



# The Guide to Becoming a Physician

A complete resource for those applying to medical school

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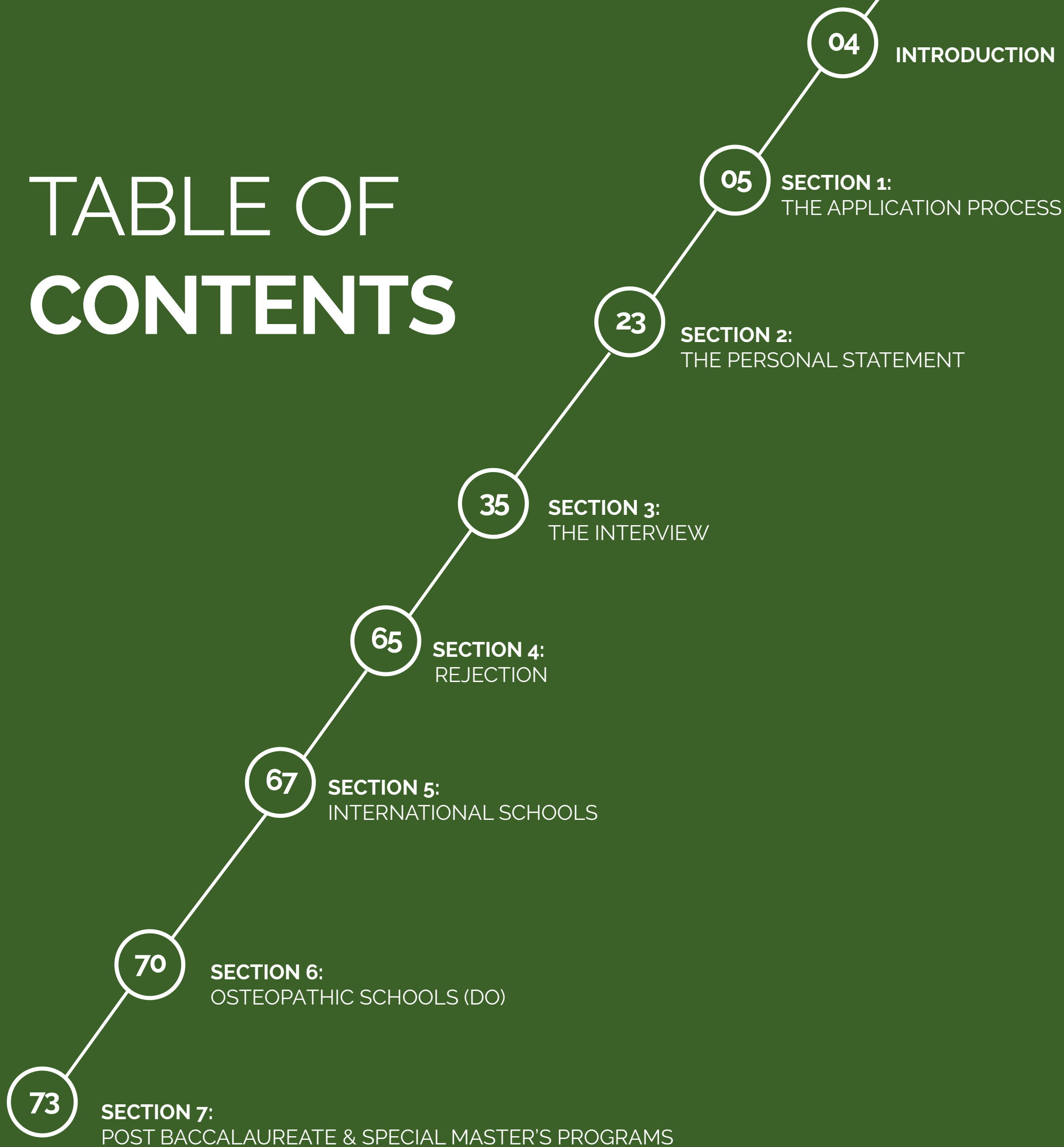
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# Introduction

There is little doubt that applying to medical school will be one of the most challenging endeavors you undertake in your career. More than 53,000 students applied to medical school for the 2020-2021 application cycle. Just over 22,000 matriculated. In short, the competition for school slots is more competitive than ever – and this means that understanding and excelling at the application process is incredibly important.

At MedSchoolCoach, we have been helping students through the application process since 2007. To date, we've helped more than 15,000 students through the process and have gained incredible insight into what makes a successful – and unsuccessful – applicant. As physicians ourselves, we understand how arduous the journey is, and also how rewarding it can be. We've decided to share some of our experiences as pre-meds, medical students, admission committee members, and doctors with you.

This book is meant to guide you through the application process and ensure that you have the knowledge that you need to avoid the pitfalls that many applicants fall into. Following the tips in this book and avoiding these pitfalls can mean the difference between acceptance and rejection.

