







EMERGENCY REMOTE TEACHING IN NURSING GRADUATION: EXPERIENCE REPORT DURING COVID-19

ENSINO REMOTO EMERGENCIAL NA GRADUAÇÃO EM ENFERMAGEM: RELATO DE EXPERIÊNCIA NA COVID-19

ENSEÑANZA REMOTA DE EMERGENCIA EN UN CURSO DE GRADO EN ENFERMERÍA: INFORME DE EXPERIENCIA EN COVID-19

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ABSTRACT

Objective: to describe the experience in emergency remote teaching for theoretical classes in undergraduate Nursing courses due to COVID-19. **Method:** this is an experience report based on Paulo Freire's analysis that addresses the emergency remote teaching process of theoretical classes in an undergraduate Nursing course belonging to a higher education institution in Salvador, Bahia, Brazil, after measures of social exclusion due to the pandemic. **Results:** supported by the dialogical education model, the emergency remote teaching process of the classes demanded the approach of teachers and students to virtual reality and the restructuring of the teaching strategies adopted by the faculty. **Conclusion:** the remote teaching experience involved the training and monitoring of teachers and students regarding the use of virtual tools, and the need to readjust teaching strategies, from virtual conferences to the joint development of products that composed evaluative activities in this environment.

Keywords: Nursing; Education, Nursing; Education, Higher; Education, Distance; Online Social Networking; Coronavirus Infections.

RESUMO

Objetivo: descrever a experiência no ensino remoto emergencial para as aulas teóricas na graduação em Enfermagem em decorrência da COVID-19. **Método:** trata-se de um relato de experiência pautado na análise de Paulo Freire que aborda o processo de ensino remoto emergencial das aulas teóricas ocorrido em um curso de graduação em Enfermagem pertencente a uma instituição de ensino superior de Salvador, Bahia, Brasil, após as medidas de afastamento social em consequência da pandemia. **Resultados:** amparado pelo modelo de educação dialógica, o processo de ensino remoto emergencial das aulas demandou a aproximação de docentes e discentes à realidade virtual, além da reestruturação das estratégias de ensino adotadas pelo corpo docente. **Conclusão:** a experiência de ensino remoto perpassou pela capacitação e acompanhamento das docentes e discentes quanto o uso de ferramentas virtuais, bem como pela necessidade de readequação das estratégias de ensino, as quais variaram desde a realização de conferências virtuais até a elaboração conjunta de produtos que compuseram atividades avaliativas nesse ambiente.

Palavras-chave: Enfermagem; Educação em Enfermagem; Educação Superior; Educação a Distância; Redes Sociais Online; Infecções por Coronavírus.

RESUMEN

Objetivo: describir la experiencia en la enseñanza remota de emergencia para clases teóricas en cursos de grado en enfermería como resultado del COVID-19. **Método:** se trata de un informe de experiencia basado en el análisis de Paulo Freire que enfoca el proceso de enseñanza remota de emergencia de clases teóricas

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en un curso de licenciatura en enfermería de una institución de educación superior en Salvador, Bahía, Brasil, después de las medidas de distanciamiento social como consecuencia de la pandemia. Resultados: respaldado en el modelo de educación dialógica, el proceso de enseñanza remota de emergencia de las clases demandó el acercamiento de docentes y estudiantes a la realidad virtual, además de reestructuración de las estrategias de enseñanza adoptadas por la facultad. Conclusión: la experiencia de enseñanza a distancia implicó la capacitación y seguimiento de docentes y estudiantes en el uso de herramientas virtuales, así como la necesidad de reajustar las estrategias de enseñanza, desde la realización de conferencias virtuales hasta la elaboración conjunta de productos para evaluar las actividades en este entorno. Palabras clave: Enfermería; Educación em Enfermería; Educación Superior; Educación a Distancia; Redes Sociales en Línea; Infecciones por Coronavirus.

INTRODUCTION

The new coronavirus of severe acute respiratory syndrome 2 (SARS-COV-2), a causative agent of COVID-19 and responsible for the current pandemic, is intensely impacting people's health due to its potential for contamination and has impacted others scenarios, such as education. This impact goes through a process of adapting academic training at universities, including health areas such as Nursing.

