The following links were shared during the chat:

- Keep Teaching @ UM: https://ai.umich.edu/keep-teaching/
- Virtual Class Now! – How to Move Your Education Online in a Hurry: https://mayocliniceducatorscentral.blubrry.net/2020/03/17/virtual-class-now-how-to-move-your-education-online-in-a-hurry-ep14/
- Telemedicine Training in Undergraduate Medical Education: Mixed-Methods Review: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6475822/
- The Feasibility and Acceptability of Administering a Telemedicine Objective Structured Clinical Exam as a Solution for Providing Equivalent Education to Remote and Rural Learners: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4763875/
- An Interdisciplinary, Multi-Institution Telehealth Course for Third-Year Medical Students: https://journals.lww.com/academicmedicine/Abstract/2019/06000/An_Interdisciplinary,_Multi_Institution_Telehealth.41.aspx
Patient Health @MD4U9 hours ago
RT @MedEdChat: Topic 1: #GME programs appear to be responding differently to #COVID19 even within institutions. How is your institution cha…

Daniel Ricotta, MD, FHM @DanielRicottaMD9 hours ago
Hi all! Dan Ricotta @BIDMchealth @bidhospitalists checking in #mededchat

Gary Beck Dallaghan @GLBDallaghan9 hours ago
@MedEdChat T1 @unc_som has a uniform approach to handling this by sending daily (or multiple times a day) email updates re #COVID19 initiatives #mededchat

Peds Endo Chick @PedsEndoChick9 hours ago
@MedEdChat Chiming in from the midwest! I'm a peds endo fellow interested in MedEd and GME. #MedEdChat

Gail Sullivan @DrMedEd_itor9 hours ago
T1 Residents considered equal members of the health care team; except those at potential hi risk (immunosuppr, cardiopul, pregnancy), all residents expected to perform usual duties, learn to assess risk, use PPE, limit caregivers/patient etc #mededchat #jgme #meded

Sherine Salib @DrSherineSalib9 hours ago
@MedEdChat We’ve had great collaboration between the various teams in the medical school, hospital & clinic. While each group is sending out site-specific updates, there is an aggregated message with the highlights that’s sent out daily to all learners across all specialties #MedEdChat

MedEd Chat @MedEdChat9 hours ago
RT @DrSherineSalib: @MedEdChat We’ve had great collaboration between the various teams in the medical school, hospital & clinic. While each…

Julia Close, MD @JuliaLClose9 hours ago
@MedEdChat All programs have cancelled face to face conferences, most have replaced with zoom meetings. #MedEdchat

felixankel @felixankel8 hours ago
T1 #mededchat. Conferences now virtual. Work on virtualnational specialty specific resident conference https://t.co/Q4Y5ujuLhW

Julia Close, MD @JuliaLClose8 hours ago
@MedEdChat Many residents pulled back from elective rotations where they are nonessential to preserve the health of the workforce. #MedEdChat
Gail Sullivan @DrMedEd_itor 8 hours ago
T1 Also fortunately seen as opportunity for residents to learn & opportunity to enhance professionalism, communication - but email overload is daunting! #mededchat #jgme #meded

Gail Sullivan @DrMedEd_itor 8 hours ago
T1 That said, elective surg cancelled, routine visits cancelled = different clinical experiences or markedly reduced clinical experiences! #mededchat #jgme #mede

felixankel @felixankel 8 hours ago
T1 #mededchat #meded communication from unilateral to multilateral communication platforms

Gary Beck Dallaghan @GLBDallaghan 8 hours ago
T1 Texting former student now an ER resident in NYC yesterday. Made me wonder if part of the plan with #COVID19 is to have counseling onsite to help residents process this. What are your institutions doing? #mededchat

Ian Fields MD @eeyanmiller 8 hours ago
@MedEdChat T1 Our OBGYN resident cohort has been split into two teams - half on service and half at home. We have pared down our teams to only essential service coverage. Plan to switch weekly. Coverage emails sent nightly. #mededchat #meded

Gail Sullivan @DrMedEd_itor 8 hours ago
T1 multilevel trainee conferences being moved online, rather than in person, so group gathering are very small no. Residents spending more time w/attendings, nurses, resp therapists & NO time with students – more intense in some ways #mededchat #jgme #meded

Julia Close, MD @JuliaLClose 8 hours ago
T1 frankly im @surprised how well zoom is managing the traffic. My kids are using it for school also and I’m in zoom meetings much of the day! #MedEdchat

Gail Sullivan @DrMedEd_itor 8 hours ago
T1 residents & attendings spending more time on telemedicine, making diagnoses (some correct, some incorrect) over the phone. Telemedicine up & running; video-medicine not yet #mededchat #jgme #meded

Kristina Dzara, PhD, MMSc @kristinadzara 8 hours ago
RT @MedEdChat: If you are tuning in to the #mededchat, remember to use the #mededchat hashtag and try to answer with the Topic numbers (T1,…

Kristina Dzara, PhD, MMSc @kristinadzara 8 hours ago
RT @MedEdChat: Welcome to the #mededchat (US) I am your moderator for the next hour @alliance4clined Thank you to our guest host this week…
Sherine Salib @DrSherineSalib 8 hours ago
@MedEdChat This has really helped with the sense of camaraderie Folks from across specialties have offered to step beyond their regular roles to help each other out. We’ve not had a “surge” yet, but this should help if we get to that point We’re all learning to be nimble #MedEdChat

