How a med school in a COVID-19 hot spot is deploying early graduates

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Less than a month ago, NYU Grossman School of Medicine (NYU) made headlines as one of the first medical schools to announce it would graduate students early to join the physician workforce and aid in the fight against COVID-19. At least a dozen schools have since followed suit.

This week, a cadre of about 30 NYU early graduates began working in the NYU health system. The mid-April start date is 10 weeks earlier than the typical July 1 date on which new interns, under normal circumstances, begin working with patients.

A recent AMA Innovations in Medical Education Webinar, featuring speakers from NYU, the AMA and Oregon Health & Science University, looked at how early graduation is being approached. A recording of the webinar is available in the resources area of the Accelerating Change in Medical Education Community (registration required). The community also is host to an ongoing discussion with leaders in medical education about the impact of the COVID-19 pandemic on training.

With New York facing what may be the nation’s most significant patient burden related to COVID-19, NYU’s decision to graduate students early was ambitious and, according to speakers on the webinar, very necessary. Those speakers offered some insight on how early graduates will be used.

All hands on-deck

With NYU located in a COVID-19 hot spot, the need to bolster the work force was evident by early March. Some early graduates began their first week on the wards on April 14, and the expectation is they will be on the front lines in the coming weeks.

“When we first started this process, we thought the early graduates would be supplemental to the teams caring for [non-COVID-19] patients,” said Patrick M. Cocks, MD, director of the internal medicine program at NYU Langone Health. “But we soon realized there was essentially no such thing
as a [non-COVID-19] patient in our hospital. All of us are essentially COVID physicians whether you’re a resident, an intern, the chief of surgery, or the hospital chair, we are all doing similar things in the care of COVID patients. The way we thought about integrating the early graduates into our team changed as well.”

When NYU put out a call asking for early graduates who were interested in working in the health systems, somewhere between 40 and 50 answered in the affirmative. Those new junior physicians—dubbed “super-acting interns” by Dr. Cocks—join the health system’s internal medicine and emergency medicine departments regardless of the specialty that they matched into. They will work in that capacity until joining the residency programs to which they matched on July 1.

“We basically said come forward, work with us where the need is, specifically in the emergency department and internal medicine units,” said Steven Abramson, MD, vice dean for education, faculty and academic affairs at NYU. “We don’t care whether you are going to be ED doctors or IM doctors, we don’t care whether you are going to stay with us or go off to another institution. We need you now.”

Concerns with the transition

At NYU, both the current residents and early graduates expressed concerns about the transition from medical school to the wards during a national pandemic. Those concerns included trainee safety, a topic on which the AMA has offered guidance, and the amount of supervision that would be required.

To prepare early graduates, NYU created a boot camp that addressed circumstances specifically related to COVID-19, such as the proper use of personal protective equipment, treatment protocols related to the virus, physician and patient isolation and the moral distress physicians may feel treating COVID-19 patients. NYU also paired early graduates with residents who weren’t on service during the boot camp, dubbing them “orientation buddies.”

“Our residents who were not doing clinical work at the time were meeting with the early graduates, they were hearing their concerns, and answering their questions and they will be a face on the wards … to help them with their day-to-day tasks,” Dr. Cocks said. “We are supplementing their supervision and education in the first period to try to mitigate some of the concerns of our early graduates and current residents.”

During this first week of training, the junior physicians will be seeing a lighter patient load at NYU relative to standard resident volumes—Dr. Cocks estimated that it would be between three and five patients. He expects that to ramp up quickly, however.


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“We anticipate that by week two or three, they’ll be caring for and contributing to the care of patients the same way any [first-year resident] on our service would,” he said.

“They are ready to take care of patients. … They want to get out there and contribute to this event that is going to reshape our society, health care, and perhaps medical education for decades to come.”

**Practical aspects of early graduation**

There are a number of practical considerations for early graduates.

In order to conform with their Match agreements, early graduates are not part of any specific residency program at NYU. The institution’s early graduates are receiving the same compensation as NYU first-year residents—compensation was a key point in recent AMA guidance on resident and fellow protections during the COVID-19 pandemic.

In terms of licensing, under a recent executive order from New York Governor Andrew Cuomo, graduates of medical schools accredited by the Liaison Committee on Medical Education and American Osteopathic Association, and matched into an Accreditation Council for Graduate Medical Education-accredited residency program in or outside New York, may temporarily practice medicine in New York under the supervision of a licensed physician, during the interval prior to reporting to their matched program. Graduates do not have to apply for a license to do so.

In July, when NYU’s early graduates head to the programs with which they matched, Dr. Cocks believes they will have a leg up.

“We do think that the individuals that are starting now will be superstars on July 1,” he said. “They are going to have this opportunity. They are going to have their first nights on call. They are going to have their first admissions behind them, so we think that wherever they go, they are going to carry that competence, that ability to care for patients and those next steps.”

The AMA has curated a selection of resources to assist residents, medical students and faculty during the COVID-19 pandemic to help manage the shifting timelines, cancellations and adjustments to testing, rotations and other events at this time.


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