

2020-06-16 & 17: #MedStudentChat/#MedEdChat: Conversation about Anti-Racism in Medical Education

The following links were shared during the chat:

- Talking about Race <https://nmaahc.si.edu/learn/talking-about-race/topics/being-antiracist>
- Doctor for a Day <https://cedi-web01.s.uw.edu/pre-health-programs/high-school-programs/>
- AAMC Report Shows Decline of Black Males in Medicine <https://www.aamc.org/news-insights/aamc-report-shows-decline-black-males-medicine>
- Black Student Application Program <https://applymd.utoronto.ca/black-student-application-program>
- Racial/Ethnic Disparities in Clinical Grading in Medical School <https://www.tandfonline.com/doi/abs/10.1080/10401334.2019.1597724?journalCode=htmlm20>
- Health Care Workers Call on Labor Movement to Take Action Against Police and Racist Violence <https://www.leftvoice.org/health-care-workers-call-on-labor-movement-to-take-action-against-police-and-racist-violence>
- Changing How Race Is Portrayed in Medical Education: Recommendations From Medical Students https://journals.lww.com/academicmedicine/Abstract/9000/Changing_How_Race_Is_Portrayed_in_Medical.97189.aspx
- An Institutional Approach to Fostering Inclusion and Addressing Racial Bias: Implications for Diversity in Academic Medicine <https://www.tandfonline.com/doi/abs/10.1080/10401334.2019.1670665?journalCode=htmlm20>
- Medical Students' Implicit Bias and the Communication of Norms in Medical Education <https://www.tandfonline.com/doi/abs/10.1080/10401334.2017.1359610?journalCode=htmlm20>
- Race/Ethnicity in Medical Education: An Analysis of a Question Bank for Step 1 of the United States Medical Licensing Examination <https://www.tandfonline.com/doi/abs/10.1080/10401334.2016.1268056>
- Using Artistic-Narrative to Stimulate Reflection on Physician Bias <https://www.tandfonline.com/doi/full/10.1080/10401334.2014.945032>
- Adopting an Anti-Racism Public Health Curriculum Competency: The University of Washington Experience <https://journals.sagepub.com/doi/full/10.1177/0033354918774791>
- An Analysis of the Medical School Pipeline: A High School Aspirant to Applicant and Enrollment View https://www.aamc.org/system/files/reports/1/march2014aib_ananalysisofthemedicalschoolpipeline.pdf
- Stolen Breaths <https://www.nejm.org/doi/full/10.1056/NEJMp2021072>



Center for a Diverse Healthcare Workforce @UCDavisCDHW 13 hours ago

We're participating in the [#MedEdChat](#) tonight! 🙌🙌🙌 Join us!



MedStudentChat @MedStudentChat 13 hours ago

For today's conversation, we are collaborating with [#MedEdChat](#). [@NNkinsi](#) + [@BriChristophers](#) will be moderating on the student side, [@SSawning](#) + [@GLBDallaghan](#) on the [#MedEdChat](#) side. Tomorrow @ 9 AM ET [#MedEdChat](#) will be continuing the conversation on anti-racism. [#MedStudentChat](#)



MedEd Chat @MedEdChat 13 hours ago

We're happy to be participating with you to continue the conversation tomorrow morning [#mededchat](#) [#MedStudentChat](#)



Susan Sawning-she/her/hers @SSawning 13 hours ago

RT [@MedStudentChat](#): For today's conversation, we are collaborating with [#MedEdChat](#). [@NNkinsi](#) + [@BriChristophers](#) will be moderating on the st...



Briana Ruiz Christophers [@BriChristophers13 hours ago](#)

Excited that [@NNkinsi](#) is joining us for this one! [#MedStudentChat](#) [#MedEdChat](#)



MedStudentChat [@MedStudentChat13 hours ago](#)

Things will run a bit differently tonight: 🗳️ There will be 4 Qs. 🗳️ Each will include “Q1, Q2, ...”, be sure to add “A1, A2, ...” to your reply ✨ Include BOTH [#MedStudentChat](#) [#MedEdChat](#) in reply (we suggest copy + paste) - Engage with each other in collaborative idea generation



Susan Sawning-she/her/hers [@SSawning13 hours ago](#)

RT [@MedEdChat](#): We're happy to be participating with you to continue the conversation tomorrow morning [#mededchat](#) [#MedStudentChat](#) <https://t...>



MedStudentChat [@MedStudentChat13 hours ago](#)

Below are the community norms for this chat. Introduce yourself in the replies (name, year/position, why you're joining in), so we can get to know each other! [#MedStudentChat](#) [#MedEdchat](#) <https://t.co/CDqv1d0hg0>



adgenelia [@adgenelia13 hours ago](#)

RT [@MedStudentChat](#): Below are the community norms for this chat. Introduce yourself in the replies (name, year/position, why you're joini...



Briana Ruiz Christophers [@BriChristophers13 hours ago](#)

Remember: *BOTH* [#MedStudentTwitter](#) [#MedEdchat](#) so we can all follow the conversation!



Dan Skinner [@danielrskinner13 hours ago](#)

[@MedEdChat](#) Uh oh—watch out! When educators and students get together, amazing things can happen! [#MedEdStudentChat](#) [#MedEdChat](#)



Susan Sawning-she/her/hers [@SSawning13 hours ago](#)

RT [@MedStudentChat](#): Below are the community norms for this chat. Introduce yourself in the replies (name, year/position, why you're joini...



MedStudentChat [@MedStudentChat13 hours ago](#)

[#MedStudent](#) Chat [#MedEdChat](#) <https://t.co/GMkrxWDjO7>



MedStudentChat [@MedStudentChat13 hours ago](#)

Some definitions to get us started before the first question comes up.

Source: <https://t.co/JL02YTecOH> [#MedStudentChat](#) [#MedEdChat](#) <https://t.co/voof39tELI>



Gary Beck Dallaghan @GLBDallaghan13 hours ago

Gary here in NC. Long time [#medstudent](#) advocate and moderator of [#MedEdChat](#) [#MedStudentChat](#)



Susan Sawning-she/her/hers @SSawning13 hours ago

RT [@MedStudentChat](#): Some definitions to get us started before the first question comes up. Source: <https://t.co/JL02YTecOH> [#MedStudentCha...](#)



Naomi Tweyo Nkinsi @NNkinsi13 hours ago

[@MedStudentChat](#) Hi everyone! I'm Naomi and I'm a rising MS3 [@UWMedicine](#). I'm going to be a co-moderator and am so excited for this discussion and to hear from all of you! [#MedStudentChat](#) [#MedEdChat](#)



MedStudentChat @MedStudentChat13 hours ago

Starting off with Q1. Are pipeline programs to encourage underrepresented groups* to pursue medicine working and are they enough? *we use underrepresented groups to focus on race/ethnicity, though we recognize that the term can be applied to others. [#MedStudentChat](#) [#MedEdChat](#) <https://t.co/RtMoplHsfB>



Stuart Ray @soupvector13 hours ago

[@MedStudentChat](#) Stuart Ray, MD Vanderbilt '90, here to learn to be a better anti-racist ally to BIPOC & more intentional about managing my privilege. [#MedStudentChat](#) [#MedEdchat](#)



Briana Ruíz Christophers @BriChristophers13 hours ago

[@MedStudentChat](#) Hey everyone, thanks for joining us! Bri Christophers, MD-PhD student, co-leader of [#MedStudentChat](#). Happy to be working with you all for change! [#MedEdChat](#)



Grace Oliver, MD @GraceOliverMD13 hours ago

[@MedStudentChat](#) I'm Grace, a family med PGY1. I have been working on my own anti-racism practice, but I work with medical students and would love to be able to incorporate it well at work as a teacher as well. [#MedStudentChat](#) [#MedEdChat](#)



MedStudentChat @MedStudentChat13 hours ago

RT [@danielrskinner](#): [@MedEdChat](#) Uh oh—watch out! When educators and students get together, amazing things can happen! [#MedEdStudentChat](#) [#Med...](#)



Rory Merritt, MD MEHP @rorymerrittmd13 hours ago

[@MedStudentChat](#) Hi! First time joining a chat in this format. I'm Rory he/him/his, I'm an assistant professor of EM [@Brown_Emergency](#) [@BrownMedicine](#), work in UME. Hoping to listen and learn and unlearn. [#MedStudentChat](#) [#MedEdChat](#)



Kristina Dzara, PhD, MMSc @KristinaDzara13 hours ago

RT [@MedEdChat](#): We're happy to be participating with you to continue the conversation tomorrow morning [#mededchat](#) [#MedStudentChat](#)



Kristina Dzara, PhD, MMSc [@KristinaDzara13 hours ago](#)

RT [@danielrskinner](#): [@MedEdChat](#) Uh oh—watch out! When educators and students get together, amazing things can happen! [#MedEdStudentChat](#) [#Med...](#)



Patrick D. Herron [@pdherron13 hours ago](#)

Hello, Patrick from [@EinsteinMed](#) & [@MontefioreNYC](#) in Bronx; [#Bioethics](#) [#MedEd](#) faculty; looking for opportunities to further support our students & faculty/staff [#MedStudentChat](#) [#MedEdChat](#)



Center for a Diverse Healthcare Workforce [@UCDavisCDHW13 hours ago](#)

[@MedStudentChat](#) A1: Pathway programs are working to a certain extent. Most programs are small, underfunded, with a huge applicant pools/limited spots. They are not enough. We need more programs to support underrepresented students from K-16. [#MedStudentChat](#) [#MedEdChat](#) [#HealthcareDiversity](#)