This book should provide you with a framework to attack your application. However, there may be many questions left unanswered for your particular situation. For this reason, we also **offer extremely effective and successful one-on-one admissions consulting at MedSchoolCoach**, and encourage you to seek our assistance if you need any further clarification or help.

Let's begin the journey now!

# SECTION 1: THE APPLICATION PROCESS

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## *The Importance of the Application*

The journey to becoming a medical student starts with the application process. It is almost impossible to overstate how important your application is, and why you should give it the time and effort it deserves.

This application serves as your own virtual representative and is the only information a school will have about you. If you are lucky, you will have a chance for the admissions committee to meet you in person at an interview, but until then, all they have is the stack of paper you have provided them.

A well-written application can really help you stand out from the crowd of your fellow applicants in this *highly* competitive process.

First, you should keep in mind that there is now a two-step process to medical school applications. The American Medical College Application Service (AMCAS) provides a potential applicant with the ability to create one form that will serve as the primary application for all of the schools to which you are applying.



This centralized application will be what each school reviews before inviting you to fill out a *secondary* application to their particular school. The AMCAS application includes academic information such as your grades and MCAT score. More importantly, it also gives you the chance to let the schools get to know you better as an individual with information about extracurricular activities, your personal statement, and other biographical details. You can access the application at [www.amcas.org](http://www.amcas.org). This section of the book will walk you through each of many components of this form in order to help you successfully complete it.

To begin with, most applicants wonder if it matters *when* you submit your application. AMCAS is available to those wanting to begin the application process in May. You can submit your application anytime between June 1st (though this date may change slightly from year to year) and October 15th. This time window leads to a lot of unnecessary confusion among applicants. The important thing to remember, however, is that many medical schools admit on a rolling basis and almost all of them interview on a rolling basis as well. Thus, the earlier you submit your application, the more spots available. This means that you want to submit the application as early as possible, but also give yourself enough time to draft, review, and complete your application to the best of your abilities. To maintain the balance between the advantages of early submission and the quality you could add to your application with a later submission, make it your goal to submit as close to early June as you can. Keep in mind, too, that even though you may submit in early June, it takes anywhere from one to eight weeks for AMCAS to **verify** your application before medical schools can see it. The earliest medical schools will typically review your application is late June.



