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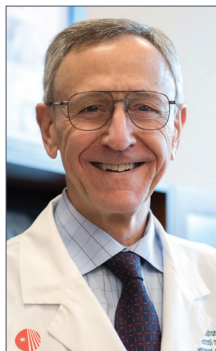
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DEAN'S MESSAGE

Kenneth Kaushansky, MD, MACP

Senior Vice President, Health Sciences

Dean, Renaissance School of Medicine at Stony Brook University



The past few months have been challenging for the Renaissance School of Medicine and the Stony Brook Medicine healthcare system, to say the least. The 2019-20 academic year started out well, with the graduation of an outstanding Class of 2019 and the School getting ready to move into the new Hospital Pavilion and the Medical and Research Translation (MART) building. As you know, these two landmark buildings had been in the planning and construction stages for more than six years and were

envisioned as the new face of Stony Brook Medicine: a boon to research, education and clinical care.

Between October and December, an amazing choreography moved the Stony Brook University Cancer Center from the Ambulatory Care Pavilion to the fifth and sixth floors of the MART; numerous laboratories moved from the Basic Sciences and Health Sciences Towers into the seventh through ninth floors of the MART;

(continued on page 12)

UPDATE FROM THE OFFICE OF UNDERGRADUATE MEDICAL EDUCATION

Andrew Wackett, MD

Vice Dean, Undergraduate Medical Education

Director, Clinical Simulation Center

Clinical Associate Professor of Emergency Medicine



It gives me great pleasure to welcome another class of bright medical students to the Renaissance School of Medicine at Stony Brook University. Our accrediting body, the Liaison Committee on Medical Education (LCME), recently renewed our full accreditation, and we earned the maximum number of commendations for: our tangible commitment to education; the commitment of resources for education and research; and the clear sense of community among our students, residents

and faculty. It is to this community that we warmly welcome our new students.

There are several wonderful things to highlight about our School of Medicine. First, this will be the third year since we introduced our accelerated Three-Year MD Program (3YMD) that allows for completion of the MD degree in three years and offers a conditional acceptance into one of our residency programs at Stony Brook. Next, our LEARN curriculum allows our students to immerse

(continued on page 2)

Update from the Office of Undergraduate Medical Education *continued from front cover*

themselves into their clinical experiences earlier and provides ample opportunities for career exploration, scholarship and multiple degrees.

We have also recently opened our new teaching and learning spaces that include a beautiful auditorium with seats colored in "Stony Brook Red," a team-based learning facility and multiple small group rooms. We are currently completing construction on our Clinical Simulation Center, which will double in size and provide additional space for standardized patient exercises, high-fidelity manikin simulations and procedural skills, including ultrasound training and much more. Our facilities allow us to apply the "flipped classroom" approach to medical education. Students learn the background material through self-directed learning and then apply the skills in our training centers, thus fostering self-direction and lifelong learning. As our healthcare systems continue to evolve, such skills, we believe, are highly essential for successful careers as physician leaders.

Professionalism is a key pillar in our curriculum. How we think about others, care for our patients and communicate with each other is vitally important in developing a successful career as physicians. In the evolution of our students from lay people to caring physicians, we cannot overstate the role of self-reflection and humility — humility to learn from our mistakes and to wonder at the awesome miracles of science. Faculty from the Center for Medical Humanities, Compassionate Care, and Bioethics have worked closely with us to create a robust program to deliberately enhance the development of professional identity among our students, and we received the Alpha Omega Alpha Honor Society Award for this endeavor.

Recently, our students have led a grassroots campaign to address the systemic racism and healthcare disparities that exist in our society. The administration has been inspired by their voices. You will immediately appreciate changes in our Transition to Medical School, Medicine in Contemporary Society, Introduction to Clinical Medicine and other preclinical courses that emphasize implicit bias training and antiracism strategies.

Furthermore, we just received our national Y2Q Survey results from the Association of American Medical Colleges (AAMC). I am happy to report that our students are less stressed and more engaged and joyful than the average medical student in the U.S., while continuing to maintain above-average performance on national standardized exams. We recently enhanced our focus on student and faculty wellness. The School provides a variety of options to participate in diverse, meaningful extracurricular activities, research activities and student clubs. The Medical Student Health, Happiness, and Humanism group is one of our many highlights.

COVID-19 has certainly left its mark on the Renaissance School of Medicine. We graduated our fourth-year students early to join the workforce; our clinical students were temporarily suspended from their rotations; and our preclinical students resorted to remote learning. However, we recovered quickly and entered the phase of the "new and improved" normal. Unfortunately, our Class of 2024 will start their learning remotely, but we are confident their experience will meet the rigor of a Renaissance School of Medicine student. The Body and Molecular Foundations of Medicine faculty are working tirelessly to deliver an outstanding learning experience

for these introductory subjects. The Medicine in Society faculty are creating their virtual small group activities, which will explore the ethics and humanity of medicine. Finally, the Introduction to Clinical Medicine faculty are structuring a virtual course to teach the fundamentals of history taking, and although it will be virtual, students will still interact intimately with our team of standardized patients and receive the high-caliber feedback that we are proud to offer. All in all, the experience will be different, but nonetheless outstanding.

Finally, a highlight on our graduates who remain our biggest ambassadors. Many have served as chief residents and have gone on to academic leadership roles throughout the U.S. and beyond, a real attestation to the quality of the physicians we graduate.

Welcome to Renaissance School of Medicine and enjoy the journey! •



VIDYA, the name chosen for this newsletter, is a Sanskrit word meaning knowledge.

Since the newsletter is devoted to covering the educational aspects of Renaissance School of Medicine at Stony Brook University, this name is especially meaningful. Part of a student's education during medical school is the pursuit of knowledge and learning.

Published twice a year in May and August, Vidya is available as a printed piece and can be viewed online.

