

Letter to Editor

The Necessity of Integrating the Morning Report in the Nursing Curriculum



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Dear Editor

Clinical education is the first source of learning and creates the professional identity of medical students. It is the most important part of nursing education [1]. Clinical education in therapeutic settings is provided in different forms, such as holding morning report sessions, rounds/grand rounds, journal club, and clinical training [2]. Nursing education is provided through nursing rounds, bedside education, nursing duties, nursing care conferences, nursing team conferences, individual conferences, field visits and the registration process [3]. Evidence-based clinical education for medical students by strengthening their problem-solving skills, active participation in the learning process and facing the real situation, and using documented and comprehensive resources leads to deeper learning. This method can also improve the decision-making skills of medical students [4]. Among the various methods of clinical education, morning report (MR), which is a basic educational conference, is the most effective and widely used method for improving the quality of medical education in the world [5, 6]. The results of studies have shown that, among the teaching methods, the highest satisfaction of students was with the MR [7].

Because of the needs of life in today's fast-changing world, there is a need for educational innovations, especially in universities and higher education institutions, including nursing schools. The results of a review study in Iran showed that the clinical education of nursing students faces many challenges that lead to the non-achievement of the necessary competency [8]. The challenges include the lack of suitable educational space in the hospital and the disparity between the number of nursing students and patients. Moreover, there are serious inadequacies in the process of clinical education. In other words, there is a gap between theory and practice, and the existing educational programs for creating the necessary abilities in nurses during education have not been effective, which can have adverse effects on achieving the goals of the nursing profession. Nurses constitute the largest part of the health system and can have a direct impact on the health of society [8-10].

In the MR session, patient introduction sessions can range from a short discussion about each patient admitted the previous night to a complete introduction of a newly admitted hospitalized patient with unusual and considerable conditions. These reports have a great role in clinical centers and are used to evaluate clinical services and improve quality [11]. The MR can pave the

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way for the development of clinical reasoning in medical students. The results of a study in Iran showed that, from the internal department assistants' point of view, the MR has much more educational value than other teaching activities, including the conference [12]. The content of the MR program includes teaching the principles of patient care based on history, transferring educational experiences, presenting diagnostic and treatment algorithms, monitoring patient care, improving presentation skills, increasing self-confidence, interaction between nursing students and faculty members, teaching pharmaceutical forms, correct prescribing and reporting of adverse events such as drug side effects, practical training in medical ethics, training in critical thinking, problem solving and clinical decision-making skills, evidence-based medical training, medical error detection and management, promotion of correct training in documentation of medical records, review of non-medical issues such as social, cultural and ethical interactions, strengthening clinical reasoning, and obtaining a comprehensive view of current activities in the relevant clinical department [13-15]. In general, reference books and consultation with experts are the sources of knowledge for nursing students, but they do not meet their educational needs due to their lower age and the possibility of errors [4]. Nursing education requires a review of clinical appraisal tools and processes. For clinical education, evidence-based MR can be an effective method for the educational planning of nursing students. Concerning the existing gap, integrating evidence-based MR in the curriculum of final-year not only for nursing students but also for midwifery student in Iran is recommended.

References

- [1] Rassouli M, Zagheri Tafreshi M, Esmail M. [Challenges in clinical nursing education in Iran and strategies (Persian)]. *Clin Exc*. 2014; 2(1):11-22. [\[Link\]](#)
- [2] Razavipoor M, Moradi S, Amuei F, Mahmoodi E, Sadeghi Mahali F, Baghbanian M, et al. [Quality assessment of clinical education in Mazandaran University of Medical Sciences from the perspective of clerkships and interns in 2019 (Persian)]. *J Mazandaran Univ Med Sci*. 2021; 31(195):82-93. [\[Link\]](#)
- [3] Aliakbari F, Haghani F. [Patient's bedside teaching: Advantages and disadvantages (Persian)]. *Iran J Med Educ*. 2011; 10(5):1161-76. [\[Link\]](#)
- [4] Abedini Z, Ahmari Tehran H, Khorami Rad A, Heidarpour A. [Nursing students' experiences on evidence-based learning in clinical setting: a qualitative study (Persian)]. *Iran J Med Educ*. 2012; 11(8):864-72. [\[Link\]](#)
- [5] Zamani B, Momen-Heravi M, Vakili Z. [Standardization of morning reports in internal medicine department at Kashan university of medical sciences (Persian)]. *Iran J Med Educ*. 2019; 19:90-100. [\[Link\]](#)
- [6] Redinger JW, Heppe DB, Albert TJ, Cornia PB, Gordon KS, Arundel C, et al. What internal medicine attendings talk about at morning report: A multicenter study. *BMC Med Educ*. 2023; 23(1):84. [\[DOI:10.1186/s12909-023-04057-y\]](#) [\[PMID\]](#)
- [7] Lessing JN, McGarry K, Schiffman F, Austin M, Hepokoski M, Keniston A, et al. The state of morning report in the current healthcare landscape: A national survey of internal medicine program directors. *J Gen Intern Med*. 2022; 37(7):1665-72. [\[DOI:10.1007/s11606-021-07010-1\]](#) [\[PMID\]](#)
- [8] Sajadi SA, Mokhtari Nouri J, Nezamzadeh M. [Comparative study of nursing education in Iran and Japan (Persian)]. *Clin Exc*. 2016; 4(2):81-99. [\[Link\]](#)
- [9] Ghanbari-Afra L, Sharifi K. [Review paper clinical competence and its related factors in Iranian nurses: A systematic review (Persian)]. *Qom Univ Med Sci J*. 2022; 16(1):2-17. [\[DOI:10.32598/qums.16.1.949.4\]](#)
- [10] Abazari P, Namnabati M. [Restrictive and Restrictive and facilitating factors of nursing students' clinical education effectiveness (Persian)]. *Iran J Med Educ*. 2017; 17:494-503. [\[Link\]](#)
- [11] Farhadifar F, Bahrami M, Yousefi F, Farazi E, Bahrami A. [Comparative study of morning report in conventional & evidence based medicine forms, from the viewpoint of medical students (Persian)]. *Res Med Edu*. 2016; 8(1):47-56. [\[DOI:10.18869/acadpub.rme.8.1.47\]](#)
- [12] Adibi P, Daryazadeh S. [Status of holding morning report sessions from participants' viewpoint: A qualitative study (Persian)]. *Dev Strateg Med Educ*. 2020; 7(2):61-70. [\[DOI:10.29252/dsme.7.2.61\]](#)
- [13] Ow GM, Shipley LC, Nematollahi S, Stetson GV. Morning report for all: A qualitative study of disseminating case conferences via podcasting. *BMC Med Educ*. 2021; 21(1):392. [\[DOI:10.1186/s12909-021-02799-1\]](#) [\[PMID\]](#)
- [14] Boroumand RM, Mousavi SR, Seyfizadeh T. [Qualitative improvement of the morning report as an effective teaching method (Persian)]. *Horiz Med Educ Dev*. 2020; 11(2):77-87. [\[doi:10.22038/hmed.2020.48366.1024\]](#)
- [15] Lameei A, Aghilmand S. [Negligence of the effectiveness of morning report (Persian)]. *J Med Spiritual Cultiv*. 2013; 22(3):43-50. [\[Link\]](#)