Transformation of Medical Education at the Era of COVID-19 Pandemic: Shiraz Experience

Alireza Heiran¹ and Babak Daneshfard²*

¹Student Research Committee, Shiraz University of Medical Sciences, Shiraz, Iran ²Traditional Medicine Clinical Trial Research Center, Shahed University, Tehran, Iran

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Dear Editor,

he recent coronavirus disease 2019 (COVID-19) crisis has dramatically affected different parts of society worldwide. Iran is among the countries which has been seriously confronted with the disease and its psychosocial side effects. Soon after the official announcement of COVID-19 detection in Iran, medical education programs were suspended. Teaching rounds, grand rounds, morning reports, and hospital conferences were paused. Classrooms were closed and clinical practice mainly involved senior medical students and was limited to quick working rounds and essential medical services without considering educational aims.

However, little by little, virtual connections emerged to help the educational programs hang on. All the arrangements were scheduled to minimize the contact between students, staff, and patients. The crucial role of social media (primarily WhatsApp) could not be ignored. Thanks to this unified platform, consulting with the residents was performed without any physical contact. All new radiographic imaging, laboratory data, and/or patients' progress were sent to the consultant physicians via this unified platform and they were reverting back soon with their diagnoses and recommendations. In addition, virtual case presentations and grand rounds with

permanent access to the presentation materials, yielded a unique experience in medical education.

Medical interns who had become the head of the medical team in the hospital wards and were managing the patients in the real world were supported virtually by the supervising residents and the attending professors. This new approach not only minimized the physical contact in the hospitals, but also gave them a unique experience in their career (i.e., managing the patients without the physical presence of the residents and attending physicians).

The current crisis once again revealed the necessitation of virtual education.³ Although this transformation in medical education, which appears to be inevitable, had some drawbacks such as decreased direct contact with patients, we believe that it had some advantages, including equity and equality in medical education. However, the efficacy of such education models needs further evaluation.

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