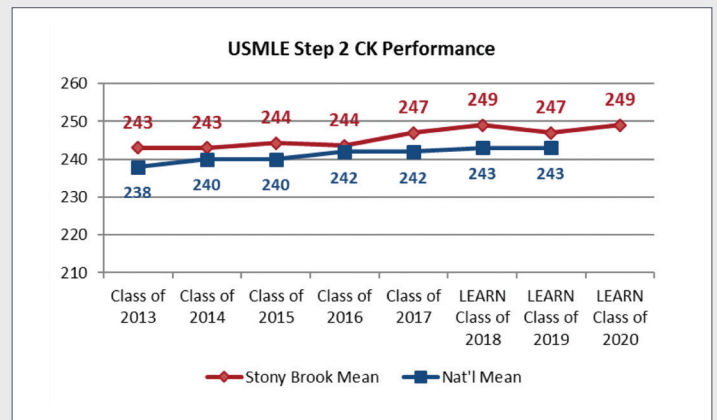
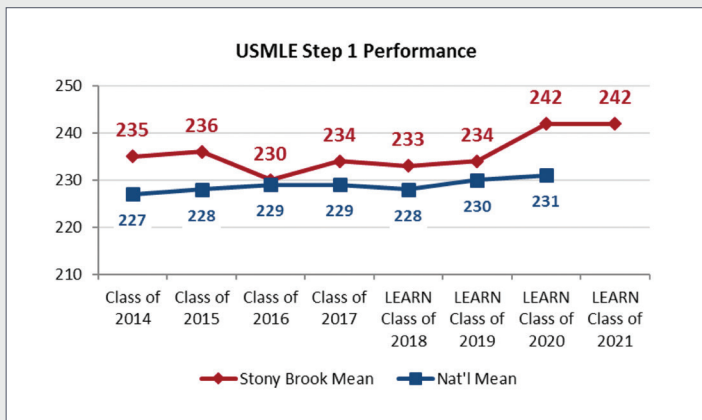
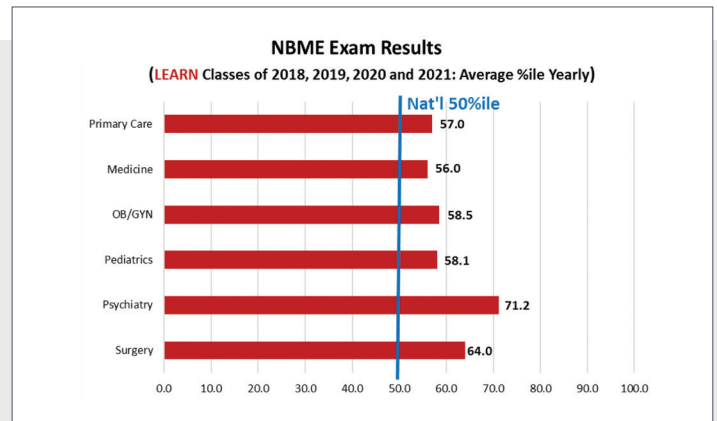
STONY BROOK MEDICINE ACADEMIC OUTCOMES IN A NUTSHELL



By Wei-Hsin Lu, PhD
 Senior Education Specialist
 Director of Assessment and Evaluation
 Research Assistant Professor of Preventive Medicine

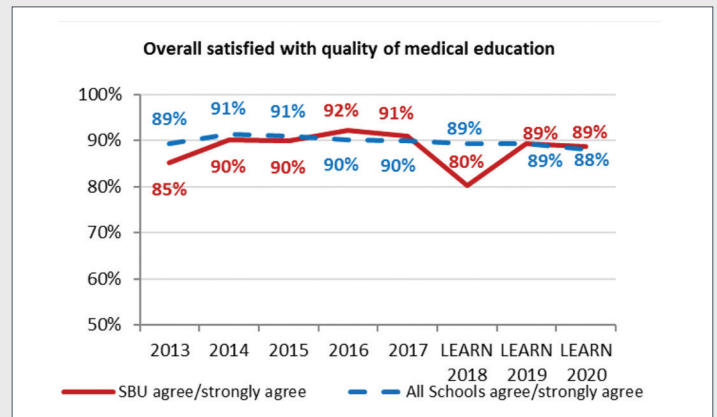
NATIONAL STANDARDIZED EXAMS

Students from Renaissance School of Medicine at Stony Brook University consistently perform at or above the national average.



AAMC MEDICAL SCHOOL GRADUATION QUESTIONNAIRE

Our graduates are satisfied with the quality of their medical education training.



WELCOME — CLASS ENTERING 2020

Renaissance School of Medicine at Stony Brook University Committee on Admissions



Jack Fuhrer, MD
Associate Dean for Admissions

The Committee on Admissions is proud to introduce the 50th entering class of the Renaissance School of Medicine at Stony Brook University. We received 5,164 applications. Of those, 747 applicants were interviewed, and we made 408 offers to fill our class of 136. Fifty percent of the class are women, 14 percent are historically underrepresented minorities in medicine, 64 percent are New York State residents, 33 percent are out-of-state residents (10 states represented) and 3 percent are international students. There are a total of 15 students with advanced degrees, including one PhD, 12 with a master's degree and two with an MPH degree. Students performed extremely well on the MCAT, and on average scored within the top 10 percent of all test takers. The median science and total GPAs for this entering class are very competitive at 3.81 and 3.82 respectively. Students majored in many fields of study, 82 percent in the sciences. They also attended 68 different schools (listed below), which include many of the finest universities in this country.