Kristina Dzara, PhD, MMSc @kristinadzara 8 hours ago
RT @MedEdChat: Topic 1: #GME programs appear to be responding differently to #COVID19 even within institutions. How is your institution cha...

felixankel @felixankel 8 hours ago
#mededchat T1 #futureofmeded=zoom+slack

Paul Haidet @myheroistrane 8 hours ago
For the old timers: what parallels, if any with the AIDS epidemic? #MedEdChat

Deb Simpson @debsimpson38 8 hours ago
T1 Update from @shelly_monks @OchsnerHealth delivering didactic curriculum across #MedEd continuum online or virtually, holding AM report virtually, rescheduling all #medstudents interviews to virtual, & providing daycare-free of charge for all employees! WTG! #mededchat @AIAMC1

Kristina Dzara, PhD, MMSc @kristinadzara 8 hours ago
RT @eeyanmiller: @MedEdChat T1 Our OB/GYN resident cohort has been split into two teams - half on service and half at home. We have pared do...

MedEdBot @MedEdBot 8 hours ago
RT @DrMedEd_itor: T1 Also fortunately seen as opportunity for residents to learn & opportunity to enhance professionalism, communication -…

Kristina Dzara, PhD, MMSc @kristinadzara 8 hours ago
RT @felixankel: #mededchat T1 #futureofmeded=zoom+slack

MedEdBot @MedEdBot 8 hours ago
RT @felixankel: T1 #mededchat #meded communication from unilateral to multilateral communication platforms

MedEdBot @MedEdBot 8 hours ago
RT @DrMedEd_itor: T1 multilevel trainee conferences being moved online, rather than in person, so group gathering are very small no. Reside…
RT @DrMedEd_itor: T1 residents & attendings spending more time on telemedicine, making diagnoses (some correct, some incorrect) over the ph...

RT @debsimpson3: T1 Update from @shelly_monks @OchsnerHealth delivering didactic curriculum across #MedEd continuum online or virtually, ho...

T1 spent the day making calls to clinic patients with resident, us on speakerphone, both of us learning. Plus how to chart/bill for this in EPIC #mededchat #jgme #meded

T1 BTW - How prophetic were Pepe @DrJuthani @rickmartinello in Dec 2019 @JournalGME re need to prep for & involvement of trainees in epidemics? "Times of crisis allow #Physician educators to model professionalism to trainees" #MedEdChat https://t.co/IWfaC2A20j https://t.co/30xWjZvfFq

#mededchat. Philosophy, case example, and references for multidirectional #meded communication platform part 1 https://t.co/MQQbZywbQ7

T1 we’re using Collaborate (Blackboard) and Zoom - more difficult to get body language cues #mededchat #jgme #meded

RT @debsimpson3: T1 BTW - How prophetic were Pepe @DrJuthani @rickmartinello in Dec 2019 @JournalGME re need to prep for & involvement of t...

RT @debsimpson3: T1 BTW - How prophetic were Pepe @DrJuthani @rickmartinello in Dec 2019 @JournalGME re need to prep for & involvement of t...

RT @DrMedEd_itor: T1 spent the day making calls to clinic patients with resident, us on speakerphone, both of us learning. Plus how to cha...

#mededchat T1 multidirectional #meded communication platform part 2 https://t.co/CRYP1Wy1d
Deb Simpson @debsimpson38 hours ago
RT @felixankel: #mededchat. Philosophy, case example, and references for multidirectional #meded communication platform part 1 https://t.co…

Lorri Zipperer @lzipperer8 hours ago
Lorri Zipperer for Albuquerque interested in #ptsafety angles to the conversation from the #resident and #fellows perspective. #mededchat

Kam @tantalizing8 hours ago
RT @debsimpson3: T1 BTW - How prophetic were Pepe @DrJuthani @rickmartinello in Dec 2019 @JournalGME re need to prep for & involvement of t…

MedEd Chat @MedEdChat8 hours ago
RT @felixankel: #mededchat T1 multidirectional #meded communication platform part 2 https://t.co/CRYP1IWy1d

Sanjay A. Patel, MD FACP FHM @buckeye_sanjay8 hours ago @MedEdChat We’ve done 2 teams (covering primary services). One in hospital/clinic, other half at home doing inbox, didactic, etc. switch every 6 days. Teams Fire 🔥 & Ice 🧶 #MedEdchat. 2 days in, let’s see how this goes...

Peds Endo Chick @PedsEndoChick8 hours ago
T1 I am trying to make sure that our fellows still get education, which is hard when I still am one and most of our attendings have difficulty with tech #MedEdChat

Gail Sullivan @DrMedEd _itor8 hours ago
T1 disaster planning done in past, now in play. Now plans for pulling attendings (not residents) from outpatient to EM, hospital, ICUs. Residents participating in planning, thinking thru ‘what if’ scenarios – possibly valuable learning experience #mededchat #jgme #meded

felixankel @felixankel8 hours ago @frisch_kelly @CORD_EM @ALiEMteam

MedEd Chat @MedEdChat8 hours ago
RT @DrMedEd _itor: T1 disaster planning done in past, now in play. Now plans for pulling attendings (not residents) from outpatient to EM, h...