COVID-19 morbidity and mortality have spread worldwide. In Brazil, the confirmed cases have already exceeded countries like Italy and Spain, severely affected by the consequences of the virus.¹ In the country, the contamination grows every day. Data from the Brazilian Ministry of Health (MS) revealed an incidence of the disease of 103.8/100 thousand inhabitants and mortality of around 7/100 thousand inhabitants. In Brazilian regions, the Northeast is the second in the ranking of confirmed cases (72,076). In the Northeast states, *Bahia* is in the third position (8,128); however, it is the state with the lowest mortality rate of 1.9/100 thousand inhabitants. This reality shows the strong gravity in the context of a pandemic, requiring measures in different government instances to minimize the risks of social contamination.²

Social isolation is one of the priority actions to mitigate the transmission of the virus. It aims to decrease the continuous flow of people in public or private places and the municipalities have implemented this measure where there are confirmed cases of COVID-19. For example, Decree 32.2563 published in the Official Gazette of the Municipality of *Salvador* on March 16, 2020, suspended the operation of public and private universities initially for 15 days, and it was extended consecutively. This decision has been adopted in different countries and states affected by the pandemic worldwide, such as Brazil, Italy, France, Spain, Germany, England, the United States, Canada, among others. In some places,

social distancing has been more severe, so modalities such as lockdown have been adopted.⁴

Despite this reality, which has also impacted people who are in training processes, there is an urgent need to adapt higher education institutions (HEIs) to maintain activities and reduce the feeling of stagnation for the current scenario. This adaptation becomes a challenge, especially in educational processes that value proximity between individuals, such as the model proposed by Paulo Freire⁵. Therefore, some university centers have been living educational experiences since there was a mandatory need for teachers and students to migrate activities, previously in person, to the online reality, requiring the transposition of methodologies and pedagogical practices, called emergency remote teaching.⁶ This movement is the restructuring of conventional classrooms, considering the essential skills for each course, including health such as Nursing.

However, although educational adaptations for the pandemic are considered essential for the continuity of academic training in courses such as Nursing, resources that provide interaction between people cannot be dispensed. This is because there is a practical character in the profession in which dealing with the health-disease process, it requires the development and/or improvement of specific skills for care.^{7,8}

Due to the emergency nature in the current scenario of the pandemic of COVID-19, which required adjustments in the academic training process, we considered relevant to know the educational alternatives used in periods of social distancing. In this sense, the study aimed to describe the experience in emergency remote teaching for theoretical classes in undergraduate Nursing courses due to COVID-19.

METHOD

The study method is an experience report on the emergency remote teaching process of classes in the Nursing course at a university center located in *Salvador, Bahia*, Brazil due to the COVID-19 pandemic. The study shows the experience of coordinators and professors working in the Bachelor of Nursing program, in the two campuses where the course is offered, linked to an analysis based on the theoretical reference of Paulo Freire⁵.

The period of the experiment was from March 16, 2020, the date of publication of the aforementioned decree, until May 2020. This decree reached approximately 1,100 students and 40 professors of the Nursing course of the aforementioned educational institution since they needed to be abruptly removed from their face-to-face academic activities.

As an alternative to social distancing, the emergency remote teaching of classes was implemented, that is, the days and times of classes formerly in person and the possibility of real-time interaction with the professor, whose teaching activities are of a theoretical

nature were maintained. Respecting the recommendations for removal from the Ministry of Health (MS), practical classes should only be resumed with the control of the pandemic. Thus, 35 subjects were remotely offered to 104 classes distributed between the first and tenth semesters, in two shifts (morning and evening), with a total of 500 online classes so far. The subjects such as Course Completion Work also include the contingent of curricular components offered in this phase.

The strategy for obtaining information to describe the experience was the recordings of the classes consulted on the platforms provided by the professors; the exchange of experience in virtual meetings every 15 days to socialize experiences and new methods for distance learning; the use of Google Forms to monitor the content of classes, reorganization of schedules and procedural evaluative activities, numbers of students during virtual classes and difficulties with the platforms. Also, we performed telephone contact by telephone applications, institutional portal, e-mails for students and professors regarding doubts or absences from classes, and contact with the leaders of the classes who provided a better view of the difficulties faced.

