So you think you want to be a doctor? Pre-med advising tips
48,014 applicants in 2013/20,055 admissions (~42% success rate)
- Average applicant MCAT score = 28.4
- Average matriculant MCAT score = 31.3
- FYI 141 accredited medical schools in the US
Outline for today

- Assessing fit for medicine
- Preparing for medical school or to think about medical school/the health sciences
- Getting started/preparing
- The application/admissions process
- The ‘holy trinity’
- Additional tips and resources
- Discussion/trends observed
Initial questions

- Common challenges working with pre-health students?
- Common questions received?
- Many pre-health students (outside of premed?)
- What would be helpful today?
Some statistics

- **Statistics**
  - 52% of doctors don’t feel fairly compensated
  - 58% of MDs would choose medicine as a career again (only 26% would choose their particular specialty)
  - Common issues: depersonalization, emotional exhaustion, overall burnout

- **Audience**
  - Do you know this?
  - Do you reveal to potential applicants?
Assessing fit

- Reorient students around careers in the health sciences, not just medicine
- Help them understand the realities of these careers
- Understand connection between individual’s skills and the skills needed to be successful in the field
Assessing fit: why do you want to be a physician?

- **Common but problematic responses**
  - ‘Good at science’
  - Prestige/money
  - Someone else’s dream

- **Better answers**
  - Skill/interest combination
  - Commitment to serve
  - Lifelong learning

- **Sample interview questions to address this issue**
  - What is a day in the life of a doctor like?
  - Why do you want to be a physician?

- **Goal: compel an understanding that the process is long and arduous, involving sacrifice and deep commitment**
Questions

- What an MD? Why not a PA (for instance)?
- **Why will you be a good physician?**
- What will you do if not admitted to medical school?
- What has informed your perspective?
- Who has informed your perspective on the field?
- **What is the relationship between medicine and science?**
Regarding prestige

Why Do So Many Doctors Regret Their Job Choice?

The latest version of an annual survey from Medscape/Web M.D., shows dissatisfaction among U.S. doctors rising. In an online questionnaire of 24,000 doctors representing 25 specialties, only 54%, said they would choose medicine again as a career, down from 69% in 2011. Just 41% would choose the same specialty again. Only a quarter of doctors said they would choose the same practice setting, compared with 50% a year ago.
Regarding prestige and glamour

- First priority should be shadowing and working in a clinical setting
- Great career IF it’s the right fit
- Put income in context
- Read up on the field
Skills

- Science critical, but...communication and trust-building are where real successes happen
- ‘Good at science’ does NOT equate with a good doctor, at least not a provider
- Strong interpersonal skills critical
- Strong science essential for medical school, but importance wanes
What if medicine isn’t the right fit?

- Other fields in medicine
- Allied fields in science
- Other fields
- Research?
Other frames to consider

- Healing vs. prevention
- Wellness vs. rescue
- Setting
- Level of autonomy
- Debt

Social Determinants of Health

Medicine is largely about relationships
Medical school preparation

• **It’s scary, but can be approachable**

• **The Holy Trinity**
  - Relevant employment/volunteering
  - Research
  - Grades & scores

• **Secondary**
  - Letters
  - Forge relationships
  - Societies, honors awards

• **Admission chances lower without a gap year**
  - Do something—anything—relevant to medicine, preferably something new (identify before applying)
Relevant activities

- Employment and/or volunteering in a related setting
  - Start early and target sustained activities
  - Get exposed to health systems; understand the reality
- Research
  - Critical, even if student doesn’t want to be a researcher
  - Grasp of scientific process and importance of field
- International experience...
  - Nice supplement, but everyone has it now
  - Skip two week-style medical service trips
Need a hook

Unify statement with a thesis or thread

Experience + preparation + goals = a strong statement

1-2 stories or anecdotes with examples as often as character count will allow

Make is personal

Be direct

How WILL I be successful?
Common challenges

Comment [t1]: Somewhere in your opening paragraph you need to make a very enthusiastic and explicit statement that medicine is the career for you.

Comment [t7]: All three of these paragraphs are strong, but all three lead with your interest in computer science, which is risk. You need to be talking about why you want to be a physician, not exclusively about how computer programming has prepared you to be one. Second, and this is crucial, you need to add more content about working with human beings. That dimension is a critical absence in this essay—people are complicated, messy, often unpredictable, etc., and you need to show your understanding of that. That is, you can still say all the things about how CS has prepared you for med school, but you must also show that you understand how we need skills like empathy, patience, creativity, etc. when dealing with actual human beings. These skills are all needed for solving problems, and people don’t behave in a way that algorithms can address, at least not always. I think you’ll get blasted by reviewers if you don’t address this.

Comment [t11]: Through these experiences, you obviously have a depth of understanding of the concurrent factors that create ill-health (racial inequities, access issues, nutrition, etc.). A good candidate speaks to all of these, so use your experiences to show your depth of understanding of the scope medicine needs to take to create better health.

