

“It was the best of times, it was the worst of times, it was the age of wisdom, it was the age of foolishness, it was the epoch of belief, it was the epoch of incredulity, it was the season of Light, it was the season of Darkness, it was the spring of hope, it was the winter of despair . . . , we had nothing before us, we were all going direct to Heaven, we were all going direct the other way . . . ”

(A Tale of Two Cities, Para.1, Line, 1)

Like other academic institutions throughout the world dealing with the CoVID-19 pandemic, we, the faculty and administration of the American University of Integrative Sciences, are formulating a plan of action to navigate a curriculum through a very difficult and fluid situation. Dickens' quote is so apropos, for it tells about a time of chaos, conflicts, and despair, as well as happiness and growth. It in fact tells us about the time of extreme opposites without any in-betweens.

Initially, the Coronavirus was identified as a zoonotic virus spread from animals and not a concern for human-to-human transmission; this has now been refuted. Initially, it was proposed that individuals who were symptomatic were the main carriers and responsible for person-to-person transmission; this fact has now been challenged; in fact, 80% of carriers remain asymptomatic. As leading public health care experts and epidemiologists have attempted to predict a plausible model of the pandemic, this too has fallen short and needed to be modified.



“It is difficult to navigate if you keep changing the landmarks.” D. Penney

AUIS has and will continue to provide our undergraduate MD students, both in preclinical as well as clinical sciences, a mandated social/physical distance course of study in an on-line/ distance learning format. Discussions are currently ongoing with our clerkship preceptors to provide a telemedicine option to meet ACGME requirements of a minimum of 72 weeks of clinical clerkships. We should see those beginning to be offered as early as end-April. An expanded list of digital academic resources has been provided to all students through AccessMedicine.

The Advanced Clinical Medicine(ACM) course, offered in the past as a pre-clerkship course to prepare students for clinical training and the USMLE Step 2 CS exam, will now be offered with on-line course options that include short didactic lectures on the individual skillset(s) being discussed, followed by a simulation-based video demonstration of the proper and appropriate skill set; as demonstrated by the course director and AUIS Clinical Dean, Dr. Penney. Students will have physician-supervised access to the simulators and clinical modules for training in patient care.

What the future holds is difficult to predict, in light of shortcomings of the projected models to date. Dr. Michael Osterholm, an infectious disease expert and founder of the University of Minnesota's Center for Infectious disease Research and Policy, interviewed by Peter Bergen (CNN), has stated that: “We are only in the second inning of a nine-inning contest, with the possibility of as many as 800,000 deaths or more in the US over the next 18 months.” He goes beyond this to state, “this wave of illness is, in fact, just the beginning of what could very easily be 16 to 18 months of substantial activity of the virus around the world.” Osterholm goes on to quote **Sir Winston Churchill**, who so eloquently stated:

“This is not the end, it is not even the beginning of the end, but it's perhaps the end of the beginning.”

Bracing ourselves for potential future outbreaks, AUIS is diligently working and implementing a curriculum that meets local, state, and federal guidelines as well as ongoing ACGME and ECFMG recommendations, which will provide our undergraduate medical students with a sound, comprehensive and compendious education in the basic and clinical sciences.

As the projected model of the COVID-19 pandemic has continued to evolve, we at AUIS will keep abreast of current recommendations and guidelines to provide our students with an uninterrupted education and pathway to Residency.

Don Penney, MD, MSC, FACEP

FROM THE CLINICAL DEPARTMENT – Torri Perry

AUIS' Clinical Department still remains open and continues to actively schedule students to the best of its ability for clinical rotations. It is AUIS' goal to keep each student matriculating at a healthy pace to ensure that COVID-19 does not slow down student progression and advancement. Thus, we have instituted two platforms, in addition to scheduling clerkships as they exist, to ensure we offer students options. AUIS is excited to introduce its online clerkship; a robust four-week elective that will add to your clinical experience and meet ECFMG requirements.

We are also preparing to introduce telemedicine clerkships with qualified practices and their physicians. More information soon to follow.

Any student that is not actively rotating is encouraged to join one of the aforementioned offerings. If not, students will be required to request a Leave of Absence to account for the lapse of time given the pandemic.

If any student's rotation has been postponed, please confirm with Mr. Perry via email at tperry@avis.edu. This will ensure each student is accounted for and that students are not affected in the aftermath.

ACADEMIC MEDICINE IN CLERKSHIPS: 4 WEEKS OF E-LEARNING FOR MD YEAR 3 and 4 – Dr. Alexey Podcheko, MD, PhD

In response to disruptions in clerkships caused by the pandemic, the AUIS academic team is working with concerned regulatory bodies to develop clinical coursework based on guidelines provided by AAMC and ACGME.

The 4-week *Academic Medicine in Clerkships* offering serves to provide students with instruction in Patient Care without exposing them to the risks associated with direct patient contact. The course is offered as e-Learning modules with supplemental teaching resources provided through AccessMedicine and The Merck Manual, delivered through AUIS learning management system, CANVAS.

