



## Coronavirus keeps future nurses, doctors away from clinical rotations

By Mark Harper

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Medical and nursing students in Florida are unable to complete work in clinical settings due to the coronavirus pandemic.

The critical role nurses and doctors are playing during the COVID-19 pandemic underscores the need for the next generation to get good collegiate training.

But a cruel ripple effect of coronavirus has current nursing and medical school students sidelined, pulled out of clinical rotations, leaving them to finish semesters using simulations and video.

Students are not in the line of coronavirus fire — as schools have opted to remove them from clinical settings for safety reasons and in order to preserve personal protective equipment for the nurses and doctors who are directly caring for patients with the virus.

Many faculty members already make use of technology in lieu of clinical training, but they know it's no substitute for the real thing.

“There really is nothing that can replace the real contact with a real patient,” said Dr. John Fogarty, dean of the Florida State University College of Medicine. “Quite frankly, reading a book and going through a case just doesn’t have the imprint on your psyche.”

Doctors in training need access to real patients to gain the ability to recognize patterns and ask the right questions to determine a patient’s history and order the proper lab work that can confirm a diagnosis.

Andrea Fischer, who’s in the last semester before obtaining an associate’s of science degree in nursing at Eastern Florida State College in Melbourne, said she’s losing out on an “invaluable experience” by missing more than one-third of the 196 clinical hours she was supposed to have completed this spring.

“Everything is hands-on in the practicum where we worked with the nurse. The nurse would have us doing stuff, doing the IVs or hanging the medicine,” Fischer said. “It’s pretty sad we’re not able to finish that out.”

Jessica Muh, a registered nurse at Florida Cancer Specialists & Research in Daytona Beach and a recent Daytona State College graduate, can attest.

“It is so important for students to get the clinical experience while in nursing school,” she said. “That is where we get all of our hands-on experience with patient care and the students currently in nursing school are missing out on such a crucial time.

“One of my best friends is in her fourth semester at Daytona State and will be missing out on her preceptorship rotation. In nursing school, that is where I gained my independence and gained so many skills,” Muh said. “It’s very unfortunate due to COVID-19 that they are all missing out on this.

Nursing students at Daytona State College follow a curriculum that is about 50% classroom and lecture work and 50% clinical work, said Amy Szoka, chair of the School of Nursing.

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The spring semester for Daytona State nursing students started in January and ends in May. They were removed from their clinical assignments in mid-March, halfway through the semester.

“Our goal right now is to focus on our students getting ready to graduate, and making sure they have enough theoretical training for them to prepare for what it’s like in the real world,” Szoka said.

Of the 600 students in the DSC program, 143 are expected to graduate in May from the two-year associate of science in nursing program. Hospitals look to hire many of them, and Szoka doesn’t want those employers to have any misunderstandings about any gaps in students’ education.

“We’ve also had conversations with our partners, Halifax and AdventHealth, because students are not getting the hands-on experience, they are going to have to work with the new graduates so their orientation process covers anything students did not have an opportunity to do while this scenario of COVID-19 is playing out,” she said.

The Association of American Medical Colleges on March 17 issued guidance suggesting medical schools pause all student clinical rotations to update students on COVID-19 and taking appropriate steps to ensure their safety. It later offered further recommendations that medical students should remain out of clinical situations “unless there is a critical health care

workforce need locally,” and those students who do return must do so as unpaid volunteers and without core academic credit.

That left medical schools with both short- and long-term concerns. First, they sought to ensure their fourth-year, graduating students had opportunities to finish their work.

FSU’s College of Medicine has a branch campus for third- and fourth-year students in Daytona Beach. Most of the work they do is clinical, Fogarty said. While most of the fourth-year students have completed their requirements, one group is doing an online rotation in geriatrics, where they are interacting with virtual patients or playing through scenarios with faculty.

A bigger challenge for FSU may prove to be handling the start of the next academic year on May 26, Fogarty said. Some schedules involving clinical settings may have to be flipped with non-clinical courses.

Dr. Martin Klapheke, assistant dean for medical education at the University of Central Florida, said the Orlando-based school pulled its students out of hospitals on March 16.

“Once it became clear that the students were going to be at risk, the virus was coming home to Florida in a significant way, we went ahead and changed midstream,” Klapheke said. Third- and fourth-year students in clinical rotations will complete the year with simulations and videos.

UCF’s College of Medicine, as has other schools, has been moving toward simulation and online learning modules, so the transition wasn’t like having to learn a new language

immediately. “It’s not ideal,” he said, “but until we can get the students safely back in the hospitals and clinics, (simulation) is the main thing we can do at this point.”

Medical schools are sharing content and making online courses available to students from other schools.

“Everybody’s really rising to the occasion,” Klapheke said.

“Everyone realizes not every medical school should reinvent the wheel. ... It’s been wonderful to see the collaboration.”

Nursing schools, including Daytona State, are using vendors that deliver simulations.

One is Gainesville-based Shadow Health, a software company, provides digital clinical experiences to 1,800 schools, mostly for nursing. Shadow creates virtual patients on whom nursing students can practice patient care.

Virtual simulations were available to schools as a way of enhancing or supporting clinical work, said Aubrey Edgar, customer success manager at Shadow Health.

“Before the pandemic, our partner schools would have been just tying up the end of the spring semester, getting ready for summer enrollments and planning for the fall semester. Now everyone is having to move all of their courses online — immediately,” Edgar said. “In the last three to four weeks, everything has changed.”

Shadow Health’s simulated patients have names and histories to assist in nursing courses including health assessment, pharmacology, mental health, gerontology and leadership. In one, 11-year-old Chelsea Warren has just been diagnosed with diabetes, and nurses must work with her and her father, Ned.

The simulations afford students a degree of comfort knowing their trial-and-error won't lead to harm of a real patient, but coronavirus poses larger questions for many, who get into the field for altruistic purposes.

There is not uniform agreement on how involved they should be in the care of COVID-19 patients.

Klapheke said quite a few UCF students have asked how they can help real patients during the coronavirus crisis. In clinical settings, they must work under the close supervision of a licensed physician.

"We are trying to find ways they can help. Calling shut-ins, making sure they are taking their medicine," he said, stressing their limitations. "(Med students) cannot be involved in direct patient care. They are not licensed yet."

The deadly virus have taken other students — including Fischer, the 40-year-old burgeoning nurse from Merritt Island — considering whether they would want to jeopardize their own health caring for coronavirus-stricken patients.

"Honestly, I'm being asked by people, 'Would you want to be doing that?' No, I don't," she said, describing a nurse friend who she said is "panicking" in fear of bringing the virus home to her children.

"That was not on the top of anybody's mind," Fischer said. "Nobody thought of this or expected it."

Fogarty, at FSU, compared those in medical careers to soldiers.

"I was in the military for 24 years and this is reminiscent of the fact that you know what you're signing up for," he said, "but you pray you don't have to go to war. The same is true with contracting a disease."