

State in 'holding pattern' as COVID cases blow up elsewhere

BY HELEN ADAMS

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You see it just about everywhere these days: people behaving a lot more normally than during the height of the pandemic. There are fewer masks, more socializing and eating in restaurants — even the prospect of movie theaters reopening soon.

And the latest update from the MUSC COVID-19 Epidemiology Intelligence Project does show the COVID case rate is down another 9% in the Tri-county area this week.

But project leader Michael Sweat, Ph.D., said this is no time to let down your guard. "I think we're in a holding pattern," he said. "What's worrying is when you look beyond the Charleston area, there are really substantial increases in the Upstate. It's all around Greenville, Anderson, Spartanburg, Pickens — every county around them is seeing increases. That's driving up the state numbers. There was a 3% increase in cases over the past week in the state."

And some other states are seeing much bigger increases. "All of a sudden, big blowups are happening. Michigan has seen a 52% increase in cases in the past week. Connecticut had a 44% increase, New Jersey an 11% increase and it's going up in New York too. And they're at a high number. Much higher than our rates, but it's taken away the hope that a magic thing happened."

The good news is that more people are getting

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Sweat



Photo by Sarah Pack

Students dressed for this year's theme of "Hollywood" for Match Day 2021. Sarah Smith, dressed as Elton John, matched to MUSC for her internal medicine residency.

Matched up: College of Medicine celebrates students' residency matches

BY LESLIE CANTU

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Match Day is back!

The Evil Queen, Ron Burgundy, Holly Golightly and the Toros and Clovers from "Bring It On" — they were all there on the second-level deck of The Joe on March 19, celebrating the next step in the careers of the graduating medical students from the College of Medicine at MUSC.

Of course, Match Day never really went anywhere. It's the day that fourth-year medical students across the country find out, all at the same time, where they'll be spending the next three to seven years in residency.

It's a "match" because the students rank the residency programs they like in order of preference, and the residency programs rank the students they like, and then a computer algorithm puts everything together and creates the matches.

The process takes place every year. The match happened last year, just as the seriousness of the COVID-19 pandemic was becoming clear to most Americans, but without the fun, lively community celebration that the College of Medicine traditionally hosts every year.

This year, the fun returned. The event was a little different, of course. Instead of opening white envelopes

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7 Match modifications
Major change to
selection process.

8 The skinny on vaccines
Things you need
to know.

2 Vaccine journey
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5 Meet Benjamin Magowan

AROUND CAMPUS

Brittany Bryant



Brittany Bryant, DSW, assistant professor in the Department of Psychiatry and Behavioral Sciences, Addiction Sciences Division, was awarded the prestigious Learning for Early

& Diversity Fellowship. Bryant is one of three scholars in the country selected for this program LEAD is a three-year program run by the National Institute of Drug Abuse through the University of California San Francisco. The program provides mentorship and professional development for Bryant to manage her own pilot project to help to secure R-level NIH funding.

Chase Glenn



Chase Glenn has been named the first-ever director of LGBTQ+ Health Services and Enterprise Resources for MUSC. Glenn comes to MUSC having served as the former executive director of the Alliance for Full

Acceptance, an LGBTQ advocacy organization based in Charleston. Glenn will oversee and coordinate the delivery

of select resources, programs and services across the MUSC enterprise to include the Regional Health Network and select programs across the state. He will also be responsible for leading the development and implementation of policy, programs and services for all MUSC LGBTQ+ community members. He will begin in his new role April 19.

Anand Mehta



Anand Mehta, D.Phil., was named senior associate dean for research in the College of Medicine. Mehta will replace current senior associate dean for research Craig Crosson, Ph.D.

Mehta joined MUSC in 2016 as a professor in the Department of Cell and Molecular Pharmacology and Experimental Therapeutics and is the SmartState Endowed Chair in Proteomic Biomarkers. An active researcher, Mehta has also served on various research, funding and strategic planning committees around MUSC. Prior to joining MUSC, Mehta was on the faculty at Drexel University, where he was professor in the Department of Microbiology and Immunology and served as associate director of the Drexel Institute for Biotechnology and Virology Research. He will work closely with Crosson in the coming months to ensure a smooth transition.

‘NOT THROWING AWAY MY SHOT’

By Kelly Warren

A chronicle of my COVID-19 vaccine trial journey.



Vaccine Journal – Part 6

Editor's Note: Kelly Warren is a manager with MUSC's Enterprise Campaigns and University Communications. Warren volunteered to be a participant in the MUSC/AstraZeneca COVID-19 vaccine trial. She shares her experiences so that others might also feel comfortable receiving the vaccine.

What gift do you give yourself for surviving a full year in a global pandemic? For me, it was the unblinding of my COVID-19 AstraZeneca vaccine trial... OK, and maybe a treat from my favorite bakery, too.

After being symptomatic following my first shot, I felt pretty confident that I'd received the vaccine and not a placebo. However, I had to wait for the big reveal. When I began the trial, I was told it would be two years before records would be opened. Once we had vaccines on the market, though, AstraZeneca decided that individual results would be unblinded as participants became eligible for vaccination.

I became eligible and at the beginning of March made an appointment. After submitting proof of my appointment to the study coordinators, they were able to unblind my record and the results

were shared – I had indeed received the vaccine!

Learning that I've been fully vaccinated for months brought a variety of feelings. It was reassuring to know I hadn't imagined the symptoms. I felt reaffirmed in my decision to participate. And I felt something I can only describe as retroactive relief. Even though I felt some of the fear begin to lighten months ago when I thought I had received the vaccine, I've still been a little on edge. Now, I felt the same rush of relief that many others have described after being fully vaccinated – but it was accompanied by a wave of relief that reaches back to when I began the trial.

Since enrolling in the study, I've paid particular attention any time AstraZeneca was mentioned in the news. In the most recent months, as data has been released, I've felt a sense of pride for participating. It's been cool to see stats and know that I'm one small representative, when they

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MUSC CATALYST news

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The MUSC Catalyst News is published bi-monthly. Paid advertisements, which do not represent an endorsement by MUSC or the state of South Carolina, are handled by Island Publications Inc., Moultrie News, 134 Columbus St., Charleston, S.C., 843-958-7480, 958-7384, 958-7488 or 937-7489. E-mail: advertising@moultrienews.com.



Letter from the
Office of the

PRESIDENT

Dear MUSC family,

As we move into Spring, I wanted to share a few thoughts during this seasonal time of rejuvenation and new growth.

