

Supplementary file 1

Table S1. Free coding, selecting the central codes, frequency of experts' answers and specifying the main themes

What do you think of TBL curriculum components?	Sub-theme	Iteration (frequency)	Main theme
<p>1. It could convert the theory to action in the end of education, it considers this point more.</p> <p>2. The curriculum engage the students with real or simulated issues which could be more effective.</p> <p>3. TBL is a learner-based program.</p> <p>4. In my opinion, the students of this field are students who must do more practical activities and they involved with problems. The logic of this field requires that teaching these students accompanied with individual or group tasks.</p>	<p>Pragmatism 16</p> <p>Problem-based 14</p> <p>Learner-based 12</p> <p>Task-based 9</p> <p>Applying knowledge 16</p>	149	Characteristics of task-based program
<p>6. The goals and landscapes of this program is to prepare individuals who have skill, creativity and independent in learning.</p> <p>6. The content of this program should include headings, in particular, the headings which are combination of theory and practice. And, in theory part, the professor provides the necessary information to students. In practical part, he/she provide tasks to students in order to be sure of their success level and in fact, he/she fix their learning.</p>	<p>Individual factors 4</p> <p>Environmental factors 4</p>	8	Factors affecting this program
<p>7. Teaching or learning method is a directed-undirected problem-solving method that use of experimental methods could now be effective.</p>	<p>Curriculum planning 5</p> <p>Sociology 3</p> <p>Psychology 3</p>	11	Forces affecting the design of program

<p>8. The activities I suggest are more learner-based ones and they could use of knowledge using it including providing problems, involved the student in a challenge using simulated real situations</p> <p>9. In my opinion, the features of this program are: learner-based, problem-based, learning-centered, practicing knowledge, independent in learning, problem-solving</p> <p>10. The features of the nursing curriculums should be learner-based, problem-based, focused on theoretical knowledge learning in real situations, independency of individual in learning and dealing with problems</p> <p>11. To design such programs, we need to human resources such as a curriculum planner, educational technologist, and even a sociologist and an educational psychologist.</p>	<p>Laboratory methods 6 Clinical methods 19 Simulation 4 Compound 14 Modeling 8 Participatory models 8</p>	<p>59</p>	<p>Methods of implementing of the program</p>
<p>12. Now, I think that if this program is administrated, we, surely, see the graduation of expert students from the university, who enjoy power and skill to convert knowledge to practice in addition to science, knowledge and theory.</p>	<p>Communication skills 17 Creative and critical thinking 8</p>	<p>25</p>	<p>Required skills</p>
<p>13. At a macro level, this program should include features including flexibility, comprehensiveness, attend to different polarization, expertise in different regions of our country. In addition to, this program should be provided based on the needs of that region and It can be said that it should be semi-centered program.</p> <p>14. At a micro level, this program should be improvable and trackable by practitioners due to its flexibility and semi-centered features. It helps make the program more adaptable. Mostly, such programs are situation-based and are designed based on the situation.</p> <p>15. Reduction of the distance between theory and practice is possible through involved students in problems and practical tasks. To that, we force them to use of their knowledge in real or simulated situations. TBL could reduce this gap between them.</p> <p>16. Educational necessary areas: Hospitals, children and infants specialized sections, health centers, family medicine bases, children clinics and outpatient children care, non-parent children care centers, nursery, orphanage, rehabilitation support centers, correctional centers, schools and kindergartens.</p> <p>17. Look, theoretical settings are at my disposal, I, professor, go to the class and speak about diabetes. I use of Flash memory and teach the diabetes issue. But, it is not the case at all in clinical settings. For example, I go to the hospital and there is no diabetic, but when I go to the hospital in next week, I see that there are 10 diabetics. Therefore, clinical settings are not at our disposal and they are unpredictable.</p> <p>18. For example, I know that part of the requirements for presence of a nurse in the pediatric sector is that he/she has strong communicational skills.</p>	<p>Being unpredictable 18 Being multi-dimensional and multiple tasks 6 Diversity of illness and environment 6 Evaluation 4</p>	<p>34</p>	<p>Gaps</p>

<p>19. In my opinion, real settings and constraints that we have in there make more problems. Clinical setting is a diverse one that you could find all kinds of diseases and individuals and such diversity make the setting unpredictable.</p> <p>20. Life skills such as anger control, assertiveness, and control stress are taught to students. We teach them how to treat with patients' family.</p> <p>21. The nature of curriculum should be such that it increases the participation of learner in the programming process. In fact, participation level of students in such programs should be more than normal curriculums in which students are expected that they outperform compared with traditional and normal curriculums.</p> <p>22. TBL is related to learning through practicing that it causes that students gain experiences and the knowledge is fixed in their minds.</p> <p>23. Mostly, teaching methods in such curriculums is experimental, clinical, simulated situations, participatory and integrated ones.</p> <p>24. Pattern plays the first role in clinical fields. In such fields, the professor teaches the students how to do their tasks. Then, they practice that task using the professor help. In second step, they should cope it alone. Success level of students is assessed based on its task such as connecting the serum to the patient.</p> <p>25. If the curriculum objective is that it could prepare the students to enter labor market, it should teach nursing science as well as nursing skill. Its content should be combination of knowledge and skill.</p> <p>26. Students should not be only taught knowledge, the clinical dimension and involving students in class and clinical activities should be also considered. They should have opportunities to be able to participate in such activities. Because, these students are supposed to work as a competence and skillful trainee in hospitals.</p> <p>27. It should be the optimal combination: Experts in that area along with curriculum planners and psychologists. Also, a sociologist is needed, because this curriculum has a clinical aspect and deals with human mental. These students are supposed to play some role in the society, so I, as a professor, should consider the society challenges and expectations, from my opinions.</p> <p>28. The most important theoretical foundation in this field is pragmatism in curriculum area provided by john dewy</p> <p>29. In running every curriculum, some parts of it should be flexible and it consider the conditions and settings. We should not consider all things in a macro level. We should consider local needs. We should consider behavioral and minor goals.</p> <p>30. In this kind of learning, learning methods starts from learner and the professor play the observer role. He/she should reduce content level and has a strong communication skill and believe the role of students and be sure that learning has taken place.</p> <p>31. Perhaps, the most prominent feature in TBL is in its title. TBL provide tasks that are practical in real settings.</p>			
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<p>32. The base of care activities is communication, i.e. if I don't identify communication skill, its consequences will be negative even though I do the best. The main core of caring is communication, i.e. if I have not communication skill, I could not provide no services to patients, his/her family or to the society.</p> <p>33. Such programs are assessed based on individuals' success in clinical settings and its practical skills.</p>			
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