Gary Beck Dallaghan [@GLBDallaghan13 hours ago](#)

A1 Many pipeline programs are successful getting students to medical school.....but once there the support is often times lacking [#MedStudentChat](#) [#MedEdChat](#)



Cedar Brush [@BrushCedar13 hours ago](#)

[@MedStudentChat](#) I say yes and no. They can help, but when it comes down to it, they aren't sufficient. Also, there needs to be greater variety. In Indigenous communities, the most common pipeline programs are nurses, other kind of practitioner aren't seen options. [#MedStudentChat](#) [#MedEdChat](#)



Susan Sawning-she/her/hers [@SSawning13 hours ago](#)

[@MedStudentChat](#) Susan here from Louisville, KY where we are grieving with the [#BreonnaTaylor](#) family. I am a med ed researcher and social justice advocate and work with our med students to try to disrupt [#MedEd](#) to create change. [#MedStudentChat](#) [#MedEdChat](#)



Cedar Brush [@BrushCedar13 hours ago](#)

[@MedStudentChat](#) A1: I say yes and no. They can help, but when it comes down to it, they aren't sufficient. Also, there needs to be greater variety. In Indigenous communities, the most common pipeline programs are nurses, other kind of practitioner aren't seen options. [#MedStudentChat](#) [#MedEdChat](#)



Kristina Dzara, PhD, MMSc [@KristinaDzara13 hours ago](#)

RT [@MedStudentChat](#): Starting off with Q1. Are pipeline programs to encourage underrepresented groups* to pursue medicine working and are...



Kristina Dzara, PhD, MMSc [@KristinaDzara13 hours ago](#)

RT [@GLBDallaghan](#): Gary here in NC. Long time [#medstudent](#) advocate and moderator of [#MedEdChat](#) [#MedStudentChat](#)



Kristina Dzara, PhD, MMSc [@KristinaDzara13 hours ago](#)

RT [@MedStudentChat](#): For today's conversation, we are collaborating with [#MedEdChat](#). [@NNkinsi](#) + [@BriChristophers](#) will be moderating on the st...



Liz Bonachea [@MDmoneyhealth13 hours ago](#)

Liz from OH, fellowship PD and superfellowship Director. Thanks for hosting.

A1 [#RepresentationMatters](#) but pipeline programs and getting URM in the door isn't enough. URM can't be expected to pay the tax to change the culture [#MedEdChat](#) [#MedStudentChat](#)



Briana Ruiz Christophers [@BriChristophers13 hours ago](#)

RT [@MedStudentChat](#): Some definitions to get us started before the first question comes up.

Source: <https://t.co/JL02YTecOH> [#MedStudentCha...](#)



Center for a Diverse Healthcare Workforce [@UCDavisCDHW13 hours ago](#)

[@NNkinsi](#) [@MedStudentChat](#) Exactly — the support for STEM courses need to start at a young age. It's an uphill battle. [#MedStudentChat](#) [#MedEdChat](#) [#HealthcareDiversity](#)



Naomi Tweyo Nkinsi [@NNkinsi13 hours ago](#)

[@UCDavisCDHW](#) [@MedStudentChat](#) [@UWMedicine](#) has a program called Doctor for a Day run by [@drwooda](#) that aims to target URM students at a younger age through monthly events. You can check out our work here! <https://t.co/AbWhyOtHKK> [#MedStudentChat](#) [#MedEdChat](#)



Gary Beck Dallaghan [@GLBDallaghan13 hours ago](#)

[@BrushCedar](#) [@MedStudentChat](#) A1 I'm intrigued by this. Why the emphasis just on nursing and not other health professions? [#mededchat](#) [#MedStudentChat](#)



Rory Merritt, MD MEHP [@rorymerrittmd13 hours ago](#)

[@MedStudentChat](#) A1: There is little data on pipeline programs with respect to this question. Myself and others have a paper coming out using [@AAMCtoday](#) data in [@Academic](#) Medicine showing that pipeline programs actually are doing worse than traditional programs. [#MedStudentChat](#) [#MedEdChat](#)



Diverse Health Hub [@DHealthhub13 hours ago](#)

RT [@UCDavisCDHW](#): [@MedStudentChat](#) A1: Pathway programs are working to a certain extent. Most programs are small, underfunded, with a huge ap...



Ming-Ka Chan, MD, MHPE [#BlackLivesMatter](#) [@MKChan_RCPSC13 hours ago](#)

RT [@UCDavisCDHW](#): [@NNkinsi](#) [@MedStudentChat](#) Exactly — the support for STEM courses need to start at a young age. It's an uphill battle. [#MedS...](#)



Ariella Coler-Reilly [@AriellaStudies13 hours ago](#)

[@MedStudentChat](#) I'm Ariella, [@WUSTLmstp](#) [@WUSTLmed](#) rising 4th year now! (Was still saying 3rd year yesterday oops.) I'm primarily here to learn. I'm also here to see if there's a way I can leverage my infographic/comic art to help educate others about what I learn. [#medstudentchat](#) [#mededchat](#)



Zarin Rahman [@ZarinIRahman13 hours ago](#)

[@MedStudentChat](#) A1: Necessary but not sufficient. They must be 1) effectively run, 2) provide students support continuously throughout the entire program 3) start early (the pipeline is broken way BEFORE college, even HS, 4) provide support beyond academics. [#MedStudentChat](#) [#MedEdChat](#)



Dan Skinner [@danielrskinner13 hours ago](#)

[@UCDavisCDHW](#) [@NNkinsi](#) [@MedStudentChat](#) The limitations of investments in STEM and pipeline programs drive home the importance of all health care professionals seeing social justice—including the broad program of economic and civic equality—as very much their lane. [#MedEdChat](#) [#MedStudentChat](#)



Susan Sawning-she/her/hers [@SSawning13 hours ago](#)

[@rorymerrittmd](#) [@MedStudentChat](#) [@AAMCtoday](#) [@academic](#) Cannot wait to read this. Please share when it is available. [#MedStudentTwitter](#) [#MedEdChat](#)



Naomi Tweyo Nkinsi [@NNkinsi13 hours ago](#)

[@UCDavisCDHW](#) [@MedStudentChat](#) [@UWMedicine](#) [@drwooda](#) Additionally, a centralized dataset of all pathway programs could make it easier for students to find them because it could then be distributed by K-12 counselors. Is anybody aware of any such dataset that currently exists? [#MedStudentChat](#) [#MedEdChat](#)



Marc Andrew Hem Lee [@SuperMarcKyo13 hours ago](#)

[@MedStudentChat](#) Hi! Marc|M3, here to listen. [#MedStudentChat](#) [#MedEdChat](#)



Cedar Brush [@BrushCedar13 hours ago](#)

[@GLBDallaghan](#) [@MedStudentChat](#) A1: wish I had an answer offhand. I would have hypotheses based off historical medical hierarchies, but I don't have a well-researched answer. Common that MD isn't option till later and students already invested in nursing path [#MedStudentChat](#) [#MedEdChat](#)



MedEdBot [@MedEdBot13 hours ago](#)

RT [@pdherron](#): Hello, Patrick from [@EinsteinMed](#) & [@MontefioreNYC](#) in Bronx; [#Bioethics](#) [#MedEd](#) faculty; looking for opportunities to further s...



Naomi Tweyo Nkinsi [@NNkinsi13 hours ago](#)

[@BenSimmonsMD](#) [@MedStudentChat](#) I'm curious why you think that is? What are areas that the program could improve? [#MedStudentChat](#) [#MedEdChat](#)



Gary Beck Dallaghan [@GLBDallaghan13 hours ago](#)

[@NNkinsi](#) [@UCDavisCDHW](#) [@MedStudentChat](#) [@UWMedicine](#) [@drwooda](#) I've never checked. It sounds like something [@AAMCPreMed](#) could coordinate nationally [#mededchat](#) [#MedStudentChat](#)



Patrick D. Herron @pdherron13 hours ago

RT @MedStudentChat: Starting off with Q1. Are pipeline programs to encourage underrepresented groups* to pursue medicine working and are...



Center for a Diverse Healthcare Workforce @UCDavisCDHW13 hours ago

@ZarinIRahman @MedStudentChat We've heard so many times before that the pipeline is leaky even in elementary school. The support, investment, and mentorship need to start early. #MedStudentChat #MedEdChat #HealthcareDiversity



Kristina Dzara, PhD, MMSc @KristinaDzara13 hours ago

Kristina here, PhD Medical Educator in Boston. Checking in for the joint #MedEdChat / #MedStudentChat to support this effort to discuss anti-racism in #MedEd. Thanks to @NNkinsi @BriChristophers @SSawning @GLBDallaghan for moderating! MT @DrSinhaEsq @jobusar @TiffanyLovePhD



Naomi Tweyo Nkinsi @NNkinsi13 hours ago

@agorancy @MedStudentChat I agree with this sentiment. While in the program the students are surrounded by others who look like them, understand them, and mentors who support them, but this isn't always maintained when actual classes start. #MedStudentChat #MedEdChat



Priya Kantesaria @pskantesaria13 hours ago

@MedStudentChat It's by no means the only way to increase representation, but I do think for some students (especially those in the area), this can be a way to get connected to a school which would have previously been out of reach. #medstudentchat #mededchat



Tamorah Lewis, MD, PhD @TamorahLewisMD13 hours ago

@MedStudentChat A1. The issue is the systemic barriers faced by BIPOC students that no pipeline program can fix. They cannot afford Ivy League college feeder tuition, the tests and prep courses are expensive and then signing up for all the medical debt is hard with no \$ resources. #medEdchat



MedEd Chat @MedEdChat13 hours ago

RT @pskantesaria A1: Personally, I've seen the pipeline programs increase representation in MedEd. At NJMS we have our MiniMed prgm which connects high schoolers across NJ to NJMS. We then have separate pipeline programs to help students prep for admissions, MCAT etc. #mededchat



Briana Ruiz Christophers @BriChristophers13 hours ago

@BrushCedar @MedStudentChat Agreed, on the not sufficient part. Do you think it's a matter of needing more "variety" of providers/institutions nearby? #MedStudentChat #MedEdChat



Ming-Ka Chan, MD, MHPE [#BlackLivesMatter](#) [@MKChan](#) [RCPSC13 hours ago](#)
RT [@danielrskinner](#): [@UCDavisCDHW](#) [@NNkinsi](#) [@MedStudentChat](#) The limitations of investments in STEM and pipeline programs drive home the impor...