# Important Term: Verification

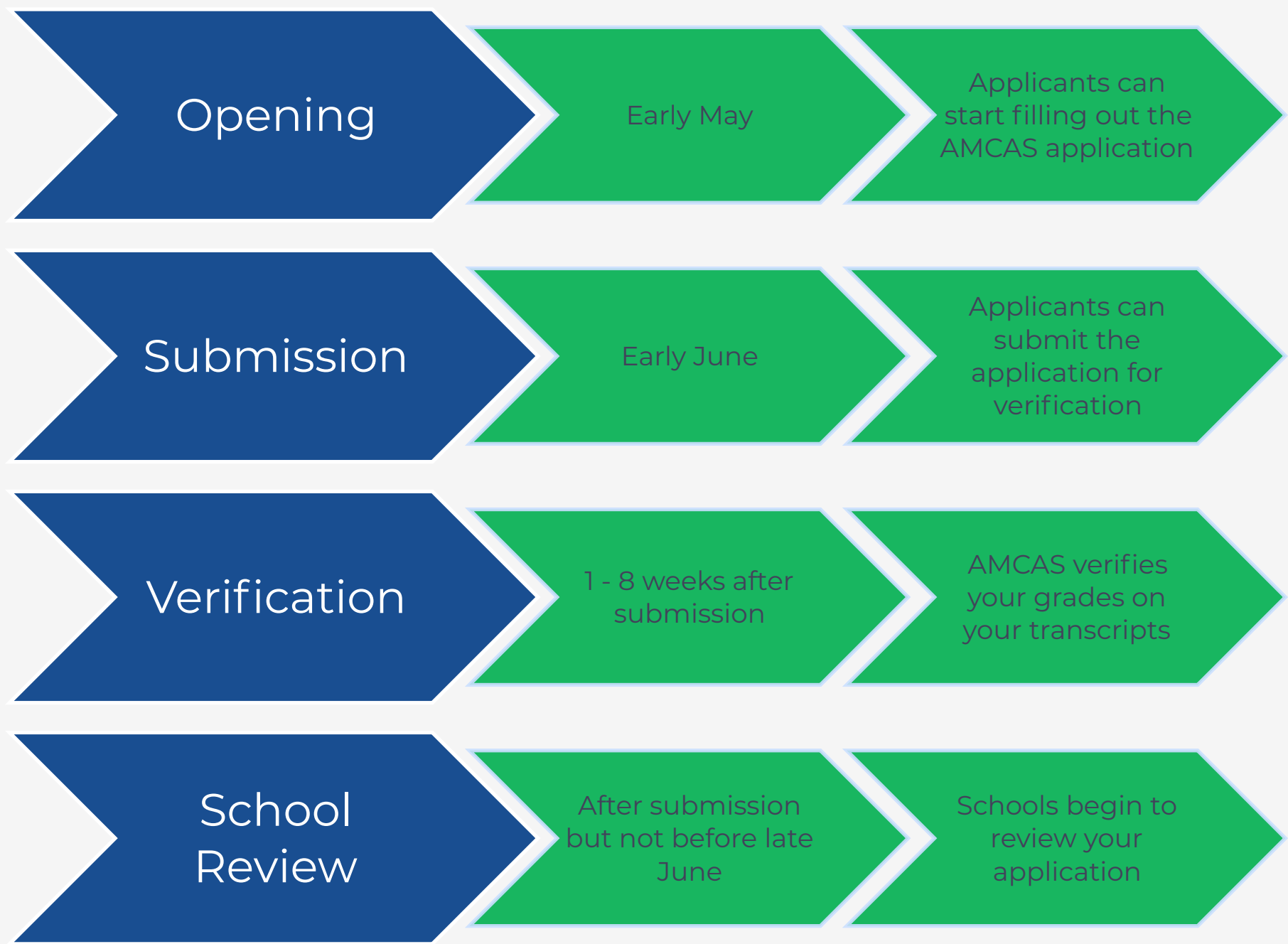


- *Once you submit your application to AMCAS, you will receive an acknowledgment of its receipt via email (provided you have included a valid email address). Such acknowledgment does not indicate that your materials (i.e., official transcripts) are complete or that deadline requirements have been satisfied.*
- *The AMCAS Verification process starts when your application has been submitted and your official transcripts have arrived at AMCAS. Once all of your materials have been received, your application joins the verification queue. Processing can take up to 8 weeks from the time that your application and all required official transcripts are received.*
- *During the Verification process, AMCAS verifies your coursework against your official transcripts, ensuring that the course information entered in your application matches that on your official transcripts.*
- *AMCAS may return your application to you—which could result in missed deadlines—if major errors or omissions in course listings are found during*

*verification. AMCAS will stop verifying your materials and send an email notification if any missing or incomplete transcripts are discovered during verification.*

**Source:** AAMC.org

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## Beginning the Application

The first section of the AMCAS is for general identification information. This is where you will enter your full legal name, date of birth, residence, applicant ID, and gender. There will also be an area where you will provide your contact information, information about your parents, and whether you have been involved with any felonies or misdemeanors. When filling out this section, remember to provide a valid email address. This is important, as that email is the main way for both AMCAS and for medical schools to contact you.

In the second section, you will enter your high school and college information. Be sure to include any schools you attended and earned credit. Yes, that summer school credit for civics you took at a government-themed summer camp counts. Every school you earned credit at—list it. In addition, you will need a transcript from each institution you attended after high school. You will need this for your own records when entering your grades later in the application and will also need to send an official copy to AMCAS for their verification. In this section you will also need to enter any disciplinary action you received during your schooling. We will discuss how to address these issues later in this chapter.



# MedSchoolCoachInsight - Don't Confuse the Mailman



*It sounds simple, but make sure to correctly list the demographic information section on your AMCAS. Mistakes here stick out like a sore thumb and they happen more often than you'd think! We've seen hundreds of applications with this basic mistake and it is grounds for immediately being put in the rejection pile!*

*Example:*

- *Incorrect: "330 brookline avenue"*
- *Correct: "330 Brookline Ave"*

BIOGRAPHIC INFORMATION	
Birth Date: 08/16/1989	Dependents: 0
Birthplace: miami Miami-Dade (U), FL, United States	
Visa Status:	Ethnic Self-Identification: Not Hispanic, Latino or of Spanish origin
Racial Self-Identification: White	Military Service: No
	Anticipated Status at time of enrollment:

## Entering Your Course Work

Be warned: this part of the application can be time-consuming and tedious! This is because you will need to manually enter in every course you took after high school, as well as the grade you earned, into the AMCAS system. **It is imperative to have a copy of your transcripts on hand so you correctly enter in all of your information.** AMCAS independently verifies the grades you entered by checking them against the copy of your transcript your colleges have sent them. Any confusion between the two documents will lead to a delay in the processing of your application, which could take weeks. AMCAS will also calculate your GPA for you in an effort to standardize different grading practices across institutions. They will calculate a separate GPA for your BCPM (Biology, Chemistry, Physics, Mathematics) courses and a GPA for all of your other coursework.

More emphasis is placed on your BCPM coursework for medical school, but it is important to show your well-rounded nature by doing well in varying subjects. In fact, some schools are putting more emphasis than others on strong backgrounds in the humanities. One great example of this is the School of Medicine at Mount Sinai, which as far back as 1987 began their HuMed program to accept students from top liberal arts colleges around the country. HuMed has recently been expanded to include students from *all* liberal arts backgrounds and from *all* schools. Studies have shown that these students have been as successful at the school as those with more traditional backgrounds.

