

Tuition & fees:

- How is MS3 tuition going to be calculated for this spring semester? Specifically, is the administration considering the cost of tuition versus actual education provided? Thus far, students have paid a full tuition and in return have studied independently for step 1, attended a few weeks of transition to application phase + clinic, and are now being registered for one online course. Is there a specific person at the SOM to discuss individual finances / academic requirements for graduation? Many students have already earned a number of elective credits during MS1-2, and are not in need of more elective credits that the Covid-19 course may provide.

- Reimbursement of fees (library, gym, etc) that we are not able to utilize this semester?

We talked some about this at the last townhall. We recognize that it is a real concern. Only the University System can make changes in tuition (including fees). We do know that the system is carefully looking at options. As we mentioned last week, to maximize your learning, we are working hard to create alternative educational experiences that prepare you to face COVID19 as reenter the clinical world. We hope that you are finding the new COVID19 course helpful. There were 400 students on the live WebEx presentations for David Weber and Melissa Miller today. It is worth highlighting that our costs of education are largely fixed. We did not reduce staff during COVID and educators have been working harder than ever during COVID. We are not backing off on our commitment to provide a robust educational experience. COVID course provides a robust curricular experience during block 14. Students who still had a rotation left to complete during block 14 were encouraged to take this course.

Step 1 and Step 2 questions:

- Any inside scoop on whether North Carolina prometric sites will extend their closures through April 30th in accordance with NC stay-at-home order? They have been understandably difficult to get a hold of. Any chatter of USMLE allowing schools to administer step 1 if closures extend beyond April? Just wondering how to best stretch out practice questions/resources for those of us who have had to postpone step 1. Thanks!
- I was scheduled to take STEP 2 in April and had the block off to do so. The exam has been cancelled with no information about rescheduling at this time. Given that the testing centers are unlikely to open in April. When will students be expected to take the exam? Given that there is limited time before applications are due and the time that is available will likely need to be used for AI's/Away rotations?
- What is the plan for students studying for step 2? I rescheduled to mid april as per Prometric reopening on april 15, but I find it hard to believe this will happen...
- Can you please offer more specific guidance as to when we will be able to restart our fourth year rotations? I know it is a changing situation, but I currently have a step 2 test date in April (I did an AI in block 1 and planned to study for step 2 in block 2) and want to know if I should move it to May, because it is unlikely we will be in rotations at that point. ps- thank you all so much for holding these town halls and working so hard to make sure we still get a meaningful education. You are all so very appreciated.
- Just a suggestion but given that medical schools have to administer CPX, would it be possible for our CPX score to replace our Step 2 CS score since we do not know when we will be able to take that? I can imagine trying to reschedule CS will be overwhelming once centers reopen given that

we usually schedule those so far in advance./ As many of you all are working with national leaders concerning what medical students' application process will look like for residency, I just wanted to suggest that given the pause for Step 2 CS and unlikelihood that we will be able to take CS for months, programs may think about just using school's CPX score instead of CS? Given that all schools have to administer CPX and we don't know how/when CS will be administered, I think CPX could be a good replacement. Just a thought! Thank you for your hard work in this process!

Given the order we think it is unlikely that the Prometric centers will reopen before May 1

CPX is a UNC specific exam. STEP exams are required steps towards licensing and only USMLE can make decisions about changes in those requirements.

We predict that substantial accommodations will be made by both USMLE and residencies to adjust to this crisis. I know it is really difficult to plan (and study) in the face of uncertainty. If you have a date on your calendar it may make sense to keep studying as if the exam will happen and then adjust if the date is cancelled.

Foundation Phase Questions

- Many of the summer opportunities for first year medical students were cancelled. It's difficult finding a new summer experience this late in the year. Do you have suggestions for opportunities locally that are currently unfilled or have added application flexibility during this time? Thank you!

We will make sure that the leaders of the Office of Medical Student Research communicates with you. We will also work with to define and distribute more opportunities. The issue remains that we are still uncertain what restrictions will be in place this summer

- With COVID, and Step changing to P/F, will the current MS1s have the opportunity to either take an early LOA year, or will we be allowed to take Step after our first clinic year so that our scores will not be compared to other med students who will have a P/F score?

We have been discussing whether to make it optional for students in Foundation Phase to postpone Step 1 exam until after Application Phase. It is still unclear when the P/F option will be implemented. NBME has said 1-2 years.