Although the year 2020 has certainly posed challenges, I am heartened to know that the interest in the field of medicine remains high and that we continue to attract outstanding students to our school. This fall will be different than previous years, in that our incoming students will be taking courses remotely. We very much look forward to greeting them all in January when we anticipate beginning in-person classes. •

UNDERGRADUATE SCHOOL BREAKDOWN

Stony Brook University	19	University of California-Berkeley	3	Rutgers University	2
New York University	8	University of Michigan	3	SUNY Albany	2
University of California-Los Angeles	8	University of Pennsylvania	3	SUNY Binghamton	2
Cornell University	5	University of Rochester	3	University of California-San Diego	2
Columbia University	4	Carnegie Mellon University	2	University of Delaware	2
Boston College	3	Duke University	2	University of Massachusetts-Amherst	2
Muhlenberg College	3	Emory University	2	University of Western Ontario	2
Tufts University	3	Georgetown University	2	Vanderbilt University	2
University of Buffalo	3	Johns Hopkins University	2		

The following schools have one acceptance:

Barnard College	Georgia Institute of Technology	University of Connecticut
Brown University	Harvard University	University of Hartford
Bryn Mawr College	Lehigh University	University of Nevada
California Institute of Technology	Massachusetts Institute of Technology	University of Pittsburgh
California Lutheran University	McGill University	University of Richmond
Carleton College	Midwestern State University	University of Southern California
Colgate University	New York Institute of Technology	University of Virginia
CUNY-City College	Northwestern University	University of Wisconsin
CUNY-Hunter College	Penn State University	Vassar College
CUNY-Lehman College	Princeton University	Virginia Commonwealth University
CUNY-Queens College	St. John's University	Wagner College
Dartmouth College	The Ohio State University	Wellesley College
Fordham University	Trinity College	William Patterson University of New Jersey
George Washington University	University of Chicago	Yeshiva University

TOTAL SCHOOLS REPRESENTED: 68

WHAT TO LOOK FOR IN 2020-21

Read your TGIF emails from the Office of Undergraduate Medical Education every Friday to get news, important scheduling information, research and fellowship opportunities, events, etc.

STUDENT ACTIVITIES

First-Year Orientation/Transition to Medical and Dental School (TMDS) August 12-21

Scholarly Concentrations Info Session During TMDS

International Opportunities in Global Medicine Info Session Fall 2020

Careers in Medicine Fall 2020

Transition to Clinical Care (Phase II) January 4-15, 2021

Asian Extravaganza TBD

Diaspora of Color TBD

Evening of the Arts TBD

Hispanic Heritage Event TBD

Jeopardy Event TBD

White Coat Ceremony Spring 2021

Match Day March 19, 2021

Research Day – Scholarly Concentrations Program (SCP) Presentations April 29, 2021

Commencement May 20, 2021

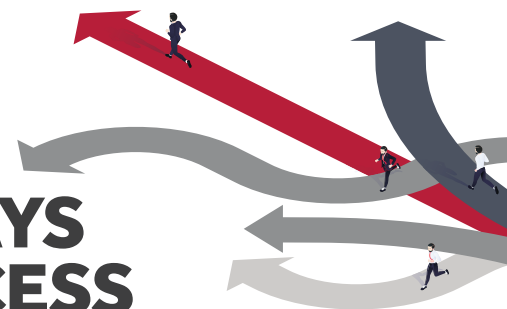
SCP Kickoff June 1, 2021

ALSO CHECK OUT THE SCHOOL'S ACADEMIC CALENDAR AT medicine.stonybrookmedicine.edu/AcademicCalendar



PATHWAYS TO SUCCESS

Richard J. Iuli, PhD
Medical Education Specialist
Director, Pathways to Success



Welcome new students and welcome back returning students!

Even though we will not have the pleasure of seeing all of you in person until later this year or until after the first of the new year. I hope you and your families have been staying safe and well throughout the COVID-19 pandemic.

What does success in medical school look like to you?

- Earning honors in courses and clerkships?
- Being elected to the Student Senate by your peers?
- Holding a position of leadership in a student organization?
- Maintaining personal wellness while balancing the demands of medical school?
- Scoring highly on Step 1 (although Step 1 will soon move to Pass/Fail)?
- Developing into and demonstrating what it means to be a “good” physician?
- Matching to your top-ranked residency program?

An argument can be made for any or all of these as benchmarks of success.

Pathways to Success is Renaissance School of Medicine’s comprehensive co-curricular program that integrates academic and career advising, student well-being and professional identity formation throughout all three phases of the **LEARN** curriculum. The mission of Pathways to Success is to ensure that our medical students achieve success along the concurrent paths leading to the MD degree and, ultimately, to residency. Pathways to Success aims to promote our medical students’ academic and career success, collaborative team skills, personal

well-being, formation of professional identity and success on national standardized exams, such as the NBME subject exams and the USMLE Step exams.

PATHWAYS TO SUCCESS IS MADE UP OF FIVE COMPONENTS:

- **Advising PODs** provide small-group and individual academic advising and student support throughout Phase I of the **LEARN** curriculum.
- **Shelf and Step Exam Support for Students, or Shelf Rx**, provides supplemental academic support to students who experience marginal academic performance in Phase I in order to minimize the risk for NBME Subject Exam (aka Shelf Exam) and USMLE Step 1 Exam failures.
- **CAREERS** provides medical students with large- and small-group and individualized career advising through curricular, co-curricular and extracurricular programs, events, information and resources.
- **The Peer and Self-Assessment** program engages medical students in facilitated small-group peer feedback and self-assessment activities that are aimed at developing their collaborative team skills.
- **Professional Identity Formation, or PIF**, refers to the growth over time in becoming a “good” physician. From the matriculation into the Renaissance School of Medicine to the swearing of the Hippocratic oath at Convocation, PIF throughout the curriculum aims to build humanistic and ethical skill sets in our students and clinicians.

Here at Renaissance School of Medicine, student success, across all dimensions of medical school life, matter to us! •



THE SCHOLARLY CONCENTRATIONS PROGRAM (SCP)

Howard B. Fleit, PhD
Assistant Dean for Curriculum
Associate Professor and Vice Chair for Education,
Department of Pathology

The Scholarly Concentrations Program (SCP) is a four-year track opportunity for medical students to engage in and attain recognition for scholarly pursuits in related areas of medicine.