To continue, your GPA will also be broken down by year (High School Freshman, Sophomore, Junior, Senior) as well as by undergraduate, post-baccalaureate undergraduate, and graduate. You'll see that each of these is actually reported as a separate line. This can work to your advantage because a poor undergraduate GPA can be remedied by a strong graduate or post-baccalaureate GPA! A few important things to remember are highlighted in the boxes below.

VERIFIED GRADE POINT AVERAGES						
GPA Calculations will appear only when your application status is Processed						
Status	BCPM		AO		Total	
	GPA	Hours	GPA	Hours	GPA	Hours
High School						
Freshman	3.39	15.00	3.52	10.00	3.44	25.00
Sophomore	3.84	17.00	3.33	9.00	3.67	26.00
Junior	3.19	24.00	3.10	9.00	3.16	33.00
Senior	3.13	30.00	2.95	20.00	3.06	50.00
Postbaccalaureate Undergraduate						
Cumulative Undergraduate	3.33	86.00	3.17	48.00	3.27	134.00
Graduate	3.75	16.00	3.60	7.00	3.70	23.00
Supplemental Hours:	P/F - Pass:	P/F - Fail:	A/P:	4.00	CLEP:	OTHER:

# AMCAS GPA Term Breakdown



- *BCPM: this is your "science GPA" and consists of Biology, Chemistry, Physics and Mathematics Courses. The courses that fall under this category are those you took in college in those departments, but there are also others that can be considered (see MedSchoolCoach Insights Below)*
- *AO: this GPA is for "all other" college level courses you took*
- *Total: your overall GPA*

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- *You will want to make sure your BCPM GPA is as high as possible so make sure to designate your courses in this way.*
- *Psychology courses are often a gray area, but if they are heavily biology based, they can be considered in your BCPM GPA. Designate your courses correctly in order to maximize your science GPA!*

*Here is a simple example:*

- *I received a "C+" in a biology heavy Psychology course - designate it as a non-science class!*
- *I received an "A+" in a biology heavy Psychology course - designate it as a science class!*

## A Note About Your Major

Do not worry if your major is not in a science field. Again, more and more medical students are being accepted from other disciplines in the humanities in an effort to train well-rounded physicians. This phenomenon is happening in medical schools around the country. Having an interesting major like religion or sociology can actually benefit you during the interview process and cause you to stand out from the crowd. If you are coming to medical school from a non-traditional background, however, be sure to have thought about how your major will influence your career as a doctor.

## Entering Your Activities

Medical schools are not just looking for candidates with a strong academic background. They also want those who have had a range of life experiences. Because of this, the activities section is incredibly important and should be the area where you put forth the greatest effort. Your work, volunteer time, extracurricular activities and other life experiences will help differentiate you from other applicants in the mind of the application committee. Along with your personal statement, this is the only area where your personality will come across to the application reviewers. You can enter a maximum of 15 experiences, which includes work, extracurricular activities, honors, awards, or publications.



These entries will appear in your application in chronological order, and cannot be rearranged. You will be prompted to enter the dates of your experience, the location, a contact person, hours per week, and a description. Your description should be brief (i.e. not more than four sentences), but should still convey why you are including it in your application. To make sure you do the best job possible, sit down and brainstorm about what activities and experiences you think represent both who you are as a person and as a medical school applicant. After jotting these down, you may be surprised at how many options you have! If you feel like you are stuck, however, ask a friend to look it over. They may offer helpful suggestions that you have overlooked, such as playing the guitar or participating in intramural sports.

Most applicants will write their descriptions in a text editing program, and then copy and paste these into AMCAS. If you do this, be sure to paste the text without any formatting, and look over each experience before finally submitting your application. Be very conscientious about what each experience says about you and whether that jives with how you would like to be perceived. Also be cognizant of polarizing issues such as hot-button political stances that may rub your reader the wrong way. For instance, if your involvement with a pro-life or pro-choice group is central to who you are, feel free to leave it in. However, be aware that the people reading your application will also have an opinion, and there is no way to predict what that opinion will be.

Not all experiences are created equal. Naturally, medical schools are looking for things that show them you are interested in medicine and have the intellectual curiosity necessary to make it through. Reviewers generally like to see some work experience because it shows a certain maturity and self-reliance that is hard to otherwise tease out of an application. If you are interested in a large academic program, any research experiences you have should be mentioned. If you have published something, you should list it, but if you have not, don't worry. Publications are important for residency applications, but not as much for medical school. Showing an interest in the scientific method is enough. Also, if you have any undergraduate leadership experiences, list those roles as well. Try not to include things from high school, unless you have continued them after high school or they are particularly impressive or important.

If you have not had any research experiences thus far, consider getting started on a project. This is not only important for admissions, but also for your own learning experience. You will need to know early in your career whether you want to do research in the future. Also, knowing your way around methods and manuscripts will be valuable when you are attempting to publish as a medical student. Research is not for everyone, but it is good to know whether or not you have an aptitude and passion for it.

