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.

Letter to the Editor: "Human Patient Simulation: Educational Issues and Practical Implications in COVID-19 Times"

Letter:

Coronavirus disease 2019 (COVID-19) looks set to be one of the most terrible pandemics regarding the numbers of contaminated persons, mortalities, and the phenomenal interest in healthcare services. The monetary outcomes from organizational shutdowns have been estimated, with conflicting results. In addition, school closures have become a reality. Also, experts have estimated that quarantine and social isolation could be required for up to 18 months, with these requirements being eased or becoming more restrictive, depending on the demand for intensive care unit beds.[1] For the current pandemic, models are required to manage the exit from lockdowns universally without overburdening medical clinics with a second peak of infected patients. In addition, a need exists to routinely refresh the models for intensive care units and clinics to assess for new dangers from COVID-19 infections in accordance with previous findings. The ability to adapt to new environments and maintain safety and quality is necessary to ensure compliance with established goals. Especially during the current pandemic, medical simulation has become a key part of medical training in many medical schools worldwide.[2,3]

The COVID-19 pandemic has resulted in many changes in our daily lives. We have continued to experience the impact on medical practice, and it has been necessary to adapt to new environments to continue to ensure the safety of our patients and ourselves and other healthcare workers and to maintain the effectiveness of our treatment. This pandemic has also affected medical education, which, traditionally, has usually involved contact with patients. During the COVID-19 pandemic, medical students in many countries have been forced to leave the hospitals where they were performing their clinical rotations. This has led universities to develop and implement educational strategies and innovations for their students to mitigate the effects COVID-19 has had on medical education.[4]

Simulation is a strategy, not an innovation, to supplant or virtually create genuine encounters with predefined objectives to bridge the gaps in present reality in an intuitive manner.[2] The initial phase in building a simulation is to determine the general reason and objectives for the simulation; for example, determining the ideal system or strategy for the simulation. Because we know the educational and learning techniques required by important examinations, although an ideal simulation system might not exist, most simulations have followed a comparable plan. The COVID-19 pandemic has provided a unique opportunity for the use of simulations, building on their strengths. The use of simulations has tremendous potential to help manage the worldwide COVID-19 emergency in 2020 and, conceivably, comparative future pandemics. The use of simulations could quickly encourage emergency clinic readiness and can provide instruction from huge numbers of medical service experts to students at different levels. Simulations have demonstrated their effectiveness in numerous settings. Simulations could also be used to educate persons through experiential learning to increase the workforce available.[5-8] Therefore, universities must assertively engage in simulation development and technology integration to optimally acquire the resources necessary and prepare protocols required to implement such programs on their campuses.[9] With a comprehensive approach, the use of simulation could help alleviate the negative effects of the COVID-19 emergency and, conceivably, could be used in future emergency circumstances.

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