Ming-Ka Chan, MD, MHPE [#BlackLivesMatter](#) [@MKChan](#) [RCPSC13 hours ago](#)
RT [@ZariniRahman](#): [@MedStudentChat](#) A1: Necessary but not sufficient. They must be 1) effectively run, 2) provide students support continuous...



Meredith Greer [@EmmGeezee13 hours ago](#)
[@MedStudentChat](#) Hi! I'm Meredith, a soon to be PGY-7 (last year!) in sleep medicine at Emory! I'm here to hear from students and educators as I am sort of in the middle right now but hoping to get to work more in the medical school once I (finally) finish training! [#medstudentchat](#) [#mededchat](#)



Naomi Tweyo Nkinsi [@NNkinsi13 hours ago](#)
[@PedsOtoDoc](#) [@MedStudentChat](#) Yes definitely. As an undergrad, I participated in a program every summer and while they were helpful in learning and making connections, it was still odd to meet current students and note that there were actually few URMs at the school. [#MedStudentChat](#) [#MedEdChat](#)



MedStudentChat [@MedStudentChat13 hours ago](#)
Q2. Research shows that narrative evaluations of BIPOC medical students use less positive descriptors and apply different standards than is done with majority medstudents. What changes can be made to evaluation forms to mitigate unequal evaluation? [#MedStudentTwitter](#) [#MedEdChat](#) <https://t.co/5Wv8a0VMnX>



Susan Sawning-she/her/hers [@SSawning13 hours ago](#)
A1: This report from [@AAMCtoday](#) in 2016 shows decline of black males in medicine. Seems it is clear from this report that different structural support is needed if we desire to increase these numbers. <https://t.co/zyeDVoRhd4> [#MedStudentChat](#) [#MedEdChat](#)



Center for a Diverse Healthcare Workforce [@UCDavisCDHW13 hours ago](#)
RT [@SSawning](#): A1: This report from [@AAMCtoday](#) in 2016 shows decline of black males in medicine. Seems it is clear from this report that dif...



Gary Beck Dallaghan [@GLBDallaghan13 hours ago](#)
RT [@SSawning](#): A1: This report from [@AAMCtoday](#) in 2016 shows decline of black males in medicine. Seems it is clear from this report that dif...



Briana Ruiz Christophers @BriChristophers13 hours ago
[@UCDavisCDHW](#) [@NNkinsi](#) [@MedStudentChat](#) Related: <https://t.co/53cDiKdR1v> [#MedStudentCh](#)
[at #MedEdChat](#)



@mmteacherdoc @mmteacherdoc13 hours ago
Hi everyone - Marty from [@MedicalCollege](#) of Wisconsin in Milwaukee. Looking forward to learning with you all [#MedEdChat](#) [#MedStudentChat](#)



Cedar Brush @BrushCedar13 hours ago
[@BriChristophers](#) [@MedStudentChat](#) That could be. It's also a matter of advertising. When pipeline programs go to advertise to communities, it's frequently nursing programs going to indigenous communities to advertise. There isn't a lot of active recruitment in other fields...[#MedStudentChat](#) [#MedEdChat](#)



Naomi Tweyo Nkinsi @NNkinsi13 hours ago
[@MedStudentChat](#) A1: One aspect to consider is finances. The most successful one I participated in was ALVA GenOM at UW. We got free housing, free food, and a stipend in addition to stipends and personalized support all 4 years of undergrad [#MedStudentChat](#) [#MedEdChat](#) <https://t.co/h0KdrZYLy0>



Ming-Ka Chan, MD, MHPE [#BlackLivesMatter](#) @MKChan RCPSC13 hours ago
RT [@UCDavisCDHW](#): [@ZarinRahman](#) [@MedStudentChat](#) We've heard so many times before that the pipeline is leaky even in elementary school. The s...



MedEd Chat @MedEdChat13 hours ago
RT Ming-Ka Chan, MD, MHPE [#BlackLivesMatter](#) [@MKChan](#) RCPSC Replying to [@NNkinsi](#) [@UCDavisCDHW](#) and 3 others Would be great if this could be a worldwide dataset. Let's use big data in meaningful ways - [#Antiracism](#) [#SocialJustice](#). [#MedStudentTwitter](#) [#MedEdChat](#) [#MedStudentChat](#)



Briana Ruiz Christophers @BriChristophers13 hours ago
[@rorymerrittmd](#) [@MedStudentChat](#) [@AAMCtoday](#) [@academic](#) Definitely looking out for this piece—thanks for doing this kind of research [#MedStudentChat](#) [#MedEdChat](#)



Center for a Diverse Healthcare Workforce @UCDavisCDHW13 hours ago
[@you2nice2me](#) [@pskantesaria](#) [@MedStudentChat](#) YES! Agree - in addition to MCAT prep courses/scholarships, we also need to prep our med school applicants with interviews, essay writing, etc. so they are as competitive as their counterparts with role models already in the field. [#MedStudentChat](#) [#MedEdChat](#) [#HealthcareDiversity](#)



Ming-Ka Chan, MD, MHPE #BlackLivesMatter @MKChan RCPSC13 hours ago
RT @KristinaDzara: Kristina here, PhD Medical Educator in Boston. Checking in for the joint #MedEdChat / #MedStudentChat to support this...



MedStudentChat @MedStudentChat13 hours ago
RT @ZariniRahman: @MedStudentChat A1: Necessary but not sufficient. They must be 1) effectively run, 2) provide students support continuous...



Cedar Brush @BrushCedar13 hours ago
@BriChristophers @MedStudentChat I would say diversity is an issue just because if there was more honest representation, it would be easier to see people in the workforce without these pipeline programs. I'd want to say more representation means more advocacy, but that hasn't always... #MedStudentChat #MedEdChat



Naomi Tweyo Nkinsi @NNkinsi13 hours ago
@MedStudentChat This helped to retain students and also provided a community that followed you all through your educational experience. The students I met in this program are still my closest friends and I am still in regular contact with all the mentors. #MedStudentChat #MedEdChat



Ming-Ka Chan, MD, MHPE #BlackLivesMatter @MKChan RCPSC13 hours ago
RT @SSawning: A1: This report from @AAMCtoday in 2016 shows decline of black males in medicine. Seems it is clear from this report that dif...



Cedar Brush @BrushCedar13 hours ago
@BriChristophers @MedStudentChat ...been the case. Frequently, POC have to act and be a certain way to survive in the larger system, so they don't advocate as their youth need them to #MedStudentChat #MedEdChat



MedStudentChat @MedStudentChat13 hours ago
RT @NNkinsi: @UCDavisCDHW @MedStudentChat @UWMedicine @drwooda Additionally, a centralized dataset of all pathway programs could make it ea...



MedEd Chat @MedEdChat13 hours ago
#mededchat



Susan Sawning-she/her/hers @SSawning13 hours ago

A2: Faculty development MUST be a key player in making changes to narrative evaluations to mitigate unequal evaluation. [#MedStudentTwitter](#) [#MedEdChat](#)



Hanna Erickson, PhD (She/her) @MDPhDToBe13 hours ago

[@MedStudentChat](#) A1: I think they're necessary but not sufficient. Need to not only recruit but also make sure the environment is inclusive. [#MedStudentChat](#) [#MedEdChat](#)



MedEd Chat @MedEdChat13 hours ago

[#mededchat](#)



MedEd Chat @MedEdChat13 hours ago

[#mededchat](#)



Briana Ruiz Christophers @BriChristophers13 hours ago

[@BrushCedar](#) [@MedStudentChat](#) This is good to know as we all work to design/adapt interventions. [#MedStudentChat](#) [#MedEdChat](#)



Zarin Rahman @ZarinRahman13 hours ago

[@MedStudentChat](#) A2: Faculty development is huge, but changing mindsets is hard/futile. One suggestion I've heard is incorporating 3rd party reviewer who comments on their growth throughout the yr regardless of performance and weight that heavily in the final eval. [#MedStudentChat](#) [#MedEdChat](#)



Hanna Erickson, PhD (She/her) @MDPhDToBe13 hours ago

[@MedStudentChat](#) A1: I also worry if this in a way this further disadvantages those in underrepresented groups who don't have the chance to participate in a pipeline program. At least one program I know of requires you apply as a freshman. What about older students? [#MedStudentChat](#) [#MedEdChat](#)



Kristina Dzara, PhD, MMSc @KristinaDzara13 hours ago

RT [@SSawning](#): A1: This report from [@AAMCtoday](#) in 2016 shows decline of black males in medicine. Seems it is clear from this report that dif...



Patrick D. Herron @pdherron13 hours ago

RT [@MedStudentChat](#): Q2. Research shows that narrative evaluations of BIPOC medical students use less positive descriptors and apply differe...