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A few years ago, AMCAS added a "Most Meaningful Activity" section. You can now designate three of your activities as the most meaningful to you. This allows you to write about these significant experiences in much greater detail (see below for specifics), but it will also give you the opportunity to really show medical schools what makes your activities special. This section is extremely important because it's easy for schools to just glance here to make decisions about your overall activities.

## AMCAS Activity Section Specifics



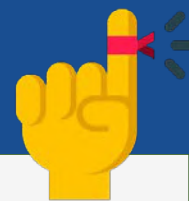
- *Total Number: 15*
- *Characters per description: 700*
- *Characters for your "most meaningful activity" remarks: 1325*

## MedSchoolCoachInsight - Don't Stress About Everything



- *A lot of students stress about the contact information for the experience section. You shouldn't! Medical schools understand a lot of your activities may not have had a specific contact person (i.e. your photography hobby). You can pretty much list anyone.*
- *Students also worry about the hour count. Estimates are fine!*

## MedSchoolCoachInsight - Think Hard About Your Most Meaningful Activity



- *Choosing which activities to designate as your most meaningful is important! With so many activities to read, schools will often take a look at those that you designated as most important to really understand who you are. Try to choose ones that are unique if at all possible, i.e. you may not want to focus on the hospital volunteering that everyone and their mother has done, unless it truly was super important to you!*

## MedSchoolCoachInsight - Create an Awards Section



- *Because readers of applications are drawn to simple lists, we believe listing your honors and awards in one section typically makes them stand out more than if you bury them with the rest of your activities.*

## MedSchoolCoachInsight - Fill it up!



- *While you do not have to have 15 activities (in fact, sometimes having less is nice as it focuses your application a bit more), you also don't want to write about only 2 or 3. Non-medical activities are essential to put in this section as they help the admissions committee have an overall idea of who you are.*





# Letters of Recommendation

**Most sections of the application are important because they allow you to tell the application committee about yourself. Letters of recommendation (LORs), on the other hand, are important because they give medical schools the opportunity to hear what *others* have to say about you.**

**The most vital thing about letters of recommendation is that you ask for them early (as early as February of the year you will be applying).** A lot of focus gets placed on who you should ask for letters, and rightfully so, but if your letters are not in on time, it does not matter who wrote them. Your letters can be continuously added into the application system. **Most schools require three letters**, but check the requirements for each school before submitting your application. You can also assign different letters to each program, with a maximum of 10 letters you have the option to upload. At a minimum, you should give your letter writers at least three weeks to write your letter. However, the more time you give them the happier they will be when sitting down to write it –and the more time they will have to enclose a letter that will paint you in the best light possible!

Who should you ask? Most advisors would say to have the people who know you the best write your letters. It is obvious when someone has known you for more than a week, and those letters are much more meaningful and provide more insight into your character. If you happen to know someone at a school you are applying to, that is an advantage that is hard to ignore, but the quality is still the most important part. Still, do not ignore this advantage and try to get to know these connections in a more in-depth way so their letters are meaningful.

This will definitely give you an inside track. A famous research name is nice to have if they know you well, but the chances that whoever is reading your letters will recognize those names is pretty remote.

We usually recommend you ask for at least 4-5 LOR, so that if one person doesn't come through you still have enough for medical schools. The typical breakdown is 2 science letters, 1 non -science letter, and 1-2 other letters that can come from principle investigators, doctors you have shadowed or community members. There can be some variation on a case-by-case basis.

Do not worry if you all of your letters are not received by the time you hit submit. You typically have plenty of time after that to get them in after you have submitted as your application will be verified and schools will not receive your application at this time. However, try not to delay this important step and ensure you get your letters submitted by the time your application is verified.

There are multiple ways to collect LORs, and each method has its own unique advantages and disadvantages. Whichever method you choose, be sure to be on top of your LORs so that it doesn't delay your application!

## AMCAS LOR Service

- *AMCAS offers a service to collect LORs for you directly.  
You can start using this in May.*
- *Pros: Efficient, free, easy.*
- *Cons: Letters can only be kept for one application cycle.*

## Interfolio

- *Interfolio is an online service which collects LORs and will then send them to AMCAS on your behalf.*
- *Pros: Efficient and easy. LOR can be kept for multiple application cycles. Can be sent to DO application as well.*
- *Cons: Each letter distribution costs money.*

## Committee Letter

- *Your pre-health office may offer you the opportunity to have a committee write a letter on your behalf. You should generally do this, if offered.*
- *Pros: A compilation of multiple letters and highlights of your education. Usually free. Allows an endorsement of your credentials from your undergraduate or graduate institution.*
- *Cons: Can be slow and inefficient.*



## College Professional Office

- *Your college may offer a service to collect and store LOR on your behalf and then send them to AMCAS.*
- *Pros: Usually free.*
- *Cons: Can be slow and inefficient.*

## Personal Statement

The personal statement is one of the most grueling parts of the application process – and getting it right is so vital that it requires its own MedSchoolCoach chapter! While we don't want to raise anxiety levels even higher, the truth is that the importance of this statement *cannot* be overstated. While it is short in length, this statement can be the way to get to the interview stage if it is done well. On the other hand, a poorly written statement can sink your chances. The most crucial thing to remember is to not only to read it over several times during the revision process, but to have multiple people read it over as well. You should also consider having our advisors look over your essay to make sure it is complete and appropriate.