Under this program, students have the opportunity to do academic exploration in:

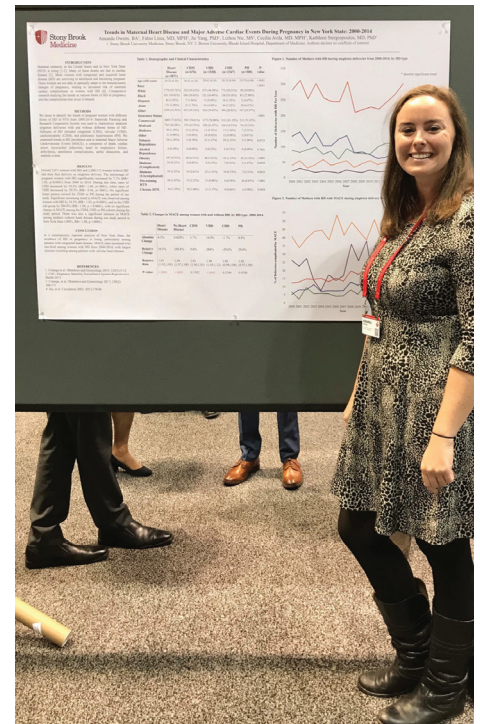
- Basic, Translational and Clinical Research
- Medical Humanities and Ethics
- Global Health
- Medical Education

The program aims to align the areas of interest of students with the academic mission of the Renaissance School of Medicine at Stony Brook University, providing a longitudinal area of work to the student experience at the School. For many students, this experience has been extremely helpful in identifying long-term career goals, exploring research project interests and building an academic track record. The specific goals of the Scholarly Concentrations Program are:

1. To provide encouragement and support students engaging in extracurricular scholarly pursuits aligned with their own area of interest.
2. To facilitate students gaining valuable career experience, networking opportunities and research project-based proficiencies to complement didactic medical education.
3. To provide special recognition to students who engage in such scholarly pursuits and complete all of the SCP's requirements.
4. To implement the research methods of the identified track, including the life sciences, social sciences, humanities, law, policy, etc.

A Research Day is held every year in the spring to give graduating students an opportunity to present the results of their research in an oral and/or poster presentation. A research award is given to an outstanding student chosen by the SCP Committee as part of the graduation festivities.

Learn more: renaissance.stonybrookmedicine.edu/ugme/education/scholarly



Poster presentation by SCP student Amanda Owens.

JOINT DEGREE PROGRAMS

The Renaissance School of Medicine at Stony Brook University has four joint degree programs — MD/PhD (MSTP), MD/MBA, MD/MPH and MD/MA.

MD/PhD (MSTP) Stony Brook University, in conjunction with Cold Spring Harbor Laboratory and Brookhaven National Laboratory, sponsors the Medical Scientist Training Program (MSTP), leading to both the MD and PhD degrees. The purpose of the MSTP, partially funded by a competitive grant from the National Institutes of Health, is to train academic medical scientists for both research and teaching in medical schools and research institutions. Graduates of this program are equipped to study major medical problems at the basic level, and at the same time, recognize the clinical significance of their discoveries. For more information, visit renaissance.stonybrookmedicine.edu/mstp.



(Left) Students from the Renaissance School of Medicine volunteer at Stony Brook HOME. (Right) Stony Brook HOME Medical Director Jedan Phillips, MD (back), and a medical student (front).

STONY BROOK HOME RELIES ON ITS MEDICAL STUDENT VOLUNTEERS

MISSION STATEMENT

Stony Brook Health Outreach and Medical Education (HOME) is dedicated to improving the health and well-being of the underserved community in Suffolk County by:

- Increasing access to free, dependable and comprehensive health services
- Empowering individuals and families through education and social services
- Training future clinicians in culturally competent and compassionate care

Benefits of volunteering at Stony Brook HOME for medical students include:

- Giving back to the local community
- Early clinical exposure
- Interacting with upperclassmen
- Learning clinical skills early
- Working directly alongside attendings
- Learning how to run a clinic
- Satisfaction of helping those in need

Medical students can volunteer to further Stony Brook HOME's mission during clinic hours and/or outside of clinic hours.

For more information about participating in Stony Brook HOME, visit stonybrookhome.com/for-volunteers/preclinical-student-responsibilities-1.

To inquire about any of the positions available or committees to get involved in, please email stonybrookhome@gmail.com.

PLEASE SUPPORT US: DONATIONS ARE TAX DEDUCTIBLE.

Please make checks payable to "Stony Brook HOME" and mail to:

Office of Student Affairs
 Renaissance School of Medicine at Stony Brook University
 Stony Brook, NY 11794-8436 •

MD/MBA The College of Business and the Renaissance School of Medicine offer a combined MD/MBA program. The purpose of the combined degree program is to prepare students for a management career in the healthcare field. The MD/MBA program combines a four-year MD degree and a 48-credit MBA degree. For more information, visit stonybrook.edu/business/graduates/combined-masters.php#view-mdmba.

MD/MPH The Program in Public Health at Stony Brook offers a Master of Public Health (MPH) degree, which can be obtained with the MD degree. The combined program requires the completion of all Renaissance School of Medicine requirements for the MD degree program and all 54 credits of the MPH program. When applying to the combined program, students will be able to select one of the three MPH concentrations — Health Analytics, Community Health, and Health Policy and Management. For more information, visit publichealth.stonybrookmedicine.edu/academics/degreeoptions/grad/md.

MD/MA The Center for Medical Humanities, Compassionate Care, and Bioethics offers, on a selective basis, the opportunity for up to five medical students a year to participate in a joint MD/MA program. In addition to their coursework, these students enroll in the Scholarly Concentrations Program and take 18 credits from the MA program in Medical Humanities, Compassionate Care, and Bioethics to receive a joint MD/MA upon graduation. For more information, visit stonybrook.edu/bioethics/education. •

WHO'S WHO IN THE OFFICE OF UNDERGRADUATE MEDICAL EDUCATION

The Office of Undergraduate Medical Education is responsible for all aspects of undergraduate medical education (including curricular affairs, student affairs and admissions), as well as faculty affairs and faculty development.