Year of the pandemic

When I think about all that we've been through, accomplished and faced in the past year, the "Year of COVID-19," it's hard to put into words how proud I am of the entire MUSC family. As a nation, state and community, we have suffered great losses during this time. To honor all of those taken from us too soon by the virus, MUSC will hold a day of remembrance service at noon on April 14. Please stay tuned to your email for the MUSC Update, as well as other communication vehicles, in the coming days for more information.

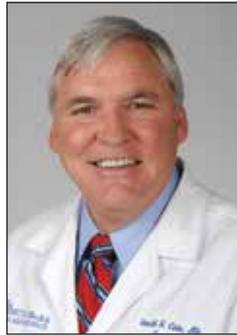
Still, in this unfolding COVID story, we are continually required to face new challenges – the latest chapter being vaccination. At the ground level, you have been doing an awesome job – and I thank you for your professionalism and tireless work. Just as we quickly responded when needed for testing – to date we have administered 378,998 PCR tests, 74,822 of which were given in underserved/rural areas, and hosted 475 mobile testing events in all 46 S.C. counties – MUSC has been asked by the state Legislature to bring vaccines to the most underserved and rural areas of South Carolina. As you are aware, this is an essential part of our mission, which we embrace, and represents the trust placed in MUSC as a direct result of our leadership, expertise, collaboration and commitment to serve this state and its citizens.

Vaccine supply has been a major challenge at a national and state level. To be clear, the weekly vaccine supplies available to the state, and thus MUSC, continue to fall well short of the need. This has translated into many frustrating hours spent rescheduling, adjusting and redirecting supplies for our teams in recent weeks. I'm pleased that we were able to begin offering new first-dose appointments and will clear our current waitlist for the vaccine this week. Our teams are working with precision to maximize our implementation of the vaccine, and I'm cautiously optimistic that our vaccine supply bottleneck is beginning to loosen. I cannot underscore enough the remarkable efforts that have gone into this process by so many from across our health system. One year from the beginning of the pandemic, we have seemingly begun the last leg of this marathon. I know you're tired – but please, don't lose heart now. We must continue to role model for those we serve the preventive measures that have proved to deter the virus from spreading. Wear a mask. Social distance and wash your hands. Protect the most vulnerable among us. Stay the course because, truly, we are almost there.

From a 30,000-foot view, it might be helpful to know a little more about my thoughts regarding moving our critical and important work forward for those we serve, COVID-19 or otherwise. Two pieces on my new blog, "Life Beyond COVID-19" and "Tyrannosaurus MUSC Rex?," are quick reads that may provide some more insight. I hope you'll take a moment to reflect on how these concepts pertain to your contributions to our shared mission and the future we seek to create.

Reflecting on mass violence, racism: We must do better

In the wake of mass killings in Georgia, and now, Colorado, during the past week, as well as the overall rise in hate crimes and violence against those of Asian descent across the nation, once again we find ourselves grappling with heinous, senseless acts as we seek to offer understanding and healing for all of those mourning the loss of



Cole

To the MUSC family,

In the wake of mass killings and the overall rise in hate crimes and violence against those of Asian descent across the nation, I'm reaching out today to ask that every MUSC family member offer their support, understanding and compassion for all those in mourning and affected in some way by these events.

The details may vary from region to region, but one fact remains the same when individuals are seemingly targeted because of their race, their gender, what they believe, who they love or what they do for a living: We have a responsibility to reflect on what we are doing as individuals, as an organization and as a larger society to prevent and stop these senseless and brutal acts of violence.

Whether violence rooted in hate occurs near or far, these events represent an urgent call to action for each of us. We must educate ourselves and examine our own biases, and then we must engage in our communities in ways that are constructive, respectful and inclusive of others. The MUSC family remains committed to sustaining and supporting a community where everyone feels welcome, valued and safe.

Thank you for your compassion and support for anyone in our network who may be suffering during this period. Our institutional resilience, determination and commitment to shared values will continue to serve as sturdy foundations for the life-affirming work we continue to perform together.

We must never forget that the MUSC family shares community with many members who live in dread that the color of their skin, ethnicity, gender, gender identity and religion make them targets of hate and worse. We must support each other as we move forward.

Should you need them, please don't hesitate to reach out and use the many resources available to you, including CAPS (Counseling and Psychiatric Services), MUSC Public Safety, Office of Gender and Equity, Department of Diversity, Equity and Inclusion, BSIT (Behavioral Support Intervention Team), University Human Resources, MUSC Health Employee Relations, Student Affairs in our respective colleges, Employee Assistance Program (EAP), Pastoral Care, and the National Crime Victims Research & Treatment Center.

MUSC remains committed to our values of respect, compassion, collaboration, integrity and innovation. Our institution has not and will not change who we are – a diverse, caring family of professionals who seek fairness, equity and inclusion for ourselves and all those we serve.

Sincerely,

Willette Burnham-Williams, Ph.D.
Chief Equity Officer, Title IX Coordinator
Department of Diversity, Equity & Inclusion

loved ones or who have been touched in some way by these recent events.

As our chief equity officer, Willette Burnham-Williams, Ph.D., noted in a recent communication to the organization, we have a duty to examine these moments of tragedy. We can reinvest in our personal efforts to educate ourselves, reflect on and correct our own biases and look for organizational opportunities to engage in constructive and meaningful work and behaviors that address these societal issues. We are committed to making sure that all who engage with MUSC feel welcome, valued and safe. We're not perfect, but we are an institution filled with diverse, compassionate people who are dedicated to fairness, equity and inclusion in all that we do.

Yours in service,

David J. Cole, M.D., FACS
MUSC President

Spoletto will look different, but organizers thrilled the show is going on

BY HELEN ADAMS

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Nurse and public health expert Ryan Taylor was excited to learn she'd been cast as a key player in the effort to help Spoleto Festival USA in Charleston, South Carolina, run as safely as possible.

"Hosting a big event in the middle of a pandemic requires a lot of thoughtful planning and teamwork. Our MUSC team was eager to contribute to keeping our community safe by providing risk mitigation strategies for this event."

Taylor is part of the MUSC Health Back2Business team, a group of public health experts at MUSC that helps organizations figure out how to reduce their risk from COVID-19. Last year, Spoleto Festival USA was canceled because of the pandemic. This year, the show will go on – with precautions in place.

Jessie Bagley directs marketing and public relations for Spoleto. "We recognized that Spoleto's staff isn't comprised of health care pros, or doctors or scientists. And in order to fulfill our mission, it was imperative for us to consult with professionals who could offer that crucial advice. After learning about the Back2Business program, it just felt like the perfect fit."

That partnership has led to changes in the general flow of Spoleto based on the latest scientific evidence about COVID-19. "The makeup of the programming has shifted slightly. And when the season is announced on April 5, there will be some visible holes," Bagley said.

