigated the SP use in nursing education and present the actual data to the researchers.

Although there are a significant number of studies about the SP use in nursing education in the literature, we found only 22 research articles documenting the use of SP

in nursing education in the last decade. The results obtained from the current review study cannot be generalized, however; it was designed to give an idea to the educators about SP use in nursing education. For this reason, it was aimed to answer two questions in this study:

-What are the situations where SP is used in nursing education?

-How does the use of SP affect the knowledge and skills of students?.

As a result, it was determined that SP is a learning method which contributes to the increase of students' satisfaction levels, self-efficacy and self-confidence particularly to the development of students' physical examination, communication and counseling skills, and helps overcome their anxiety. The institutions, which provide health care, need nurses who can manage complex clinical settings, deliver high quality nursing care, have critical thinking skills, and sophisticated problem-solving, decision making and communicative skills. For this reason, undergraduate nursing students have to acquire professional knowledge and skills before they graduate, which should be followed by a clinical practice. The findings of the current study supported the idea that the use of SP method was efficient in acquiring cognitive skills, which is a crucial part of learning process for the utilization of knowledge in clinical setting, as well as for gaining knowledge and improving certain skills. Students do not know what they are expected to do before their first interaction with a mentally individual unhealthy (Stuart, 2009). Furthermore, there may not always be a chance to encounter severe cases such as paranoid schizophrenia and bipolar mania in clinical practice; or the interaction of a student who does not have enough experience in communication and counseling with a patient can cause aggression or some unpredicted complications in patient (Webster, 2014). The experience of meeting with SP prior to clinical practice helps students overcome anxiety and increase self-confidence by ensuring both the safety of patient and a realistic experience. Therefore, SP applications provide learners with an opportunity to experience the case and assess their own performance before they encounter actual patients.

According to the findings of the review, although there was not a statistically significant difference between experimental and control group in terms of students' cognitive skills and attitudes in some studies, working with SP was found to be a positive, creative and meaningful management increases experience. SP self-confidence, students' develops communicative skills, facilitates

transformation of theoretical knowledge into practical skills, and provides experience with difficult patient cases. The use of SPs in nursing education provides a planned and standard learning experience. In addition, the application of SP creates the opportunity to objectively assess the technical and professional skills of learners such as interpersonal and communicative expertise (Buxton et al., 2015).

The findings of the review revealed that SP method gave students a chance to gain clinical experience for complicated cases which they had difficulty with handling (Barnett et al., 2011; Sharpnack et al., 2013; Fink et al., 2014). However, although this review revealed the contribution of SP management to the development of students' communicative skills, the effect of SP application on such cognitive skills as problem-solving and decision-making has not been discovered yet.

According to the findings of the research, it was determined that randomized controlled trial studies evaluating SP and other similar training methods (case study, volunteer peer group, etc.) comparatively were limited in number (n=7, 30.43 %). Future studies on this subject are expected to close this gap. Although the results of the study indicated that SP application allowed students to have a unique experience by creating a controlled learning environment, it was recommended

that the way the theory is transferred into the practice should be analyzed in detail (Robinson-Smith et al., 2009; Ndiwane et al., 2014). Schram & Mudd (2015) revealed that SP application had time and cost handicaps. The preparation of case scenario by the teaching staff for SP application, training the individual to play the SP role, allocating time for application outside the classroom, difficulties in finding proper time with nurses to participate in the application, and meeting the cost of specific expenses such as transportation individuals are all handicaps which increase the work load, cost and required time. According to Webster (2014), the teaching staff and drama actors watched the films of psychiatric cases and worked on them so that the psychiatric patient role could be played well. Sharpnack et al. (2013) and Karadag et al. (2016) solved the problem of scenario writing by using the scenarios prepared in Elsevier Simulation Learning System source (Lewis, Dirksen Heitkember &Bucker, 2011) and utilizing the graduate students' care plans, respectively. In the literature, it is recommended to coordinate the personnel, teaching staff, and nurses in the nursing schools in order to reduce the costs of SP application. However, there is very little proof about SP use. The main drawback of this application is that if the time allocated for SP training is not

sufficient, students may be provided with unnecessary information about learning scenario, which can prevent students from asking detailed questions. Theatres, drama clubs, community volunteers and trained SPs are recommended to be used during the application (Schram & Mudd, 2015). SP patient video records can both reduce the cost and allow the students to gain extra learning experience (Rutherford–Hemming & Jennrich, 2013).