Comment [t2]: I think this is a lovely vignette, but it’s not yet developed in a way that hones the intuitiveness piece. Help me a little more...what about your intuition mattered here? To me this reads like a story of courage and kindness, which is not a bad thing but I think there’s a bit of a disconnect with the message here...and we need a really tight message.

Comment [CF1]: Your opening paragraph needs to close in something resembling a thesis that cues up the rest of the narrative and gives it some sort of organizing principle.
Secondary essays

- Take them very seriously!
- Answer the question
- Say something that hasn’t already been stated, or say it in a new way
- Can never know if school is *really* interested, so must treat all as if that’s the case
Letters

- Be strategic
- Cover character from many dimensions
- Prioritize academic and research letters
- Guide writers!
- An impersonal letter can be worse than no letter
- Structure matters
  - Bullets and bolding
- Use cues
  - Bolding, relevant jargon, headings, etc.
I have known Michael for over three years, during which time he has been a summer intern for... I am Director of the program, and have interacted with Michael as a direct supervisor, indirect supervisor (i.e., giving him goals and expecting him to work with others). He has worked independently, and I have also worked directly with him on some projects.

**Comparison with peer group:** Each year we have one to three such interns, all likely to attend Medical school. Michael is one of the best, perhaps the best, of this group in terms of intelligence, work ethic, independence and thinking ability. He is also thoroughly pleasant, and with excellent social and team skills. This assessment is based upon ability to produce high-quality output (presentations, data analysis, documents) that exceeded expectations/under the minimal ‘brief’. It is based upon his grasp of complex subjects compared to others (he ranks first in my sample for independent ‘academic’ skills) and feedback from permanent staff who worked with him as peers.

**Unique Contributions to the Incoming Class:** I view Michael as someone likely to energize his peers, feed their intellectual curiosity, and promote group cohesion. I base this on his own curiosity (he would always seek to learn details about anything new or challenging to him) and his ability to communicate well with all members of the team, regardless of their background (we have a culturally/socially/sexually orientated/religiously diverse team that includes many who are nowhere near as intellectually gifted as Michael, but he worked well with them and made them eager to work with him/learn from him/happy to hear his findings). In his resume you will note his passion for experience, to validate and calibrate the intellectual materials that he learns in a thoughtful and appropriate way. That experience, and his personality, will be valuable and motivating for his peers.

**Thinking and reasoning competencies:** Much of this is covered above, but I would add that when faced with a specific problem (how does sleep apnea affect cardiovascular health, for example), his approach was to learn and assimilate, collect data and analyze quantitatively, use critical thinking, and present it as elegant a way as he could. On more than one occasion, for example, he conducted statistical analyses and prepared both PowerPoint and a written document, going beyond the expectation. Of course, his actual skills (statistical analyses, for example) were only a little better than those appropriate for his educational level at the time, but his approach was excellent (better than many PhD students that I have known) and is perfect for the more detailed instruction that he will get in Medical school.

**Science competencies:** He navigated scientific and medical concepts in sleep medicine independently and with ease. Unlike many, he sought to understand and not just know (for example, relating facts on the subject of apnea/CVH).

**Interpersonal competencies:** As mentioned above, Michael is well-above average for social and cultural competence. He is a natural leader, and others want to work with him because of his inclusive nature. He is interesting and engaging.

**Intrapersonal competencies:** Michael is ethical and strongly self-motivated. He did not want to present a project to ‘the customer’ (usually me) until it met his standards of completeness and was well presented. Since he also understood deadlines, this meant that he would work extra to meet his standards. There were occasions when the feedback to a project was not as positive as I think he was expecting. On those occasions, he regrouped quickly and re-engaged to fulfill the clarified expectations. He was thoroughly reliable. That was reassuring to other staff and commented on by them (one of the reasons he was here on multiple summers, in fact).

In conclusion, I have known many candidates for medical school, and I see Michael as being amongst the best. He has many strengths, and is well motivated to make the most of the personal, social, and intellectual opportunities in the next phase of his career and life.
Sample interview questions

Clinical experience
What are your strengths and weaknesses interacting with patients?

Understanding the challenges of being a physician
Why do NPs or PAs do as well or better than physicians on evaluations and outcomes?

Global thinking
Regardless of how you did in the course, what class do you think all medical school applicants should take?
Sample questions

Thinking like a scientist

*You’re given a large budget to address poor health in a rural Washington community. Where would you start?*

Showing self-awareness

*How would your friends describe you?*

Medicine as more than equations

*What is the relationship between science and medicine?*
Other resources

- Cleveland Clinic Resources
- Favor American Medical College Application Service (AMCAS) resources over US News and World Report
- College advisers

AAMC Data Book: Medical Schools and Teaching Hospitals by the Numbers 2014

$219.00 - Non-Member, For-Profit

quantity: 1.00  Add To Cart

2014, 152 Pages
Thanks

- Questions? Call or email
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