One big difference: delaying the premiere of the opera "Omar" until next year. "As we started talking to Back2Business about all that it takes to do an opera, it became clear that the logistical challenges of putting on a grand opera are just insurmountable during

"I think the arts really do have an impact on people's mental health and well-being. This is also a chance to put a lot of artists to work and give them some livelihood and stability after what has been a really hard year for them as well."

Jessie Bagley

these times. We didn't want to sacrifice the story or the art form for COVID," Bagley said.

"One thing MUSC has been really great about is making it clear that they're not telling us what to do. They are the voice of recommendations and the voice of science that help guides our decision-making."

While Spoleto will still have plenty of music, theater and dance performances, the scope will be different. "Limited venues and limited capacities are going to be in effect. Normally, our performances take place in 10 to 13 venues, and that number will be considerably lower," Bagley said. "We're also operating at about 25% of the capacity we're accustomed to. But although the Festival might feel a bit smaller, and without the usual celebratory gatherings and parties, there will be some exciting and really beautiful additions."

People will be asked to attend in pods, Bagley said. They'll wear masks and stay physically distant from people outside of their group. And most performances will be outside.

There are plenty of good reasons

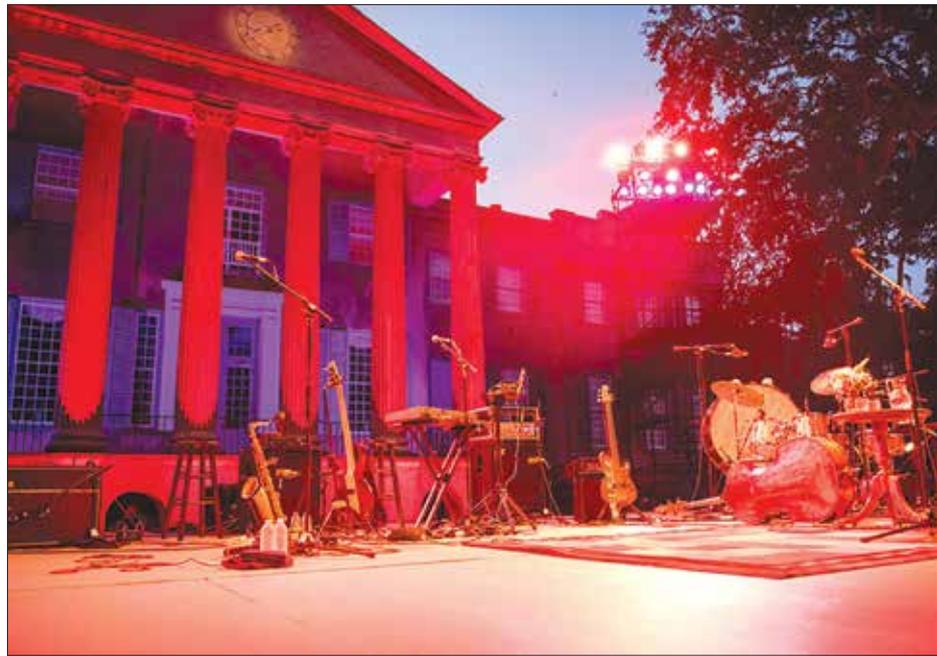


Photo by Leigh Webber Photography

The Cistern Yard at the College of Charleston, one of the main venues for this year's Spoleto Festival.

for the outdoor emphasis during the pandemic. For example, "When people sing, they project a lot of air, increasing aerosolization," Taylor said.

Put those performers outside, give them plenty of distance from others and you can have a safer show. Bagley is just thrilled that Spoleto will happen this year.

"I think the arts really do have an impact on people's mental health and well-being. This is also a chance to put a

lot of artists to work and give them some livelihood and stability after what has been a really hard year for them as well."

Taylor said her team takes its work with Spoleto very seriously. "Any big gathering inherently poses higher risk, so our job is to help reduce that risk as much as possible. The opportunity for us to be involved in keeping our community safe is something that our Back2Business team doesn't take lightly."



MEET BENJAMIN



Benjamin Magowan

College; Years at MUSC

College of Health Professions—Cardiovascular Perfusion Program; Class of 2022

How are you changing what's possible at MUSC

As class president, I'm helping my class navigate the rigors of online learning in a field that requires hands-on skills.

Hometown Scituate, Rhode Island

Favorite sports team Boston Bruins and the New England Patriots – I still love Tom Brady!

Someone in your life who inspires you My mother, who immigrated to the U.S. from the Philippines more than 25 years ago. I remember as a young child when she worked a third shift as a CNA. Her relentless drive to improve her life and refusal to give up pushed me to be the best version of myself.

Something that relaxes me during COVID Watching my backlog of movies

Favorite restaurant In Charleston, it's Halls Chophouse for their legendary steaks. Back in Rhode Island, it's Atwood Grill in Johnston for their delicious dish, Chicken Michelle.



INNOVATION WEEK AT MUSC

There's something for everyone!

Interactive panels | Podcasts & interviews | Practical tips | Competitions
Fun demos | Live & recorded sessions

Tracks include:

Transformational Technology | Learning Reimagined | Science Never Sleeps
Pitch Sessions | Innovators Toolbox | Health & Wellness

Don't miss these signature events:

Poster session, Tuesday, 4/27, all day
Shark Tank competition, Thursday, 4/29, 2:00 p.m.

musc.edu/innovationweek



Living Your Best Work Life 2021 Self-Care Support Sessions Monthly with Tenelle Jones For All MUSC Care Team Members Every 4th Wednesday of the Month at 12 p.m. MUSC COVID-19 Resiliency Program

Responding to the COVID-19 pandemic has had a significant impact on stress and mental health well-being of our MUSC care team members. These effects will continue for after vaccines and treatments are in place. Self-care monthly support sessions will teach you how to care for yourself 24/7 with practical tools, discussions, guidance and support.

To join the sessions

1. Go to Microsoft Teams and Click the Teams icon (on left hand side)
2. Then click Join or Create Team in top right corner
3. Enter Code: dhs4ur
4. Click on Living Your Best Work Life 2021 channel
5. Click on the self-care support session to access the link and click add to calendar

For more information or questions contact:
Tenelle O. Jones LMFT, LAC
tonjsten@musc.edu
843-364-7798



EARTH MONTH 2021 EVENTS

MUSC Sustainability

Social, economic, & environmental resilience is imperative in our changing world. MUSC Sustainability and its many partners present a series of resilience themed events.



WEEK 1: APRIL 4-10



Worldwide, over 125 universities are hosting webinars on a Green Recovery, Climate Solutions, and a Just Transition. College of Charleston will host South Carolina's event.