## Where Should I Apply?

Choosing which schools to apply to is an important step that should not be taken lightly. And if you are not realistic about which schools to choose, you can easily find yourself sitting on the sidelines when the new school year begins. One strategy we recommend is that you apply to schools of varying difficulty to increase the odds of a successful application cycle. This means categorizing the schools into the following categories: reach, hopeful, and target. You'll notice we didn't use the word "safety". **There are no safety schools when it comes to medical school applications.** Why? Because the application process is simply too competitive! Even if your GPA and test scores are great, a school may not interview you because they will think you won't attend their particular school. Realistically think about your competitiveness as a potential medical student and choose a certain number of schools from each of these three categories to apply to.

The exact number is up to you and will vary on a case-by-case basis, but we recommend applying as broadly as possible in order to improve your chances. In fact, we recommend considering 15 schools **at a minimum**.

Factors to consider when choosing what schools to apply to include your own ethnic background and simple geography. There are many schools which have lower overall GPA and MCAT requirements, but when you look closer, many times these schools are recruiting traditionally underrepresented minority students to help fill a much needed gap in the physician work force. Your application may not be appealing to them if you don't fit an underrepresented demographic. Similarly, you'll notice that there are many public state schools that heavily – or even entirely -- recruit students from within their own respective states. You will want to look into how many out-of-state candidates are accepted before applying.

Naturally, some of the schools that you apply to will be more appealing than others, although your feelings about any given school might change considerably once you have visited the campus to see for yourself. You might also have to resign yourself to attending a medical school that was not among your top choices, but remember, being accepted to a medical school that was not your first pick is better than not being accepted at all! Play the game well, and you are more likely to come out ahead.

## Should I apply early decision?

There are probably a lot of would-be medical students wondering right now about whether to make an early decision application to medical school.

In most cases, applicants view early decision as a great chance to get accepted to their top choice school. They think that, much like applying early decision to college, applying early decision to medical school could get them into a school without having to worry about competing with other candidates. Unfortunately, it does not work this way.

**In almost all scenarios, applying early decision to medical school is the wrong idea.** The biggest problem is that early decision applicants are not allowed to apply to any other school until they are rejected from their early decision school. This usually does not happen until October, at which point your application is really too late for all other schools. Applying late to these schools will be detrimental, as they will have already started to fill their class and interview slots long before you even send in your secondary. Essentially, you really are putting ALL of your eggs into one basket and ruining your chances at all of the other schools to which you may have been able to apply.

So our advice is simple: don't apply early decision to medical school (except in really extenuating circumstances as evaluated on a case-by-case basis).

## Red Flags

The pre-medical track is a long haul. Colleges recognize this and often come with a plethora of activities and social events that have allowed you to blow off steam. However, these activities may have led to trouble at school or with the law. Unfortunately, these red flags are discussed in your primary application. There are two separate sections that cover these issues. The first will ask you to describe any academic problems or probations during college, and the second will ask you about your criminal history, specifically any felonies in which you were involved. While this can be understandably difficult, you must be honest in your discussion of these incidents. The key, however, is not to focus on what did you wrong but to accept responsibility for what you did and to show what you have learned from your experience. No one can give you the answers to these questions, and they require a certain level of introspection. Obviously no one wants a red flag, but by showing maturity and responsibility, you can transform your experience of the negative experience into one where you showed some desirable character traits such as honest reflection, critical analysis of past mistakes, and willingness to improve upon yourself.

Not all red flags involve former disciplinary issues, and there are other topics you may be asked about as well. Examples of these include reasons for time off during college, time between college and your application, why your application has failed previously, low MCAT scores, low GPA, a failing grade, an incomplete course or similar topics. We recommend not addressing any red flags in your personal statement unless you had a great experience explaining why you took time off. For other red flags, answer the questions asked and leave it at that. Just be honest and explain what you have learned. Life can be long and difficult, and rarely anyone emerges unscathed.

If you have any questions or are not confident in your answers, our MedSchoolCoach advisors are particularly adept at working with you to articulate these types of situations positively.

## Secondary Applications

The primary application is just the beginning of your medical school journey. The next step is to conquer the challenges of secondary applications. Coming to this stage is important since it means that a school, after reviewing your AMCAS, is interested in learning more about you and will email you their secondary application. A secondary application usually consists of your biographical application, additional essays, and yet another application fee ranging between \$50-100 per school. The number of essays varies but can range between two and eight. Some of the questions are similar between schools, so you may be able to use an essay for more than one school, but in general do not plan on this. While AMCAS makes it very easy to apply to many schools, the secondary application tends to be extremely school-specific and ensures that you are only applying to schools in which you are truly interested.