DEANS



Andrew Wackett, MD
Vice Dean, Undergraduate Medical Education
Director, Clinical Simulation Center
Clinical Associate Professor of Emergency Medicine



Mary Jean Allen
Assistant Dean for Student Affairs and Financial Aid



David Cohen, MD
Associate Dean for Student Affairs
Associate Professor of Emergency Medicine



Howard B. Fleit, PhD
Assistant Dean for Curriculum
Associate Professor and Vice Chair for Education, Department of Pathology



Jack Fuhrer, MD
Associate Dean for Admissions
Associate Professor of Medicine



Lisa Strano-Paul, MD
Clinical Professor of Medicine
Director, Primary Care Clerkship



Grace Agnetti, MS, EdD
Assistant Dean for Admissions



Jennie Williams, PhD
Assistant Dean for Student Diversity

DIRECTORS



Wei-Hsin Lu, PhD
Senior Education Specialist
Director of Assessment and Evaluation
Research Assistant Professor of Preventive Medicine



Mark J. Sedler, MD, MPH
Founding Director, Office of Global Medical Education
Professor of Psychiatry and Behavioral Health

PROFESSIONAL STAFF



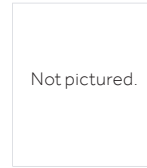
Richard (Rick) J. Iuli, PhD
Medical Education Specialist
Director, Pathways to Success Program



Caroline R. Lazzaruolo
School of Medicine
Registrar and Office Manager



Jeffrey Swain, PhD
Faculty Development Specialist



Linda DeMotta, MA
Learning Specialist

Not pictured.

WELCOME FROM ALUMNI

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Undergraduate Medical
Education
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Mary Hoffmann, MA
Assistant Director,
Alumni Relations, Health
Sciences Schools

The Renaissance School of Medicine Alumni Board is delighted to welcome the incoming Class of 2024.

It is evident that you make up another smart, talented, energetic and diverse class. There are more than 4,300 outstanding alumni whose footsteps you follow.

All our alumni are here to support you in your journey through medical school, and beyond. The alumni board looks forward to meeting the new class in person at the White Coat Ceremony and presenting you with a stethoscope, a gift from many of our alumni and friends. After graduation, the class will be asked to pay it



MSII student, Soumya Mandava, leading alumni on a tour of the Renaissance School of Medicine during a class reunion.

forward by making a small gift to the students who come after them.

During your years at Stony Brook, the alumni will provide mentorships, scholarships, help with career guidance, sponsor trips for international medical missions and offer places to stay when students do their away-rotations or travel for residency interviews. Students are always welcome to interact with the alumni during class reunions and invited to participate in virtual and in-person Careers in Medicine events.

If you have any questions or wish to get in touch with any of our alumni, please email Mary Hoffmann (mary.hoffmann@stonybrook.edu). Also, consider becoming the MSI student representative for the Renaissance School of Medicine Alumni Board. •



(Left) Renaissance School of Medicine students, residents and faculty with teachers from Longwood High School. (Right) Stony Brook faculty and students at Brentwood High School.



BREAKING DOWN BARRIERS

Cordia Beverley, MD, Assistant Dean for Community Health Policy

Medical Students and Residents Go Back to High School to Encourage Next Generation of Physicians

Since May 2017, the Renaissance School of Medicine at Stony Brook University, has participated in the annual “Doctors Back to School Day” (DBTS). Promoted by the American Medical Association, the program was created to introduce high school students from underrepresented communities to professional role models and encourage them to consider medicine as an attainable profession. The program also enables medical students and residents to better understand the communities they serve. In the United States, racial and ethnic minorities are at a disproportionate risk of healthcare disparities and experience worse outcomes from preventable conditions. Public health literature has documented that increased participation of underrepresented individuals in the health professions leads to better health outcomes for underserved communities. Each year, the program is hosted at Suffolk County’s Brentwood, Longwood and Wyandanch high schools. In 2020, however, the event has been postponed due to the COVID-19 pandemic.

Demographically, Brentwood High School has a population that is 83 percent Hispanic, where 31 percent of the high school students are learning English as a second language, and 84 percent of the students are economically disadvantaged. Longwood High School has a student population that is 48 percent white, 26 percent Hispanic and 20 percent African American, and 54 percent of students are economically disadvantaged. Wyandanch Memorial High School has a student population that is 44 percent African American

and 54 percent Hispanic, and 93 percent of students are economically disadvantaged.

During the four-hour program, the medical students and residents speak with approximately 600 high school students about their personal journeys and the challenges they overcame on the road to becoming physicians. Response to the sessions has been enthusiastic with the high school students actively engaging with the medical students and residents, as well as expressing their excitement about the program.

One student from Brentwood remarked, “This was one of the best medical visits. The medical student was really inspirational and told me and my friend to follow our dreams and convinced me to go into the medical field and become a doctor.”

The feedback from our medical students and residents has also been very positive. In the words of one medical student, “As someone who grew up going to underserved public schools for most of my childhood, I felt that an event like today’s would have been immensely helpful in motivating me in my path to medicine.”

In 2019, a pre/post survey of 278 high school students from Brentwood, Longwood and Wyandanch who participated in DBTS, indicated that the program had a significant impact on increasing student interest in careers in medicine ($p < .0001$). Additional significant impacts were seen in knowledge about what is required to pursue a career in medicine ($p < .0001$) and a greater



A Renaissance School of Medicine student with a student from Wyandanch Memorial High School.

understanding of the various challenges and rewards experienced when pursuing a medical career.

