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A national webinar for dermatology applicants during the COVID-19 pandemic

To the Editor: Drastic adjustments to medical education during the COVID-19 pandemic have left medical students concerned about changes to the residency application process. Elimination of in-person away rotations, delayed or cancelled subinternships, and the transition to virtual interviews are among the difficulties faced by dermatology applicants this cycle. Statements released by the Association of Professors of Dermatology (APD) in April and June 2020 addressed student concerns and suggested modifications to the application process (Table I).[1,2] To complement these statements, the Dermatology Interest Group Association (DIGA) hosted a webinar for dermatology residency hopefuls. Similar webinars have been held by national specialty organizations in orthopedic surgery, ophthalmology, and emergency medicine.[3,4]

DIGA is a national student-run organization composed of 120 medical school chapters that serves as a forum for the exchange of information among students interested in dermatology. With support from the APD, a webinar titled "The Shifting Landscape of the 2020-2021 Dermatology Application Cycle in the Era of the COVID-19 Pandemic" was developed. Six US residency program director panelists participated in the event.

A total of 996 viewers attended the webinar. An optional poll was administered; only medical students were asked to respond. Of 679 respondents, 62% were fourth year students, 19% were third year, 14% were preclinical, and 4% identified as other. Minorities underrepresented in medicine accounted for 31% of respondents; 25% of respondents reported attending an institution not affiliated with a dermatology residency program. During the webinar, panelists collectively addressed this year's residency application process via questions prompted by physician moderators (Table II). These questions had been collected from medical students via Google questionnaires administered by DIGA in the weeks before the event. Additional real-time questions from viewers were answered both verbally and in written form in Zoom's (San Jose, CA) question-and-answer and chat functions.

Program director panelists also presented highlights from the APD consensus statement,[2] such as promoting application to fewer programs to allow for holistic review. Panelists emphasized that one recommendation letter may be written by any faculty member with whom a student has worked closely, regardless of specialty. This is important given that one quarter of our attendees interested in dermatology do not have a home program. Virtual away rotations were described as opportunities to learn more about specific programs but should not be perceived as necessary to match into dermatology. The webinar was recorded and is freely available for reference.[5]

The COVID-19 pandemic has presented significant challenges for graduate medical education. Fortunately, the broad adoption of video conference communication has translated into unique opportunities for medical students to stay informed on issues of significant value to them. The large number of webinar viewers suggests acute interest in this format, and discussions for a future webinar on virtual interviews have begun. Underrepresented

Table I. Recommended changes to the residency application process from the Association of Professors of Dermatology consensus statement

• Students submit no more than 60 applications to dermatology programs (recommended: 40-60).
• Students accept no more than 15 interviews (recommended: 12-15).
• Programs do not offer in-person away rotations, except for students without home dermatology residency programs.
• Programs conduct virtual interviews for all applicants.

Table II. Questions directed to 6 dermatology residency program director panelists during the webinar

Demonstrating interest in programs
How should students express interest in specific programs given most dermatology away rotations are cancelled?
Who should students contact in the department/division? (Program director? Chief resident?) How do we find contact information?
Should mentors advocate for students by making calls or sending emails on their behalf?
Should students tailor their personal statements to specific programs?
Should students have a region-specific strategy?
How should students without a home dermatology program approach away rotations?
Residency applications this year
Are test scores weighted differently this year and if so, how?
How will different application components be weighted (eg, letters of recommendation, personal statement, clerkship grades)?
How can students strengthen their applications (especially those with weaker test scores and those who have had opportunities cancelled)?
How should students address "red flags" on applications (eg, low Step 1 score, personal leave of absence, repeating clinical rotations)?
Virtual interviews
How should applicants prepare for virtual interviews?
Are programs going to coordinate virtual interview dates?
How should applicants get the best feel for programs now that in-person meet-and-greets, away rotations, and interviews are cancelled?
Research
Is it beneficial to take a year off to do research in dermatology?
How should students include research experiences and projects that have been delayed or cancelled on their applications?
International medical students
How can international medical students strengthen their applications this year?
Will virtual rotations accept international medical students?

minorities and students without home dermatology programs constituted a significant portion of the webinar audience, demonstrating the need and opportunity to fill gaps in recruitment and mentorship for these groups. Beyond COVID-19 and the resumption of the traditional residency application process, large-scale webinars may continue to be invaluable resources for dermatology applicants.

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The continuing impact of COVID-19 on dermatology practice: Office workflow, economics, and future implications

To the Editor: Coronavirus disease 2019 (COVID-19) is significantly impacting health care delivery worldwide. Its initial impact on United States (US) dermatology practices was recently assessed.[1] This study determined the magnitude of the ongoing impact of COVID-19 on US dermatology outpatient care.

Data were analyzed from the first 1000 responses to 3 prevalidated surveys of 9891 practicing US dermatologists comparing outpatient volumes and scheduling issues for the week of February 17 to the week of March 16 (survey 1), April 13 (survey 2), and May 18, 2020 (survey 3). Representativeness with American Academy of Dermatology membership was confirmed (Supplemental Tables I and II, available via Mendeley at https://data.mendeley.com/datasets/dkbbp4ds9x/1). Statistical significance was calculated using χ^2 with the Marascuilo procedure and 2-tailed independent *t* test/analysis of variance with post hoc Scheffe testing.

The impact of COVID-19 was material (Table I). Average weekly patient visits were significantly decreased to 28.2 visits (95% confidence interval [CI], 23.7-32.7 visits) mid-April from 149.7 visits (95% CI, 139.6-159.9 visits) mid-February, rebounding to

Table I. Comparison of United States dermatology practice data during February 17 to 21 vs March 16 to 20, April 13 to 18, May 18 to 22, and prospective estimates*

Variable†	Week of February 17, 2020	Week of March 16, 2020	Week of April 13, 2020	Week of May 18, 2020	*P* value‡
How many days did you practice?	4.2 (4.1-4.3)	3.1 (3.0-3.2)	3.5 (3.4-3.6)	3.6§ (3.5-3.8)	<.0001
How many patients were seen in your primary practice location?	149.7 (139.6-159.9)	63.5 (57.8-69.2)	28.2 (23.7-32.7)	96.5 (93.0-100.0)	<.0001
How many biopsies did you perform for suspicious pigmented skin lesions?	19.9 (18.0-21.7)	7.8 (6.7-8.9)	3.6 (2.7-4.3)	7.8‖ (6.7-9.0)	<.0001
Did you selectively postpone non-essential appointments?, %Yes	35.4 (31.9-39.0)	79.4 (76.0-82.5)	95.6 (94.3-96.9)	73.7‖ (70.6-76.7)	<.0001
How many biopsies were postponed?	3.9 (3.1-4.7)	10.8 (9.2-12.3)	7.9 (6.7-9.1)	3.7¶ (2.6-4.8)	<.0001
Prospective estimates		**March 16-20**	**April 13-18**	**May 18-23**	
If appointments were postponed during the week, when did you primarily reschedule them?	Weeks postponed	6.4 (5.9-6.8)	7.5 (7.3-7.8)	4.5 (4.2-4.8)	<.0001
	Not rescheduled at this time, %	25.6 (22.1-29.1)	20.8‖ (18.2-23.4)	11.0 (8.9-13.2)	<.0001
If biopsies were postponed when did you primarily reschedule them?	Weeks postponed	7.2 (6.8-7.7)	6.4 (6.1-6.6)	1.9 (1.7-2.2)	<.0001
	Not rescheduled at this time, %	54.7 (50.7-58.8)	37.3 (34.2-40.4)	8.5 (6.6-10.4)	<.0001