reasoning practices in trainees and exploration of the utility of integrating the VMR into clinical reasoning curricula.

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REFERENCE

1. The Clinical Problem Solvers. Virtual Morning Report. [website]. The Clinical Problem Solvers; 2020. https://clinicalproblemsolving.com/learn-live/. Accessed May 29, 2020.

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#EducationInTheTimeOfCOVID: Leveraging social media to teach during the COVID-19 pandemic pandemonium

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1 | WHAT PROBLEMS WERE ADDRESSED?

Residency education has been disrupted by the coronavirus disease 2019 (COVID-19) pandemic. Programmes in pandemic status, as designated by the 'Accreditation Council for Graduate Medical Education (ACGME)' in the United States, have substantially modified or suspended traditional educational activities to adhere to physical distancing practices and allow residents to focus on patient care. This lapse in educational events is especially challenging now, as residents and other health care professionals are facing a previously undocumented illness and must stay current with the deluge of new information on COVID-19. Hence, there is a need for simple, digestible, up-to-date, and accurate information on COVID-19 that is electronically disseminated and easy to obtain.

2 | WHAT WAS TRIED?

In March 2020, the American Association of Medical Colleges (AAMC) issued a statement strongly suggesting that medical students not participate in any direct patient care, and Emory medical students were subsequently removed from clinical rotations.[1] Despite this, medical students demonstrated an extraordinary interest in being involved in the COVID-19 response, even if not through direct patient care. We harnessed medical students' enthusiasm and availability by sending a solicitation to the medical school student body, seeking students interested in creating COVID-19 educational materials. These educational materials were then disseminated via social media for our internal medicine (IM) residents, faculty members and educational community.

Infographics were employed as the primary educational medium to ensure information was visually engaging and easily absorbed by busy clinicians. Fellows and faculty members chose recent literature on COVID-19 salient to patient care, prioritising relevant basic sciences, epidemiology, clinical presentation, and therapeutics and management. Medical student pairs summarised each topic and created the infographic. Students received infographic templates, a style manual, and examples to guide his or her efforts. To ensure the accuracy of the disseminated information, a fellow or faculty member reviewed all infographic content and provided feedback to the students.

We posted graphics daily on the IM Residency Instagram account (@karen.ll.law, 745 followers) and the Twitter account of an infectious diseases faculty member (@JenniferSpicer4, 4,238 followers) with the hashtag #EducationInTheTimeOfCOVID. Over the first 43 days of this initiative (17 March to 29 April 2020), we created 64 infographics with contributions from 75 medical students, 18 fellows, and two faculty members.

3 | WHAT LESSONS WERE LEARNED?

This initiative highlights the potential of social media to deliver resident education during the COVID-19 pandemic and physical distancing. By mobilising a large base of medical students, we maximised engagement, minimised per capita time commitment, and offered a unique educational opportunity. Students have anecdotally described the value of developing these new skills, participating in the review process with fellows, and engaging with medical literature in a novel,

challenging, and rewarding manner. By having content experts review the final posts, we ensured the accuracy of our educational products.

Dissemination via social media facilitated quick access by residents. We have received feedback that health care professionals at other institutions have used our graphics in individual and group learning. In this time of educational disruption, we believe this innovation demonstrates how we can engage medical students and social media to deliver educational resources and keep frontline health care professionals up-to-date with rapidly changing information in the setting of the COVID-19 pandemic.

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REFERENCE

1. Association of American Medical Colleges. *Guidance on Medical Students' Participation in Direct Patient Contact Activities*. Washington, DC: AAMC; 2020:1-6. https://www.aamc.org/system/files/2020-03/meded-March-30-Interim-Guidance-on-Medical-Students-Clinical-Participation_0.pdf. Accessed April 1, 2020.

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Responding to hospital system and student curricular needs: COVID-19 Student Service Corps

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1 | WHAT PROBLEMS WERE ADDRESSED?

Throughout March 2020, cases of the coronavirus disease 2019 (COVID-19) grew exponentially, and New York emerged as an epicentre of the crisis. Social distancing, shortages of personal protective equipment and clinical care needs necessitated that students be removed from the clinical setting. A group of students, faculty members and administrators was formed to identify ways in which students could be involved in supporting the health system. Immediately identified areas of need included maintaining virtual medical education, supporting rapid adoption of telemedicine, assisting high-volume hotlines and providing well-being support to providers and students. The COVID-19 Student Service Corps (CSSC) was devised and deployed at Columbia University Irving Medical Center with the mission of supporting health systems and their patients, workforce and communities facing the COVID-19 pandemic through interprofessional student service-learning projects (see www.ps.columbia.edu/education/covid-19-student-service-corps-cssc).

2 | WHAT WAS TRIED?

The CSSC leadership team developed guiding principles, including service-learning guidelines, and service project ideas that were found to be successful. Guiding principles included:

- Needs are identified by the health care system.
- A service-learning model, in which students learn, reflect and grow in their professional and personal identities when serving their communities, is utilised.[1]
- Leadership and collaboration are interprofessional when possible.
- Faculty member and student collaboration; oversight and supervision help students serve the health care system and communities.

Project areas to consider given local health care setting needs:

- The 'COVID-19 'Hotline staffing' of community-facing and internal staff lines.