Corona virus pandemic has begun a new human era including a newer era of medical education. All sorts of medical education, conferences, seminars, and workshops have been affected by the outbreak of the pandemic.\(^1\) The rapid spread of COVID-19 has affected medical students physically, academically, financially, and psychologically.\(^2\)

During in pandemic, norms of compulsory social distancing, sanitation, hygiene, and various guidelines and recommendations, not only in the clinical practices but medical schools, have been transitioned from the way of living from traditional into online methods. Besides, practical classes, clinical rotations, and direct patient encounters of clinicians and medical students have been deferred, paused or stopped. Most of the clinicians across the globe are following new standards of online consultation whereas the medical educators are conducting lectures, classes and group learning activities virtually or in hybrid technique. If a similar situation continues, there might be days in future when universities will also conduct written or viva-voce examinations virtually. Thus, there is increasing scope of telemedicine even in post-pandemic status for clinicians, medical educators and students.\(^3\)

Telemedicine is the use of electronic information and communication technologies to support health care as well as medical education when distance separates participants. Concerning the current scenario, there is a limitation of traditional healthcare consultation, minimized healthcare access and access to standard medical education. Thus, the telemedicine platform in the current scenario has come to the rescue in this situation to the clinicians, medical students and teachers.\(^1\)

Although the medical students might not directly be involved in patient care at such an early stage, it is important to expose them to different technologies and teach them how to incorporate telemedicine in day-to-day life.\(^2\) In various parts of the world, medical students have undertaken a variety of ‘frontline’ roles, according to institutional and national healthcare needs, as well as their own knowledge, experiences and preparedness, which provided them learning experience. Thus, there is much need of knowledge of telemedicine among medical students.\(^2,\,3\)

The basic aim of using telemedicine in medical education could be useful in facilitating basic and clinical knowledge acquisition, decision making improvement, enhancement of variation in anatomy knowledge or 3-dimensional simulations. Besides, it could also be helpful in improving skill coordination, practicing for rare or critical events, training, and improving individual psychomotor skills. These newer goals in newer scenario can be incorporated into newer curricula and integrated with existing clinical experiences. It would certainly help students with core telemedicine and clinical skills to prepare them for current and future pandemics as well as develop the competencies for this transition.\(^4\)

Medical educators could explore major domains of telemedicine like access to care, cost-effectiveness, patient experience, and clinician experience. Thus, we should use this opportunity to improve the medical curriculum by an incorporative hybrid method of teaching, learning including real and virtual methods using telemedicine. Furthermore, it’s the time to adopt the practice of telemedicine and harness its advantages in new curricula.\(^2,\,5\) The universities and various bodies like Medical Education Commission, Nepal Medical Council, Nepal Medical Association, or could work together in designing and implementing a telemedicine in newer medical education curriculum.\(^1\)

**REFERENCES**