Wendelyn Oslock (she/her) [@WendelynOslock13 hours ago](#)

RT [@MedStudentChat](#): Q2. Research shows that narrative evaluations of BIPOC medical students use less positive descriptors and apply differe...



Rory Merritt, MD MEHP [@rorymerrittmd13 hours ago](#)

[@NNkinsi](#) [@MedStudentChat](#) A1: I sincerely hope pipeline programs can be expanded, centered on antiracist principles to diversify the physician workforce especially for BIPOC [#equity](#). These programs need resources and \$\$\$ to make them successful [#MedStudentChat](#) [#MedEdChat](#)



MedStudentChat [@MedStudentChat13 hours ago](#)

RT [@SSawning](#): A1: This report from [@AAMCtoday](#) in 2016 shows decline of black males in medicine. Seems it is clear from this report that dif...



MedEd Chat [@MedEdChat13 hours ago](#)

RT Tamorah Lewis, MD, PhD [@TamorahLewisMD](#) A1. This program is very novel and very successful. 25 black students in their incoming Med school class - by far most in history. These types of "radical" programs are needed for change. [#medstudentchat](#) [#mededchat](#)



Ming-Ka Chan, MD, MHPE [#BlackLivesMatter](#) [@MKChan](#) [RCPSC13 hours ago](#)

[@MDPhDToBe](#) [@MedStudentChat](#) A1 Agree - we don't pay enough attention to retention @ school or in academia in general and we don't frame as thriving rather than surviving. [#MedStudentTwitter](#) [#MedStudentChat](#) [#MedEdChat](#) [#MedTwitterChat](#)



Center for a Diverse Healthcare Workforce [@UCDavisCDHW13 hours ago](#)

A2: one way is to increase BIPOC faculty, staff, and evaluators who are participating in faculty development especially around diversity, inclusion, and unconscious bias trainings. [#MedStudentChat](#) [#MedEdChat](#) [#HealthcareDiversity](#)



Naomi Tweyo Nkinsi [@NNkinsi13 hours ago](#)

[@MedStudentChat](#) A2: Here is an interesting study from [@UWMedicine](#) about racial disparities in clinical grading. It's clear that this is an ongoing issue. <https://t.co/co7IIOWR3g> [#medstudentchat](#) [#mededchat](#)



Center for a Diverse Healthcare Workforce [@UCDavisCDHW13 hours ago](#)

RT [@NNkinsi](#): [@MedStudentChat](#) A2: Here is an interesting study from [@UWMedicine](#) about racial disparities in clinical grading. It's clear tha...



Rory Merritt, MD MEHP [@rorymerrittmd13 hours ago](#)

[@NNkinsi](#) [@MedStudentChat](#) [@UCDavisCDHW](#) [@UWMedicine](#) [@drwooda](#) There is not one. We used data from the [@AAMC](#) Graduation Questionnaire which costs LOTS of money to access. Making this data free could be argued is in line with antiracist principles if used to advance racial equity. [#MedStudentTwitter](#) [#MedEdChat](#)



MedEd Chat [@MedEdChat13 hours ago](#)

RT [@NNkinsi](#): [@MedStudentChat](#) A2: Here is an interesting study from [@UWMedicine](#) about racial disparities in clinical grading. It's clear tha...



Naomi Tweyo Nkinsi [@NNkinsi13 hours ago](#)

[@akila_pai](#) [@MedStudentChat](#) I also worry that anti-racism training will be a one-off occurrence and not something that is required on an ongoing basis. It's not enough to be exposed to these ideas only once. The schools have to really commit to re-training educators. [#medstudentchat](#) [#mededchat](#)



@mmteacherdoc [@mmteacherdoc13 hours ago](#)

RT [@NNkinsi](#): [@MedStudentChat](#) A2: Here is an interesting study from [@UWMedicine](#) about racial disparities in clinical grading. It's clear tha...



Cedar Brush [@BrushCedar13 hours ago](#)

[@mcsnyder03](#) [@MedStudentChat](#) Perhaps this is just my own cynicism, but I've found trainings don't work, and institutions don't hold people accountable [#MedStudentChat](#) [#MedEdChat](#)



Patrick D. Herron [@pdherron13 hours ago](#)

RT [@NNkinsi](#): [@MedStudentChat](#) A2: Here is an interesting study from [@UWMedicine](#) about racial disparities in clinical grading. It's clear tha...



Cedar Brush [@BrushCedar13 hours ago](#)

RT [@NNkinsi](#): [@MedStudentChat](#) A2: Here is an interesting study from [@UWMedicine](#) about racial disparities in clinical grading. It's clear tha...



Liz Bonachea [@MDmoneyhealth13 hours ago](#)

[@MedStudentChat](#) Q2 Faculty development for sure. I struggle with the checkbox forms but see the idea. Honestly I put almost no weight on LOR for this reason. If it isn't from someone I know or full of red flags it doesn't add much [#MedStudentChat](#) [#MedEdChat](#)



Briana Ruiz Christophers [@BriChristophers13 hours ago](#)

[@MedStudentChat](#) A1. I want to hype up [@GatewaysLab](#) sponsored by [@TriIMDPhD](#) that has been actively supporting students interested in physician-scientist careers. It shows in their outcomes and in the commitment of the MD-PhD students who get involved in the program. [#MedStudentChat](#) [#MedEdChat](#)



Gary Beck Dallaghan [@GLBDallaghan12 hours ago](#)

[@NNkinsi](#) [@akila_pai](#) [@MedStudentChat](#) The bigger issue is the fact that the people who need the training inevitably don't attend....and there are no consequences. [#mededchat](#) [#MedStudentChat](#)



Susan Sawning-she/her/hers [@SSawning12 hours ago](#)

[@PedsOtoDoc](#) A2: Yes, definitely specific feedback. The same way that we use coaching to provide feedback to faculty on their teaching, we could use a similar model to provide feedback on how they evaluate. Faculty dev alone will solve all. Need other solutions too. [#MedStudentChat](#) [#MedEdChat](#)



Naomi Tweyo Nkinsi [@NNkinsi12 hours ago](#)

[@MedStudentChat](#) A2: I'd love to see you all discuss "professionalism" scoring in these evaluations. To me this always feels like a dog whistle. Interested in your thoughts! [#medstudentchat](#) [#mededchat](#)



@mmteacherdoc [@mmteacherdoc12 hours ago](#)

[@MedStudentChat](#) A2 I wonder if it would help to give feedback to faculty pointing out evidence that they've used these terms. Works for QI. [#MedEdChat](#) [#MedStudentChat](#)



Teresa Hartman [@thartman2u12 hours ago](#)

[@SSawning](#) [@GLBDallaghan](#) [@AAMCtoday](#) Late to the chat from Omaha- I am too old - getting sadder that [#Diversity](#) programs aren't solving the endemic problems <https://t.co/yIkupWnxoC> - [#mededchat](#)



Center for a Diverse Healthcare Workforce [@UCDavisCDHW12 hours ago](#)

[@BrushCedar](#) [@mcsnyder03](#) [@MedStudentChat](#) Trainings seem like an easy answer for large institutions, but it has its limitations. How much can we change a person's views? One way is to increase the training, retaining, and hiring BIPOC who hold [#antiracist](#) values. [#MedStudentChat](#) [#MedEdChat](#) [#HealthcareDiversity](#)



Ming-Ka Chan, MD, MHPE [#BlackLivesMatter](#) [@MKChan](#) [RCPSC12 hours ago](#)

[@mcsnyder03](#) [@MedStudentChat](#) A2 [#Implicitbias](#) training would be critical for all teachers. I might also add feedback skills. I wonder about using a coaching model when thinking about assessment of learning [#MedStudentChat](#) [#MedTwitter](#) [#MedEdChat](#)



Susan Sawning-she/her/hers [@SSawning12 hours ago](#)

[@PedsOtoDoc](#) *will not solve all, need other solutions too! [#MedStudentChat](#) [#MedEdChat](#)



MedEd Chat @MedEdChat12 hours ago

RT Tamorah Lewis, MD, PhD @TamorahLewisMD Replying to @NNkinsi @akila_pai @MedStudentChat I wonder if a short "bias interrupter" exercise that had to be completed every time an evaluation was to be completed could help? #MedStudentChat #MedEdChat



rheuminate @londyloo12 hours ago

RT @MedStudentChat: Q2. Research shows that narrative evaluations of BIPOC medical students use less positive descriptors and apply differe...



Ming-Ka Chan, MD, MHPE #BlackLivesMatter @MKChan RCPSC12 hours ago

RT @UCDavisCDHW: A2: one way is to increase BIPOC faculty, staff, and evaluators who are participating in faculty development especially a...



Naomi Tweyo Nkinsi @NNkinsi12 hours ago

@ZarinRahman @MedStudentChat Interesting! But those third party evaluators will also have bias in how they view students, especially if they only get a small period of time to see them work. I'm not sure if this solves the problem or actually just adds more. #medstudentchat #mededchat



MedStudentChat @MedStudentChat12 hours ago

Q3. How can undergraduate medical education (UME) and graduate medical education (GME) work to undo myths and harms perpetuated by race-based medicine? What might this look like by specialty? #MedStudentChat #MedEdChat <https://t.co/6liq8NO8Lk>



Ming-Ka Chan, MD, MHPE #BlackLivesMatter @MKChan RCPSC12 hours ago

RT @NNkinsi: @MedStudentChat A2: Here is an interesting study from @UWMedicine about racial disparities in clinical grading. It's clear tha...



