

1 **Title:** To Help or Not to Help: A First Year Canadian Medical Student’s Dilemma During the COVID-19
2 Pandemic.

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9 She is a recipient of Ontario Medical Students Association Innovator Grant and McMaster Medical Student
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11
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25 **Discussion Points:**

- 26 1. Is a virtual medical school even a medical school?
- 27 2. Who gets to be a front-line healthcare worker?
- 28 3. Do medical students have a role to play in the COVID-19 pandemic?
- 29 4. How to use your time “efficiently” amidst a global pandemic?
- 30 5. Reconciling with an uncertain future post-COVID-19 pandemic.

31
32 **Publisher’s Disclosure:** *This is a PDF file of an unedited manuscript that has been accepted for publication.*
33 *As a service to our readers and authors we are providing this early version of the manuscript. The manuscript*
34 *will undergo copyediting, typesetting, and review of the resulting proof before it is published in its final citable*
35 *form. Please note that during the production process errors may be discovered which could affect the content,*
36 *and all legal disclaimers that apply to the journal pertain.*

1 THE EXPERIENCE.

2
3 On March 13, 2020, we received our first email concerning COVID-19. This was followed by a large flurry of
4 emails and soon our inbox was flooded with, “*there will no longer be any large group lectures*”...“*no clinical*
5 *skills classes*”... “*all anatomy programs have been suspended*” and so forth. The mails kept coming in, and
6 with them came a wave of confusion about the future. For me, a first-year medical student, I was shocked. I
7 understood that many universities across the globe were taking steps toward social distancing but an online
8 medical school? That had to be a mistake. Suddenly, another email came in, suggesting that all the upper-
9 year students on clerkship were discharged from clinical duties and that all medical students were expected to
10 not visit any healthcare facilities unless necessary. After reading the last email, I was no longer feeling
11 uncertain about the future; instead, I felt apprehensive. Although, I could not pinpoint the reason for my
12 feelings.

13
14 Then my phone rang, it was my supervisor calling to check in. He asked what my thoughts were about
15 medical students being suspended from clinical duties. Before I could say anything, he said that in this time
16 when physicians should be helping out more, why should the medical students be discouraged from helping
17 and doing their part? His idea was that we did not come to medicine to step away when the need arises, but to
18 take proper precautions, and stand up in solidarity to provide care. Listening to him, I felt validated. I took a
19 deep breath as I realized that the sentiment I felt was of being stripped of the opportunity to play my part. I
20 kept thinking back to the day of our white coat ceremony just a few months ago, where we pledged to serve
21 our communities with kindness, care, and justice. Now, a time when more than ever before, we had the
22 opportunity to stay true to our oath, we were told that our services will no longer be required. Talking further,
23 we both explored the other side of the issue. We did discuss how having medical students at the hospital
24 increases liability as well as puts students at risk. However, reconciling with those ideas, and staying inside
25 the house was difficult.

26
27 Sensing that many medical students felt the same as me yet recognizing our responsibility to engage in social
28 distancing like all citizens, the next few days went into finding a sweet balance. Within days, we started seeing
29 a rise in initiatives started by medical students to help with the COVID-19 relief.¹ Initiatives like helping
30 frontline workers by doing grocery runs or providing child-care services. It was heart-warming to see how
31 students from all across the globe were collaborating, reaching out, innovating and trying to support the
32 frontline heroes.² Personally, I found myself drawn to reducing anxiety and aiding in the mental health of
33 community members. As an Education Committee member of the Ontario Medical Students Association, I
34 began working with medical students from all over Canada to create a series of infographics sharing
35 resources and encouraging medical students to stay informed (**Figure 1**). I began checking in with senior
36 residents of my building, and we tried to reassure and encourage each other. Somehow, in an attempt to
37 physically distance, people were indeed coming together emotionally.