The Liaison Committee on Medical Education (LCME) requires that medical student education incorporate active community participation and ongoing reflection. The medical students who participated in this program expressed their appreciation for the opportunity to serve their community and the tremendous learning experience that DBTS provided.

We would like to thank Brentwood, Longwood and Wyandanch High Schools for their collaboration and hospitality. The event was coordinated by Cordia Beverley, MD, Assistant Dean for Community Health Policy and Yvonne Spreckels, MPA, Director of Community Relations at Stony Brook University Hospital. We look forward to returning to the schools in 2021. •



STUDYING MEDICINE AND PUBLIC HEALTH DURING A PANDEMIC

Jessica White, Renaissance School of Medicine MD/MPH Student

When I decided to pursue a dual degree in public health four years ago, I had no way of knowing that my graduate school year would round out with the country in the throes of a global pandemic.

In 2016, I thought studying medicine and public health simultaneously would allow me to explore health and disease through both an individual and public lens. I knew that I would encounter real-world examples of the topics I was studying while on clinical rotations in medical school; little did I know that I would encounter a public health crisis on a global scale.

During my evening classes in public health, I learned about approaches to influence the health of groups of people, such as community interventions, policy initiatives, health communication strategies and epidemiological research, to name a few. I took courses in biostatistics, health policy, demography, health behavior and communication, medical ethics, health economics and environmental health. I gained skills in conducting statistical analysis of public health data sets. I learned how to evaluate a public health initiative for effectiveness. I studied how to conduct qualitative research, a different type of research that felt foreign to a medical student with experience in quantitative research methods. We dug deep into topics like healthcare disparities and barriers to health services. We debated the restrictions placed on individual freedoms for the sake of public health. We explored the past and current health systems and the economics of healthcare. While many of these topics are encountered during

medical school, my graduate school classes in the evening provided a deep dive into these public health topics. The two programs complemented one another beautifully.

During my preclinical years in medical school, I volunteered at SB HOME (Stony Brook Health Outreach and Medical Education), a student-run clinic for those who are uninsured. There I saw firsthand how access to healthcare and healthcare inequalities influence individual health. In my medical school classes, I learned about the uneven distribution of diseases and the risk factors that contribute to the development of disease, such as socioeconomic status, race, gender and access to healthcare. During my clinical years of medical school, I was directly involved in patient care, and like my experiences at SB HOME, I saw how access to healthcare influenced individual health. I also became more aware of our current health systems, like Medicare, Medicaid, and the hospitals and clinics I was rotating at, and how they influence individual and public health. I witnessed firsthand how public health initiatives, such as routine childhood vaccination, can fall short. Medical school gave me tangible examples and experience with the topics I learned about in my public health classes.

Then the pandemic hit. It was March of my graduate school year — the year I took off from medical school to complete the bulk of my public health classes. I was currently enrolled in an epidemiology class and a health economics class. We went from learning about past epidemics to finding ourselves in the midst of a global pandemic. We went from learning about the economics of healthcare to seeing how a public health crisis like COVID-19 influences the economy. Our classes went virtual, but our learning experience was all around us. We saw the uncertainty around a new virus.

We saw how science adapts to changing information. We saw how quickly resources could become depleted and the need for rapid expansion of medical services. We saw public health initiatives put in place to stay home, wear a mask, maintain social distance and wash your hands. We saw some states shut down in the name of public health. The list goes on. What was working? What fell short? I could not help having a critical eye when so much of what I was learning about in school was happening in real time. We are not out of the woods yet, and I am still wrapping my head around this experience as both a student and a global citizen.

In addition to the pandemic, we also saw the growth of a movement centered around racial inequality. From a public health perspective, there are health disparities, such as higher rates of morbidity and mortality, and healthcare disparities, such as decreased access to and utilization of health services, based solely on race. As I have learned in my public health classes and experienced during medical school, both racism and bias in the community, in addition to the systemic racism that exists within the healthcare sector, are threats to public health. The increased awareness and call to action that the current movement has produced is long overdue.

With all that is going on in the world, I cannot think of a more important time to be both a student of medicine and public health. As a future physician and public health professional, I hope to combine what I have learned in my dual degree program with my real-world experiences. The dual degree program in medicine and public health has given me the tools to become a leader in healthcare, improving the health of individual patients and the public at large. •

Dean's Message *continued from front cover*

and final preparations were underway to complete the new experimental imaging center on the fourth floor of the MART. In a single day, well over 100 pediatric and intensive care patients were moved from the main Stony Brook University Hospital tower (as I refer to it, the black hexagons) into the sixth through ninth floors of the new Hospital Pavilion.

As we were wheeling patients and equipment that December day into the new building, an occasional news story was broadcast or printed about a new virus and disease appearing in Wuhan, China. Little did we know then that a tsunami was rolling toward New York. By February, the term person under investigation (PUI) was on everybody's lips, and on March 8, Stony Brook University Hospital had admitted its first patient with documented COVID-19.

From March 8 until April 16, that one-patient "COVID census" blossomed into 437 patients, about one-third of whom were in an ICU on mechanical ventilation. During that time, I sent out several notes keeping all the faculty, students and staff up to date on our progress in providing exemplary care for our patients and keeping our people safe, often remarking/predicting that how we responded to the COVID-19 epidemic would define us. As I write this, now that our COVID-19 census is down to 18 patients, only two of whom are on mechanical ventilation, I am certain that our response to COVID-19 in Suffolk County paints us in a glowing light, including the very best outcomes of any of the three hospital systems on Long Island, and a remarkably

low level of SARS-CoV2 infection within our faculty, students and staff.

We experienced one more shining example of the heart-warming response of the Renaissance School of Medicine to the pandemic in Suffolk County. As our COVID-19 census began to climb, we explored the possibility of graduating the Class of 2020 early, and then offering them employment as assisting physicians, essentially working as interns to help care for hospitalized patients. While much work was required on the students' part to prepare, and on the administration to clear the hurdles to make this "legal," a virtual graduation was held for the Class of 2020 seven weeks early, on April 8. Following the graduation, more than half of our Class agreed to become assisting physicians. While some were initially skeptical of their "value," it was abundantly clear that our early graduates made a huge impact, as the completion of their "tour of duty" in mid-June was met with a huge thank you and a concern: "What will we do without them?"