WED, APRIL 7TH
6:30 - 8PM

Info and registration:
tinyurl.com/solve-climate-info

Join the College of Charleston on Zoom to learn about traditional and indigenous agriculture.

CLIMATE FRIDAY

FRI, APRIL 9TH
12PM

Registration:
<https://tinyurl.com/climatefriday>



COMING UP...

Earth Day Bike Ride
by Charleston Climate Coalition
April 17th, 10am

Resilience in the 21st Century faculty panel
by MUSC, EpiE, and the Citadel
April 22nd, 3-5pm



TO BE ANNOUNCED...



MUSC Wellness Adventure Out -
Yoga in Hampton Park
[PowerPlantSC.com](https://www.powerplantsc.com)
Charleston Medical District Events



CONTACT
SUSTAIN@MUSC.EDU
WITH ANY QUESTIONS



MATCH *Continued from Page One*

inside the Charleston Music Hall at the stroke of noon, with family and friends looking on in the auditorium, students received an email from the National Resident Matching Program.

After learning the results on their own, students had the option to join classmates at The Joe for an outdoor celebration that incorporated several COM Match Day traditions, including a slideshow of each student highlighting the family and friends who've helped them get to this point and a costume theme.

This year's theme? Hollywood.

Among the three Nicolas Cages, seven Will Ferrells, a Zach Galifianakis, the Last Airbender and Elton John were students Camila Villacreses, dressed as Audrey Hepburn, and husband, Bryce Robbins, dressed as Cage.

The couple had known for several weeks that Robbins matched to MUSC in ophthalmology; they were waiting to find out whether Villacreses would match to MUSC in vascular surgery, as they hoped, or end up halfway across the country.

They got good news: Villacreses will enter the vascular surgery residency program at MUSC.

Vascular surgery was a last-minute choice for Villacreses. Interview season had already started, and she had begun interviewing for general surgery positions, when she did her vascular surgery rotation.

"I absolutely loved it. So literally halfway through interview season – I'd already been interviewing for general surgery – I decided to try and apply to vascular," she said.

"I really feel like I connect with that patient population. I'm interested in health disparities work in my career, and I think that's a particular patient population within surgery that has a lot of potential for health disparities work. And I also love the range of procedures you can do," she added.

Robbins, who wasn't even sure what ophthalmology was when he started medical school, found the specialty appealed to his technology and engineering sides.

"I was really blown away by how fine

and intricate of a specialty it is," he said. "Once I saw cataract surgery for the first time, I was sold."

Two of the Will Ferrells – Ann Hill, dressed as Mugatu from "Zoolander," and Nate Silvestri, dressed as Buddy the Elf – each matched in pediatrics.

Hill is headed to Children's Hospital of Philadelphia while Silvestri is going to Johns Hopkins Medicine.

None of the students this year had the opportunity to visit their potential new institutions before applying to get a feel for the hospital culture; instead, they had to rely on the vibe they got from Zoom interviews and advice from their mentors at MUSC.

Silvestri said one of his mentors, Michelle Hudspeth, M.D., did her residency at Johns Hopkins and spoke highly of the education and training she received there. He was thrilled to match there, though he joked before the results were announced that he wanted to go "Anywhere that will have me."

Silvestri's parents both work at MUSC; his mother is a nurse, and his father is pulmonologist Gerard Silvestri, M.D. In their own ways, they inspired him to go into medicine, as did his grandparents. He said three of his four grandparents moved in with the family as they approached the end of life. Helping to care for them – even with things as simple as helping them up and down stairs – steered him toward a career caring for others. However, he ultimately knew that he wanted to work with children.

Kids are just more fun, he said.

"I can legitimately wear an 'Elf' costume to work on Christmas, and everyone will be OK with it," Silvestri said.

Hill was also inspired by a doctor parent. Her mother is pediatric radiologist Jeanne Hill, M.D. Although Jeanne would have liked for her to have gone into radiology, Ann wanted a specialty with more patient interaction.

She was also looking for a position in a large academic medical center that would expose her to complex cases and perhaps something in another part of the country since she's always lived in the Southeast.

She'd like to subspecialize and is currently considering pediatric cardiology, pediatric critical care or



Photos by Sarah Pack

Logan Hood sits through the proceedings with all the imperiousness you would expect from the Evil Queen. Hood matched in internal medicine at Redmond Regional Medical Center in Rome, Georgia.

pediatric emergency care.

Altogether, 97.7% of the class matched this year. They are headed across the nation to places as far as Hawaii and as near as the Grand Strand.

Four participated in the military match and will begin their service at Eisenhower Army Medical Center in Augusta, Georgia; San Antonio Military Medical Center in Texas; Tripler Army Medical Center in Honolulu, Hawaii; and UC Davis Health/Travis Air Force Base in California.

A third of the class will remain in South Carolina. Because students

couldn't do away rotations at other medical schools or visit programs for in-person interviews, match watchers had speculated that students and programs across the country might be inclined to stick to known entities. But the rate of in-state matches for MUSC students is consistent with previous years' classes.

A significant portion, 43%, of the class is committed to primary care specialties: 18.6% to internal medicine, 8.5% to pediatrics, 1.7% to medicine-pediatrics, 12.4% to family medicine and 2.3% to obstetrics and gynecology.



Trace Neal is headed to an internal medicine residency at Massachusetts General.

Nothing likely to ‘Match’ this residency process in one strange year

By CINDY ABOLE

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Matching into a residency program is supposed to be one of the pinnacle experiences during a medical student’s education.

But in the COVID-19 pandemic year, the experience for everyone involved was beyond typical.

The pandemic caused disorder and uncertainty in the traditional Match season as thousands of residency applicants in the United States and internationally, as well as numerous residency programs at hospitals and institutions, scrambled to create alternative and fair processes that would work within an environment of COVID-19 restrictions.

At MUSC, residency programs had already been anticipating a change since Spring 2020 as the university ceased in-person classes and moved all students to virtual learning. For medical students, clinical clerkships and away rotations were disrupted as recommended by the American Association of Medical Colleges (AAMC).

According to MUSC Graduate Medical Education (GME) institutional coordinator Ann Ronayne, who helps to manage 80-plus specialty and subspecialty residency programs in 24 areas at MUSC, many of the campuswide residency programs managed much of their planning and changes on their own. “Medical residencies and fellowships are so different. There’s not a one-size-fits-all approach to managing things. Most of the planning was left up to the residency program directors and coordinators to figure out as to what was best for their programs and their needs,” said Ronayne.

Department of Neurology residency program coordinator Cassandra Tucker was appreciative of the support and resources provided by the GME Office.