Briana Ruiz Christophers @BriChristophers12 hours ago

We had conversations about this with our admin just today. Evaluators focus more on detailed knowledge rather than if students are actually growing into the role of physician. There's plenty of time in the next years of training to solidify knowledge... #MedStudentChat #MedEdChat



Cedar Brush @BrushCedar12 hours ago

@NNkinsi @MedStudentChat Remove the word "professionalism" entirely. It's inherently biased. If people insist on keeping then at least replace with specific categories like "is the student racist?" 😊 #MedStudentChat #MedEdChat



Susan Sawning-she/her/hers @SSawning12 hours ago
[@MKChan_RCPSC](#) [@mcsnyder03](#) [@MedStudentChat](#) Love this! I just tweeted the same. I like the coaching model for this. [#MedStudentChat](#) [#MedEdChat](#)



Liz Bonachea @MDmoneyhealth12 hours ago
[@NNkinsi](#) [@MedStudentChat](#) q2. I think one of the huge issues in checkbox forms and evals in general is vague terminology- ask me about specific behaviors and I'll give you a useful answer. I did a credentialing form today that asked me to rate the candidate's "appearance"... [#mededchat](#) [#MedStudentChat](#)



Susan Sawning-she/her/hers @SSawning12 hours ago
RT [@NNkinsi](#): [@MedStudentChat](#) A2: Here is an interesting study from [@UWMedicine](#) about racial disparities in clinical grading. It's clear tha...



Jorge Ganem, MD @jfganem12 hours ago
RT [@NNkinsi](#): [@MedStudentChat](#) A2: Here is an interesting study from [@UWMedicine](#) about racial disparities in clinical grading. It's clear tha...



Gary Beck Dallaghan @GLBDallaghan12 hours ago
[@MDmoneyhealth](#) [@NNkinsi](#) [@MedStudentChat](#) Seriously?!?
Appearance? [#MedEdChat](#) [#MedStudentChat](#)



Briana Ruiz Christophers @BriChristophers12 hours ago
[@mmteacherdoc](#) [@MedStudentChat](#) Interesting thought! I wonder if this could also be applied to residents who sometimes are the evaluators for med students... [#MedStudentChat](#) [#MedEdChat](#)



Patrick D. Herron @pdherron12 hours ago
[@NNkinsi](#) [@MedStudentChat](#) One of my former students shared this with me / really resonated with the problems of "professionalism" I struggle with in [#meded](#) [#mededchat](#) [#MedStudentChat](#) from: <https://t.co/9IOTuMOOn9> <https://t.co/xYu0pNev ez>



Cedar Brush @BrushCedar12 hours ago
[@MedStudentChat](#) A3: I'd actually like to see a breakdown of "evidence-based practices" where old studies are analyzed to see if they hold to current standards of validity (most don't) and to talk about racist experimentation that happened when teaching subjects [#MedStudentChat](#) [#MedEdChat](#)



Ariella Coler-Reilly @AriellaStudies12 hours ago

[@MedStudentChat](#) [#MedStudentChat](#) [#MedEdChat](#) A2 Agree with excellent earlier comments. Also want to add: hold faculty responsible for giving constructive criticism + providing *the opportunity* to improve accordingly --> THEN evaluate *specifically* how effectively the feedback was incorporated



Liz Bonachea @MDmoneyhealth12 hours ago

[@MedStudentChat](#) Q3 I don't get many students in the NICU but I love an exercise called myth busters- tell me something people have taught you about the NICU and we look up the evidence together. My fellows are taking on "black ELBWs have a survival advantage" tomorrow [#mededchat](#) [#medstudentchat](#)



Grace Oliver, MD @GraceOliverMD12 hours ago

[@MedStudentChat](#) A3 Looking at some interactions I've had, there's two levels of trying to at least PREVENT not undo harms of race-based medicine: setting a good, anti-racist foundation in medical education and then interrupting what's still out there [#MedStudentChat](#) [#MedEdChat](#) 1/



Gary Beck Dallaghan @GLBDallaghan12 hours ago

[@BrushCedar](#) [@MedStudentChat](#) I agree. We have some [#medstudents](#) studying some of our test questions and cases used for teaching to identify bias. It's going to take some time...but worth the effort. [#MedEdChat](#) [#MedStudentChat](#)



Rory Merritt, MD MEHP @rorymerrittmd12 hours ago

[@MedStudentChat](#) A2: Agree with [@NNkinsi](#) about professionalism issues as a dog-whistle. Antiracist policy suggestion for every medical school. "Professionalism" warnings and remediations should be public at least to the student and faculty body if not nationally. [#MedStudentChat](#) [#MedEdchat](#)



Cedar Brush @BrushCedar12 hours ago

RT [@pdherron](#): [@NNkinsi](#) [@MedStudentChat](#) One of my former students shared this with me / really resonated with the problems of "professionali..."



Ming-Ka Chan, MD, MHPE [#BlackLivesMatter](#) @MKChan RCPSC12 hours ago

[@mmteacherdoc](#) [@MedStudentChat](#) A2 Group feedback reports with most common or outlier comments flagged anonymously for all to learn along with personalized report can be beneficial [#MedStudentChat](#) [#MedEdChat](#)



MedEd Chat [@MedEdChat12 hours ago](#)
[#MedEdChat](#)



Grace Oliver, MD [@GraceOliverMD12 hours ago](#)
[@MedStudentChat](#) A3C Example of foundation: if there is no race-based estimated glomerular filtration rate in the lab report, we set the new standard of not using it and can easily go further by discussing its racist origins. [#MedStudentChat](#) [#MedEdChat](#) 2/



Briana Ruiz Christophers [@BriChristophers12 hours ago](#)
Yes, important point: how do we craft metrics and questions that encourage evaluators to think more broadly than vague terms like "extensive clinical knowledge" — what does this mean for someone on their first clerkship versus another on their final? [#MedStudentChat](#) [#MedEdChat](#)



Zarin Rahman [@ZarinIRahman12 hours ago](#)
[@MedStudentChat](#) A3: Begin by recognizing & researching its harms/pitfalls/issues, and opening up forums for discussion whenever presented in educational settings. Then, it is important to get rid of this content in testing environments (Step, exams, etc.) [#MedStudentChat](#) [#MedEdChat](#)



Grace Oliver, MD [@GraceOliverMD12 hours ago](#)
[@MedStudentChat](#) A3C Example of foundation: removing racial descriptors from standardized tests as "buzzwords" so students don't spend literally years building the mental habit of associating race as only or even primarily occurring in a specific race [#MedStudentChat](#) [#MedEdChat](#)



@mmteacherdoc [@mmteacherdoc12 hours ago](#)
[@MDmoneyhealth](#) [@MedStudentChat](#) We're doing a "science says" series on COVID-19 [@MedicalCollege](#). Could do a similar set for racism & health or med Ed. [#mededchat](#) [#medstudentchat](#). <https://t.co/yUYsHvJsTL>



Grace Oliver, MD [@GraceOliverMD12 hours ago](#)
[@MedStudentChat](#) A3C Example of foundation: removing racial descriptors from standardized tests as "buzzwords" so students don't spend literally years building the mental habit of associating race as only or even primarily occurring in a specific race [#MedStudentChat](#) [#MedEdChat](#) 3/



Briana Ruiz Christophers [@BriChristophers12 hours ago](#)
[@MedStudentChat](#) A3. Shameless plug for the paper [@NNkinsi](#), [@lizstein](#), me + colleagues published recently in [@AcadMedJournal](#) from our perspective as medical students: <https://t.co/maDpW8ljwg> [#MedStudentChat](#) [#MedEdChat](#)



Ian Pereira @IanJPereira12 hours ago

[@NNkinsi](#) [@MedStudentChat](#) Oi... professionalism, like many competencies defined by a few, can be wielded as a carrot or stick. Personally, I would like to see more patients & the public evaluate, and define, such measures. [#MedEdChat](#)



Grace Oliver, MD @GraceOliverMD12 hours ago

[@MedStudentChat](#) A3C Ex of interruption: re: a Black patient's low Vitamin D level, an attending told me (exact quote) "they have different bones, that number is meaningless here." I disagreed firmly in front of the entire team and treated the patient appropriately. [#MedStudentChat](#) [#MedEdChat](#) 4/



@mmteacherdoc @mmteacherdoc12 hours ago

A3- we love journal clubs - with discussion on how does this article apply to my practice? [#MedEdChat](#) [#MedStudentChat](#)



MedStudentChat @MedStudentChat12 hours ago

Q4. What are some ideas for how to transform hiring, retention and promotion to recognize and reward the work of BIPOC in medical education? [#MedStudentChat](#) [#MedEdChat](#) <https://t.co/a34iDzflx5>



Susan Sawning-she/her/hers @SSawning12 hours ago

[@ChristleNwora](#) [@MedStudentChat](#) [@ChristleNwora](#) you had some amazing recommendations for medical schools/admins a few weeks ago that I retweeted and saved. Would love to have you retweet here w/ the hashtags so they will be included in the [#MedStudentChat](#) and [#MedEdChat](#) transcripts. They were excellent!



Tamorah Lewis, MD, PhD @TamorahLewisMD12 hours ago

RT [@BriChristophers](#): [@MedStudentChat](#) A3. Shameless plug for the paper [@NNkinsi](#), [@lizstein](#), me + colleagues published recently in [@AcadMedJ](#)...