38
39 As days pass by, and we begin to adjust to our new online curriculum, I find myself surrounded by new
40 dilemmas. Every news or social media outlet that I surfed was filled with ideas of being productive. From
41 cooking challenges to exercising, and spending time with family, everyone seems to be in a race to make

1 efficient use of this unexpected gift of time. I am guilty of thinking similarly. I found myself being pulled in all
2 directions. It was important for people to recognize that not doing anything productive, and simply taking care
3 of ourselves was equally important. To seek support when needed. To realize that it is okay if we all do not
4 come out as chefs, or athletes after this lockdown.

5
6 Even though I am not at the frontline, I feel a sense of responsibility by being associated with the profession of
7 medicine. In some ways, living everyday through this pandemic and seeing the world cope, seems to teach me
8 something new every day. Even though our classes are now online, and it seems scary to think we might not
9 learn all the necessary clinical skills, I am determined to work harder. Most of all, stories of sacrifice and triumph
10 of healthcare professionals motivate me to be a better version of myself, to be a better student, and a better
11 physician in the future. To end off, just like all the email communications we received, I hope you are all keeping
12 safe during these uncertain and changing times.

13
14 Learn more about education in Ontario, Canada (including infographics), volunteering opportunities and
15 wellness during COVID-19 at the Ontario Medical Students Association website: <https://omsa.ca>.

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1 **REFERENCES.**

2

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4 Times of Pandemic. Int J Med Students. 2020 Jan-Apr;8(1):9-10.

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6 Role in Addressing Community Needs in the COVID-19 Pandemic: An Experience from the US. Int J
7 Med Students. 2020 Jan-Apr;8(1):70-72.

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1 FIGURES AND TABLES.

2
3 **Figure 1.** Infographics created with students of the Education Committee of the Ontario Medical Students
4 Association


5
6 OMSA AÉMO

7 **Feeling overwhelmed with the never-ending**
8 **stream of information on the COVID-19 pandemic?**
9 **Use "T.H.I.N.K!"**

10


11 **Take a moment** Allow yourself the time to process information, as it's difficult even in the best of times to critically evaluate a study. 

12

13  **Hierarchy of evidence** View studies lower on the hierarchy (e.g. case reports) with more scrutiny than those higher up (e.g. randomized controlled trials).

14

15

16 **Investigate the source** Look up the journal in which the study was published and beware of deceptive journals, such as those not found in indexed databases (e.g. Scopus, PubMed). 


17

18


19 **n?** **N of what?** Always be wary of drawing conclusions from studies with small sample sizes.

20

21

22 **Keep Current** Be proactive in setting aside time each day to review from vetted sources. 

23

24 

25 CREATED AND DEVELOPED BY MICHAEL SCAFFIDI & JANHAVI PATEL EDUCATION COMMITTEE, OMSA
26 <https://oneresearch.library.utoronto.ca/deceptivepublishing>
<https://www.carl-abrc.ca/>
<https://www.cebm.net/2014/06/critical-appraisal/>

27

OMSA AÉMO

Donning: Get Me Gloved



Gown



Mask then Eye Protection*



Gloves



Doffing: Gloves Go First

Gloves



Gown



**Face
Eye Protection
then Mask***



CREATED AND DEVELOPED BY ISABELLA FAN, VICTORIA MCKINNON & JANHAVI PATEL EDUCATION COMMITTEE, OMSA

* N95 mask and eye protection (goggles/face shield) are required for enhanced aerosol-generating procedures
<https://www.youtube.com/watch?v=cCzwH7d4Ags>



Wash/ Sanitize
Hands


1
2
3
4

Image last updated: April 20, 2020

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HOW CAN COVID-19 TRANSMIT?

Droplet Contact




Cough/Sneeze → Mucous membranes

Direct Contact




Person → Person

Indirect Contact




Person → Surface → Person

AGMP: Airborne
Non-AGMP: Research ongoing
(Nature.com/articles/d41586-020-00974-w)



Droplet nuclei in the air (< 5µm) → Respiratory tract

Fecal-oral?
Further research needed



Feces → Food/Surface → Mouth

AGMP - AEROSOL GENERATING MEDICAL PROCEDURES

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