

COVID-19 Updates

As of February 2, 2021, **96% of residents and fellows have received their COVID-19 vaccination**. This is an incredible level of participation, and you all should be very pleased with this rate! Given the numbers will not have significant change, we will not be communicating weekly updates from this point forward.

TRAVEL: If you have not seen the updated travel policy, please be sure to download it from Starport. Please note any travel outside of the DC-MD-VA area (includes southern Pennsylvania, Delaware and eastern West Virginia) requires a call to Occupational Health upon return and a COVID-19 test.

GATHERINGS: We have received many questions regarding the resumption of gatherings -- for both work and social situations. At this time, we must continue to be vigilant regarding PPE and small group precautions, which currently limits gatherings to no more than 10 individuals in the appropriate circumstances -- see Starport for our *MedStar GME Educational Gatherings Policy* that remains in place. Unfortunately, this means that we cannot plan for in-person graduation celebrations this spring, which applies to all of our GME programs. Virtual gatherings will keep us safe and will help to keep the COVID positivity rate trending downward.

January GME Town Hall Follow Up

Thank you to everyone who participated in our January GME Town Halls. If you missed the Town Hall, you can view a [recording and the slides](#), available on www.MedStarGME.net.

What is the cumulative COVID-positivity rate for our residents and fellows? Based on data from Occupational Health, our cumulative COVID+ rate for MedStar Health residents and fellows is 3.8%.

When will the pediatric floor at MGUH return to its pre-pandemic capacity? Hospital bed capacity remains constrained across the MedStar system. The plan remains for the pediatric units at MGUH to return to their pre-pandemic capacity once the strain on our health system subsides. There are many moving parts involved and operational decisions regarding bed allocation are made at a system level. The senior operational leadership team is not anticipating any changes in pediatric bed capacity for the remainder of the current fiscal/academic year (through the end of June) based on cyclical surges and the uncertainty introduced by viral variants. Capacity will be re-evaluated in the summer or early fall 2021, once public health measures and community vaccination initiatives have made enough of an impact, as projected, to begin to ease the strain on the system. The GME leadership team will continue to work with all of our programs that rotate on pediatric inpatient units to ensure continuity of educational objectives.

Message from the Working Group on Racial Justice

The Covid-19 pandemic has been unlike any other global pandemic in recent history. It is far reaching and leaves numerous victims and families in its wake - but it has also spurred the combined effort of researchers, state and public health agencies, and global health organizations to work together to combat this disease. The advent of the coronavirus vaccine appears to be one such advance that provides hope for a return to a different but hopeful future.

With more than 10 million coronavirus vaccines already administered in the United States alone - many to hopeful healthcare workers and our most vulnerable - this vaccine has been seen as a possible light at the end of the tunnel.

This sentiment however is not a universal one. This has become more and more evident as the idea of being inoculated with the coronavirus vaccine hits resistance, particularly in communities most vulnerable. Many of these folks are patients of color in the communities that the Working Group for Racial Justice seeks to support.

When looking at the topic of vaccine hesitancy however, it is important to explore the historical context in which this resistance finds its origin. As Gabrielle Perry, a clinical epidemiologist from New Orleans puts it, "...you can't look at [vaccine] hesitancy at face value. Centuries of inhumanity [make it not] easily forgotten." Furthermore, as illuminated by Caitjin Guntry: "... history tells us that widespread skepticism about vaccination is often a product of citizens' relationship with the state..." - a picture that can be easily seen in the case of the history of medicine in America.

State sanctioned protocols and procedures have had a history of deleterious effects on certain subgroups, specifically African Americans. Take for example the infamous Tuskegee Syphilis Study whereby a medical experiment sanctioned by the United States intentionally withheld treatment from poor African American patients from 1932 to 1972 to study the natural history of the disease - when a curative treatment was readily available. Or take for instance the illustrious history of HeLa cells whereby Henrietta Lacks' cancer cells were used to further science without the permission of those closest to her - or even the patient herself before she passed away.

Though these things may have happened more than 30 years ago, the collective history has become imbedded within many communities of color further creating this syndrome of mistrust of the medical establishment. Any attempts to encourage vaccination must be couched, we believe, in an understanding that recognizes the impact that collective history has on our current medical practice and adoption of the coronavirus vaccine specifically in our black and brown patients.

We encourage all practitioners to listen and ask questions rather than dictate the benefits of the COVID vaccine. When we listen to our patients to understand where they are coming from, we can begin to reach out and form stronger relationships. We can begin to build trust and action within our collective healthcare system.

Sincerely,

Linda, Megha, Jimmy, and Manas
Co-Chairs, Working Group for Racial Justice

MedStar Health – Georgetown Research Symposium

We are pleased to report the Annual Research Symposium will take place this year in a virtual format! The planning committee is busy developing an agenda, which is expected to provide workshops, didactics and scientific presentations over the course of several days, with a kick-off planned for **Monday, May 10 at 1:00 pm**. We will have our traditional resident and fellow research competition this year, with top finalist presentations being conducted online. So, start preparing your abstracts and getting ready for submission! Dates and more information will be provided to you soon.

Save the Date! Program Directors' Retreat

Please hold Thursday, April 8 for our annual GME Program Directors' retreat. More information to follow.

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