Manisha Juthani @DrJuthani8 hours ago @debsimpson3 @rickmartinello As educators, we need to involve our trainees in pandemic responses, inspire them, support them, and help protect them. #MedEdchat #YaleInfectiousDiseases

#MedEdChat Transcript produced by the Alliance for Clinical Education
Abhay Dandekar @abhaydandekar 8 hours ago
T1- triage "thinking out loud" and the decision making that goes into how to prioritize patients (email, phone, office, ED, etc.) is valued for critical thinking, relationship development, modelling, and prompting for learner thinking and entrustment #MedEdChat @acgme #MedEd

Deb Simpson @debsimpson3 8 hours ago
T1 Great opp across #GME for residents/fellows to have telehealth visits, virtual check-ins, e-visits w established older adult pts. Now "covered" via Medicare CMS Expanded Telehealth Benefits #COVID2019 Check out rules/regs #MedEdChat @AmerGeriatrics https://t.co/j5JpQ2J4Tw

MedEd Chat @MedEdChat 8 hours ago
Topic 2: #GME programs appear to be responding differently to #COVID19 even within institutions. How's your institution changing (or not) structured curriculum - didactics, small group teaching, other reqs for #Residents #Fellows? Are they prgm specific or across GME? #MedEdChat

Yusuf Yilmaz @YusufYilmazPhD 8 hours ago
RT @felixankel: #mededchat Philosophy, case example, and references for multidirectional #meded communication platform part 1 https://t.co…

Avraham Z. Cooper, MD @AvrahamCooperMD 8 hours ago
RT @debsimpson3: T1 BTW - How prophetic were Pepe @DrJuthani @rickmartinello in Dec 2019 @JournalGME re need to prep for & involvement of t...

Please Stay Home - "The Chiu Man" MD @cjchiu 8 hours ago
RT @debsimpson3: T1 BTW - How prophetic were Pepe @DrJuthani @rickmartinello in Dec 2019 @JournalGME re need to prep for & involvement of t...

MedEd Chat @MedEdChat 8 hours ago
RT @debsimpson3: T1 Great opp across #GME for residents/fellows to have telehealth visits, virtual check-ins, e-visits w established older...

Kristina Dzara, PhD, MMSc @kristinadzara 8 hours ago
RT @MedEdChat: Topic 2: #GME programs appear to be responding differently to #COVID19 even within institutions. How's your institution chan...

Gail Sullivan @DrMedEd itor 8 hours ago
T1 Resident/fellow block schedules & curriculum not changed yet, but large conferences all virtual now. These events bring out/highlight professionalism (strengths & lapses) in residents & faculty #mededchat #igme #meded

#MedEdChat Transcript produced by the Alliance for Clinical Education
Ian Fields MD @eeyanmiller 8 hours ago
RT @MedEdChat: Topic 2: #GME programs appear to be responding differently to #COVID19 even within institutions. How’s your institution chan...

Lorri Zipperer @lzipperer 8 hours ago
@DrMedEd_itor It could happen that simulations play a role in prep for similar occurrences in the future. #mededchat

Deb Simpson @debsimpson38 8 hours ago
T2 @ALiEMteam has series of resources for #GME-ducators “Teaching in Age of #COVID-19” (7 since 3.17)! From how to’s on digital asynchronous chats to assessing learners remotely. #MedEdChat Bookmark their space as @TChanMD, et are #Amazing #MedEdChat https://t.co/LtPO5JqJTA

Christopher Jackson @ChrisDJacksonMD 8 hours ago
T2 Self-directed modules, Zoom conferencing #MedEdChat

Peds Endo Chick @PedsEndoChick 8 hours ago
T2 Grand Rounds and our weekly resident led lectures are being streamed. For our division didactics, we don’t have any scheduled due to spring break--not sure what will happen with those that are scheduled. #MedEdChat

MedEd Chat @MedEdChat 8 hours ago
RT @debsimpson3: T2 @ALiEMteam has series of resources for #GME-ducators “Teaching in Age of #COVID-19” (7 since 3.17)! From how to’s on d...

Lorri Zipperer @lzipperer 8 hours ago
@abhaydandekar @acgme Good point. thinking out loud with a team could help manage #dxerror when it comes to #COVID19 #medEdChat.

Sherine Salib @DrSherineSalib 8 hours ago
@MedEdChat T2. Our learners may never encounter another global pandemic, but we can take this opportunity to teach them about: - Making decisions in the face of uncertainty - Leading difficult conversations - Working at the fringes of one’s comfort zone #MedEdChat #MedEd #COVID19

Julia Close, MD @JuliaLClose 8 hours ago
RT @abhaydandekar: T1- triage "thinking out loud" and the decision making that goes into how to prioritize patients (email,phone,office,ED...
Gail Sullivan @DrMedEd_itor 8 hours ago
T2 At UConn everything is program specific as to curriculum & clinical experiences but canceling routine/elective care & move to virtual conferences is across the institution #mededchat #jgme #meded

felixankel @felixankel 8 hours ago
#mededchat. One unintended consequence of all webex or zoom confs. Residents are seeing their peers in there homes with kids running in thr background. Brings humanity into a professionally isolating experience bc of social distancing

Angela Spencer @angspenc 8 hours ago
RT @debsimpson3: T2 @ALiEMteam has series of resources for #GME-ducators “Teaching in Age of #COVID-19” (7 since 3.17)! From how to’s on d...