Another aspect of the COVID-19 crisis is that as a research-intense university and medical school, it was our obligation to study the origins, pathophysiology, effects and treatments for the physical and psychological effects of the virus on individuals and on our communities. It is thus gratifying that there are now 180 research projects underway across the University, about half of which are Renaissance School of Medicine faculty-led projects, to better understand virtually all aspects of the disease and its effects on people. A quick sampling of such projects includes:

-
- The development of better viral and antibody testing for SARS-CoV2.
 - Molecular modeling of how the spike protein of the virus interacts with its cell surface receptor.
 - Live virus isolation and analysis.
 - The mechanisms of the blood-clotting abnormalities that are so critical to developing severe disease.
 - The effects of common medications that target the same receptor as the virus on disease onset and severity.
 - Clinical trials of some of the most promising therapeutic approaches to COVID-19, such as remdesivir or post-convalescent plasma.
 - The mental health of physicians, graduate students and healthcare staff during and following the pandemic.
 - Screening a number of populations for depression or domestic violence.
 - The effects of social isolation on well-being.
 - Interactions of COVID-19 or the threat of the disease with other behavioral and mental health issues, such as substance abuse.
 - The conversion of face-to-face physician-patient interactions to telehealth.
-

One highly valuable research tool that was developed is the COVID-19 Data Commons and Analytic Environment, in which the electronic medical record and many additional data elements from the greater than 4,000 patients who were SARS-CoV2 positive and seen as inpatients or outpatients at Stony Brook University Hospital are housed after careful data curation, in a form that can be searched relatively easily, in order to generate or test hypotheses of a wide range of questions surrounding this new disease.

Another very important societal topic that has a huge impact on the Renaissance School of Medicine is the subject of institutional racism and its effect on physician diversity and healthcare disparities. The combination of the blatant and racist murder of George Floyd, the growing awareness that many people of color have died under suspicious circumstances, an intentionally divided nation in which some support repressive responses to peaceful protests, and the medical, social isolation and fiscal crises that have come from COVID-19 have created a "perfect storm" for widespread social unrest not seen in the past 50 years.

One need look no farther than the disproportionate adverse outcomes to the COVID-19 pandemic within communities of color to witness healthcare disparities up close and personal. Students and faculty on the Stony Brook Medicine campus have rightfully responded to these events with sadness, frustration and anger, and a call for change. Based on numerous town hall

meetings, and direct conversations with student and faculty leaders, the Renaissance School of Medicine is adopting a number of innovative and well-tested approaches to enhance student, resident and faculty diversity, in part by creating a more nurturing and welcoming environment for students, residents, faculty and hospital staff. This includes a major new, longitudinal curricular element and a new approach to cultural sensitivities, as well as reaching out to our communities to better understand the causes of healthcare disparities in Suffolk County, and craft solutions to them.

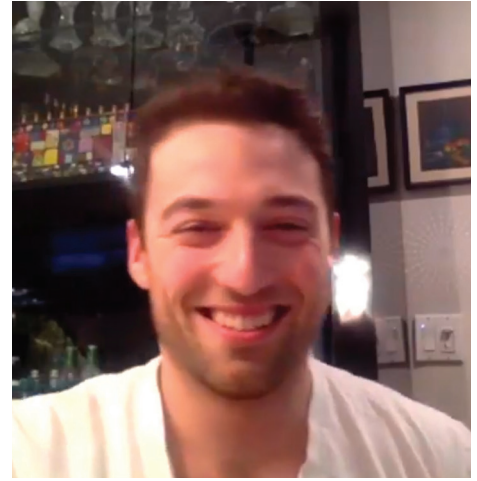
Finally, while we await a return to "normalcy," whatever that new normal may be, the upcoming academic year will and will not resemble our past. For example, the Class of 2024 will begin their medical school curriculum in August entirely online, consistent with the need for adequate social distancing for large lecture-style encounters, with all of the Basic Building Blocks courses (e.g., anatomy, biochemistry, etc.) offered remotely. The Introduction to Clinical Medicine course, which teaches history taking virtually, will also serve to introduce the students to telehealth. Class of 2024 students are scheduled to arrive on campus in January 2021.

Our second-year students will see only modest changes from the past, with hybrid courses combining both online work, and face-to-face (mask-to-mask!) sessions. While we had to suspend clinical clerkships during the height of the Suffolk County COVID-19 crisis, our core and elective clerkships started up almost as usual on

June 1 and have, with just a few exceptions, been as experiential as the past.

So the past year in the life of the Renaissance School of Medicine has been eventful, filled with much to be very proud of. However, we cannot and will not rest on our laurels, as the new Class of 2024 is entering, and facing a hybrid curriculum. We are uncertain if the 29kDa chunk of RNA called SARS-CoV2 is about to re-emerge with a whimper or with a vengeance this coming fall or winter. Still, if this past year has taught us nothing else, one thing is for certain, the Renaissance School of Medicine stands strong and ready to take on any and all challenges we face.