Application Phase Questions:

- Coming from a CSP student having completed 2/5 weeks of the OB block in clinical time and an additional 1.5 weeks of online modules I would just like to advocate for being able to carry over credit for the work that has been completed. Many of us, even in this short time, have nearly completed the majority of block objectives and it would be a shame to see that work go to waste. At minimum the clinical log and any evaluations that have been completed I think should carry over to the restart.
- I appreciate the work being done by our administrators and everyone at UNC to accommodate and make the best of the situation, but I would also like to advocate for receiving at least partial credit for the work that has been done by MS3 Application phase students over the past month. I understand the situation is less than ideal for everyone involved, and if we are thinking about this with the proper greater view, it is our education that has taken a hit by being out of the hospital for an extended period. Over the course of this month, we spent about 3 weeks in the clinic, showing up early, staying late, and earning grades/evaluations. When the first temporary suspension of clinical duties was issued, we were given 2 weeks of modules and online work that

was to substitute for the lost clinical experiences with the understanding that completion would yield credit for our block of CSP. We have completed those clerkship requirements as they were presented to us, and it feels like an undermining of our work to not receive any credit (carryover of evaluations, credit for our block completed or at the very least our clinical time). We pay what comes out to be about \$1000/week to be trained at UNC, and to erase over 4 weeks of clinical work completed seems to me a breach of the agreement we all inherently make when we sign up for medical school.

We are working hard to restructure Application Phase when you return to your clinical rotations but also to find ways to allow the work you completed in the first month of Application Phase to “count”. This includes assignments completed and clinical evaluations received. We want to balance that with not “short-changing” any one’s experience on a clinical rotation. The input from students on this has been very helpful.

Individualization Phase Questions

- First, I wanted to thank the entire UNC SOM faculty for their admirable flexibility and resilience during this period of uncertainty. Second, I am excited about the upcoming COVID19 course, so thank you for so quickly coming up with a solution for us. While I know everything is up in the air right now, I am wondering if it is at all possible that the curriculum would have to be restructured so much that our graduation (for me, May 2022) would at all be delayed. Though knowing this information may plant fear in students, at the same time, having some sort of reassurance that this possibility has been considered and/or is being actively prepared for by the administration would also help assuage some of the uncertainty I’m sure many students are experiencing. I understand if this is something that definitely cannot be answered, but if the question can at least be considered or commented on as a valid concern, I’d greatly appreciate it. Thank you so much.

The next few weeks will bring greater clarity re the course of this epidemic. Educating a robust workforce will be more important than ever. We still feel that graduation for the majority of you will happen on time.

Scheduling/Graduation Requirements/Away Rotations:

- I believe it's a little deceiving how much time is available in UNC's individualization phase. Specifically, time for away rotations. If one or multiple of my AI's/ACS's/Critical Care rotations is cancelled due to COVID-19 in the coming months, how will I be expected to complete those requirements if I was planning to complete 2-3 away rotations in the summer/fall months before applications are due and interviews start?/ How will our schedules resume when we are able to go back to clinical duties? Will we be able to do our AI first if that's what is needed before away rotations?

In the national conversations we have been in, this will be an unusual interview season with likely fewer away “audition AIs”. We know this is hard to hear but these are extra ordinary times We will need to look carefully at how to address capacity. If for an example a student had a block 2 AI and we resume in block 4, what do we do if there is already a student scheduled for that AI in block 4. We are looking at creative solutions such as shorter AIs and also looking at opportunities to increase total capacity.

- General questions specific for rising MS4 students: Will the COVID course count as elective credit or can it also count as an ACS? How will taking this likely 8-week block affect graduation requirements? Will rising MS4 students be able to switch their schedule preferences? Are SHS Immersion days still happening?
- What type of credit will COVID-19 count as? What's going to happen to our course schedules? Will you just push them back a month so we can pick up where we left off? A lot of us need to do AIs before completing aways
- For Individualization Phase students: when will we know what the plan is for block 3?
- IND Phase: When will the official 2021 graduation requirements be released, including the COVID-19 course?
- Do we still have the same deadline for, say, submission of specialty preferences like we would without COVID?

We should have more specific answers to this question in the next 6-8 weeks. The Individualization Phase leadership group is convening to develop contingency offers. Your suggestion of modifying ACS requirements is one thing we are considering. We are also looking at structure of Application Phase and deciding how to meet the objectives of the SHS immersion days
We hope to release new graduation requirements in the next month or two

- Given the time that has been lost for students at all institutions, What is the likelihood that institutions will be accepting away students for rotations during the 2020-2021 cycle? Is UNC accepting away students for the 2020-2021 cycle?