Kathryn Andolsek @GME_MD 8 hours ago
@DrMedEd_itor @debsimpson3 @GLBDallaghan #MedEdchat can be great opportunity for residents to co-create curriculum in virtual visits

felixankel @felixankel 8 hours ago
RT @debsimpson3: T2 @ALiEMteam has series of resources for #GME-ducators “Teaching in Age of #COVID-19” (7 since 3.17)! From how to’s on d...

Lorri Zipperer @lzipperer 8 hours ago
@DrSherineSalib @MedEdChat Teamwork and good communication concepts play into this too -- drawn from #ptsafety and its focus on #highreliability during a crisis. #mededchat

MedEd Chat @MedEdChat 8 hours ago
#MedEdChat

Gail Sullivan @DrMedEd_itor 8 hours ago
T2 and professionalism: the resident who sees no patients on his schedule so stays home vs the resident that checks with attg & comes in to (socially distanced) office to call every patient cancelled, w/the attending #mededchat #jgme #meded

Abhay Dandekar @abhaydandekar 8 hours ago
T2 - Because teaching and learning in the virtual environment lacks the context of body language/tone ; need to set appropriate expectations, prompt LOTS of engagement, & provide rapid but useful mini-assignments with crisp goals and summaries. #MedEd #MedEdChat @MedEdChat
Stephanie Starr, MD @StephRStarr 8 hours ago
RT @debsimpson3: T1 BTW - How prophetic were Pepe @DrJuthani @rickmartinello in Dec 2019 @JournalGME re need to prep for & involvement of t...

Sherine Salib @DrSherineSalib 8 hours ago
@MedEdChat T2. I think an important component to build into our curricula at this time of uncertainty is something that helps learners regain a sense of control... This can be simple things such as leading educational discussions, etc. #MedEdChat

Deb Simpson @debsimpson3 8 hours ago
T2 The virtual learning future is now. Need tutorials about how to move your edu online in a rush? @MayoLearning https://t.co/E4ipNKNlhG #mayofacdev or check out from @carens8892 https://t.co/ca75JF2yxD #MedEdChat

MedEd Chat @MedEdChat 8 hours ago
RT @debsimpson3: T2 The virtual learning future is now. Need tutorials about how to move your edu online in a rush? @MayoLearning https://...

Gail Sullivan @DrMedEd_itor 8 hours ago
T2 the faculty member who jumps in to find virtual cases & set up virtual presentations for fellows, vs. faculty person who decides take vacation - real opportunity to role model professionalism #mededchat #igme #meded

Kathryn Andolsek @GME_MD 8 hours ago
@PedsEndoChick really needed in GME as we think #interprofessionalCare to care for our other patients so they can get care for their diabetes thyroid adrenal other endocrine care -can help us with augmented consultation virtually

C Stalburg @carens8892 8 hours ago
RT @debsimpson3: T2 The virtual learning future is now. Need tutorials about how to move your edu online in a rush? @MayoLearning https://...

Deb Simpson @debsimpson3 8 hours ago
@MedEdChat Amazing work @ALiEMteam! Much appreciated! #MedEdChat

Abhay Dandekar @abhaydandekar 8 hours ago
@DrMedEd_itor T2 - and the faculty member who recognizes learner limits and anxiety ; having a pulse of the clinical learning environment and how to leverage this is critical #MedEd #MedEdChat
Gary Beck Dallaghan @GLBDallaghan 8 hours ago
T2 Having taught online for a few years I can say it is a time consuming, but rewarding experience if done well. Would be a great opportunity to have residents lead discussions to give more opportunities to teach #mededchat

Sanjay A. Patel, MD FACP FHM @buckeye_sanjay 8 hours ago
@MedEdChat Moving to remote/distance learning (recorded didactics, video board review, etc). Encouraging great supplementary material like @hdx @CPsolv #FOAMed #MedTwitter, etc. #MedEdChat

Gail Sullivan @DrMedEd_itor 8 hours ago
Impressive work!

Kathryn Andolsek @GME_MD 8 hours ago
@MedEdChat will be helpful to perhaps engage library colleagues to send those updates in a way we subset updated ones-I sorry I miss key info or can find what’s most current @GLBDallaghan @JournalofGME #patientsafety #coronavirus #SARSCoV2

Lorri Zipperer @lzipperer 8 hours ago
@abhaydandekar @DrMedEd_itor Definitely! Situational awareness plays into it .. each person has their own level of anxiety and stressors to manage during crisis. Frontline leadership is crucial. #mededchat

Julia Close, MD @JuliaLClose 8 hours ago
T2 I’ve asked PDs to schedule a zoom check in with residents. I’m worried about social isolation without confronted. Incorporate gratitude into these sessions to offer some reminder of the positive

