

**Supplementary Material 6.** Free text comments on the impact of COVID-19 on endoscopy training programs

## Negative sentiments

- Training was completely forgotten both by the trainees and Trainers as they were all in either performing essential medical duties or staying out of hospital.
- Despite using all physical space during normal working hours, we can only perform about 30% of the volume.
- Less case volume for trainees. No hands-on workshops.
- High stress and fear for being COVID-19 positive
- Severely affected number of inpatient consultations, outpatient office consultations along with elective endoscopic procedures.
- Difficult to see how we can resume hands-on training, either of our own fellows/trainees or running hands on training courses in the current climate. Or until an effective treatment/vaccine is proven to work.
- First year fellows mostly affected as they were just about finding their feet when this hit! Now starting all over again mostly. However, I believe they will all eventually catch up.
- Trainees are afraid of doing procedures because sufficient PPEs are not available to all.
- We have noted that 1st year fellow's endoscopic skills declined more significantly than 2nd and 3rd year fellows now that they are starting to do some elective procedures with faculty
- We most likely will need to extend the period of training
- Bad faculty management during pandemic
- COVID-19 struck during the last quarter of training which made it especially challenging in a 12-month advanced endoscopy program where the final quarter is spent honing the fellow's skills once fundamentals are secured. Unfortunately, this will negatively impact their learning experience, but we are unable to lengthen the training schedule

## Neutral sentiments

- We are very high-volume center and have only two advanced trainees. Even though the number of cases decreased for trainees during pandemic but really didn't impact much of their training. They are already sufficiently trained to practice independently.
- We are expecting to resume training soon and apart from the PPE constraints it should become business as usual
- Better planning will be needed for resumption of endoscopy training

## Positive sentiments

- As this is a temporary phase, the training can resume with almost 75% capacity after a few months. Till then the trainees are coached through video lectures and on-line sessions
- A major increase in the use of telemedicine / virtual care for outpatient gastroenterology by staff gastroenterologists and the adoption of joint training telemedicine clinics, with trainees & staff over the last 2 months.
- Fellows actively more engaged in developing educational programs for other fellows and more active in clinical research (retrospective) studies.
- We all will have to adapt to performing cases in a limited capacity. Fellows will have to augment their endoscopic skill using Endoscopic simulators.
- We have grown closer and stronger
- But more time for thesis preparation. More time to communicate with supervisor.
- Ironically, the crisis has afforded a great training opportunity for our advanced fellow. He was not redeployed and has assisted with many of the emergency complex ERCP and EUS/pancreatic cyst-drainage procedures that we have continued to do.
- The moderately negative impact was balanced by a greater cohesion of faculties and trainees Inside the department and with other departments
- Having the opportunity to experience this pandemic has also been a great learning experience for all of us. Care with disinfection and use of PPEs increased.
- Part of any endoscopy training is the understand and adopt to new challenges. COVID-19 pandemic was challenging but at the same time, it gave us an opportunity to improve proper PPE and re-understand basics of virus transmission risk/mitigation strategies. Fellows do appreciate these challenges as part of their training. Thanks!

COVID-19, the coronavirus disease of 2019; ERCP, endoscopic retrograde cholangiopancreatography; EUS, endoscopic ultrasound; PPE, personal protective equipment.