

Medical students' value-rich exposures in clinical setting during the COVID-19 pandemic

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Abstract

Exposing medical students to real-world situations and clinical practice experiences during their education years can help them build their professional value frameworks. The COVID-19 pandemic is one of the most challenging conditions that medical students have experienced; however, this pandemic have provided value-rich opportunities assisting in development and enhancement of their professional identity. This commentary aimed to emphasize the importance of medical students' exposure to clinical practice during the pandemic and the potential that such encounters provide for internalizing values.

Keywords: Values; Exposure; Clinical education; Pandemics.

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Introduction

The World Health Organization (WHO) declared the COVID-19 a pandemic in March 2020, which shocked the medical community (1). The significant impact of the pandemic on medical education, especially clinical education, is unprecedented, and clinical education has widely changed since the advent of pandemic. Medical schools around the world have suspended their clinical rotations in response to lack of personal protective equipment, concerns for students' health, and risks of the virus spreading to communities. However, cancellation of clinical education has a negative effect on students as medical community members and leads to loss of opportunities to gain experience (2).

One of the important aspects of medical education, along with teaching knowledge and skills, is value education. Values in the healthcare system are defined as normative guidelines that help resolve conflicts and challenges, choose the right course of actions, and function effectively in clinical decision-making and judgment process (3). Students' lived experiences during their education years help them acquire values that build their value framework. Yazdani et al., stated that a value-rich exposure is an appropriate method for internalizing values (4). Exposure to real-world situations through clinical experiences during education years is an opportunity to transfer values to medical students, and hence eliminating such exposure deprives them of

acquiring necessary competencies needed for their future professional life.

Value-rich exposures during the pandemic

Despite the pandemic's challenges, the authors believe that it has provided opportunities for medical students to develop their professional identity. The first concern is whether the pandemic makes medical students feel valued and efficient in the healthcare system or makes them feel ignored. How can medical students realize their value as members of the medical and healthcare team whose clinical rotations have been disrupted during the pandemic, and as a result their learning interests and interventions have been undermined? During the pandemic, health risks to students in clinical settings are serious challenges that need to be addressed. According to the Association of American Medical Colleges (AAMC) guideline in August 2020, medical schools should carefully evaluate their local condition to decide about students' participation in bedside clinical teaching. To maintain students' safety, program directors should arrange for appropriate safeguards to protect them from contracting COVID-19 and their participation in clinical courses only when crucial according to educational program objectives (5). Five value-rich exposures for students during this pandemic are as follows:

1. Patients' triage process

Since the onset of the pandemic, hospital

visits have increased so significantly that hospital triage standards have changed, and even severely-ill patients may not be admitted due to lack of hospital beds. Given the importance of fulfilling the rights of justice and equality for all patients, such situations create rich exposures of values. In these situations, medical students can become familiar with the difficulties of the medical team in the pandemic crisis, where they must decide which patient should be prioritized for hospital admission based on hospital equipment and patient safety concerns.

2. *Duty to care versus right to protection*

During the pandemic, simultaneous protection of patients and staff can be challenging (6), and providing necessary care to patients endangers the health of medical and health care staff, who are called “health advocates” (7). Turale et al., stated that, “The language of today is reminiscent of war time: working on the frontline, facing battles, making sacrifices, being sacrificed, being resilient, doing our bit and joining forces” (8). Not only do medical and healthcare team have professional duties to provide care for patients, but they also have responsibilities for the health of themselves and that of family and loved ones, and striking a balance between these two is required for the best outcome. This pandemic is a unique opportunity for students to observe the trade-offs between death and survival in patients' health and staff's health, choices that are value-based

options and considering medical ethics principles.

3. *Patient-provider interaction in the pandemic*

Patients' comfort is a significant aspect involving in their treatment, which is threatened by the pandemic conditions. The COVID-19 patients are often alone in isolated wards with minimal communication, whereas effective communication is a fundamental requirement in patient-provider interaction. During the pandemic, healthcare providers try to convey warm smiles and good moods to comfort patients despite limitation caused by wearing full personal protective equipment (6). Real-world experiences in such value-rich conditions can enhance students' skills to manage such situations, help patients, and provide care and comfort for patients.

4. *Difficult clinical decision-making*

In pandemic conditions, one of the challenging and agonizing decisions for the medical and healthcare team is about not resuscitating patients due to lack of ventilator devices as well as prioritizing and rationing available devices among patients. Not allowing the families to accompany and visit their hospitalized patients is another difficulty in the pandemic condition. In this pandemic, value-based decision-makings are extensively required, and being exposed to such conditions prepares medical students for similar situations in their future professional practice.

5. *Patient dignity in end-of-life care*

Human dignity is a major concern in bioethics and value education. In the pandemic, numerous patients died in isolated wards alone with no farewell opportunity and no support or strength of heart in the last minutes of their lives. A professional duty of physicians and nurses is to help the patient to be in peace in dying process. During the pandemic, due to the risk of infection, post-mortem and burial ceremonies or traditions have not been permitted, which can lead to emotional distress in the patient's family, relatives, and friends, as well as create a sense of disrespect for the deceased patient's dignity. Despite all obstacles during the pandemic, decision-makings about maintaining patient dignity include value-rich exposure experiences for students affecting their future professional skills.

Conclusion

Presence of medical students in clinical settings during the pandemic is a valuable opportunity for value education, a critical principle in medical education. During the pandemic, medical education and teaching authorities should not deprive medical

students of the uniquely different experiences that can teach value-based concepts. Given the unique and important situations created in this pandemic, medical universities, by emphasizing the importance of value education in medicine, should provide safe conditions for students to take advantage of these opportunities. This commentary discussed such value-rich experience opportunities that can help internalize value concepts such as love, equality, justice, security and peace in medical students.

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Conflict of interest

The authors declare no conflicts of interest.

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