Grace Oliver, MD @GraceOliverMD12 hours ago

[@MedStudentChat](#) A3C Ex both: The trope of calcium-channel blockers being used as first-line for hypertension in Black patients, but thiazide diuretics in everybody else. Don't teach it, don't encourage it. [#MedStudentChat](#) [#MedEdChat](#) 5/5



Ming-Ka Chan, MD, MHPE [#BlackLivesMatter](#) @MKChan_RCPSC12 hours ago

[@GraceOliverMD](#) [@MedStudentChat](#) A3 So many of our tools and norms across the disciplines are based on a sample of patients who do not represent [#BIPOC](#). We need to be explicit about this bias with our patients & learners and get the data to amend the tools [#MedEdChat](#) [#MedStudentChat](#)



Alliance4ClinEd @Alliance4ClinEd 12 hours ago

RT @MKChan_RCPSC: @GraceOliverMD @MedStudentChat A3 So many of our tools and norms across the disciplines are based on a sample of patients...



Hanna Erickson, PhD (She/her) @MDPhDToBe 12 hours ago

@MedStudentChat A2: I don't have a great answer for this, but I think at least faculty need ongoing faculty training in anti-racism and providing feedback could help? Definitely can't be a single training. #MedStudentTwitter #MedEdChat



Naomi Tweyo Nkinsi @NNkinsi 12 hours ago

@ZarinRahman @MedStudentChat This also requires training of faculty in how to respond to critiques from students. This is often where the idea of threatening "professionalism" concerns comes in, in my experience. #medstudentchat #mededchat



Ming-Ka Chan, MD, MHPE #BlackLivesMatter @MKChan_RCPSC 12 hours ago

RT @BriChristophers: @MedStudentChat A3. Shameless plug for the paper @NNkinsi, @lizstein, me + colleagues published recently in @AcadMedJ...



Meredith Greer @EmmGeezee 12 hours ago

@MedStudentChat Don't just take what you learned as is. Stop and think about it. Research it. And teach it to your students better than it was taught to you. #medstudentchat #mededchat



Ming-Ka Chan, MD, MHPE #BlackLivesMatter @MKChan_RCPSC 12 hours ago

RT @mmteacherdoc: A3- we love journal clubs - with discussion on how does this article apply to my practice? #MedEdChat #MedStudentChat



Cedar Brush @BrushCedar 12 hours ago

@MedStudentChat A3: I would also like to see actual POC community members coming to teach what lectures they can. Schools need to remove necessity that educators have to have certain degrees. I jumped through hoops to get the school to let... #MedStudentChat #MedEdChat



Mark Ryan @RichmondDoc 12 hours ago

#MedStudentChat #MedEdChat -- caught a thread of the discussion. Sharing the letter @VCU SoM students put together to call on the institution to change its curriculum to address systemic racism and our school's historical role in it: <https://t.co/yWan0vYmar> A model for others?



Center for a Diverse Healthcare Workforce @UCDavisCDHW 12 hours ago

[@MedStudentChat](#) A4: Retention rates are higher when BIPOC are properly compensated, represented, and offered growth opportunities. Additionally, not only do our medical education spaces need to be diverse, but the environment must be inclusive as well. [#MedEdChat](#) [#MedStudentTwitter](#)



Gary Beck Dallaghan @GLBDallaghan 12 hours ago

A4 I think the retention aspect of this question centers around creating a culture of inclusivity on campus. It's not just about diversity....but that is always the focus. [#mededchat](#) [#MedStudentChat](#)



Cedar Brush @BrushCedar 12 hours ago

[@MedStudentChat](#) an indigenous woman come speak on violence against indigenous women when the lecture my year was highly insufficient. This shouldn't have been that hard. [#MedStudentChat](#) [#MedEdChat](#)



Liz Bonachea @MDmoneyhealth 12 hours ago

[@MedStudentChat](#) Q4 increase diversity and IB training for promotion and recruiting committees, get away from strict numeric metrics for pubs/grants, URM mentors, share the data (ex. Women apply for fewer NIH grants but are equally successful). Culture that keeps talent [#MedStudentChat](#) [#MedEdChat](#)



Susan Sawning-she/her/hers @SSawning 12 hours ago

[@MedStudentChat](#) Q4: We have be sure that all faculty and admin are recognizing this work to be important. For too long, diversity, inclusion, and anti-racism curriculum development and scholarship have been seen as side hobbies in [#MedEd](#). [#MedStudentChat](#) [#MedEdChat](#)



Cedar Brush @BrushCedar 12 hours ago

[@MedStudentChat](#) All lectures regarding marginalized communities need to be taught by people from that community period. [#MedStudentChat](#) [#MedEdChat](#)



Hanna Erickson, PhD (She/her) @MDPhDToBe 12 hours ago

[@MedStudentChat](#) A3. Even if these myths aren't taught in the curriculum, they're going to show up in the literature. I would love to see medical school courses tackle these myths head-on and explain to students why they're wrong. [#MedStudentChat](#) [#MedEdChat](#)



MedEd Chat @MedEdChat 12 hours ago

RT [@MDPhDToBe](#): [@MedStudentChat](#) A3. Even if these myths aren't taught in the curriculum, they're going to show up in the literature. I would...



Susan Sawning-she/her/hers @SSawning12 hours ago

@MedStudentChat A4: We have to be sure our students are getting recognition either through class credit, awards, funding, distinction/scholarly tracks, publications. We cannot ask students to be doing this work only as a personal interest. #MedStudentChat #MedEdChat



Zarin Rahman @ZarinIRahman12 hours ago

@MedStudentChat *Often cited as biggest reason faculty of color leave. #MedEdChat



Patrick D. Herron @pdherron12 hours ago

@BrushCedar @MedStudentChat Trusting the expert in the room is often the person with lived experience and not the one with the most degrees #mededchat #MedStudentChat



Ming-Ka Chan, MD, MHPE #BlackLivesMatter @MKChan RCPSC12 hours ago

@MedStudentChat Q4 Bias training for all involved and diverse representation at these tables. Contextual #LeadershipDevelopment @ all stages of career. Mentorship, coaching & sponsorship. Awards that reflect the richness & power of their work #MedEdChat #MedStudentChat



Rory Merritt, MD MEHP @rorymerrittmd12 hours ago

@EmmGeezee @BriChristophers @MedStudentChat @NNkinsi @lizstein @AcadMedJournal A3. @BriChristophers Can I use your (cited!) paper for faculty development purposes? #MedStudentChat #MedEdChat



Ming-Ka Chan, MD, MHPE #BlackLivesMatter @MKChan RCPSC12 hours ago

RT @RichmondDoc: #MedStudentChat #MedEdChat -- caught a thread of the discussion. Sharing the letter @VCU SoM students put together to call...



(((MartinWinckler))) utilise le féminin générique @MartinWinckler12 hours ago

RT @MedStudentChat: Q3. How can undergraduate medical education (UME) and graduate medical education (GME) work to undo myths and harms per...



Meredith Greer @EmmGeezee12 hours ago

@NNkinsi @ZarinIRahman @MedStudentChat I am all here for the critiques. Honestly, if it weren't for my students, I never would have thought twice about our PFT normal values. They asked, I read, we figured out the answer. We can all learn from each other & we do better together! #medstudentchat #mededchat



Ming-Ka Chan, MD, MHPE #BlackLivesMatter @MKChan RCPSC12 hours ago
RT @SSawning: @MedStudentChat Q4: We have be sure that all faculty and admin are recognizing this work to be important. For too long, diver...



MedEd Chat @MedEdChat12 hours ago
[#MedEdChat](#)



Briana Ruiz Christophers @BriChristophers12 hours ago
[@MedStudentChat](#) A4. I hope that committees will look more broadly at than metrics like papers and awards and ask folks concretely about people they've mentored, programs/projects/moments they've created, new conversations they've brought to their dept, etc [#MedStudentChat](#) [#MedEdChat](#)



MedEd Chat @MedEdChat12 hours ago
[#MedEdChat](#)



MedEd Chat @MedEdChat12 hours ago
[#MedEdChat](#)



Cedar Brush @BrushCedar12 hours ago
[@you2nice2me](#) [@MedStudentChat](#) I'd also add to this, to please not have these task forces be all white students. The burden shouldn't be forced on marginalized communities, but I'm also not down with things repeating themselves. Any groups working on this need to be diverse [#MedStudentChat](#) [#MedEdChat](#)



Hanna Erickson, PhD (She/her) @MDPhDToBe12 hours ago
[@MedStudentChat](#) A4: There needs to be a re-evaluation of what kind of work is valuable. Papers and grants are important, but other things are important too. Also, there needs to be diversity in candidate pools AND in the committees assessing those candidates. [#MedStudentChat](#) [#MedEdChat](#)



Ming-Ka Chan, MD, MHPE #BlackLivesMatter @MKChan RCPSC12 hours ago
Thread relevant to [@MedStudentChat](#) joint [#MedEdChat](#) [#MedStudentChat](#) on [#Antiracism](#)



@mmteacherdoc @mmteacherdoc12 hours ago
RT @MDPhDToBe: @MedStudentChat A3. Even if these myths aren't taught in the curriculum, they're going to show up in the literature. I would...



