Since January 2020 Elsevier has created a COVID-19 resource centre with free information in English and Mandarin on the novel coronavirus COVID-19. The COVID-19 resource centre is hosted on Elsevier Connect, the company's public news and information website.

Maintaining patient involvement in dermatology education during the COVID-19 pandemic: Challenges and solutions

To the Editor: We read with interest the article by Ashrafzadeh et al[1] regarding dermatology education for medical students during the COVID-19 pandemic. A significant challenge posed by the COVID-19 pandemic has been the translation of traditional learning opportunities that incorporate patient involvement into virtual formats. Opportunities to learn directly from patients in ambulatory and in-patient settings, standardized patient simulations, and medical student workshops with patient tutors are critical aspects of effective dermatology teaching. We report a novel, virtual "patient-doctor" teaching exercise that maintained patient involvement during the COVID-19 pandemic.

In prior years, the exercise involved faculty-led small groups of students rotating through live patient examination and discussion stations. To accommodate the pandemic's social distancing requirements, the author (SB) codesigned a virtual workshop for remote dermatology teaching of Harvard Medical School students. The course directors contacted patient tutors to request video participation. Dermatology residents then recorded videos as they interviewed the patients and examined their skin findings. During the synchronous virtual session, the videos were viewed by the medical students. Following each video, up to 7 students described patients' skin findings in virtual breakout groups with 2 faculty facilitators, who then led broader, learner-centered virtual discussions of each disease entity.

A patient concern about participating in teaching encounters, virtual or in-person, is confidentiality.[2] We suggest introducing a "professionalism contract" in which students agree that any personal health information will neither be saved nor disseminated. Additionally, faculty should work closely with information technology to ensure that teaching platforms are secured, password-protected, shared only among intended audiences, and in compliance with confidentiality policies. The course directors should seek feedback from patient participants to help them feel more invested and involved, encouraging further partnership in medical education efforts.[2] Additionally, patients can be invited to watch and approve video recordings before they are broadcasted, which empowers patients to feel ownership over their stories and secure about how they are being portrayed.[3]

We learned through the patient-doctor virtual session that patient involvement is not limited by constraints of in-person teaching. For instance, the virtual experience reduces patients' logistic limitations, such as the need to take time off from work and travel to a medical school. Moreover, virtual platforms allow educators to create curricula more inclusive of diverse patients' involvement, which has been shown to improve health outcomes and quality of care.[4] One limitation of virtual learning in dermatology to recognize, however, is the inability to palpate skin lesions, an important component of the dermatologic examination.

Through our research, we found that the virtual learning environment provides numerous multimedia tools that allow educators to promote patient centeredness and engage learners in more aspects of patients' experiences. For example, embedding patient-recorded videos depicting living conditions into a presentation[5] or including an audio journal of a patient describing their daily life with a chronic disease can highlight the patient experience more vividly than a lecture.

The pandemic has accelerated the need for virtual medical education delivery. Through innovative programs, educators can maintain patient involvement in virtual teaching, ensuring that patients' voices continue to enrich medical student learning.

Connie R. Shi, MD,[a] Lori R. Newman, MEd,[b,c] Bina Kassamali, BA,[a,b] and Susan Burgin, MD[a,b]

From the Department of Dermatology, Brigham and Women's Hospital, Boston, Massachusetts[a]; Harvard Medical School, Boston, Massachusetts[b]; and Department of Education, Boston Children's Hospital, Boston, Massachusetts.[c]

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Correspondence to: Susan Burgin, MD, Department of Dermatology, Brigham and Women's Hospital, 221 Longwood Avenue, Boston, MA 02115

E-mail: sburgin@bwh.harvard.edu

Conflicts of interest

None disclosed.

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