“The GME office stepped out of its scope to keep us informed about the latest guidelines and standards outlined by the Accreditation Council for Graduate Medical Education (ACGME) that needed to be communicated and made sure that these lines of communications remained open,” said Tucker.

The ACGME is the organization responsible for all graduate medical training programs for physicians in the United States.

Pediatrics residency program director David Mills, M.D. and coordinator Rebecca Hasegawa agree. “The GME office was very helpful with hosting intermittent virtual discussions among program directors and coordinators as we shared ideas, discussed methods to plan virtual conferences and safe gatherings, discussed residents’ wellness and strategy, etc. It was really helpful to hear this as it didn’t just affect our program, as these guidelines affected everyone. We were truly in this together to share ideas,” said Mills.

For the Pediatrics residency team, both Mills and Hasegawa quickly realized that the traditional recruitment process would change in the pandemic year sometime in mid-to-late summer; and they began to plan accordingly. “Since applicants would not be able to experience their residency programs’ ‘family vibe,’ collegial culture, the beautiful new MUSC Shawn Jenkins Children’s Hospital and MUSC Children’s Health R. Keith Summey Medical Pavilion and the City of Charleston, we began thinking of ways to engage applicants in various creative ways,” Mills said.

Taking that concept a step further, the Pediatrics residency team also included current residents and medical students from MUSC who were interested in pursuing a pediatric residency – and established virtual recruitment committees to serve as resources in



Photo by Sarah Pack

MUSC’s pediatric residency program team includes Dr. Mason Walgave, from left, Rebecca Hasegawa, Dr. Brynn Donnelly and Dr. David Mills, program director.

planning and feedback throughout the process.

These changes also led to important redesigns of the pediatric residency website and social media accounts (specifically Instagram @muscpeds) – adding videos and updating content and highlighting different aspects of the program’s curriculum.

Neurology did the same – utilizing the opportunity to enhance its electronic presence on the web. “We realized our webpage needed to represent our program and the Charleston area on a more current level. We pushed hard to update our presence on social media. We also created a recruiting video that received lots of positive feedback from applicants about its content and resources. We scrambled to improve virtual platforms like Zoom and Thalamus as well,” Tucker explained. Thalamus is a comprehensive interview scheduling platform used to connect residency applicants.

According to Tucker, the Neurology residency team asked themselves how they would make applicants comfortable enough so that elements of the residency recruitment process, such as virtual interviews, were not so one-dimensional and that the interviews would be taken seriously. “For MUSC Neurology’s Match process, we focused on a combination of things that I think made applicants get a sense of our program

and what MUSC and Charleston offered as well,” she said. “We made sure our applicants knew our residents had support in all areas.”

When the National Residency Matching Program (NRMP) launched “Match season” on Sept. 1, 2020, student-candidates began preparing and uploading materials to the AAMC’s Electronic Residency Application Service. And by October, and for the next four months, residency programs began recruiting and selecting their candidates for interviews.

The Pediatrics residency program launched the process with a virtual open house by which students from across the U.S. and abroad could visit their website, learn about the program and decide if they wanted to apply to the program. In a typical Match, the program hosts around 200 applicants for in-person visits and interviews. During the pandemic year, a total of over 1,000 people applied with 280 candidates virtually interviewed for 17 first-year (PGY-1) resident slots. According to Mills, the team determined which candidates would proceed to interviews, and then planners offered virtual happy hour events with current residents, which were meant to be casual question-and-answer sessions. For the virtual interview day, they built in more interaction with candidates through organized virtual coffee chats with

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COVID-19 Vaccines

Sharing recipes, kid trials and other things you need to know

BY BRYCE DONOVAN

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Do you want the good news or the bad news first?

No question has been more pervasive during the past year's pandemic than this one. It's almost as if it's left all of us hesitant to celebrate any victories, even big ones (like, we have three really amazing vaccines) in the war on COVID because we know there's always going to be a "yeah, but ..." right after it. For the past year it seems like for every step forward, there's been an accompanying step back. With each victory, a demoralizing caveat.

Vaccinated people can hang out with more people now. (Yay!) But they still have to wear masks. (Dang it.)

Social distancing and masking are really making a difference. (Sweet!) Texas is open for business! (D'Oh!)

Almost a quarter of the United States population has now been vaccinated (*Pats self on back*) Social inequities have never been more apparent. (*Face

palm*)

So just as this pharmaceutical freight train is starting to pick up steam and crank out massive quantities of vaccine, here comes the inevitable next wave.

And here we go again. Or do we?

"We are not out of the woods yet," said Danielle Scheurer, M.D., MUSC Health System chief quality officer. "It's up to us as to whether we're going to remain vigilant — by continuing to wear masks and practice social distancing — or relax too soon. We can do this. We just have to be smart. Nobody wants to lose all the ground we've gained."

Maybe it's another "but the bad news is" scenario all over again. But maybe, just maybe, this time we get to have a say



Scheurer



Photos by Adobe Stock

When it comes to this pandemic, it seems like for every bit of good news there's the accompanying bad.

in what the future holds.

With the vaccine landscape changing almost daily, each week we are checking in with Scheurer to ask her the most

pertinent questions that are hanging in the balance.

See VACCINE Q&A on page 9

MUSC Horseshoe upgrade

BY JESSE DARLAND

darlandj@musc.edu

In approximately six weeks, Information Solutions will upgrade the Horseshoe, MUSC's enterprisewide intranet (<https://horseshoe.musc.edu>), to run on the same version of Sitecore as MUSC's external websites. Content managers will experience a two-week content freeze in early May. There will not be any disruption to users of the site. This upgrade applies only to Horseshoe.

We are combining the Horseshoe and our external websites into one platform so we can maintain a single Sitecore platform with a single set of features. All features and components available to external websites (including embedded videos, rich callout components, etc.) will be available on the upgraded Horseshoe. In addition, new improvements made to MUSC's websites moving forward will also automatically be available on the Horseshoe. The Horseshoe's navigation and the look and feel will change slightly to match the external websites as part of this process.

"Visitors to the Horseshoe will have a much better experience, because all the rich content and designs

available on our external websites will now be available on the Horseshoe as well. Training will also be easier because content managers will only need to learn how to use a single version of Sitecore, and managers will be able to make internal and external updates from the same interface," explained Christine Gainer, manager of Digital Web Services.

Gainer added that they are asking all of the content authors who maintain sites on the Horseshoe to help to make this process go smoothly by doing the following before the end of April:

- Make any essential updates to your pages. As part of the upgrade, the Horseshoe's contents will be frozen for about two weeks in early May.
- Delete blank, outdated or irrelevant pages.
- In the Media Library, delete any old files or images that are not being used.