After completing the general AMCAS application, medical schools will review your file and decide whether to send you a secondary application or not. The cutoff for this is different at each school, so the selectivity of a secondary is variable. There are stories of some schools sending a secondary and then sending a rejection letter the day after cashing your check.

Much of the secondary is made up of additional essays that have school-specific questions. There are some questions that will be used by multiple schools; 'recycled' questions include descriptions of your research experience or what your career has been in the last 10 years. Others, however, will be very specific and you will be asked to explain your interest in one particular school. A general trend that you should be aware of is that more selective schools tend to have more secondary essays, making it a weed-out process based on your interest in the program. Once you have received a secondary application, the goal is to explain why you are interested in medicine at that school. Do some research on their website and ask around about interesting aspects of each school, and if you are still stumped, have MedSchoolCoach look over your essay when you are finished.

## Interview

An application may get your foot in the door, but it is the interview that will open the door for you. There are numerous do's and don'ts for your interview day. So many, in fact, that an entire chapter is devoted to interview specifics! Mock interviews are a crucial step in preparing yourself. While it is hard to take these seriously and the act of practicing conversation can often feel a little odd, getting your mind to think about questions and focusing on answers will be important for when you start getting questions that appear to come out of nowhere. Keep reading for our detailed interview section!

## After Submitting

After submitting your AMCAS application, the process becomes a waiting game. It can take one to eight weeks for AMCAS to verify your application before a school even sees it. Secondary applications can be sent out anytime between August and November, and have to be reviewed before interviews are given out. Unfortunately, this waiting process is a common feature of all the medical school application hurdles. Check the status of your application and letters of recommendation on AMCAS every few days until everything has been finalized. Once this is done, all you can do is sit back and wait.

## Update Letters

Update letters are a popular way to let schools know what you've done since submitting your initial primary or secondary application. It's important to keep in mind that schools have thousands of applications to go through and it's difficult for your update letter to always get the attention it deserves. That said, a well-timed and well-placed update letter can help you substantially in the process. If you have any new activities, especially significant ones, you should write a school an update. Similarly, if you have grades available from a Master's program for example, you'll want to update the school once those grades are available. The same thing goes for research and any publications or presentations since your initial submission. You can write update letters to schools that you interviewed at and are waiting to hear a decision from, as well as schools where you haven't interviewed yet. They don't always help, but they rarely ever hurt. Keep in mind, though, some schools specifically ask for no update letters, but a lot of schools will accept update letters through their online portal, which is a good way to send them.

The following is an example update letter, but be sure to personalize it to each school and your own activities:

*Dear Admissions Committee,*

*I am writing to provide updates on my activities since submitting my application, and to express my continued interest in attending your medical school.*

*Since submitting my secondary application in July, I have begun volunteering at a community resource center in Los Angeles. At the center, I am responsible for dispensing and educating individuals on community programs and resources, as well as providing meal and housing assistance. I have enjoyed the interaction with others, and the ability to gain knowledge on the challenges and circumstances the impoverished people in our community face.*

*In addition, I have completed my pre-requisite science courses in Organic Chemistry II and Physics II. Although challenging, I received an A in both classes while taking other difficult science courses simultaneously. As I have now completed the pre-medical coursework with a 4.0, I am confident that I have the necessary study skills that will allow me to adapt to the rigorous material in medical school.*

*Lastly, I would like to express my interest in attending X School of Medicine. Being from the area, I can think of no better place to learn and serve the local community. In addition, programs such as the introduction of ultrasound in the curriculum and integration of technology in medicine greatly intrigue me. I am also hoping to become actively involved in the student run clinic if admitted to your medical school. The X medical community has such a strong and profound influence in this region, and I hope to become part of the healthcare team who is changing the way we care for the patients of Los Angeles.*

*I appreciate your continued review of my application, and would be honored to interview at your institution.*



# SECTION 2:

# THE PERSONAL STATEMENT

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No guide to medical school would be complete without coverage of the personal statement. Here at MedSchoolCoach we understand that it's important to consider both the point of view of the admissions committee *and* the student so we took care to write this section with dual perspectives in mind. Similarly, as an essay writer, you should take into account the admission committee's perspective as well as your own when writing your essay.

## How is the Personal Statement Used by Admissions Committees?

The personal statement is just one part of your entire medical school application, with GPA, MCAT, extracurricular activities, letters of recommendation and interview making up the rest.

Keep in mind that this statement will be read multiple times during the admissions process and that having it word-perfect is vital.

## The Separator

Your personal statement can make the difference between an acceptance or a rejection from medical school. A great personal statement serves to show the admissions committee that you are the kind of person who has the potential to be an excellent physician and an asset to their school. It also helps to personalize your application and set you apart from the many other applicants coming in with similar MCAT scores and GPAs (see figure below).