Sherine Salib @DrSherineSalib 8 hours ago
@MedEdChat T2. It will be interesting to see how we all adjust our teaching styles & approaches in medical education post-COVID19. Surely there’s something that we can take away from all these drastic changes... #MedEdChat

felixankel @felixankel 8 hours ago
#mededchat T2 key in my mind to successful virtual conferences is backchannel (slack, webex or zoom..) worked great with @regionsem with great leadership from @mikepaddock and @BradleyGordonMD

#MedEdChat Transcript produced by the Alliance for Clinical Education
RT @felixankel: #mededchat T2 key in my mind to successful virtual conferences is backchannel (slack, webex or zoom..) worked great with @…

Abhay Dandekar @abhaydandekar 8 hours ago
@DrSherineSalib @MedEdChat T2 - teaching virtually can also be so exhausting because you don't get to feed off of your learners as frequently. Pairing with faculty to teach together can be a good remedy for this. #MedEd #MedEdChat

Deb Simpson @debsimpson38 hours ago
@GLBDallaghan T2 Could be key role for #residents #fellows #faculty who are at risk to play vital role and collaborate with #MedEd-ucators and #FacDev-ers with expertise! #MedEdchat @2LindaMLove @erhall1 @GLBDallaghan @SDRME_Mede

FreeAllThePeople @nancyeadams 8 hours ago
@myheroistrane Horrible presidential leadership #mededchat

Kathryn Andolsek @GME_MD 8 hours ago
@DrSherineSalib hopefully we hold onto lessons learned - the positive ones - #virtualDidactics #virtualPatientCare #popHealth #innovation @DrMedEd_itor @JournalofGME @MedEdChat

FreeAllThePeople @nancyeadams 8 hours ago
@myheroistrane And also, Mike Pence making things worse #mededchat

Elissa Hall @erhall18 hours ago
#MedEdChat helps if you can see people to keep energy, tone, and pacing... so if video is an option require it. If not — perhaps sounds strange — put a mirror in front of you... self awareness of posture and facial expression impacts projection tone and energy

Elissa Hall @erhall18 hours ago
@racheldawkinsmd @HopkinsACH_OME I hear you! Thanks for sharing and being open about the challenges! #mededchat

Rick Martinello @rickmartinello 8 hours ago
RT @debsimpson: T1 BTW - How prophetic were Pepe @DrJuthani @rickmartinello in Dec 2019 @JournalGME re need to prep for & involvement of t...
Gail Sullivan @DrMedEd itor 8 hours ago
T2 rather than lecture, we’ve been using platforms for interactive discussion. Faculty still leads, poses questions & cases, provides key background, validates or corrects - which same as for our live didactics - still, tough virtually! #mededchat

Kathryn Andolsek @GME_MD 8 hours ago
@debsimpson3 #keepteaching has been useful resource for me at Duke; also for us some new “tools” lots of coaching especially by #schoolofnursing colleagues who’ve taught virtually for > 2 decades

MedEd Chat @MedEdChat 8 hours ago
Topic 3: Direct supervision of #Residents #Fellows is an @ACGME requirement VI.A.2.c).(1). In seeking to minimize #COVID19 exposure/spread what strategies are you using/changing to provide direct supervision? Best practices #Telemedicine? #MedEdChat

Deb Simpson @debsimpson3 8 hours ago
@erhall1 #MedEdChat - other strategies and tips @erhall1? How optimize virtual rounds, work rounds, etc. Any tips there besides getting the #tech to work?

FreeAllThePeople @nancyeadams 8 hours ago
@myheroistrane But on the brighter side, Anthony Fauci #MedEdchat

Deb Simpson @debsimpson3 8 hours ago
@MedEdChat @acgme T3 @ACGME has accelerated the use of Common Program Requirements for supervision of telemedicine visits carried out by residents & fellows. Originally scheduled for July 1, 2020 are now effective immediately! #MedEdchat Details & more changes https://t.co/DgHfF4HprV

Teresa Chan @TChanMD 8 hours ago
RT @MedEdChat: #MedEdChat https://t.co/IR9nmBcGtS

Elissa Hall @erhall1 8 hours ago
#MedEdchat | great example Felix also of roles... you have people responsible for the backchannel so the facilitator could facilitate. It is a full time job to do the backchannel effectively! Love it!

JUAN PABLO PEÑA, MD @juanpaesculapio 8 hours ago
RT @debsimpson3: T2 @ALiEMteam has series of resources for #GME-ducators “Teaching in Age of #COVID-19” (7 since 3.17)! From how to’s on d...
Mike Paddock @mikepaddock 8 hours ago
RT @felixankel: #mededchat T2 key in my mind to successfull virtual conferences is backchannel (slack, webex or zoom..) worked great with @...

Abhay Dandekar @abhaydandekar 8 hours ago
@debsimpson3 @erhall1 Simple things (like in the real world) - acknowledging people’s names, narrating the feel of the room and bedside frequently, and creating lots of if/then scenarios #mededchat #MedEd

Deb Simpson @debsimpson3 8 hours ago
T3 Some references on telehealth curricula for #residents & #medstudents #MedEdChat TU to @hedy_wald: https://t.co/2GMxOAXIY4 https://t.co/cGAcBMJsU2 https://t.co/KhtCGzPF4A https://t.co/W367rSbjW4 https://t.co/wPITpQzVe https://t.co/P9LYJGNqa6

Elissa Hall @erhall 18 hours ago
I concur! Tips and tricks for initiating @debsimpson3 #mededchat

Maya FLATTEN THE CURVE Hammoud, MD,MBA @Maya_Michigan 8 hours ago
RT @debsimpson3: @MedEdChat @acgme T3 @ACGME has accelerated the use of Common Program Requirements for supervision of telemedicine visits...