The Digital Web Services team also provided a helpful Q&A to prepare for the upgrade.

Q. Do I need to migrate my content to the new platform?

A. No, IS will transfer everything to the upgraded Sitecore. You will not need to migrate anything. However, we will not migrate web forms automatically, unless you specifically identify the forms that you need.

Q. What is a "content freeze"?

A. As part of the upgrade process, Horseshoe authors will not be able to make updates for a two-week period. That will start toward the end of April and end in early May. More firm dates will arrive in a later communication.

Q. What if I've changed positions at MUSC, and I don't know who updates the site I used to manage?

A. We can help. Please contact Digital Web Services, and we will find the appropriate contact.

Q. Will I need additional training to use the upgraded Horseshoe?

A. Maybe. If you've already been trained to update MUSC's external websites, then you will be able to use those skills to manage content on the upgraded Horseshoe. If you have only been trained on updating the Horseshoe, additional training will be needed.

Q. How do I log into the Horseshoe to make updates?

A. You can log into the Horseshoe to make updates by visiting <https://sitecore.horseshoe.musc.edu/sitecore>. Use your netID and password to log in.

For information on the Horseshoe upgrade, visit <https://horseshoe.musc.edu/everyone/information-solutions/digital-web-services/horseshoe-upgrade>.

What you need to know about the COVID-19 vaccine – Part 5

Danielle Scheurer, M.D., MUSC Health System’s chief quality officer, weighs in on the most pressing issues related to COVID-19 and vaccination. The following is a condensed compilation from recent articles that can be found in their entirety on the MUSC Catalyst News digital platform at web.musc.edu/about/news-center.

Q. How were things last week? How are they looking this week in terms of number of vaccines we’re receiving? Are we seeing that uptick yet?

A. You know what? It’s actually getting better. Last week, we got 20,000 doses and we’re expecting 24,000 this week. Our waitlist is gone. Our scheduling links are open. We’re into second doses with schools. It’s all good. We’re only scheduling like a week or two in advance, just to be safe. We’ve learned a lot from how things have gone in the past. We don’t want to get out over our skis. Going forward, I only expect our shipment numbers to go up.

Q. Is the demand for vaccine appointments dropping?

A. Yes and no. Some sites are slower to schedule than others. For fixed sites, like Florence at the Civic Center, people should come. I’m not afraid to put that out there. That’s a good spot to get a vaccine. If you’re willing to travel, it’s worth a look. On March 31, anyone over 16 will be eligible for a vaccine, so I don’t think we’re going to see a lull in demand.

Q. What a seesaw the AstraZeneca story has been. In light of all the recent news do you see it getting an Emergency Use Authorization (EUA)?

A. It’s pretty close to the other viral vector vaccines (specifically, Johnson & Johnson), so I don’t see why it wouldn’t. The only thing I can’t figure out is the efficacy against the South African variant was extremely low. It’s weird to even say this, but we might not even need it, given how much of the existing three vaccines are expected to be delivered in the U.S.

Q. I have heard some people are asking these companies (Pfizer, J&J, Moderna) to make their recipes public so other companies can make these things. What do you think about that?

A. I don’t know why they would. I think there’s more than one way to accomplish the goal. Like the Merck deal is a good example. (Merck partnered with Johnson & Johnson to help to manufacture its single-dose vaccine.) So forcing these companies to publish their recipes doesn’t make sense. I mean, who says, “That great new breakthrough drug you just made? Yeah, now it’s generic.” We’ve got enough vaccine that that just isn’t necessary.

Q. What are you seeing as far as long COVID symptoms go? Are we getting patients with lingering symptoms, like fevers, breathing trouble, cognitive/psychiatric problems, stuff like that?

A. We are in the process of setting up a long-hauler clinic – you know, for people dealing with lingering and long-term aftereffects of COVID. It’s desperately needed. These people need to be able to seek care and advice. I think some of them are made to feel like they’re crazy. We know it’s a really complicated virus. We can detect it in almost every organ in the body, so it’s not that big of a stretch that you would have prolonged symptoms.

Q. The U.S. government is committing \$10 billion to expanding screening to students returning to in-person schooling. Does screening really help or is that just one of those things that makes us feel better because at least we’re doing something?

A. It depends on the type of tests they use. If they use an antigen test, it’s not really that helpful. But if it’s a PCR (polymerase chain reaction) test – what we refer to as the “gold standard” – then it might be actually helpful. At MUSC, we’re switching almost exclusively to deep nasal, which might sound bad, but believe me, it is so much better than the nasopharyngeal test. It basically just goes midway up your nose. It might tickle but it doesn’t hurt. And it works just as well as nasopharyngeal swabbing.

Q. Is MUSC involved in any vaccine trials for children?

A. We are getting close, but right now we don’t have any up and running.

Q. Once that happens, how hard is it to get enrollees? Seems like a bit of a leap of faith for parents to put their kid in a trial, isn’t it?

A. Well, you’re asking a doctor, so I’m going to say no. (*Laughs*) But you’re right. It can often be hard to do a pediatric trial. Sometimes they have to offer incentives to give families compensation. What helps sometimes is, with a lot of these trials geared to younger people, there is a 2 to 1 enrollment, meaning there’s a 67% chance their children will get the vaccine. For me as a parent – and both my kids are in a trial, by the way – knowing there’s that good of a chance versus, say, 50%, is what swayed me.

Q. How do the vaccines they are using in these kids’ trials differ? Are they the same? A diluted version? Completely different?

A. That’s a good question. It’s the exact same vaccine, but they typically adjust the dose, just like you would with any medicine. The smaller the person, the less of it they need.

Q. Right now COVID cases in Britain are down 90% versus 79% in the U.S. From a vaccine standpoint, Britain has given nearly 45% of its population at least one dose versus 25% here. Do these numbers, looked at together, show that Britain’s approach (give as many people as possible at least one dose) is a better than ours (give people both first)? If so, do you think it’s worth changing course – and is that even possible at this point – in this country?

A. I don’t think so. I think we’ll have enough vaccine going forward that it won’t be an issue. I think we are too far along to change course now. The U.K. took a huge gamble there – thank God it worked.

Q. I know I’ve asked this before, but what if, say, a new variant pops up that renders current vaccines ineffective. Do these researchers – the same ones that came up with the current batch of vaccines – feel confident that they can solve the new riddle fairly quickly?

A. I think the two mRNA ones (Pfizer and Moderna) have expressed confidence that they could adapt to that. The logistics would be a giant headache – like distribution, scheduling, etc. – but as far as making it goes? Yeah, they could make it, no problem.

