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Exploring the Impacts of the Pandemic on Medical Students

Dr. Buch:

Coming to you from ReachMD studios, this is *COVID-19: On The Frontlines*. I'm Dr. Peter Buch. And here today to discuss how the pandemic has impacted medical students are Miss Sheila Eghbali and Mr. Kyle Glose, who are fourth-year medical students here at the Frank H. Netter MD School of Medicine where I teach.

Sheila, welcome to the program.

Ms. Eghbali:

Thank you so much for having me.

Dr. Buch:

Kyle, welcome to the program as well.

Mr. Glose:

Good morning, Dr. Buch. Thank you for having us today.

Dr. Buch:

Let's get right into it. What lessons have each of you learned from the COVID-19 pandemic that you will apply to practice? Kyle, let's start with you.

Mr. Glose:

I think the COVID-19 pandemic has brought out a lot of lessons for myself as a medical student and as a future physician and I think also lessons for myself just as a human being, as a member of society, and I think that one thing that I think is forefront in my mind is the vulnerability that a lot of my patients have or future patients will have to isolation. I think it's something I hadn't recognized very much before the COVID pandemic, I think exacerbated a lot of those things, and I think people who live alone or have a small social safety net that can dissolve quickly, and I think that's something that going forward in my life, even when society hopefully returns back to more normal state, I'll ask my patients about, and I'll be aware of and mindful of making sure that they have support in that way.

Dr. Buch:

Kyle, are there any specific cases that you can think of that you want to share with the audience?

Mr. Glose:

Well, sure. So I did my third year at a rural hospital in Northern Maine, so we—our school has this longitudinal integrated track, and so I was up there for 9 months. And the hospital is on the Canadian border, and so a lot of the people who live in this town called Fort Kent have family in Canada. And when the Canadian border has shut down for, you know, an extended period of time, 18, 20 months, a lot of folks couldn't go across to see their parents or vice versa, couldn't come across to see their children or their children couldn't come across and see them. And I can think of one patient in particular who she was very ill in the hospital and ended up passing away without anyone by her side because her family couldn't come across to see her, and I think that the level of isolation that she experienced in the end was you know, really dramatic because of the pandemic; but I think that, for me, it opened my eyes to the importance of just checking with our patients about isolation in general, because even when the pandemic is over, there are still going to be patients that appear in our practices that are isolated for whatever reasons, whether it's, you know, institutional or systemic, such as the border being shut down, or more personal, like being estranged from family. So, and I think that, for me, I will recognize how crucial that is for people during a hard time, especially during a medical crisis.





Dr. Buch:

Thank you. Thank you for sharing that. And how about you, Sheila? What lessons will you apply from the pandemic?

Ms. Eghbali:

So I think I would like to second what Kyle has said, but on a different note, one of the things that really stood out for me was how much information was influx throughout the pandemic. In the very beginning, I was really following the research carefully, and I practically read every paper that came out, and after a few months, that became an impossibility because there were just so many pieces of research coming out, and our understanding of what COVID was and what it was doing and how to treat it was constantly influx. And one of the things that I got to experience and really, you know, got a lesson from that was how information in science and medicine changes so much, and if you have more and more data, something that you thought was true before is no longer true, and it's really important to look at the strength of evidence and wait and see what sort of your collective findings show you. And I think this is really important in medicine and in my future practice because there's always new things coming out, and patients have questions about it, and it's good to have that sort of understanding of how that information is influx and to be able to explain that to our patients.

I think one of the other things that really stuck with me that I think I'm going to carry into my practice is that I didn't get to see, for example, respiratory cases very much during my third year because we were not allowed to see COVID patients, and as a result I found that I had sort of a gap in my understanding, of how to diagnose and manage and treat patients with respiratory conditions that come in. And when I faced that during my fourth year, I suddenly realized I needed to close that gap, and I think this can be true for anything that we might not have the, you know, opportunity to see when we are training.

Dr. Buch:

Sticking with you for just another moment, Sheila, how did the increase in remote learning affect you?

Ms. Eghbali:

I have to say I liked the remote learning because a lot of my sites were really far away, including in a separate state in Massachusetts, and being able to maximize my clinic time and then log into Zoom, and be there for the lectures was really valuable for me. For my psychiatry rotation, my hours were such that if I left to be in-person for a lecture, I wouldn't have enough time to meet my weekly hour requirement, and so this in some cases was actually pretty critical for me to have the option of maximizing my clinic time. There, there were some negative aspects, which is not being able to interact with colleagues and being able to sort of have that learning from one another in queues and in a place where you are present, so that is definitely something I missed, but there were perks in being able to log in from afar as well.

Dr. Buch:

Thank you for sharing. For those just tuning in, you're listening to *COVID-19: On The Frontlines* on ReachMD. I'm Dr. Peter Buch, and I'm speaking with Miss Sheila Eghbali and Mr. Kyle Glose, who are fourth-year medical students here at the Frank H. Netter MD School of Medicine, about their experiences during the pandemic.

