HEALING ARTS: MATERIA MEDICA

Medical Students in the Time of COVID-19

Aldis H. Petriceks, B.A.

Harvard Medical School Boston, MA, USA.

On March 11, 2020, as the COVID-19 pandemic hit full stride in its ascendance to the fog which has now engrossed all of daily life, Dr. Anthony Fauci told the U.S. House Oversight Committee that the problem “is going to get worse.”¹ While Dr. Fauci was speaking to congress, my first-year classmates and I were in the hospital for our Practice of Medicine course, and our big question that day was likely similar to that of the elected representatives, and perhaps even Dr. Fauci: *What on earth is going to happen?* Months later, the answer is still unresolved, but the story has progressed.

By March 12, our first-year curriculum had “gone virtual”; our dorms began emptying; and most medical schools across the country underwent the same process. On March 17, the Association of American Medical Colleges recommended that all medical schools suspend student involvement in patient care for a minimum of two weeks, and later extended this recommendation.^{2, 3} On March 20, my upper-class peers opened their residency match letters over a live Zoom feed and then graduated in May, also over Zoom. Yet for all their ceremonial losses, these newly minted doctors now have this: they will be in the hospitals, doing the work, no longer inhabiting the medical students’ liminal state in which one simply wonders when it will all end.

From the pandemic’s beginnings, my classmates and I have had little difficulty comprehending our dispersal from campus. What has instead gnawed at us is the moral tension of social distancing, of living life on Zoom while our instructors work nights on COVID-19 surge teams, lead hospital board meetings, and, every now and then, contract the virus themselves. How can one learn medicine from the confines of one’s room when real medicine requires a perilous contact with the outside world?

By early June, it was announced that our pre-clerkship curriculum would continue—and finish—online. That was a saddening announcement, but not unbearable: our pre-clerkship curriculum lasts only fourteen months in total, and we would begin our hospital rotations, on time, in September of 2020. Yet even after realizing that our personal timelines would go undisrupted, many medical students faced the same moral tensions of enjoying personal safety during our work-from-home remote learning while so many people suffered risks of contracting COVID-19 themselves.

Almost immediately after the virus began spreading throughout the USA, students across the country began spearheading initiatives; offering daycare for the children of young physicians; managing scarce personal protective equipment; and curating collections of constantly developing research findings on COVID-19.⁴ At Harvard, a team of students created an online COVID-19 curriculum—replete with full modules and learning assessments—in a mere four days. Other groups advocated for the protection of Native Americans during the pandemic, organized COVID-19 screenings in homeless shelters, and translated patient materials into non-English languages. I felt I had become useful to the pandemic response by screening for the virus in one of the homeless shelters and co-authoring an article on goals-of-care conversations with older patients in the context of COVID-19. What dawned on my classmates and me was the need to prepare ourselves not just for clinical medicine but a new model of clinical care that took into account the moral tensions of unequally apportioned risk among patients and staff.

The May 25 murder of George Floyd indicted us all anew, wrenching into focus the systemic racism and discrimination that saturate policing and public policy and that fuel the race and class health disparities that continue to challenge health care justice. I realized that the rage at inequality which underlies both COVID-19 and the police killing of Black persons in America is undeniably connected to, inextricably tangled in, a web of societal shortcomings.

The conflation of the COVID-19 crisis and the anti-racism movement has motivated a greater urgency for medical students to reimagine the medicine on which we are embarked. For many of us, clinical medicine has widened to include its practice beyond the clinic. The social illnesses which multiplied the impact of COVID-19, and which made possible the murder of George Floyd, highlight our continued need for the creativity, determination, and organizational prowess which my peers have demonstrated over these past months. It highlights as well the urgent needs to face racism, to address white privilege, and to dissect medicine’s own implicit and explicit biases.

So there is, perhaps, a broader significance to the efforts of medical students in the era of COVID-19. We may look back on these efforts not merely for their timeliness and innovation, but for the greater context in which they arose: a context which forces us to look *forward* at ills which plague our society and healthcare system; a context which cannot be changed in the clinic alone;

Prior Presentations None.

Received April 9, 2020

Revised July 9, 2020

Accepted August 3, 2020

Published online August 19, 2020

J Gen Intern Med 35(11):3374–5

DOI: 10.1007/s11606-020-06106-4

© Society of General Internal Medicine 2020

and a context which will not suffocate the passion, the resolve, the love, and the healing, of my peers across the country.

Corresponding Author: Aldis H. Petriceks, B.A.; Harvard Medical School Boston, MA, USA (e-mail: aldis_petriceks@hms.harvard.edu).

REFERENCES

1. **Baird RP.** What It Means to Contain and Mitigate the Coronavirus. The New Yorker. March 2020. <https://www.newyorker.com/news/news-desk/what-it-means-to-contain-and-mitigate-the-coronavirus>.
2. AAMC. Guidance on Medical Students' Clinical Participation: Effective Immediately. 2020.
3. **Whelan A, Prescott J, Young G, Catanese VM, McKinney R.** Interim Guidance on Medical Students' Participation in Direct Patient Contact Activities: Principles and Guidelines. 2020.
4. **Krieger P, Goodnough A.** Medical students, sidelined for now, find new ways to fight coronavirus. New York Times. www.nytimes.com/2020/03/23/health/medical-students-coronavirus.html. Published March 23, 2020.

Publisher's Note: Springer Nature remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.