***Have a question you’d like answered? Email it to donovanb@musc.edu with the subject line “Vaccine Q.”*

MUSC's Mail on the Move program: Walk your way back to well-being

One of the ways the COVID-19 pandemic has reshaped our lives is that it has deprived many of us of our customary forms of exercise, such as gym workouts, group fitness classes and even the physical activity associated with daily living such as walking to and from meetings, coaching a child's sports team or browsing stores on a weekend. Additionally, preliminary studies looking at the impact of the pandemic demonstrate that not only do a majority of individuals report an increase in sedentary behaviors, but over 60% of Americans polled also report an increase in unhealthy nutritional habits and unintentional weight gain as a result of the pandemic.

Fortunately, with the emergence of widespread vaccinations, many of us are looking forward to resuming a more normal routine including the return to MUSC campus for many care team members that have spent more than a year working remotely. Not only will the return to regular operations signal a moment of victory over the COVID-19 pandemic, but it will also be an opportunity for all of us to reengage in many healthy behaviors that we have gotten away from over the course of the pandemic.

Not sure where to start? Walking is great place to begin. A short walk in between meetings or a brisk walk during a lunch break boasts substantial health benefits and remains one of the simplest and easiest forms of exercise to do. Another way in which you can get additional steps in upon your return to campus is through retrieving your departmental mail. While it may seem simple, the new and improved MUSC mail system provides care team members with the opportunity to get in their steps and improve their well-being while getting their mail.

The MUSC Office of Health Promotion and MUSC Mail Services have collaborated to launch "Mail on the Move," a walking challenge designed around the newly launched MUSC nodular mail system. The new system features nodes/zones centrally located to every department/clinic where mail can be picked up on a weekly or daily basis. Not only is the new system more efficient in terms of delivery time, but it provides care team members with an opportunity to build in short sessions of walking/physical activity throughout their workdays.

The Mail on the Move program also creates an opportunity for connection

with a colleague, something that has been sorely missed within the remote work landscape, by allowing you some time to get your steps in together. Of course, there is also room for some friendly competition — try engaging your coworkers in a step challenge and use your mail walk to log more throughout the day.

As simple as it may seem, even the shortest or slow walks compound to have positive physical and mental health benefits for all who engage on a consistent basis. Past studies have supported this notion, finding that a daily walk(s) can reduce the risk of a multitude of chronic diseases and mental health conditions and is even linked to increased longevity.

THE PHYSICAL BENEFITS OF WALKING

A 2018 study from the Centers for Disease Control and Prevention examining the health benefits of walking found that the energy used for moderate intensity walking resulted in reductions in risk for high blood pressure, high cholesterol, diabetes, heart disease and even certain cancers.

Walking can also help boost your

businesses," said Burnham-Williams.

The virtual gathering will offer exposure to cultural resources, an economic development update and spotlight on minority-owned businesses, according to event organizers with Black Expo South.

The summit's "empowerment" experience will highlight five pillars of economic growth and sustainability — education, health, jobs, entrepreneurship and wealth creation — all critical to the economic growth of the Lowcountry community and state.

- Education – Preparation for higher education and science, technology, engineering and math (STEM) opportunities.

See **SUMMIT** on page 11

MUSC Health & Well-Being

By Susan L. Johnson, Ph.D.,
MUSC Office of Health
Promotion



immunity, which is now more important than ever as we navigate the pandemic. A study of over 1,000 men and women found that those who walked at least 20 minutes a day, a minimum of five days a week, had 43% fewer sick days than those who exercised once a week or less. And if they did get sick, it was for a shorter duration, and their symptoms were milder. Another recent study found that walking can reduce cravings and intake of a variety of sugary snacks, which have been linked to weight gain, obesity and chronic diseases such as diabetes.

THE MENTAL HEALTH BENEFITS OF WALKING

While the physical benefits are notable, the mental boost from adding a walk to your daily routine may be more immediate. A 2017 study found that walking increased creative output and productivity at work more than 50%. According to the study, walking opens up the free flow of ideas, and it is a simple and robust solution to the goals of increasing creativity and increasing physical activity. Furthermore, studies show that even a 10-minute walk can dramatically reduce perceived symptoms of both anxiety and depression.

Walking in nature, also known as "green exercise," was found to reduce negative emotions and decrease the risk of depression.

HOW WILL YOU WALK?

We encourage you to share how your department engages in the "Mail on the Move" program by sending in photos or testimonials about how you choose to get moving to musc-empwell@musc.edu.

Questions about where your departmental mail pick-up location, please contact smallsea@musc.edu.

Black Expo Summit set for April 24

Staff Report

The 2021 S.C. Virtual Black Expo Economic Empowerment Summit will be held from 10 a.m. to 4 p.m., Saturday, April 24. This year, the summit will include a statewide focus, connecting the Lowcountry, Midlands and Upstate and aiming to educate, enlighten and empower people throughout the state.

Offered virtually due to the continuing coronavirus pandemic, the unique event will feature the American gospel vocal group the Clark Sisters and rapper, actor and record producer Master P.

This year's summit sponsors include

MUSC, Boeing, Dominion Energy, Blue Cross Blue Shield of South Carolina, Nextera Energy, Richland County, University of South Carolina, the City of Columbia, S.C. and Wells Fargo.

Willette Burnham-Williams, Ph.D., chief equity officer, MUSC Department of Diversity, Equity and Inclusion, was integral to MUSC's sponsorship of this year's event. "MUSC is proud to be title sponsor for the 2021 Black Expo. During an unprecedented year that has harshly impacted the health and economic sustainability of communities of color, MUSC remains strongly committed to eliminating care disparities and promoting the increased opportunity for Black and other minority-owned

HOLDING *Continued from Page One*

vaccinated every day. South Carolina just opened up vaccinations to anyone 16 and older.

And right now, Sweat puts a conservative estimate of the immunity level in the Tri-county area at about 40%. That factors in the number of people who have been vaccinated and the number who have tested positive for COVID-19 during the past three months. He uses three months as a standard because it's the only post-infection time period for which there's scientific evidence about immunity at this point.

Meanwhile, statewide, Sweat puts the current immunity level even higher, at about 45%. And he likes what science suggests about the near future. "We have strong data that says within three months from now, about 83% of people will have good immunity."

But Sweat worries about a few things that could help the coronavirus make a comeback. First: the presence of variants. A lab at MUSC found both "variants of interest" and "variants of concern" in coronavirus samples earlier this month.

The South Carolina Department of Health and Environmental Control is tracking them, too.

Sweat is especially concerned about a variant first spotted in the United Kingdom. "That's the one we're seeing in almost 20 or 30% of our cases in South Carolina now. And it's 50% more transmissible," he said. "In Europe, they're having a major outbreak and they really attribute it to that variant."