With this information, we structured a report into three topics: preparation for the action, action, and Evaluation of the action. Through these topics, the paper encompassed the teaching-learning process during the implementation of emergency remote classes, based on the perspective of Paulo Freire's dialogic education⁵.

RESULTS OF THE EXPERIENCE

The period of social distancing by COVID-19 required an emergency remote teaching of classes, and the training of the faculty to use virtual platforms. Also, educational approaches were restructured and adapted to a new context.

PREPARING FOR THE ACTION

Initially, given the condition of social distancing and aimed at approaching the virtual reality, all professors received online training to use the Big Blue Button platform. This platform was provided by the institution for all courses already used in distance learning subjects. It has structure forums for content and questions and a space for real-time conferences. In addition to this resource, the institution also offered the use of other virtual meeting tools such as Microsoft Teams and Webex.

In this sudden process of adaptation, a momentary inversion of roles is revealed: educators who previously assumed a place of oppressors start to occupy the place of the oppressed individual, needing to learn about another dimension of the teaching-learning process, with the challenge of maintaining the premises of liberating education. The indispensability of the training process for the use of

virtual environments is due to the limited understanding of online teaching. In general, professors are usually recruited for this teaching modality due to their specialties and teaching skills, but they do not receive the proper training to learn theoretical concepts about the virtual environment, which can intensify the resistance behavior in the teaching staff for a remote education.⁹

Despite the different strategies adopted for emergency remote education, it is quite true that, in Freire's perspective, the distance between educator and student is one of the critical nodes of the pedagogical process. However, this distance transcends being close since human beings consciously tend to distance themselves from people to be present.⁵ If even in person, the distance from this dyad is usual, given the persistence of the board educational model, maintaining the proximity from virtual reality is a great challenge in the current reality, in which it deprives the physical contact and sometimes looking into the eyes and expressions. In this sense, the skillful handling of virtual platforms by professors should be considered an essential strategy to minimize the impact on this interaction process. This is because its implementation brings multiple possibilities of interpersonal communication, collaborative work, the creation of evaluation and self-evaluation exercises, the access to the processing of information, interaction, management, and educational administration by students, which is built horizontally from the knowledge by rigid cultural and educational practices.¹⁰

Thus, the student group needs to be informed about the use of the platform. There was no need for sudden training, specifically for Nursing students since they are already used to such platforms. The Pedagogical Project of the Course has a forecast of 18% of the subjects available in distance learning. Even this fact, the coordination needed to pay attention to resolve existing doubts, and to offer a specific tutorial for the students. Another measure adopted was "test class", so that both students and teachers were familiarized with the new virtual condition.

For the management of the software, the exchange of experiences among professors facilitated the process and coped with the new teaching modality. During online training, the faculty who already work with the virtual distance learning tool helped others in the use process. In addition to this support, the approach of the coordination team to answer questions about the platforms, the availability of brief recorded tutorials, and the flexibility of the classes' replacement times were essential for the implementation of this methodology. All of this preparation is the "praxis" restructuring of the educator, which, according to Freire⁵, it is a movement to seek liberation.

Once they were trained, all classes were available for emergency remote education in 24 hours. The professors of the coordination started to make recurring contacts through other media, such as cell phone messaging application, phone call, e-mail, and institutional portal to favor the proximity with the students

and the guarantee of access to the content. This support happened even more assiduously by coordinating the course, especially by understanding the social reality of many students, represented by the lack of access to the internet and, sometimes, a computer. Thus, to minimize academic commitment due to this social context, cell phone chips with an internet data package were distributed by the institution among students who were without access.

In the process of remote teaching of classes, students and professors had to adapt to a routine at home, even maintaining the days and shifts already scheduled before the pandemic period. This is because the family, in general, has also been developing remote activities, whether at work (home office), in kindergarten, elementary, middle, and higher schools. Also, there were household chores and the need to deal with the presence of children full time in the home space that was distractors for learning. Thus, the participation of students in virtual activities was initially low, but the coordination to reach these students, through telephone calls, contacts by e-mail, forwarding tutorials, and strategies used by the faculty such as activities scored, provided better participation and adherence to the new proposal.