Briana Ruiz Christophers @BriChristophers12 hours ago

This. Students doing work that others get paid for when they are paying to go to that institution is inequitable on so many levels. [#MedStudentChat](#) [#MedEdChat](#) <https://t.co/BxOEaRECwH>



Naomi Tweyo Nkinsi @NNkinsi12 hours ago

[@PedsOtoDoc](#) [@MedStudentChat](#) [@CamaraJones](#) There is no moving forward without acknowledging the harm that has been done to past and present BIPOC students. To do otherwise is to gaslight them. [#medstudentchat](#) [#mededchat](#)



Briana Ruiz Christophers @BriChristophers12 hours ago

[@PedsOtoDoc](#) [@MedStudentChat](#) I think people want to have an objective "checklist" (which I understand) but then it puts blinders in place so you can't see everything else that person has done with their time and energy [#MedStudentChat](#) [#MedEdChat](#)



Naomi Tweyo Nkinsi @NNkinsi12 hours ago

[@EmmGeezee](#) [@ZarinRahman](#) [@MedStudentChat](#) Unfortunately that is not an attitude shared by all educators :([#medstudentchat](#) [#mededchat](#)



Ming-Ka Chan, MD, MHPE [#BlackLivesMatter](#) @MKChan RCPSC12 hours ago

Another thread relevant to [@MedStudentChat](#) joint [#MededChat](#) [#MedStudentChat](#) on [#Antiracism](#)



Naomi Tweyo Nkinsi @NNkinsi12 hours ago

[@MedStudentChat](#) [#medstudentchat](#) [#mededchat](#)



Briana Ruiz Christophers @BriChristophers12 hours ago

[@MKChan](#) [RCPSC](#) [@MedStudentChat](#) Well done! An example of how students can put together clear, compelling ideas in such a simple to understand way. Meanwhile consultants get paid how much money to come up with half of these ideas 🙄 [#MedStudentChat](#) [#MedEdChat](#)



Susan Sawning-she/her/hers @SSawning12 hours ago

I absolutely believe this. We have to acknowledge how our institutions and how we personally have contributed to and upheld systems that harm. Maybe using a restorative justice framework? We cannot move forward without this. [#MedStudentChat](#) [#MedEdChat](#)



Ming-Ka Chan, MD, MHPE [#BlackLivesMatter](#) @MKChan RCPSC12 hours ago

[@UCDavisCDHW](#) [@MedStudentChat](#) The pipeline work needs to start in infancy - we start the work with getting parents to believe in the wonderful potential of their children & keep fostering that from nursery school & onwards [#MedEdChat](#) [#MedStudentChat](#) [#Antiracism](#)



Michelle Caunca @michelle_caunca12 hours ago

RT @MDPhDToBe: @MedStudentChat A4: There needs to be a re-evaluation of what kind of work is valuable. Papers and grants are important, but...



Molly Snyder @mcsnyder0312 hours ago

RT @BriChristophers: @MedStudentChat A4. I hope that committees will look more broadly at than metrics like papers and awards and ask folks...



Cedar Brush @BrushCedar12 hours ago

@BriChristophers @MKChan RCPSC @MedStudentChat LOL I felt panicked scrolling through this. Please, ancestors, guide me and help me use technology! #MedStudentChat #MedEdChat



Ming-Ka Chan, MD, MHPE #BlackLivesMatter @MKChan RCPSC12 hours ago

RT @SSawning: I absolutely believe this. We have to acknowledge how our institutions and how we personally have contributed to and upheld s...



@mmteacherdoc @mmteacherdoc12 hours ago

RT @NNkinsi: @PedsOtoDoc @MedStudentChat @CamaraJones There is no moving forward without acknowledging the harm that has been done to past...



Susan Sawning-she/her/hers @SSawning11 hours ago

#MedStudentChat #MedEdChat -- excellent thread w/ references to discuss with your #MedEd leaders.



MedEdBot @MedEdBot11 hours ago

RT @SSawning: #MedStudentChat #MedEdChat -- excellent thread w/ references to discuss with your #MedEd leaders. <https://t.co/u49rZgQNQQ>



Harry (#BLM who disagrees??) Paul @ HarryPaul 10 hours ago

RT @MedStudentChat: Q2. Research shows that narrative evaluations of BIPOC medical students use less positive descriptors and apply differe...



Expressions Training @LeaderRepeater10 hours ago

RT @MKChan RCPSC: @MedStudentChat Q4 Bias training for all involved and diverse representation at these tables. Contextual #LeadershipDevel...



Alexandra Hernandez @DrAlexandraH7 hours ago

RT @NNkinsi: @MedStudentChat A2: I'd love to see you all discuss "professionalism" scoring in these evaluations. To me this always feels li...



AnnalsAfricanSurgery @AfricanSurgery7 hours ago

The Kenya Orthopaedic Association (KOA) @KenyaOrthopaed1 invites you to a #zoom #meeting tomorrow, June 18, 2020 from 6:30-7:30 PM EAT. Use this link <https://t.co/7x7K9KeolQ> to register today. Don't be left out! #orthotwitter #MedEdChat #MedTwitter #surgEd <https://t.co/uV0iUg7CLS>



Karuga™ @harrisonthuo6 hours ago

#COVID19 #Kenya #Kenyan #orthopaedic



AnnalsAfricanSurgery @AfricanSurgery6 hours ago

@KenyaMedics KMA @WomenSurgAfr @OrthoToday @OrthoEvidence @MedscapeOrtho don't miss!



MerciehDaniels. @merciehdaniels6 hours ago

RT @AfricanSurgery: The Kenya Orthopaedic Association (KOA) @KenyaOrthopaed1 invites you to a #zoom #meeting tomorrow, June 18, 2020 from...



Daisieh @daisydaniels1093 hours ago

RT @AfricanSurgery: The Kenya Orthopaedic Association (KOA) @KenyaOrthopaed1 invites you to a #zoom #meeting tomorrow, June 18, 2020 from...



Tiffany Love, PhD @TiffanyLovePhD2 hours ago

RT @KristinaDzara: Kristina here, PhD Medical Educator in Boston. Checking in for the joint #MedEdChat / #MedStudentChat to support this...



Dr Jo Szram ✨ @lungsatwork2 hours ago

RT @KristinaDzara: Kristina here, PhD Medical Educator in Boston. Checking in for the joint #MedEdChat / #MedStudentChat to support this...



MedEd Chat @MedEdChat2 hours ago

Part 2 of the #MedEdChat and #MedStudentChat starts in 30 minutes! <https://t.co/zEq4f1IZpX>



Susan Sawning-she/her/hers @SSawningan [hour ago](#)

RT @MedEdChat: Part 2 of the [#MedEdChat](#) and [#MedStudentChat](#) starts in 30 minutes! <https://t.co/zEq4f1IZpX>



Stephanie Starr, MD @StephRStarran [hour ago](#)

RT @MedEdChat: We're happy to be participating with you to continue the conversation tomorrow morning [#mededchat](#) [#MedStudentChat](#)



MedEd Chat @MedEdChatan [hour ago](#)

Welcome to this special [#medstudentchat](#) & [#mededchat](#) (US) I am your moderator for the next hour [@alliance4clined](#) [#meded](#)



MedEd Chat @MedEdChatan [hour ago](#)

The [#mededchat](#) / [#medstudentchat](#) topic & questions will be announced in a moment...for now, please introduce yourselves [#meded](#)



MedEd Chat @MedEdChatan [hour ago](#)

If you are tuning in to the [#mededchat](#), remember to use the [#mededchat](#) & [#medstudentchat](#) hashtags ...and try to answer with the Topic numbers (T1, T2, T3)



Gary Beck Dallaghan @GLBDallaghanan [hour ago](#)

Gary here in NC! [#MedEdChat](#) [#MedStudentChat](#)



MedEd Chat @MedEdChatan [hour ago](#)

We will assume that all of your tweets during [#mededchat](#) / [#medstudentchat](#) are your own during this hour unless otherwise stated [#meded](#)



MedEd Chat @MedEdChatan [hour ago](#)

T1 about to come up in a few moments. Please remember to use BOTH [#mededchat](#) and [#medstudentchat](#) in your responses!



MedEd Chat @MedEdChatan [hour ago](#)

Topic 1: Are pipeline programs to encourage underrepresented groups to pursue medicine working and are they enough? [#medstudentchat](#) [#mededchat](#)



Susan Sawning-she/her/hers @SSawningan hour ago

@MedEdChat Susan here in Louisville KY. Last night's chat with #MedStudentChat was fabulous. Thanks to @NNkinsi and @BriChristophers for moderating. #MedEdChat



Gary Beck Dallaghan @GLBDallaghanan hour ago

T1 For schools struggling for more diversity, they have helped. Can more be done? Most assuredly. #mededchat #MedStudentChat



Center for a Diverse Healthcare Workforce @UCDavisCDHWan hour ago

T1: Pathway programs are necessary but currently insufficient. Most are small, underfunded, with huge applicant pools & limited spots. We need more programs to support underrepresented students from K-16 with continuous mentorship. #MedStudentChat #MedEdChat #HealthcareDiversity



Gary Beck Dallaghan @GLBDallaghanan hour ago

@UCDavisCDHW T1 My question is how do we leverage this? It's quite obvious there is a need, but there doesn't seem to be the political will to provide more resources. #mededchat #medstudentchat



Susan Sawning-she/her/hers @SSawningan hour ago

T1: Excellent program for k-12 students that @NNkinsi outlines below. #MedEdChat #MedStudentChat



MedEd Chat @MedEdChatan hour ago

RT @SSawning: T1: Excellent program for k-12 students that @NNkinsi outlines below. #MedEdChat #MedStudentChat <https://t.co/V4aWlts4WQ>



Susan Sawning-she/her/hers @SSawningan hour ago

@GLBDallaghan @UCDavisCDHW T1: Perhaps a stronger mandate from LCME? Currently the element is quite broad IMO. #MedEdChat #MedStudentChat



MedEdBot @MedEdBotan hour ago

RT @MedEdChat: We will assume that all of your tweets during #mededchat / #medstudentchat are your own during this hour unless otherwise st...