MedEd Chat @MedEdChat 8 hours ago
RT @debsimpson3: T3 Some references on telehealth curricula for #residents & #medstudents #MedEdChat TU to @hedy_wald: https://t.co/2GMxOAXIY4

Gail Sullivan @DrMedEd_itor 8 hours ago
T3 it’s March (not July): indirect superv. for many tasks appropriate. Direct superv. unchanged as yet: attendings now w/out routine visits/surg, actually have more time. But supervis. WILL be a problem if health care system is overwhelmed @mededchat #jgme #meded

Kathryn Andolsek @GME_MD 8 hours ago
@gailSullivan have awesome fac colleagues who withclosed schools:daycares used vacation to get kids settled; i think they’re also great role models-making sure family is ok so they can get back to clinical work -I have a feeling we”ll still need them when they’re back next week

Julia Close, MD @JuliaLClose 8 hours ago
@racheldawkinsmd @HopkinsACH_OME It’s hard! Right before this chat I had a virtual happy hour with a few heme/onc PDs- and we felt a real connection. How to bring to teaching? We had open ended questions, gave everyone time to share #MedEdChat https://t.co/nrV7OHYH0A

#MedEdChat Transcript produced by the Alliance for Clinical Education
Peds Endo Chick @PedsEndoChick 8 hours ago
@DrMedEd_itor Do you use a virtual blackboard or document for taking notes in real time? Trying to figure out ways to make it as interactive as possible. #MedEdChat

Kathryn Andolsek @GME_MD 8 hours ago
@felixankel @MedEdChat #amazonChime free for 90 days another great platform for group and break our team learning. #tbl @debsimpson3

MedEd Chat @MedEdChat 8 hours ago
RT @JuliaLClose: @racheldawkinsmd @HopkinsACH_OME It’s hard! Right before this chat I had a virtual happy hour with a few heme/onc PDs- and...

Sherine Salib @DrSherineSalib 8 hours ago
@MedEdChat @acgme T3. In the hospital, we are encouraging teams to start with “table-rounds”; not all team members see all the patients subsequently Also, only the attending & 1 learner go into rooms for patients on isolation i.e. “targeted” supervision & still allowing learning #MedEdChat

Akshay Sharma @AkshaySharmaMD 8 hours ago
RT @debsimpson3: T1 BTW - How prophetic were Pepe @DrJuthani @rickmartinello in Dec 2019 @JournalGME re need to prep for & involvement of t...

Deb Simpson @debsimpson38 8 hours ago
T3 Struggling a little with how to set up supervision of telemedicine visits carried out by residents & fellows - when ours are helping in #EmergencyMedicine, doing virtual visits, staffing "drive thru" testing sites. Ideas? #MedEdChat

MedEd Chat @MedEdChat 8 hours ago
RT @DrSherineSalib: @MedEdChat @acgme T3. In the hospital, we are encouraging teams to start with “table-rounds”; not all team members see...

Elissa Hall @erhall18 hours ago
Agree completely! We need to engage learners in application, synthesis, and reflection. And we need to give ourselves grace to start simple. Facilitator presence is key in virtual environments for scaffolding and advancing cognitive collaboration. #mededchat

Kathryn Andolsek @GME_MD 8 hours ago
RT @debsimpson3: @MedEdChat @acgme T3 @ACGME has accelerated the use of Common Program Requirements for supervision of telemedicine visits...
Gary Beck Dallaghan @GLBDallaghan 8 hours ago
@debsimpson3 T3 An @admsep member was talking about having a 3-way system so she could observe the interaction between resident and patient #mededchat

MedEd Chat @MedEdChat 8 hours ago
RT @erhall1: Agree completely! We need to engage learners in application, synthesis, and reflection. And we need to give ourselves grace...

Abhay Dandekar @abhaydandekar 8 hours ago
T3 - supervision guidelines for #telemedicine and video need to include a shared experience and identification of roles for learners and faculty so that patients are informed #MedEdChat #MedEd

Deb Simpson @debsimpson3 8 hours ago
@GLBDallaghan @admsep T3 Challenge is if in PPE then sound is challenge. Solutions? #MedEdChat

Kathryn Andolsek @GME_MD 8 hours ago
Zoom at beast has whiteboard polling feature ability to share screens pretty nimbly @PedsEndoChick @@MedEdChat I like the polling feature in particular (sure other have these too)@GLBDallaghan

Michelle Lin, MD @M_Lin 8 hours ago
Since I had nothing to do with it, I can brag on the @ALiEMFac and @ALiEMteam (incl editors @Silveriolining @andyglittle) on the ⚡️ fast sprint to get these 8 articles written along with professional infographics. Super impressive teamwork everyone!

Academic Life in EM @ALiEMteam 8 hours ago
RT @debsimpson3: T2 @ALiEMteam has series of resources for #GME-ducators “Teaching in Age of #COVID-19” (7 since 3.17)! From how to’s on d...