THE ACTION

The faculty developed educational methodologies adapted to the virtual environment were in different ways. Among the activities, the use of conference space for interaction with students was the one recommended as essential by the institution. In this, the professors could expose their classes, answer questions about the content, perform activities in real-time, and maintain the link with the students. The sensitivity of teachers is very important, who used other audiovisual resources to add to classes, such as music when they perceived demotivation by the students. Music can transcend barriers in the teaching-learning process, as it has an affective and recreational dimension, in addition to being a resource that favors academic health education, allowing the fixation of contents from a critical, reflective, and current perspective.¹¹ This inspiration shows the sensitivity in the process of problematizing formation in which the individuals immersed in reality emerge from it, needing to elaborate new reasons for their needs.⁵

In addition to the recommendations of the institution, the faculty endeavored to seek other strategies to cover the content proposed by the teaching plans. Thus, they also used slides from the Microsoft PowerPoint program, sent a week before the students for later approach in a conference environment, with a proposal for reflection and dialogical discussion. This didactic resource brings together constructed and codified meanings that, through the experience of the individual, different representations appear. Thus, decoding is promoted, with consequent reconstruction of the situation experienced, culminating in a space for reflection and criticism.⁵

Using this tool, the professors used the provision of clinical cases as a strategy for fixing the content covered, with later discussion in the chats of the virtual environment and directed studies that were corrected in a shared way also during the conferences. The strategy of using clinical cases breaks with traditional teaching, and it is instigating and motivating if presented by videos or simulated scenes when addressing different aspects of health care.¹² The valorization of dialogue between students and knowing how to listen and reflect, even in a virtual environment, is fundamental in the educator-educating relational process, premises of Freire's Dialogical Model.⁵

Another resource used by the professors was the recording of short videos, sometimes in the laboratory of the institution, adopting due care regarding physical distancing with a maximum number of two professors per recording. There are structured scripts for the construction of videos that normally go through planning, pre-production, production, editing, and publication, but the educational objective and coherence must exist among the other didactic materials that the student will receive.¹³ In these videos, the faculty simulated Nursing techniques for a better understanding of the performance of the procedure by the students. These videos are not intended to replace practical classroom sessions, so they are a facilitating strategy for understanding the shared content, which again reveals the concern of educators with their "praxis", making learning meaningful and mitigating the impacts caused by distance in the educational process, favoring the reach of students.⁵

The use of social networks also emerged to minimize the barriers of social distancing, which helped to keep the student stimulated mainly because it is a resource widely used today and easily accessible by the student community. However, they should promote the professionalism of Nursing students of graduation in an electronic and social media, as they may violate private or inappropriate information that favors disciplinary actions and finishing of internships.¹⁴

In this perspective, "live" classes called *lives* were held, offering contents converging with themes appreciated by other students from other areas and even by relatives of the students in focus. Nowadays, communicating has been a movement widely spread by social networks. According to Freire, communication originates from dialogue, which in this line of understanding directs awareness to the world from a collaborative perspective.⁵ As it allows dialogue in real-time, this strategy was suggested by an international study as effective in the education process of emergency nurses in disaster preparedness.¹⁵

One of the activities entitled AV3, which consists of a procedural evaluation, was reformulated to maintain the evaluation proposals adopted by the course. This activity helps students interact and prioritizes teamwork, and it is followed by the professors from the development of group constructions according to the knowledge and availability of the contents of each

subject. The proposal, which consists of an active-participatory methodology, has the role of students in their training process as its main focus. Thus, inserted in virtual reality, they could maintain a model of problematizing education that starts from the premise that a person only knows something when he transforms it and transforms it into the process.⁵

Such evaluation, previously developed from the proximity of the educator-student relationship, required the creativity of the faculty and students. In this sense, a range of methodologies was used, such as the development of virtual medical records of fictitious patients, booklets, folders, and educational videos with themes of exams and women's health, mental map and image technique, through drawings that facilitate the understanding of pathophysiology and anatomies. The different methodologies must be guided by the quality of the content offered, as it is essential to have an appropriate and stimulating interaction between the participants. This can favor autonomy but requires constant evaluation of the effectiveness of the technologies used.¹⁶ These activities still needed to be adequated/contextualized to the pandemic. As a way of valuing and disseminating the work developed, the productions were shared on institutional social media called *Mostra Virtual*, organized by the university center.