I suspect there will be less capacity both at UNC and at other institutions for away electives. We have not made any decisions on how many away students we can accept when clinical rotations restart but will monitor the situation closely

- will our rotations remain in the same order?

The order will likely remain the same but the structure (length of time etc) may be different

- whenever C/O 2021 is able to resume Indiv Phase- please shorten the rotations from 4 weeks to 2-3 weeks. That way we can get more grades and clinical rotations in our transcript and before ERAS. Shortened rotation schedules will allow us especially those not fully decided on residency choice to make more informed decisions. / Any chance of doing 3 week rotations so we can fit in more before ERAS?/ For Individualization Phase scheduling, what about reconstructing the schedule such that each block is 3 weeks instead of 4?

These are creative solutions we are exploring

- Please expand AI options in each discipline. For example, there are ONLY two courses in psychiatry that counts as AI at UNC central. On that note, Indiv Phase students should get priority registration over App phase at least until ERAS application. They have a whole year to catch up so I really hope SOM leadership will open up more clinical spots for Indiv Phase students once we are able to safely return to clinical settings.

We will need to work hard to create adequate capacity for Individualization Phase students to get the clinical training they need while at the same time making sure Application Phase students meet their course objectives to move through Application Phase. I strongly believe we have the capacity and the creativity to do so.

- IND Phase: Will we repeat the Block 05-14 scheduling process?

- IND Phase: Can we still anticipate receiving Block 01 grades in the next 30 days? Or will there be a delay in grade reporting due to COVID-19?
- IND Phase: Will the SHS component of the COVID course count toward SHS-5 graduation requirements?

See answers above. We hope to have more specifics about Indy Phase course structure and scheduling in the next month. Indy Phase leaders are meeting regularly. Student input is actively being sought

We are working to release Block 1 schedules within 30 days

We will need to be flexible with many of the deadlines that we put into place pre COVID. We will let you know of changes as we develop new guidelines and policy, adjusting to the evolving epidemic.

- If there are any future presentations or resources planned for advice on how to write personal statements or the other sections of ERAS, can those be released to us early? It would be great if we could use this time to get ahead on as much as possible for our applications since we will likely be busy with more demanding rotations when we come back. Thank you!

That is a great suggestion and we will work on this. Maureen has been virtually meeting with 2021 students.

COVID Course Questions and Volunteer Questions:

- Do we know how flexible the new curriculum? Specifically, for people with other responsibilities in light of the virus, e.g. taking over child care in our home, will there be options to work on things at different-than-assigned times?
- what will our daily schedules look like during the COVID course?/ What will our daily schedule look like once the covid course starts?
- Will the covid course be completely online?
- Can LOA students take the COVID-19 elective?
- Should I travel back from Michigan for the elective course?
- I have a large family at home and while we share internet, it gets very slow. As majority of COVID elective course work will probably be online, is there any on-campus study location options where we can maintain social distancing from other students still but also have reliable internet and dedicated study spots? Even if those are available after 5 pm, it will be very helpful.
- any way we can include some type of system (based on activities or other metrics and not percentiles) that we can get HP and H for the Covid course? As a Individualization phase student getting H in rotations is crucial
- IND Phase: If we intended to take a break during Block 03 and the COVID course continues, are we required to continue in it?
- Does participation in faculty-led COVID-19 research, including preparing COVID-19 grant proposals, count as service learning for the COVID-19 course, given that it is a form of science in the public interest?
- What student voices are part of the COVID-19 course creation? All other curriculum changes are overseen and approved by the Education Committee with guaranteed student involvement. I strongly urge the administration to include student leadership in the creation of the COVID-19 course. As a branch campus student, I am most adamant that Branch Campus students have

advocates on the team creating these courses. I am happy to provide my name for follow-up:
Tyler Clay, MS3, Asheville

The course was designed to provide maximum flexibility for students and still provide a high quality educational experience. If you have trouble with connectivity or other resource issues, please contact Student Affairs. We are working to individualize solutions.

The Education Committee which has student representation on oversaw the creation of the COVID19 course. We actively took input from students into consideration as we created the course. We had time pressures to launch the course but will seek more broad student input as the course evolves during Block 1. We hope to create a wider set of electives during block 3 which will also be helped by student input. We do want to give flexibility to students who want to take off block 3

- How does Gov. Cooper's stay at home order affect the SOM (admin, faculty, students, ect)
- Given the possibility of increased exposure with social activities, will service opportunities be required, encouraged, voluntary, and/or stratified by level of compatibility with social distancing?
- Can you share potential political advocacy opportunities for medical students if you know of any offhand? For example, calls to congress to increase production of PPE for healthcare workers, pressuring corporations to increase production of ventilators? What are the biggest surmountable roadblocks to making our hospitals safer?