Students with unscheduled or anticipated interruptions to clerkship training and those coming off study periods will be mandated to participate in the course.

TELEMEDICINE CLERKSHIPS – NEW OFFERING

In response to the COVID-19 pandemic, AUIS is offering telemedicine rotations in Internal Medicine/Family Medicine to its MD Year 3-4 (Clinical Sciences) students beginning May 4, 2020. These rotations provide you with the following experience(s):

TeleRadiology (4 weeks)

Learn radiology from a high volume Teleradiology practice that sees a vast variety of cases including X-rays, CTs, Ultrasound, and MRI images. This rotation is beneficial for future residents in any specialty to get a basic and in-depth analysis on how to interpret images for each modality. You will be ahead of your colleagues after this rotation with having the ability to view radiological images and understanding how to identify pathologies.

TeleHealth - Preventative/Wellness Medicine (4 weeks)

With the increasing demand of Wellness and Preventative Medicine in the US, this rotation has gained huge popularity. Whether you want to go into Internal Medicine, Family Medicine, Pediatrics, or OB/GYN, this rotation is beneficial for most future physicians. Learn about obesity treatment and prevention, vitamin infusions, hormone replacements, and aesthetics such as Botox and Fillers.

Below are links to view a demonstration video for both the Virtual Teleradiology elective and the Virtual Preventative Medicine elective with Dr. Taha and Dr. Ghani at Onyx Partners. (<https://www.teleclerkships.com>)

https://youtu.be/0VcPzFO_Uc8 | https://youtu.be/Y_w2Y398ksA

Attendance Requirements: All elective experiences will be mandatory, and any absence must be reported. To submit an absence request you will be required to contact the elective coordinator. A student may not miss more than 2 days per month (beyond the usual number of days off permitted by the site) of the elective rotation due to illness, emergency, or an approved absence (including for residency interviews).

Summative Assessment: End of Rotation Assessment.

One student assessment form per elective will be submitted for the student's final grade by the elective course director or another core faculty member serving as the course director's designee.

Rotation Schedule: 30-34 hours a week, 4 weeks, weekdays only

Virtual Clinical Time: 3 days a week

Virtual Lectures/Discussions: 2 days a week

Specific days and times to be discussed during orientation

A MESSAGE FROM THE LEADERS OF NBME AND ECFMG | FAIMER

Dear International Medical School Educators, Students, and Graduates:

We recognize that the disruptions to USMLE testing present an extraordinary challenge for all of you. Finding a means to restore USMLE testing is a top organizational priority. Our goal is to collaborate with you as we determine how to assure rapid and safe resumption of testing across a variety of venues. We recognize the impact on both U.S. domestic students as well as those of you in our international community.

Status on Prometric Testing

We are receiving reports that several Prometric test centers are erroneously listed as open, and some examinees with confirmed slots were met with closed centers when Prometric resumed limited testing on May 1st. This has led to a confusing and difficult situation for examinees. We are deeply disturbed by the experience you may be having and are working to immediately find resolution to these issues.

Prometric CEO, Roy Simrell, is aware of our shared dissatisfaction with the current situation and the need for a clear and immediate plan to rectify the problems experienced by examinees. We have been, and continue to be, in daily contact with Prometric to represent the needs of the examinees and faculty to improve the execution of the safe resumption of testing and Prometric's communication with examinees. We have emphasized the impact their actions have on this critical community and the need to ensure examinees are provided timely and reliable information.

We expect capacity constraints and challenges to continue. For this reason, we are working hard to design and deliver solutions even outside of Prometric test centers.

Alternate Delivery of USMLE Step 1, Step 2 CK, and Step 3

We have several efforts underway to resume testing and to address testing backlog and capacity constraints. We have incorporated the suggestions and ideas we have received from medical students, medical school faculty, state medical boards, and our international partners in this work, and will seek to partner even more closely as we move forward with implementation. We expect to have better insight on feasible alternatives and associated requirements within the next week. We will continue to provide at least weekly updates of our progress at usmle.org and ecfm.org.

Step 2 CS

We are dedicated to finding a testing solution for Step 2 CS that assures the safety of examinees and standardized patients as our top priority. We have a dedicated team exploring innovative and disruptive solutions to resume Step 2 CS examinations. This includes options that alleviate the need to travel to examination centers. We expect to have more news next week.

Partnership

Working together, we can respond to the challenges wrought by the COVID pandemic and ensure the continued excellence of America's future physicians.

A MESSAGE TO APPLICANTS — ECFMG | FAIMER IS OPEN AND PROCESSING YOUR APPLICATIONS

We are pleased to confirm that ECFMG | FAIMER programs and services continue to operate. Our staff members are working to process your applications and service requests, and our representatives are answering phone and e-mail inquiries as quickly as possible.

Physicians who use our programs and services should continue to submit applications and other service requests as they would normally. This will help ensure sufficient processing time and your readiness for next steps, as they become available, in pursuing ECFMG Certification, J-1 visa sponsorship (if applicable), and U.S. graduate medical education (GME).