Conclusion

The aim of this study was to conduct a literature review on the SP use in nursing education that was published in the last decade and to offer the results for the benefit of researchers. The results of this review cannot be generalized, however; it is considered to be valuable for presenting ideas on SP use in nursing education to educators. The findings suggest that use of SP in nursing education may have a positive impact on self-efficacy and develop communicative skills of students, facilitate the transformation of theoretical knowledge into practical skills, and provide opportunities to encounter difficult patient cases. The current findings supported the idea that the use of SP method was helpful in acquiring cognitive skills, which is an essential part of teaching process for the utilization of knowledge in clinical setting, as well as the development of knowledge

and certain skills. Therefore, these findings indicate that the educational value of SP use in nursing programs, if integrated appropriately, can be appraised in academic settings as an active learning methodology. However, it is recommended that the way theory is put into practice and the influence of SP application on students' behavioral patterns should be investigated in a detailed manner, which points out the need to conduct more qualitative and quantitative studies, mainly randomized controlled trials on this field.

References

- Barnett, G.V., Hollister, L., & Hall, S. (2011). Use of the standardized patient to clarify interdisciplinary team roles. *Clinical Simulation in Nursing*, 7(5), e169–e173.
- Barrows, H.S. (1993). An overview of the uses of standardized patients for teaching and evaluating clinical skills. *AAMC Acad Med*, 68, 443-51.
- Becker, K.L. Rose, L.E., Berg, J.B., Park, H. & Shatzer, J.H. (2006). The teaching effectiveness of standardized patients. *Journal of Nursing Education*, 45(4), 103-111.
- Beigzadeh, A. Bahmanbijri, B. Sharifpoor, E. & Rahimi, M. (2016). Standardized patients versus simulated patients in medical education: are they the same or

- different. Journal of Emergency
 Practice and Trauma, 2(1), 25-28.
- Beischel, K. P. Hart, J. Turkelson, S. & Churchill, J. (2014). Using a standardized patient to teach fall safety. *Clinical Simulation in Nursing*, 10(4), e183-e190.
- Beullens, J. Rethans, J.J., Goedhuys, J. & Buntinx, F. (1997). The use of standardized patients in research in general practice. *Family Practice*, 14 (1), 58-62.
- Bland, A.J., Topping, A. & Wood, B.A. (2011). Concept analysis of simulation as a learning strategy in the education of undergraduate nursing students.

 Nurse Education Today, 31(7), 664-70.
- Bornais, J.K. Raiger, J.E. Krahn, R.E. & El-Masri, M. (2012). Evaluating undergraduate nursing students' learning using standardized patients. *Journal of Professional Nursing*, 28(5), 291–296.
- Buxton, M., Phillippi, J.C. & Collins, M.R. (2015). Simulation: a new approach to teaching ethics. *Journal of Midwifery Womens Health*, 60(1), 70-4.
- Churchouse, C. & McCafferty, C. (2012).

