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Future studies are needed to evaluate the long-term effects of these online lectures on resident education.

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## SUPPLEMENTARY MATERIALS

Supplementary material associated with this article can be found in the online version at <https://doi.org/10.1016/j.urology.2022.02.032>.

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During the coronavirus disease 2019 pandemic, the field of Urology demonstrated its adaptability, dedication, and grit through continued patient care and resident training, in addition to a number of other ways. The Urology Collaborative Online Video Didactic (COViD) lecture series is one example of this. The learning resource was developed by a nationwide group of educators in Urology to fill the training void created by the cancellation of in-person conferences and elective Urological procedures.

This study showed that utilizing COViD lectures provided gains in Urological knowledge according to a pretest/posttest design where assessments were given to participants before and after the use of COViD lectures. As expected, baseline knowledge (pretest score) was greater at higher post graduate yearlevels, however this trend disappeared following COViD lectures (posttest score). The self-reported degree of COViD lecture use also influenced outcomes, as knowledge after COViD lecture use (posttest score) and knowledge gained (change from pretest to posttest) increased with the number of COViD lectures used.

These findings suggest the use of COViD lectures successfully increased the Urological knowledge specifically assessed on the tests given. The COViD lectures appeared to eliminate differences in knowledge level that existed across post graduate yearstatus at baseline and also provided knowledge gains in a “dose-dependent” manner. The development of such educational resources and their unrestricted availability for trainees will be a lasting benefit to the field of Urology. This is especially helpful in the era of mounting evidence of the effectiveness of video-based education<sup>1</sup> and the consideration that most surgical trainees now have grown up in the “digital age” and often prefer or benefit more from multimodality learning.<sup>2</sup>

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## EDITORIAL COMMENT



This work by Tuong and team provided a timely look into the use of video-based education for Urology resident training.