EVALUATION OF THE ACTION

For the evaluation of the action, the coordination prepared a form for monitoring remote classes on an emergency basis, using Google Forms, for daily collection. It contained the following information: date, class schedule, subject, difficulties with the platform, students who reported difficulties in access, number of students, and the approximate percentage of students who interacted in class. By monitoring the progress of the classes, they could identify the progress and difficulties and redirect actions with the use of technologies to the needs presented by the students.¹⁷

Given this information, they could carry out constant evaluations of the action since the form automatically aggregates the new information since inserted by the professors who were essential to readjust strategies, to contact students without or with access difficulties, and teaching remote, checking the interaction of classes and realizing which professors had the easiest/most difficult integration with the class.

In general, the experience favored the acquisition of knowledge with virtual platforms with the implementation of classes and training of professors in this process. From a practical point of view, the indicated strategies can guide the performance, not only in Nursing but of any public or private institutions that need to adapt classes and training to meet the educational training needs in times of pandemic that require social distancing. The methodologies adopted can virtually still be added to the problematizing educational-formative process, when it is resumed in person since

all knowledge on virtual platforms can enable discussions in other spaces not previously explored by the faculty and students.

In this sense, the search for maintaining the critical-reflexive perspective, and therefore, problematizing, even in remote emergency teaching, demanded creativity mainly from the professors so that the students participated actively and dialogically in the discussions of the contents. Thus, work in this type of education requires the professors not also creativity, but attention to schedules, dedication, making videos, professional posture for this interaction, and adaptation of the family environment. However, it can also generate a greater workload due to the need to learn to redirect the classroom and for requiring a diversity of activities in this type of format.

This feeling could also be shared by the students, who sometimes felt overwhelmed due to the pandemic scenario having changed their life routine. With that, the recorded classes ensured flexibility to the students, as they allowed access at a more opportune time, especially those who worked during the pandemic or those who had difficulties in the family environment. However, it was not possible to guarantee a favorable environment for dialogue for these students, so that this strategy, although beneficial to some, can weaken the perspective of the liberating model foreseen by Paulo Freire⁵.

Considering these issues, the support of the course coordination in the remote teaching process was challenging. It demanded a division of tasks among the professors of the coordination team by semester since they are specific in their demands; attentive and welcoming look at students in difficulties; perception of resistance or difficulties in emergency remote education; reception of professors in their difficulties and individualized training meeting each one in their specificity.

The reviews of the theoretical contents need to be resumed at times, for the construction of clinical reasoning and adaptation by the students. In this way, all the programmatic content was possible to be reached due to the extension of the term in three weeks. Another limitation of the remote teaching strategy is that classes with non-dynamic and not very creative methodologies do not favor the participation of students in chats, discussion forums, and in the conferences. We observed that it is also fundamental in the practice of remote teaching to avoid a virtual environment that values the verticalization of teaching, board conception, in which only the teacher is the protagonist of knowledge, reflecting on students who replicate speeches without critically analyzing them.

CONCLUSION

The report showed that the process of emergency remote teaching of theoretical classes in undergraduate Nursing due to the pandemic of COVID-19 went through teacher training on the virtual technologies used, and the need to bring the relationship between educator and student, even in the distancing period, favoring this

process. Also, it was necessary to reorganize and/or create new teaching strategies represented by the dissemination of narrated slides, online conferences, video classes, lives of renowned teachers, and with expertise in the discussion of the topics proposed in the college's social network and virtual projects.

The sharing of this experience advances to guide the action for the management of higher education in times of public calamity, as in the case of COVID-19. However, it is limited by not identifying the anxieties generated by the emergency remote teaching process, especially in the teacher-student relationship, which sometimes need differentiated attention, removing even more people with unfavorable social classes of virtual reality. Also, the decision to use some teaching strategies from the teaching praxis shared in a partnership between peers was highlighted, without necessarily anchoring on theoretical-conceptual support.

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