



Using Virtual Rounds to Resume Clinical Experiences for Medical Students during COVID-19

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Introduction

The **COVID-19** pandemic **disrupted** standard graduate **medical education** (GME), canceling all in-person clinical rotations for medical students.

To counter this disruption the Family Medicine Service (FMS) at Penn State College of Medicine (PSCOM) **initiated virtual “rounding”** for **students** during their Family Medicine clerkship.

This was **incorporated into** the **synchronous and asynchronous online learning** modules for clerkship students during this indirect patient care period.

Methods

Clerkship competencies, including **history taking, case presentation, documentation, clinical reasoning and communication** were **assessed** during the experience by faculty and staff **with immediate feedback** to the students.

Experience of the online learning environment and use of virtual tools for **virtual rounding** was **assessed** by qualitative analysis of **reflective narratives** from the students.



Interventions

Medical students virtually interfaced with their patients **via iPad tablets** (right picture) and pre-rounded with FMS clinicians. The devices were left with the patients so that the students could have further virtual interaction. Students then presented the patient on **rounds** with the inpatient FMS team **via a Zoom connection** (see above picture).



Preliminary Results

A total of **20 students** and **6 faculty** participated in the virtual Family Medicine rounds.

Students found the “live” interactions with patients a **welcome relief** from the online learning modules.

Although technically challenging at times, faculty felt the **virtual rounds added value** to student interaction and learning.

Conclusions

There was a clear **progression of competencies** for the students that occurred as a result of the virtual rounds and interactions.

It is hoped that the **virtual rounds** allowed students to **refine** their skills of **history taking, case presentation, documentation, clinical reasoning, and communication** and better positioned the students for their return to direct patient care.