Gary Beck Dallaghan @GLBDallaghan 8 hours ago
@debsimpson3 @admsep True....but sometimes that can be solved using a conference line to speak via phone and not the computer. Had to do that yesterday in my office so I could hear #mededchat

Kathryn Andolsek @GME_MD 8 hours ago
@debsimpson3 for virtual visits I can drop in virtually too; talk to/see patient shd have 3 way discussion (similar to office) Discussion with resident by cell/chat feature
1. **Elissa Hall** @erhall18 hours ago
   1. #MedEdChat focus on the human side of things ... utilize netiquette to establish expectations and how to engage w/ others in this new context. Removes concerns about how do I act socially or fit-in & instead focuses on cognitive engagement

**MedEd Chat** @MedEdChat8 hours ago
We have about 5 more minutes left in our discussion. Please feel free to give some final thoughts #meded #mededchat

**Klint W. Kloepping** @NoDesat8 hours ago
RT @debsimpson3: T2 @ALiEMteam has series of resources for #GME-ducators “Teaching in Age of #COVID-19” (7 since 3.17)! From how to’s on d...

**Deb Simpson** @debsimpson38 hours ago
On behalf of @JournalofGME TU to #MedEdChat for allowing us change topics in <36 hrs. This is #SoMe's power as we support our #GME #meded-ucators. Stay safe, be well esp those directly serving our patients! Congrats to all! It's almost #MatchDay2020 Take #DistanceMatch challenge https://t.co/7OfmKAKNYi

**Lorri Zipperer** @lzipperer8 hours ago
How does the group feel about managing mistakes in the virtual space? #mededchat #ptsafety

**Vinny Arora MD MAPP** @FutureDocs8 hours ago
RT @debsimpson3: On behalf of @JournalofGME TU to #MedEdChat for allowing us change topics in <36 hrs. This is #SoMe’s power as we support...

**Kathryn Andolsek** @GME_MD8 hours ago
@julialclose @MedEdChat love the virtual coffee hour; morning faculty meeting could be #virtualbreakfastclub

**Kathryn Andolsek** @GME_MD8 hours ago
RT @debsimpson3: On behalf of @JournalofGME TU to #MedEdChat for allowing us change topics in <36 hrs. This is #SoMe’s power as we support...

**Abhay Dandekar** @abhaydandekar8 hours ago
Institutions and Societies can provide great opportunities for #facdev and learners to actively participate in micro and macro level encounters related to #COVID19 - this can be skillfully prioritized with active stakeholder engagement #MedEdChat #MedEd @acgme @AAMCtoday
2. #MedEdChat excellent points - call by name, keep open communication, be transparent, practice wait time, & consider how you are incorporating voice of all learners as some may be more verbal that others

Huge thanks to @debsimpson3 for creating questions and sponsoring @jgme participation! and to @mededchat for hosting! Now if we can just decrease the number of COVID emails . . . #mededchat #jgme #meded

That's a wrap...I will post the #mededchat transcript tomorrow morning on https://t.co/mJivoK9NyX on the Resources page. Thanks everyone for participating! #meded

Join us again next week at 9 pm Thursday. Thank you again to @JournalofGME for tonight's topic! Don’t forget to suggest topics by DM or email #meded #mededchat

Learning that is asynchronous, virtual, data driven, distanced, and yet empathic with compassionate and professional role modeling is the future. Let's learn from #COVID19 and actively share our lessons and innovations! #MedEdChat #MedEd

T2 and @abhaydandekar thanks for reminding us that good education and good clinical care are really about being inclusive, respectful people of ourselves and each other. Skills we all need in these challenging times. #MedEdChat #JGME

Thanks for letting a #medEdChat newbie feel welcome! G'night all.

RT @debsimpson3: T3 Some references on telehealth curricula for #residents & #medstudents #MedEdChat TU to @hedy_wald: https://t.co/2GMxOA...

RT @debsimpson3: @MedEdChat @acgme T3 @ACGME has accelerated the use of Common Program Requirements for supervision of telemedicine visits...
Elissa Hall @erhall18 hours ago
#MedEdChat - Great strategy w/ a welcome also when people enter ... do a virtual check in with a prompt as we cannot always see who is present so we can associate a voice with a name which allows for integration into discussion during the session.

Elissa Hall @erhall18 hours ago
RT @DrMedEd_itor: Huge thanks to @debsimpson3 for creating questions and sponsoring @jgme participation! and to @mededchat for hosting! Now...

Andy Tagg @andrewjitago8 hours ago
RT @debsimpson3: T2 @ALiEMteam has series of resources for #GME-ducators “Teaching in Age of #COVID-19” (7 since 3.17)! From how to’s on d...

Andy Tagg @andrewjitago8 hours ago
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Elissa Hall @erhall18 hours ago
Thanks @debsimpson3 @jgme @MedEdChat for this #mededchat!

JGME @JournalofGME8 hours ago
JGME
Thank you for joining us for another great #MedEdChat!

Ricardo Correa MD, EsD, FACP, FACE, FAPCR, CMQ @drricardocorrea8 hours ago
@MedEdChat We are trying to keep our fellows away from the hospital as much as we can. Our GME office and DIO is very supportive and using innovative way of teaching and learning #mededchat #uazphxmed

Dime Store Cowgirl @catig06208 hours ago
RT @drricardocorrea: @MedEdChat We are trying to keep our fellows away from the hospital as much as we can. Our GME office and DIO is very...

