The following principles and information are offered as guidance for medical schools navigating the clinical curriculum and tolerating uncertainty during the COVID-19 pandemic.

- **Deliberately and prospectively identify** those clinical experiences/assessments that can only be met with direct (in-person) patient contact versus those that can be achieved and/or assessed through alternative/virtual formats (Curriculum Committee).

- **Anticipate and plan for M3/M4 overlaps and sudden loss of access to clinical training site(s)**; this depends completely on the deliberate, prospective identification described in the first bullet item.

- **Review the learning objectives of all clerkships**, including typical final-year clerkships such as emergency medicine and critical care, and **determine whether some objectives may have been met in another clerkship or clinical experience at another point in the student’s curriculum** (Curriculum Committee).

- **Consider waiving elective graduation requirements to allow time and resources for completion of clinical requirements** (Student Advancement and Promotion Committee).

- **Be flexible and innovative** with the time and space of clinical encounters – **think longitudinally and qualitatively, not quantitatively**, about the clinical curriculum and be prepared to track each student’s progress through it.

- **Grade consistently** across clerkships from a time certain and **ensure clarity on transcripts and in the MSPE**.