Wishing the very best to all our Vidya readers in the coming academic year. •



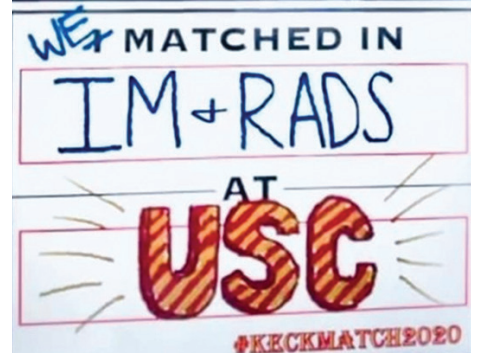
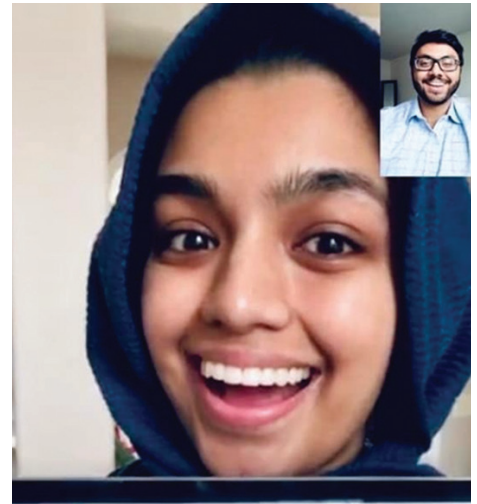
Members of the Class of 2020 celebrate Match Day.

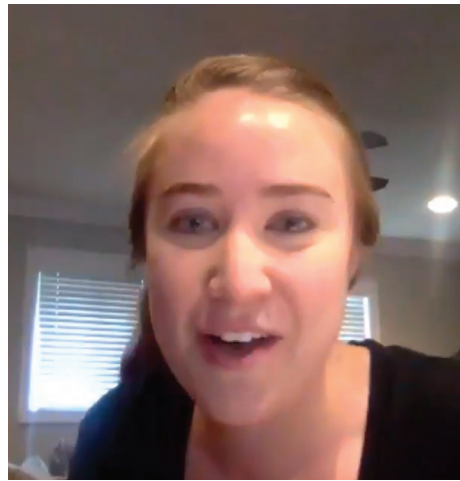
WHAT A MATCH

The Class of 2020 matched to the following residency specialties and programs:

SITES

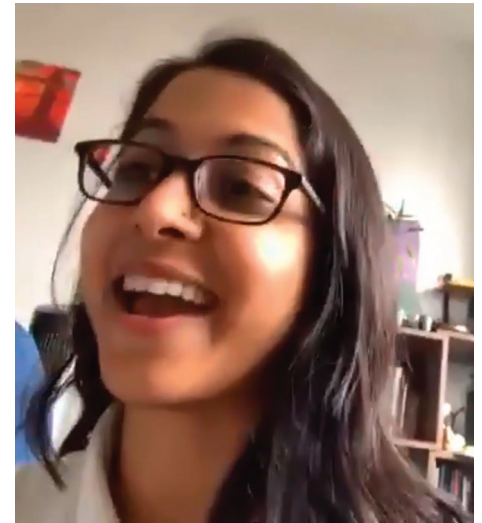
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|--|---|---|---|
| Albany Medical Center | Johns Hopkins Hospital | Rutgers-Robert Wood Johnson Medical School | University of Minnesota Medical School |
| Baylor College of Medicine-Houston | Kaiser Permanente-Oakland | St. Barnabas Medical Center | University of North Carolina Hospitals |
| Baystate Medical Center | Lehigh Valley Hospital | State University of New York, Upstate Medical University-Syracuse | University of Rochester/Strong Memorial |
| Brigham and Women's Hospital | Medstar Washington Hospital Center | Stony Brook Medicine | University of Southern California |
| Brooke Army Medical Center | Montefiore Medical Center/Einstein | SUNY HSC Brooklyn | University of Texas Southwestern Medical School-Dallas |
| California Pacific Medical Center | Mount Sinai Medical Center | Thomas Jefferson University | Vanderbilt University Medical Center |
| Children's National Medical Center | Naval Medical Center Portsmouth | Tufts Medical Center | Yale-New Haven Hospital |
| Cleveland Clinic | New York University Grossman School of Medicine | UC San Diego Medical Center | Zucker School of Medicine-Northwell |
| Cleveland Clinic Foundation-OH | New York University Winthrop Hospital | UC San Francisco | Cohen Children's |
| HCA Healthcare/USF Morsani-Bayonet Point-Florida | New York-Presbyterian/Queens | UCLA Medical Center | Zucker School of Medicine-Northwell Forest Hills Hospital |
| Health Quest | New York-Presbyterian Hospital/Columbia University Medical Center | University of Arizona College of Medicine at Tucson | Zucker School of Medicine-Northwell Glen Cove Hospital |
| Hospital of the University of Pennsylvania | New York-Presbyterian Hospital/Weill Cornell Medical Center | University of Connecticut School of Medicine | Zucker School of Medicine-Northwell Lenox Hill Hospital |
| Icahn School of Medicine at Beth Israel | Presence Resurrection Medical Center | University of Hawaii | Zucker School of Medicine-Northwell NS/LIJ |
| Icahn School of Medicine at Mount Sinai | | University of Massachusetts Medical School | |
| Icahn School of Medicine at St. Luke's-Roosevelt | | University of Miami/Jackson Health System | |





ALL RESIDENCY PROGRAMS

- | | |
|---|---|
| Primary Care: | Obstetrics/
Gynecology |
| General Internal
Medicine | Ophthalmology |
| Pediatrics | Orthopaedic
Surgery |
| Med-Peds | Otolaryngology |
| Family Medicine | Pediatrics |
| Specialties: | Pediatrics/
Emergency
Medicine |
| Anesthesiology | Combined |
| Dermatology | Physical Medicine
and Rehabilitation |
| Emergency
Medicine | Plastic Surgery |
| Family Medicine | Psychiatry |
| Internal Medicine | Radiation
Oncology |
| Internal Medicine/
Pediatrics | Radiology |
| Combined | Surgery |
| Neuro-
developmental
Disabilities | Thoracic Surgery |
| Neurology | Urology |
| Neurosurgery | Vascular Surgery |



TOP Residency Specialties

17
STUDENTS **INTERNAL MEDICINE**

14
STUDENTS **EMERGENCY MEDICINE**

14
STUDENTS **ANESTHESIOLOGY**



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