Peds Endo Chick @PedsEndoChick7 hours ago
@GME_MD Oh, certainly. Most of our specialty is looking at numbers, so it's relatively easy to provide e-consults. We cancelled all our clinics for the next 6 weeks and will likely be doing much of that with our own patients. #MedEdChat
Mike Paddock @mikepaddock7 hours ago
This brought me so much joy today. Unintended benefit. #MedEdchat

Peds Endo Chick @PedsEndoChick7 hours ago
@JuliaLClose @DrMedEd_itor It may. Our next didactic block is run by an attending who makes things super interactive, and since we’re all out until May, thought it might be good to get started early. #MedEdChat

MedEdBot @MedEdBot7 hours ago
RT @abhaydandekar: Institutions and Societies can provide great opportunities for #facdev and learners to actively participate in micro and...

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RT @DrMedEd_itor: Huge thanks to @debsimpson3 for creating questions and sponsoring @jgme participation! and to @mededchat for hosting! Now...

Abhay Dandekar @abhaydandekar7 hours ago
@acgme #medtwitter @boedudley @DrDanSchumacher @cabanam @CincyIM @MedEdChat @KP MedSchool @SaraBuckelew @StanfordMed @dgsomucla

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The Human Diagnosis Project @hdx7 hours ago
RT @buckeye_sanjay: @MedEdChat Moving to remote/distance learning (recorded didactics, video board review, etc). Encouraging great supplemt...
Kristina Dzara, PhD, MMSc @kristinadzara 7 hours ago
RT @MedEdChat: That’s a wrap...I will post the #mededchat transcript tomorrow morning on https://t.co/mJivoK9NyX on the Resources page. Tha...

Kristina Dzara, PhD, MMSc @kristinadzara 7 hours ago
RT @debsimpson3: T2 The virtual learning future is now. Need tutorials about how to move your edu online in a rush? @MayoLearning https/...

Kristina Dzara, PhD, MMSc @kristinadzara 7 hours ago
RT @debsimpson3: T2 @ALiEMteam has series of resources for #GME-ducators “Teaching in Age of #COVID-19” (7 since 3.17)! From how to’s on d...

Hedy Wald @hedy_wald 6 hours ago
Appreciate shoutout&hope helpful-this2:Telemedicine:A Practical Guide for Incorporation in2 yr Practice Free online curric 2help physicians begin or expand use of telemedicine&includes timely info abt patient care during pandemics&public health crises https://t.co/tWklVDnoyG

Lonika Sood, MBBS, MHPE @sood_lonika 6 hours ago
Hey #MEdtwitter are any of you creative folks using twitter for online learning for your students? How? #meded #MedEdchat #HMICommunity

MedEdBot @MedEdBot 5 hours ago
RT @sood_lonika: Hey #MEdtwitter are any of you creative folks using twitter for online learning for your students? How? #meded #MedEdchat...

Ricardo Correa MD, EsD, FACP, FACE, FAPCR, CMQ @drricardocorrea 5 hours ago
Our first zoom happy hour. A total success. Keeping the wellbeing of the fellows and faculties. @uazmedphx #meded #mededchat #medtwitter #endotwitter #StopTheSpread #COVID19

Palivizumab @Experiential Dr 5 hours ago
RT @myheroistrane: For the old timers: what parallels, if any with the AIDS epidemic? #MedEdChat

Dr. Antentor Othrell Hinton, Jr, PhD. @phdgprotein865 5 hours ago
RT @drricardocorrea: Our first zoom happy hour. A total success. Keeping the wellbeing of the fellows and faculties. @uazmedphx #meded #med...
Laura Tatpati, MD @Dr_Tatpati 5 hours ago
RT @debsimpson3: @MedEdChat @acgme T3 @ACGME has accelerated the use of Common Program Requirements for supervision of telemedicine visits...

Teresa Chan @TChanMD 3 hours ago
RT @felixankel: T1 #mededchat. Conferences now virtual. Work on virtual national specialty specific resident conference https://t.co/O4YSuju...

Telemedy_This Brand is For Sale @TelemedyB 2 hours ago
RT @debsimpson3: Great resources support transition 2 virtual #MedEd. Join us tonight at 8:00 PM Central to explore #COVID2019 impacts on #GME. Search #MedEdchat to join guest hosts from @JournalofGME as explore changes in clinicals, curriculum, & supe... https://t.co/HQtZJZXLdP

The #MedEdChat Influencers

Top 10 Influential

@debsimpson3 100
@MedEdChat 90
@DrMedEd itor 86
@GLBDallaghan 71
@felixankel 66
@JuliaLClose 62
@acgme 56
@DrSherineSalib 54
@erhall1 45
Prolific Tweeters

@MedEdChat 20
@DrMedEd_itor 16
@debsimpson3 16
@GME_MD 12
@MedEdBot 11
@erhall1 10
@felixankel 9
@abhaydandekar 9
@kristinadzara 9
@JuliaLClose 7

Highest Impressions

@MedEdChat 156.5K
@kristinadzara 48.1K
@FutureDocs 32.7K