Another concern: vaccine hesitancy. Not everyone who can get vaccinated wants to. Sweat recently got early results from a survey his team conducted on the coronavirus in the Charleston area. It found that about 30% of the people who responded either aren't sure if they'll get vaccinated or already know they don't want to.

Finally, Sweat worries about caution fatigue. People are sick of worrying about getting sick. "I don't think they're being as vigilant. Right now, 60% of people in the Tri-county area are unvaccinated or haven't had COVID, putting them at risk. You know how this virus works. Once it gets into the right network, it can really fly."

TRIAL *Continued from Page Two*

list the number of participants. It's a feeling similar to the early days of the pandemic, when I felt so connected to our larger global community.

While it hasn't been the smoothest rollout, I am excited and hopeful that this vaccine will soon be approved in the U.S. The faster we get more vaccines in arms, the better! Of course, I've been paying attention to reporting on efficacy rates, effects on severe illness and potential correlation to blood clots. I still feel very confident in my participation and the vaccine.

With my records unblinded, I was advised not to take another vaccine and asked to continue participating in the trial, which I will be doing. At this point, it's a weekly e-diary that takes less than a minute to complete and the occasional in-person appointment. Overall, I've had a great experience, especially

SUMMIT *Continued from Page Ten*

- Health – A focus on reducing health disparities that negatively impact the minority and low-income communities. Healthy communities make for better economic decisions.
- Jobs – Looking at long-term economic development with sustained employment and elimination of barriers to

considering my early vaccination and tiny role in history. I would absolutely participate in a trial again.

It truly feels like an end is in sight as my family and friends receive their vaccines. I know life won't be exactly as it was before, and for now, we must continue taking precautions. But there are signs of normal life returning. There are talks that soon we will be gathering again for celebrations, and I can now walk in busy parks and go to the gym without the all too familiar underlying fear that has accompanied us for a year. And, eating outside at restaurants will soon seem like just another expected perk of spring in Charleston.

So with this final entry, I urge each of you to get the vaccine as soon as you can, continue to protect yourself and others by masking and following guidelines and practice patience for just a little longer. And if you get the chance, participate in clinical research.

employment.

- Entrepreneurship – Evaluation of the fundamentals for successful business creation and growth.
- Wealth creation – A look at the elimination of the wealth gap, education through financial literacy.

To register for the event, visit <https://blackexposouth.vfairs.com/>.



Increasing Engagement of LGBTQ+ Populations in Health Care Delivery and Health Research: Lessons Learned
Co-Sponsored by Student Alliance for Equality (SAFE)

Thursday, April 15th 2021
12:00 – 1:00 p.m.
Approved for 1-hour of DEI Credit

With panel experts representing clinical perspectives, community advocacy, and research implementation, this presentation will highlight needs of LGBTQ+ populations and address strategies to overcome barriers to their inclusion in research and clinical care.

Presented By:
Chase Glenn (pronouns: He/Him)
Executive Director of the Alliance For Full Acceptance

Liam C. Hein, PhD, RN, FAAN
Associate Professor, University of South Carolina
Senior Atlantic Fellow for Health Equity, GWU-Atlantic Institute

Marty S. Player, MD MSCR
Associate Professor, Department of Family Medicine, MUSC
Co-director Primary Care Telemedicine

Chase Glenn has been named the first-ever MUSC director of LGBTQ+ Health Services and Enterprise Resources Effective Monday, April 19, 2021



SCTR Lunch & Learns
More Information & Registration:
Visit [SCTR.musc.edu](https://sctr.musc.edu) > "Education & Training" or email burgsteil@muscedu

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<https://is.ed/lunchandlearn>

PROCESS *Continued from Page Seven*

current pediatric residents, using Zoom breakout rooms. Finally, Mills met with candidates in small groups in 20-minute sessions, where he discussed experiences and answered questions.

“We wanted enough ‘face time’ with the candidates to market our program and evaluate the applicants,” said Mills. “A huge part of what we do is learning about that applicant. We asked questions like, ‘Will that person be a good fit for our program?’”

Since it’s difficult to assess an individual fully on camera versus in person, Mills also evaluated each applicant’s interactions with him – gauging his or her intercommunication skills via webcam, nonverbal communications and responses to behavioral-based questions. “In the past, it may not have been a red flag to me, but in this virtual process, it became a big deal,” said Mills, “These were all features that were important to me in looking for a good resident.” He also placed more of an emphasis on letters of recommendation when determining each applicant’s score.

For March 19’s Match Day results, Pediatrics matched a total of 22 interns – 14 categorical pediatric interns, three Primary Care interns, one child neurology and four Internal Medicine/Pediatrics interns – two of whom are MUSC Class of 2021 soon-to-be graduates.

Neurology also followed a similar process on its virtual interview days. Tucker would meet with applicants to answer questions and resolve any technical issues. Nicholas Milano, M.D., residency



Photo by Sarah Pack

Dr. David Mills, right, rounds with pediatric physicians at MUSC Shawn Jenkins Children’s Hospital.

program director, conducted a program overview with candidates, followed by a virtual lunch with Neurology residents, interviews and a farewell with Milano.

“Virtual interview were an atypical experience for both faculty and candidates. Due to the interviews being virtual, it made assessing the program and candidates more challenging,” said Tucker. Therefore, candidates were provided with information about the program prior interviews. As well as email addresses of everyone who participated with the interview process. This allowed candidates to email specific questions, as some preferred to email specific questions to ask a question privately rather than in a virtual group setting. “Being responsive and providing alternative

methods of contacting the program such as text, messenger in addition to great residents, faculty and a strong program, I believe are some of the components applicants noticed and appreciated.”

The Neurology residency program manages a total of 34 residents and fellows as well as four neuro-psychiatry residents and four child neurology residents. For this year’s Match process, the program interviewed 95 applicants and matched eight PGY-1 intern residents.

With the pandemic still evolving, many people involved in medical residency programs feel that this experience – or something like it - might still exist for the 2021-2022 Match process.

According to Mills, the Pediatrics residency program continues to evaluate its process. They shared brief surveys with all applicants to determine what went well and how they could improve the experience in the future. “I really envision that virtual opportunities will continue to play a big role in the residency recruitment process in the future. I do see some type of hybrid model using virtual and in-person interviews across the country moving forward.”

According to Ronayne in the GME Office, “I believe the AAMC wants to see how this year’s Match program goes and how successful matches will be. Website platforms, virtual tours and other tools will stay with us, and we can’t get complacent about the information that’s out there. Programs will need to continue updating their information to make them more competitive with other residency programs around the country.”

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