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The Impact of Covid-19 on Medical Student Education – Navigating Uncharted Territory

T.A. Conlon^{1,2}, P. Mc Carthy^{1,3} R. Mc Govern^{1,3}, S. Slattery^{1,2}, J. Yates^{1,3}, S. Murphy^{1,2}

- 1. Department of Paediatrics, School of Medicine, University College Dublin, Dublin 4, Ireland.
- 2. Department of Paediatrics, Children's Health Ireland at Temple Street, Dublin 1, Ireland.
- 3. Department of Paediatrics, Children's Health Ireland at Crumlin, Dublin 12, Ireland.

Dear Editor,

The Covid-19 pandemic has been described as the defining global health crisis of our time, the impacts of which are innumerable. Since the first reported Irish case in February and the subsequent declaration of a global pandemic, this novel virus has posed enormous challenges globally. The implementation of emergency public health measures has led to widespread closure of educational facilities, restricted movements and an overhaul of our hospitals. As clinical faculty in the Department of Paediatrics in University College Dublin, we consider the possible implications for medical education.

Medical students in their clinical years are a unique cohort, who in ordinary times reside on the busy wards of a teaching hospital. These however are not ordinary times. Our hospitals have changed dramatically. Non-essential workers work remotely, elective work has been deferred, teams restructured and private hospitals nationalised. Doctors are essential staff, but where do medical students lie?

The answer to this is not clear-cut and there is much debate internationally about the role of medical students in a pandemic¹⁻³. There are several ethical considerations. Should students remain integrated in healthcare in the midst of a pandemic? If so, what is their role? Should they be educated remotely to mitigate the risk of infection? If so, at what expense? The impact of Covid-19 is likely to be long-lasting and we must also consider our ethical responsibility to ensure future doctors are adequately trained.

Irish Universities are currently closed and clinical placements have been cancelled. Many learning opportunities have been missed. An innovative online clinically-based paediatric module was developed encompassing online lectures, discussion forums, e-learning scenarios, clinical examination videos and videoconferencing tutorials. In the midst of much uncertainty and stress, our students have been remarkable. They have bravely accepted new teaching methods, online assessments, early graduations and even early internships.

The impact of this unprecedented interruption in clinical teaching must not be underestimated. This crisis has highlighted the many strengths of e-learning, but equally its limitations for clinical teaching. Many skills cannot be taught remotely. With the timeline of the current crisis uncertain, we must carefully consider the implications of cancelling clinical attachments indefinitely. Despite current uncertainty, students ultimately will need to be reintegrated to the hospital environment. Efforts to ensure this happens safely are paramount. The disruptive and potentially transformative impact of Covid-19 on undergraduate medical education is likely to be profound.

Corresponding Author:

Dr Tracey A. Conlon

Department of Paediatrics, School of Medicine, University College Dublin, Dublin 4, Ireland.

Email: tracey.conlon@ucd.ie

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