We have to take this order very seriously and only go to work when there are no alternatives (for example to care for patients). We will carefully plan service activities in a way that is consistent with Governor Cooper's order. There will be many options that can be done virtually

AMA has released important guidance: Needs to have the following three components: 1) remote capability 2) aligned with system needs 3) educational value. Coproduction process with students, education, and system leadership. This will be our focus

- What does the NC shelter in place order mean for volunteer opportunities? Are we allowed to travel to volunteer? Do we need specific written permission?

If you are taking part in activities that contribute to essential services such as health care, we feel that this is allowed under the new order. But we again emphasize the importance of physical distancing

- I would like the administration to discuss increased or heightened need for student volunteering once the COVID epidemic is over and social distancing is done. There will probably be UNC Health and community members who need childcare at that time if they have to work double shifts to accommodate a backlog of elective visits and procedures. Additionally, there will also be heightened food and housing insecurity in the community as things go back to normal. In the event that there are not enough service learning opportunities to accommodate the several hundred students enrolled in the covid course, can students postpone their service or make up some hours after the conclusion of the course (taking an incomplete for now and completing it later?)?

This is a very thoughtful question. We will need to think carefully on how to continue our commitment to service. Rather than having it be part of the COVID course I hope we can find other opportunities inside and outside the curriculum to continue this commitment

Other Questions:

Extended Study students:

- Will this affect graduation for those of us who are class of 2021 still in application phase?
- How will things look for students who are on a delayed schedule? Will this look differently based on campus location and if so what will each campus look like for different students who delayed?

Student Affairs is reaching out to students who had extended study time. We will do our best to allow an on-time graduation but also ensure that you meet the SOM objectives for graduation. We hope to have tailored plans available in the next month or so.

MD/PhD:

- How will this impact the trajectory of MD PhD students who may not be able to return to rotations before PhD? Will we receive partial credit towards rotations in the future? When should we be expecting the COVID course may wrap up in order to communicate a new start date to our PIs?
- For MD/PhD students who will be entering their PhD in the fall, is it possible to complete a portion of the current clerkship? For example, for a student in CSP, is it possible to complete 2 out of 3 of the clerkships, where the 3rd will be completed when returning to medical school?

The MD/PhD students have a fair amount of flexibility given that they accumulate course credits toward their MD degree while getting their PhD. We will also think creatively how course requirements can be split between starting and finishing the PhD.

Return to Clinical Rotations:

- How much advanced notice should we anticipate before a potential return to clinical rotations? We anticipate that you will have 2-3 weeks notice.
- Some of us are scheduled to be at a different clinical site and planning to utilize AHEC housing starting next trimester. Should those of us in a similar situation plan to extend leases or find housing where we are now or is it anticipated that we will begin rotations along our original trajectory by the start of the second trimester/
- For those of us who have electives scheduled at Central campus starting with Block 3 but are currently at a branch campus, should we continue with plans to move to Chapel Hill next month since Block 3 could still occur?/ Is there an estimated date that we expect to have a decision one way or another for Block 3? I know many of us are just trying to plan our studying for step 2. Thank you!

We will not likely be able to return students to clinical rotations before June or July. If you are in a situation where you are facing financial pressure and feeling like you have to make a decision about things like housing leases, please reach out to Student

- based on how things are now, how likely is it that block 3 will also be cancelled for MS4s? Is there a chance that some rotations might happen, if they don't require PPE?

We have a leadership team working closely with the health system to develop criteria for when students can return to clinical work. It is possible that Indy Phase students will return earlier given that they are closer to finishing school and have less flexibility than App Phase students.

Communication

- I've heard of other hospitals sending out updates regarding their personal COVID situation to their employees (e.g. number of cases in the hospital, number of PUIs, etc.). Would it be possible to do something similar for medical students to be kept aware of what's going on - maybe weekly or biweekly?

We have been trying to communicate regularly via email re student specific issues and storing those communications on our COVID19 dedicated webpage. On that page we are also posting information specific to students

We also hope that the weekly townhalls help communicate information tailored to students

We are open to other suggestions on how to improve communication

AOA/GHHS:

- Do you know if AoA and Gold Humanism awards will still be given on schedule?

Yes