ECFMG Certification

ECFMG continues to process Applications for ECFMG Certification and applications for the United States Medical Licensing Examination® (USMLE®) step components required for Certification, and to verify medical education credentials.

- USMLE Step 1 and Step 2 Clinical Knowledge (CK): **Prometric test centers around the world are open or are beginning to reopen.** We are aware that Prometric has provided inaccurate information about the status of some of its test centers, causing confusion and additional difficulties for some examinees. The leadership of the USMLE program and ECFMG are in daily contact with Prometric to ensure an immediate resolution to this situation.
- USMLE Step 2 Clinical Skills (CS): Work is underway to formalize a plan to resume USMLE Step 2 CS testing, and applicants with canceled testing appointments are receiving regular e-mail updates.
- We continue to verify medical education credentials with international medical schools, although there are some pockets of service disruptions. To support institutions that are working remotely, ECFMG is leveraging electronic communications to stay connected, facilitate the verification process, and minimize disruption of services for our applicants.
- **Applicants seeking an ECFMG Certificate to begin U.S. GME programs in summer 2020 should expect their certificate to be issued in time to start their programs.** ECFMG has been in contact with medical schools to ensure that individuals who meet ECFMG Certification requirements will be issued an ECFMG Certificate.

GUIDELINES FROM REGULATORY BODIES: ECFMG | FAIMER | NBME

In the event of continued closure of Prometric testing centers, the AUIS Administration will make adjustments to the deadlines for taking CCSE and USMLE Step 2 CK exams.

All Covid-19 related notifications and communications from NBME and ECFMG may be found at:

Changes to Medical School Programs or Policies Resulting from COVID-19: <https://www.ecfm.org/focus/issue37.html>

Changes to Medical School Programs or Policies Resulting from COVID-19

“ECFMG | FAIMER appreciates that the health and safety of your students is of the highest priority to you during the COVID-19 pandemic. We understand that you may need to make certain temporary accommodations or other changes to your programs and policies to enable the appropriate continuation and completion of their education. You may choose, for example, to conduct classes remotely using on-line distance learning tools.

According to ECFMG |FAIMER policy, a medical school must have a physical campus and conduct its main educational operations in the country where it is recognized. However, in light of the unique circumstances brought about by COVID-19, conducting **distance learning classes temporarily will not negatively impact the eligibility of current students for ECFMG Certification**. Please also note that ECFMG |FAIMER does not set requirements or times for graduation; this is done at the sole discretion of the medical school.”

Coronavirus (COVID-19): [Assessment Information and Updates from NBME](#) | [Prometric Coronavirus Updates](#)

A MESSAGE FROM ERAS ADMINISTRATION REGARDING 2021 CYCLE

Greetings,

We at ERAS Support Services at ECFMG hope that you are well, staying safe, and taking the necessary precautions amid this Coronavirus (COVID-19) pandemic.

Each day our team remains committed to processing your students/graduates supporting documents and providing the most up-to-date information to our ERAS applicants and EMSWP ERAS medical schools as changes and challenges to our normal circumstances occur.

As it stands, there have not been any changes to the upcoming ERAS 2021 application cycle. This could change and we are monitoring the situation closely.

For the most recent information regarding ECFMG’s services, please visit ECFMG’s [Coronavirus Updates](#) webpage. You may also visit the Association of American Medical Colleges (AAMC) [Coronavirus \(COVID-19\) Resource Hub](#) for additional information as it relates to the academic medicine community.

We look forward to continuing to serve you. Please stay safe and healthy as we work through this together.

Sincerely,

ERAS Support Services at ECFMG/EMSWP ERAS, Email: erasadmin@ecfm.org

TELEMEDICINE — DAVID WRIGHT

It goes without saying, but we are enduring unprecedented times. Going to the grocery store has become our great escape, and Starbucks drive-thru is the closest we can get to studying outside of our home. As medical students, we are left with a lot of uncertainty. One massive shift is delivery of healthcare via telemedicine. Just in the past few years, several major health insurance companies began reimbursing for online doctors’ visits, but it was a niche and not heavily utilized. This pandemic has rapidly accelerated the need for this advancement.

Telemedicine can allow for patients to connect with doctors at any time, in real time, and saves a trip in public, granting much needed access to medical care. While there are many obvious limitations – such as the inability to auscultate and palpate – it provides a needed resource when twenty years ago it simply was not possible. As a future physician, it will be to our benefit to integrate knowledge of efficient, ethical, and legal concepts of telemedicine practice.

FREE TEST PREP

Two free weeks of AMBOSS (or add an add’l two weeks to subscription): go.amboss.com/now (code: AMBOSS-MD20)

Free NBME Self-Assessments and Answer Explanations (now through May 31st): [CLICK HERE FOR INFO](#)

CONTACT

We need help! If you have ideas, articles, discounts, dates, or anything else to contribute, please email newsletter@avis.edu