Gary Beck Dallaghan @GLBDallaghanan hour ago

@SSawning @UCDavisCDHW T1: True, but what do we do when we get students? There is still a lack of inclusion institutionally. <https://t.co/vkOYr7EqQf> #MedEdChat #MedStudentChat



Susan Sawning-she/her/hers @SSawning43 minutes ago

[@GLBDallaghan](#) [@UCDavisCDHW](#) T1: Elect politicians who believe in funding public education. Various national [#MedEd](#) organizations should lobby for more funding at the k-12 level through HRSA, etc. The funding keeps shrinking. [#MedEdChat](#) [#MedStudentChat](#)



MedEd Chat @MedEdChat42 minutes ago

Topic 2: Research shows that narrative evals of BIPOC medical students use less positive descriptors and apply different standards than is done with majority med students. What changes can be made to evaluation forms to mitigate unequal evaluation? [#medstudentchat](#) [#mededchat](#)



Alliance4ClinEd @Alliance4ClinEd40 minutes ago

T1 Addressing bias in [#medstudent](#) evaluations requires deliberate monitoring of comments. Even with [#facdev](#), those who need it rarely attend. [#mededchat](#) [#medstudentchat](#)



Gary Beck Dallaghan @GLBDallaghan38 minutes ago

T2 I just wrapped up a study with a student looking at gender bias in evaluations. It was quite enlightening....and somewhat disturbing. How to change this is perplexing. [#mededchat](#) [#MedStudentChat](#)



Alliance4ClinEd @Alliance4ClinEd37 minutes ago

T2 It doesn't help that even exam questions incorporate bias <https://t.co/M9plpAYIDv> [#mededchat](#) [#medstudentchat](#)



Susan Sawning-she/her/hers @SSawning36 minutes ago

[@GLBDallaghan](#) [@UCDavisCDHW](#) T1: Need a competency at all [#MedEd](#) schools around anti-racism. Without taking a deep look within and owning that most of our institutions do not foster belongingness and doing the deep work to foster institutional change, things will remain the same. [#MedEdChat](#) [#MedStudentChat](#)



Gary Beck Dallaghan @GLBDallaghan34 minutes ago

[@SSawning](#) [@UCDavisCDHW](#) T1 Which made reviewing this article interesting. I had never considered how communication norms in medicine promote biases <https://t.co/Sjq01tUwm9> [#mededchat](#) [#medstudentchat](#)



Gary Beck Dallaghan @GLBDallaghan33 minutes ago

T1 This just showed up from the great [@Top_Gundersen](#) in my feed and fits perfectly with this discussion for the [#mededchat](#) [#medstudentchat](#)



MedEd Chat @MedEdChat32 minutes ago

Topic 3: How can UME and GME work to undo myths and harms perpetuated by race-based medicine? What might this look like by specialty? [#medstudentchat](#) [#mededchat](#)



Susan Sawning-she/her/hers @SSawning31 minutes ago

T1 T2 T3: This article is a must read for for [#MedEd](#): Adopting an Anti-Racism Public Health Curriculum Competency: The University of Washington Experience (especially box 1) [#MedEdChat](#) [#MedStudentChat](#) <https://t.co/dCP6xlt4ex>



Alliance4ClinEd @Alliance4ClinEd29 minutes ago

T3 Incorporating reflection with open, honest discussions may help. This article reports on using artistic narrative, which could be adapted and used anywhere <https://t.co/Z5T4xXYmvl> [#mededchat](#) [#medstudentchat](#)



MedEd Chat @MedEdChat28 minutes ago

RT @SSawning: T1 T2 T3: This article is a must read for for [#MedEd](#): Adopting an Anti-Racism Public Health Curriculum Competency: The Univer...



Susan Sawning-she/her/hers @SSawning25 minutes ago

T3: I want to highlight Nieblas-Bedolla, @BriChristophers @NNkinsi, Schumann, and @lizstein 's @AcadMedJournal article: Changing How Race Is Portrayed in Medical Education: Recommendations From Medical Students: [#MedEdChat](#) [#MedStudentChat](#) <https://t.co/dILX0XgV3T>



Liz Bonachea @MDmoneyhealth24 minutes ago

T3 We have to foster cultures that promote questioning of myths/stereotypes as well as open dialogue about bias and microaggressions. It takes deliberate practice and safe spaces to develop these skills [#medstudentchat](#) [#mededchat](#)



MedEd Chat @MedEdChat22 minutes ago

Topic 4: What are some ideas for how to transform hiring, retention and promotion to recognize and reward the work of BIPOC? [#medstudentchat](#) [#mededchat](#)



MedEd Chat @MedEdChat22 minutes ago

RT @MDmoneyhealth: T3 We have to foster cultures that promote questioning of myths/stereotypes as well as open dialogue about bias and micr...



Susan Sawning-she/her/hers @SSawning21 minutes ago

T1, T2, T3: This is an excellent thread with supporting articles that is also a must read for all in [#MedEd](#). Thank you to [@michelleko2d](#) for compiling this. [#MedEdChat](#) [#MedStudentTwitter](#)



Gary Beck Dallaghan @GLBDallaghan20 minutes ago

[@MDmoneyhealth](#) Agreed. I think this approach relates well with Topic 4 as well! [#mededchat](#) [#medstudentchat](#)



MedEd Chat @MedEdChat18 minutes ago

RT [@SSawning](#): T1, T2, T3: This is an excellent thread with supporting articles that is also a must read for all in [#MedEd](#). Thank you to [@mi...](#)



Gary Beck Dallaghan @GLBDallaghan16 minutes ago

T4 This is an interesting set of questions, particularly the second one. How often do we just expect people to do jobs and not support them? This may be a good change to make. [#mededchat](#) [#medstudentchat](#)



Susan Sawning-she/her/hers @SSawning13 minutes ago

T4: We have to desegregate the health care workforce. EXCELLENT, must read article by [@RRHDr](#) [@EmedinaEduardo](#) [@RheaBoydMD](#) in [@NEJM](#) that clearly outlines what we have to do in our academic health care institutions and in [#MedEd](#). [#MedEdChat](#) [#MedStudentChat](#) <https://t.co/8hBSwS11FW>



Liz Bonachea @MDmoneyhealth12 minutes ago

T4. We need to rethink P&T, FTEs, and RVUs in the context of systemic racism and minority taxes. Put our money where our mouth is- If DI and health equity is important we should fund and promote people doing the work [#MedEdChat](#) [#MedStudentChat](#)



MedEd Chat @MedEdChat12 minutes ago

RT [@SSawning](#): T4: We have to desegregate the health care workforce. EXCELLENT, must read article by [@RRHDr](#) [@EmedinaEduardo](#) [@RheaBoydMD](#) in @...



Gary Beck Dallaghan @GLBDallaghan10 minutes ago

[@SSawning](#) [@RRHDr](#) [@EmedinaEduardo](#) [@RheaBoydMD](#) [@NEJM](#) T4 "we must insist that for the health of the black community &, in turn, the health of the nation, we address the social, economic, political, legal, educational, & health care systems that maintain structural racism" Excellent quote from this article! [#mededchat](#) [#MedStudentChat](#)



Susan Sawning-she/her/hers @SSawning9 minutes ago

T4: It is not a mystery. Our systems were set up to support white students. We have to do the deep work to dismantle the system and rebuild it to support BIPOC students. [#MedEdChat](#) [#MedStudentChat](#)



Patrick D. Herron @pdherron8 minutes ago

RT [@MedStudentChat](#): Q3. How can undergraduate medical education (UME) and graduate medical education (GME) work to undo myths and harms per...



MedEd Chat @MedEdChat7 minutes ago

We have about 5 more minutes left in our discussion. Please feel free to give some final thoughts [#meded](#) [#mededchat](#) [#medstudentchat](#)



Susan Sawning-she/her/hers @SSawning6 minutes ago

T4: "...need to master learning the ways in which structural racism affects health...medical schools and training programs should equip every clinician, in every role, to address racism. And licensing, accreditation, ...should test this knowledge..." [#MedEdChat](#) [#MedStudentChat](#)



Susan Sawning-she/her/hers @SSawning5 minutes ago

RT [@GLBDallaghan](#): [@SSawning](#) [@RRHDr](#) [@EmedinaEduardo](#) [@RheaBoydMD](#) [@NEJM](#) T4 "we must insist that for the health of the black community &, in tu..."



Alliance4ClinEd @Alliance4ClinEd5 minutes ago

Final Thoughts: This was a fantastic collaboration with [@medstudentchat](#) to address issues of race in medicine. We have a lot of work to do, but some great insights gained from this joint [#medstudentchat](#) and [#mededchat](#)

The #MedEdChat Influencers

Top 10 Influential



[@MedStudentChat](#) 100



[@NNkinsi](#) 96



[@UCDavisCDHW](#) 65



[@BriChristophers](#) 58

 [@UWMedicine](#) 57

 [@AAMCtoday](#) 55

 [@SSawning](#) 52

[@lizstein](#) 45

 [@GLBDallaghan](#) 45

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 [@UCDavisCDHW](#) 11

 [@KristinaDzara](#) 7

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[@MedEdChat](#) 247.6K



[@BriChristophers](#) 82.4K



[@MKChan_RCPSC](#) 70.7K



[@MedStudentChat](#) 45.8K



[@SSawning](#) 45.0K



[@KristinaDzara](#) 39.8K



[@GraceOliverMD](#) 34.9K



[@GLBDallaghan](#) 30.2K



[@NNkinsi](#) 23.6K



[@MartinWinckler](#) 22.3K