 Standardized patients versus simulated patients: Is there a difference? *Clinical Simulation in Nursing*, 8(8), e363-e365. doi:10.1016/j.ecns.2011.04.008

- Dikici, M.F. & Yarış, F. (2007). Ondokuz Mayıs Üniversitesi Tıp Fakültesi klinik beceri eğitiminde standardize ve simüle hasta programı. *Türkiye Klinikleri Journal Medical Sciences*, 27, 738-743.
- Fink, M., Linnard-Palmer, L., Ganley, B. Catolico, O. & Phillips, W. (2014). Evaluating the use of standardized patients in teaching spiritual care at the end of life. *Clinical Simulation in Nursing*, 10(11), 559-566.
- Flynn, K. (2012). The use of standardized patients to minimize anxiety in undergraduate nursing students in the clinical setting. Master of Arts in Nursing Theses:58.
- Gaba, D. M. (2004). The future vision of simulation in health care.

 Quality & Safety Health Care, 13(1), 2-10.
- Higgins, J.P. & Green, S. (Eds.). (2011). Cochrane Handbook for Systematic Reviews of Interventions (Vol. 4). John Wiley & Sons.
- Kameg, K.M., Szpak, J.L., Cline, T.W. & Mcdermott, D.S. (2014). Utilization of standardized patients to decrease nursing student anxiety. *Clinical Simulation in Nursing*, 10(11), 567-573.
- Karadag, M. Calıskan, N. &Iseri, P. (2016). Effects of case studies and simulated

- patients on students' nursing care plan.

 International Journal of Nursing

 Knowledge, 27(2), 87-94.
- Kilgore, R.V., Goodwin, M.E. & Harding, R.A. (2013). Adding context to a simulation module for leadership and management baccalaureate nursing students. *Journal of Nursing Education and Practice*, 3(9), 148.
- Kim-Godwin, Y.S., Livsey, K.R., Ezzell, D. & Highsmith, C. (2013). Home visit simulation using a standardized patient. *Clinical Simulation in Nursing*, 9(2), e55-e61.
- Kowitlawakul, Y., Chow, Y.L., Salam, Z.H. & Ignacio, J. (2015). Exploring the use of standardized patients for simulation-based learning in preparing advanced practice nurses. *Nurse Education Today*, 35(7), 894-9.
- Kurz, J.M., Mahoney, K., Martin-Plank, L. & Lidicker, J. (2009). Objective structured clinical examination and advanced practice nursing students.

 Journal of Professional Nursing, 25 (3), 186–191.
- Levine, A. & Swartz, M. (2008). Standardized patients: The "other" simulation. *J Crit Care*, 23, 179–184.
- Lin, E.C.L., Chen, S.L., Chao, S.Y. & Chen, Y.C. (2013). Using standardized patient with immediate feedback and group discussion to teach interpersonal

- and communication skills to advanced practice nursing students. *Nurse Education Today*, 33(6), 677-683.
- Luctkar-Flude, M. Wilson-Keates, B. & Larocque, M. (2012). Evaluating high-fidelity human simulators and standardized patients in an undergraduate nursing health assessment course. *Nurse Education Today*, 32, 448–452.
- Mackey, S., Tan, K.K., Ignacio, J., Palham, S., Dawood, R.B. & Liaw S.Y. (2014). The learning experiences of senior student nurses who take on the role of standardised patient: a focus group study. *Nurse Education Practice*,14(6), 692-7.
- May, W., Park, J.H. & Lee, J.P. (2009). A ten-year review of the literature on the use of standardized patients in teaching and learning: 1996–2005. *Medical Teacher*, 31(6), 487–492.
- Metcalfe, S.E., Hall, V.P. & Carpenter A. (2007). Promoting collaboration in nursing education: The development of regional simulation laboratory. *Journal of Professional Nursing*, 23(3), 180-183.
- Moher, D., Liberati, A., Tetzlaff, J., Altman, D.G. & Prisma Group. (2009).

 Preferred reporting items for systematic reviews and meta-analyses:

- the PRISMA statement. *PLoS Med*, 6(7), e1000097.
- Ndiwane, A., Koul, O. & Theroux, R. (2014). Implementing standardized patients to teach cultural competency to graduate nursing students. *Clinical Simulation in Nursing*, 10(2), e87-e94.
- Oh, P.J., Jeon, K.D. & Koh, M.S. (2015). The effects of simulation-based learning using standardized patients in nursing students: A meta-analysis.