So let's continue the discussion with you, Kyle. How have you managed the stress?

Mr. Glose:

That's a great question. And I think that stress management is something that's important always, but especially during COVID when, you know, again, the isolation I think brings out stress. So, for me, I think the biggest thing was just making sure I made time for my peers and making sure that I made time for those social connections. I'm someone who takes a lot of gratification from being around people and from having interactions with my friends, and I think during COVID that was hard to do. I think it was also a lot of taking a step away from my day-to-day work and reevaluating the things that were fulfilling me in my life and making sure to prioritize those, so calling my mom, reading a good book, you know, going and just getting outside and getting some fresh air, taking time for that, which even though, to be honest, I did infrequently because time demands and third-year medical school] are stringent. Even doing that infrequently I think helped me a great deal with managing the stress, but I think it all started with acknowledging that I needed to prioritize those things in my life.

Dr. Buch:

Thank you. So, before we close, I'd like to look ahead and hear from each of you one last time, starting with you, Sheila. Do you think medical students should fully participate in patient care should there be another pandemic?

Ms. Eghbali:

I think that's a really excellent question, and I don't think it has a really easy answer. I would say yes and no, and this is the way I would break it down. So, in March, April and May of 2020 when there was sort of the really big surge, at least where we were, a lot of the physicians on the different services—for example, surgeons were put into the ICU, so we really didn't have access to all the different





services where we would do our training because everybody was shifted to do patient care in the COVID units, and so I think during that time, participating would not have really been helpful for us, and we might have slowed things down because the stress level was also really high on the system. But then when we returned to the clinic, we had some limitations—So I think in those cases that would be helpful and allow us to sort of not only gain a better exposure to all the different things that come through but also learn how to deal with a condition that's affecting everybody in sort of the world and be prepared for that when we go into our internship, so that's sort of my thought around that.

Dr. Buch:

Thank you. Kyle, it's your opportunity.

Mr. Glose:

Yeah. And I'll second what Sheila said. I don't think there's an easy answer to this question. However, I would say that I think there's a tendency to think that medical students are, you know, likely to distract the team or detract from the ability to provide patient care in a really intensive setting, like the peak of a pandemic, but I think I've always had the perspective that medical students can actually bring something to the team as well. And for me, one of the biggest thing that I've found medical students can bring is time. And I think one of the lessons from the pandemic was just how important clear and effective communication with patients is about treatment options and vaccination and what the coronavirus pandemic means and how to protect yourself and your families, and I think that medical students could have offered something like that during this pandemic, taking time to sit with patients and really help explain things and help them understand in a way that doesn't feel rushed and doesn't feel you know, distracted. I think that we should be allowed to help, and if there were, hopefully, there won't be, but if there were another pandemic, again provided the things that Sheila mentioned are true, that the training environment is still beneficial for us and that PPE is available and it can be done safely for us and for our patients.

Dr. Buch:

Thank you so much. So coming to the conclusion of today's program, I want to give you both a chance to add any final information that you want to share with our audience. Sheila, you'll be up first.

Ms. Eghbali:

All right. Thank you so much again for, for having us. This has been a great opportunity to share some of our experiences. And, and I think, really the takeaway message that sort of for me from the COVID pandemic hasbeen there is—uh, not only the pandemic has affected the healthcare system and everybody who's affected and you know, all the people who have, unfortunately, lost their lives, there's been also a lot of unequal impact on different communities, and that is something that's been brought to light. And as a result of it, we have also been learning more about it within the clinical and the medical school setting, and I think these while it has been a really horrific time for I think everybody around the globe, it has also brought out a lot of lessons for us to learn that we can carry forward, both for ourselves as just people but also as physicians, as future physicians caring for our patients.

Dr. Buch:

Thank you. Very important thoughts. Kyle, anything else that you wanted to add in conclusion?

Mr. Glose:

Yeah. I think I would just add that, as we mentioned earlier, the COVID pandemic has created an unprecedented situation for medical education and for medical students coming through during this pandemic, and I think that one of the biggest benefits that we've drawn from that is just our ability to be adaptable. We've had to adjust our entire curriculum and adjust our expectations for third and fourth years, for away rotations, for residency interviews, and I think that that adaptability is something that, is a huge positive of having gone through medical school during this time.

Dr. Buch:

Thank you very much. And as we close, I want to thank my guests, Sheila Eghbali and Kyle Glose, for sharing all of those valuable insights to give us perspective on how the COVID-19 pandemic had impacted medical students. Sheila, thank you very much for joining us today.

Ms. Eghbali:

Thank you. Thank you for having me.

Dr. Buch:

Kyle, again, thank you for joining us here today as well.

Mr. Glose:

Thanks so much, Dr. Buch.





Dr. Buch:

I'm Dr. Peter Buch. To access this and other episodes in our series, visit reachmd.com/covid19, where you can be Part of the Knowledge. Thanks for listening, and see you next time.