



Letter to Editor

**Letter to the editor regarding paper entitled "Interprofessional education in the surgical department"**

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**Dear Editor,**

I read with interest Amouzeshi et al.'s article which has been recently published in your journal under the title "Comparison of medical and nursing students' readiness for interprofessional education in the surgical department" (1). While the article is potentially of interest to readers, there are several aspects that need attention. First of all, under the Section "Materials and Methods", the score of 52 for the whole questionnaire is considered as the cut-off point and the upper limit is considered good and the lower limit as poor. How was this determined? What references were taken to determine this? What about subscales? Secondly, considering the title of the article, I did not find any findings regarding the role of the surgical department in this research. What was the reason for the researchers to emphasize the surgical department in the title of the article? Is readiness for interprofessional education different in the surgical department than in other departments? Is there a specific tool to measure students' readiness for interprofessional education in the surgical department? Thirdly, under the Section "Conclusion", there is a claim that it is appropriate that before the start of IPE training, educational workshops have been conducted to learn interprofessional principles and also to analyze the concepts of teamwork and cooperation, professional identity, roles, and responsibilities. In my opinion, this approach is not suitable for the workplace, requiring students to take their 'lessons learned' back to their own contexts. Clearly, a re-orientation of activities from the workshop to the workplace such as grand rounds can increase students' participation and motivation. Moreover, by moving to the workplace and taking advantage of working together and participating in the activities of a larger community, students can build new knowledge and develop new approaches to challenges encountered in practice (2). Finally, based on the study findings, the authors recommended the use of IPE in the official curriculum. It seems that for this purpose we need to conduct more qualitative and mixed methods studies. Moreover, a more robust approach to data collection is needed. I kindly request the researchers to explain the above-mentioned issues.

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**Conflicts of Interest**

There is no conflict of interests to be declared.

**References:**

1. Amouzeshi Z, Daryazadeh S, Keramatinejad S. Comparison of medical and nursing students' readiness for interprofessional education in the surgical department. J Surg Trauma. 2023;11(1):21-27.
2. Lave J, Wenger E. Situated learning: Legitimate peripheral participation. New York (NY): Cambridge University Press; 1991.