 Nurse Education Today, 35(5), e6-e15.
- Rauen, C.A. (2004). Simulation as a teaching strategy for nursing education and orientation in cardiac surgery. *Crit Care Nurs Quarterly*, 24(3), 46-51.
- Rhodes, L.M. & Curran, C. (2005). Use of the human patient simulator to teach clinical judgment skills in a baccalaureate nursing program. *CIN: Computer, Informatics, Nursing*, 23(5), 256-262.
- Robinson-Smith, G., Bradley, P. & Meakim, C. (2009). Evaluating the use of standardized patients in undergraduate psychiatric nursing experiences. *Clinical Simulation in Nursing*, 5(6), e203-e211.
- Rutherford-Hemming, T. & Jennrich, J. (2013). Using standardized patients to strengthen nurse practitioner competency in the clinical setting.

- Nursing Education Perspective, 34(2), 118-121.
- Ryan, C.A., Walshe, N., Gaffney, R.,
 Shanks, A., Burgoyne, L. & Wiskin, C.
 M. (2010). Using standardized patients
 to assess communication skills in
 medical and nursing students. BMC
 Medical Education, 10, 24:1-8.
- Ryan, C.A., Walshe, N., Gaffney, R., Shanks, A., Burgoyne, L. & Wiskin, C.M. (2010). Using standardized patients to assess communication skills in medical and nursing students. *BMC Med Educ*, 10(24), 1–8.
- Sarıkoç, G., Özcan, C.T. & Elçin, M. (2016). An innovative practice in psychiatric nursing education: standardized patients. *Dokuz Eylül University Nursing Faculty Journal*, 9(2), 61-66.
- Sarmasoglu, S., Dinç, L. & Elçin, M. (2015). Using standardized patients in nursing education: effects on students' psychomotor skill development. *Nurse Educator*, 41 (2), E1-E5.
- Schram, A.P. & Mudd, S. (2015). Implementing standardized patients within simulation in a nurse practitioner program. *Clinical Simulation in Nursing*, 11(4), 208-213.
- Sharpnack, P.A., Goliat, L. & Rogers, K. (2011). Using standardized patients to teach leadership competencies.

- Clinical Simulation in Nursing, 9(3), e95-e102.
- Shin, H., Ma, H., Park, J., Ji. E.S. & Kim, D.H. (2015). The effect of simulation courseware on critical thinking in undergraduate nursing students: multisite pre-post study. *Nurse Education Today*, 35(4), 537-42.
- Theroux, R. & Pearce, C. (2006). Graduate students' experiences with standardized patients as adjuncts for teaching pelvic examinations. *Journal of the American Academy of Nurse Practitioners*, 18(9), 429-435.
- Titzer, J.L. Swenty, C.F. & Hoehn, W.G. (2012). An interprofessional simulation promoting collaboration and problem solving among nursing and allied health professional students. *Clinical Simulation in Nursing*, 8(8), 325-333.
- Vu, N.V. & Barrows, H.S. (1994). Use of standardized patients in clinical assessments: recent developments and measurement findings. *Education Research*, 23, 23-30.
- Webster, D. (2014). Using standardized patients to teach therapeutic communication in psychiatric nursing. *Clinical Simulation in Nursing*, 10(2), e81-e86.
- Whiting, P., Savović, J., Higgins, J.P. Caldwell, D. M., Reeves, B.C. Shea,

B., et al. (2016). ROBIS: a new tool to assess risk of bias in systematic reviews was developed. *Journal of Clinical Epidemiology*, 69, 225-234.

Zavertnik, J.E., Huff, T.A. & Munro, C.L. (2010). Innovative approach to teaching communication skills to nursing students. *Journal of Nursing Education*, 49(2), 65-7.