with iterative changes. After IRB approval, the UME survey was distributed to members of CORD during the 2021 Academic Assembly. Using SPSS v26, a descriptive analysis was performed.

Results: Sixty-three individuals responded to the UME survey, with 27 (42.9%) program directors (PDs), 19 (30.2%) assistant/associate PDs, 5 (7.9%) core faculty, 5 (7.9%) clerkship directors, 4 (6.3%) residents/fellows and 3 others (vice chair of education, educational researcher, unknown). Most respondents were white (84.1%) and approximately half identified as women (50.8%). Table 1 provides means and standard deviations for statements displayed from most to least important.

Conclusions: The positive financial impact on medical students was described as the greatest benefit of the pandemic. Virtual technology was varied in its impact: positive for conferences and interviewing but negative as a surrogate for clinical rotations or the ability for students to evaluate residency program culture. The top challenge facing UME was the removal of students from clinical rotations. This may impact residency programs, requiring them to remediate those skills. A limitation of this geographically broad cohort was the number of respondents.

Table 1. Undergraduate medical education benefits and challenges.

Item	Mean	SD
UME Benefits – Rank 1 to 6 with 1 being most important.		
Decreased financial burden of away rotations/interviews	2.53	1.76
Increased utilization of asynchronous learning	3.08	1.49
Use of videoconferencing programs (Zoom, etc.)	3.29	1.61
Re-evaluation of current education modalities for students	3.63	1.68
Ability to attend virtual education sessions from a variety of departments/programs	3.69	1.58
Time for students to participate in scholarly activity	4.77	1.29
UME Challenges – Rank 1 to 7 with 1 being most important.		
Students pulled from clinical rotations	1.40	0.88
How students get the "fit" of the program over the virtual platform	3.32	1.61
Use of virtual rotations while students were pulled from clinical experiences	4.18	1.47
Restrictions on simulation activities	4.45	1.73
Inability to host in-person lecture	4.58	1.65
Virtual interviews	4.70	2.00
Students having to remediate required clinical rotations prior to 4th year electives	5.30	1.77

SD = Standard Deviation
UME = Undergraduate Medical Education

30 Prez Drills: An Online Interactive Workshop to Develop Presentation Skills in Preclinical Medical Students

Alexis del Vecchio, Anthony Seto, Paul Bryan, Logan Haynes, Nicole Ertl

Learning Objective: Students at our university identified low confidence in presenting oral cases and a desire for more practice. We created a workshop, "Prez Drillz", to address this. We will cover our initiative, results to date, and ways that this can be implemented at other medical institutions.

Background: Presenting clinical cases orally is a core skill for medical students, a task some find intimidating. Oral case presentations may influence preceptors' impression of students, as it highlights learners' cognitive and non-cognitive attributes.

Objectives: Students at our university identified low confidence in presenting oral cases and a desire for more practice. We created a workshop, "Prez Drillz", to address this.

Methods: Before the workshop, students viewed a podcast on oral case presentation structure. 154 second-year students participated in the 2.5-hour workshop, hosted via Zoom videoconferencing, with 1 physician preceptor for 4-5 medical students. During the workshop, students first listened to a 5-minute case audio, outlining patient history and examination findings. Students delivered an oral case presentation, based on information extracted. Self-reflection and feedback from peers and preceptor followed. Students then practiced delivering a second oral case presentation by implementing the feedback received.

Results: Students completed a retrospective survey on their agreement (1=strongly disagree; 5=strongly agree) with self-efficacy statements regarding presentation skills pre- vs post-workshop (effective frame/context, clear history/physical exam, convincing top differential diagnoses, comprehensive management plan, appropriate confidence, clear/effective communication, organized/structured approach). All ratings of self-efficacy (N=23) increased with statistical significance ($p<0.001$) and large effect size; the average self-efficacy rating was 2.50/5 pre-workshop versus 4.32/5 post-workshop. Average workshop rating (N=55) was 4.73/5.

Conclusions: This workshop improved students' self-efficacy in oral case presentation skills. Peer-teaching, repetition, and feedback opportunity aided their success. Medical educators can adapt this model to help learners improve and elevate their oral case presentations.

31 The Impact of COVID-19 on the Medical Student Emergency Department Clinical Experience

Page Bridges, Samantha Shelhoss, Paige Neroda, Elena Roberts, Lindsay Grasso, Smith Heavner, Lauren McCafferty

Learning Objective: Describe the impact of COVID-19 related restrictions in the clinical learning environment on the patients and chief complaints evaluated by students.

Background: In March 2020, medical students across the nation were removed from the clinical learning environment in response to novel coronavirus. Upon returning, students found new precautions and restrictions around patient care to avoid exposure and curb PPE shortages. These restrictions often impacted which patients students could see, potentially changing their experience in comparison to students in typical years.