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Similarly, a poor personal statement can eliminate you from the group of contenders. When a medical school committee has a few hundred applicants, a personal statement that is poorly written, with typos, spelling mistakes or bad content is a potentially irreparable. A blunder like this will quickly move you to the bottom of the pile. The personal statement is a quick way to “weed out” similar applicants. In other words, with many similar applications, the personal statement can decide who gets an interview and who does not. And as schools only accept students who have been interviewed, getting to this step in the process is a very big deal.

## Percentage of accepted applicants (2021-2022)

- *As an example, Applicants with an MCAT score between 510-513 and a GPA between 3.40-3.59 had an acceptance rate of about 50%.*
- *What separated the half that was accepted from the half that was not? The personal statement plays a large part in this. Applicants with similar stats are differentiated by the personal statement.*

## The Interview Starting Point

Apart from serving as a means to weed out medical school candidates, the personal statement is also important because it provides the starting point for many interview discussions and questions. When committee members sit down to interview an applicant, they often have just a few minutes to skim the application. The personal statement provides the perfect amount of information for them. They can pick out a few key points and use it as the starting ground for your interview. If this is the only part of the application that they may read, you need to make it perfect.

## Summary



- *The personal statement is read multiple times by multiple people during the admissions process.*
- *The personal statement separates applicants with similar statistics.*
- *The personal statement is used as a spring board for your interview.*





## Goals for the Personal Statement

Now that you understand just how significant the personal statement is to admissions committees, we will look at what some of your goals for the personal statement should be.

### Sell Yourself



There is a balance to be struck in your medical school application: you want to present yourself in the best light possible without coming off as arrogant or conceited. The mistake people often make is that they think selling themselves involves listing grades and honors. It does not (see Section 1). Rather, it involves telling the reader about who you are as a person. Remember, the admissions committee already knows how you look on paper; they now want to look beyond those statistics at what makes you stand out from the crowd. This is the place in your application where you have freedom. You can be humorous, serious or philosophical. The key is to *be yourself*. Let your personality shine through!

### Tell Them Why You Want to Go into Medicine



The second goal of the personal statement is to give the admissions committee a sense of why you want to go into medicine in the first place. It is not an easy career to prepare for, after all. Doctors keep long hours and must learn to deal with highly stressful situations regardless of specialty. In short, a career in medicine is not right for everyone – so it is your job, through your personal statement, to convince the committee that being a doctor is right for *you*. The committee needs to see your passion for medicine.

## Keep It Readable



When writing your personal statement, be mindful of keeping it a readable length and using an engaging style. Trying to use large words and convoluted sentences to make the personal sound more impressive will only lead the reader to put the paper down. That doesn't mean you don't want to be somewhat creative in your writing (in fact, many often think of the personal statement as a creative writing piece), but you want to try to stay away from anything incomprehensible!

## Make It Interesting



Perhaps the most important goal of all though is to keep the personal statement interesting. It should capture the attention of the reader from the very first sentence and hold that attention throughout the entire piece. Remember, medical school admission committees are reading thousands of these essays. You want yours to stand out in a good way. Writing a generic personal statement may not get you rejected, but it certainly will not make it any easier to get an acceptance letter.

## What Makes a Bad Personal Statement?

You now know how important the personal statement is in your medical school application and what your goals are in writing one. So, what exactly makes a good personal statement? There is no definite answer to this question, but there are many features that all good statements have in common. Before we discuss these, however, it might be helpful to think about what makes for a *bad* personal statement. If you know what the common pitfalls are and avoid them, your personal statement will already be better than many other applicants.

### Absolute Contraindications

- *Mentioning your MCAT score*
- *Mentioning your GPA*
- *Typos*
- *Spelling mistakes*
- *Name dropping*
- *Making up stories*



## Relative Contraindications

- *Mentioning awards you won years ago*
- *Listing anything (i.e. extracurricular activities)*
- *I want to go into medicine because I want to "help others"*
- *Writing in the third person*

## Try to Avoid

- *Mentioning how you wanted to be a doctor since preschool*
- *Talking about your second cousin who suffered a broken toe*
- *Talking about that one bad grade*

Here is a quick medical lesson for all the pre-meds out there. Sometimes certain drugs are absolutely contraindicated, meaning if a patient has condition X, then you never give them drug 1 (for example, if a patient has a head bleed, you never start them on heparin which is a blood thinner). Sometimes, things are relatively contraindicated, meaning that a patient has condition Y, you probably should not start them on drug 2, but you can do it if you absolutely need to. This is a good metaphor when thinking about your personal statement. There are a few absolute contraindications in the personal statement – in other words, things you should avoid at all costs. If any of these do end up in your personal statement, you will likely automatically be rejected. There are also a few relative contraindications – these are things you should try your hardest to avoid unless they serve a specific point in your essay. Finally, there are some points that are trite; applicants have made them for years and admissions committees are bored of reading about them. You will want to try to avoid these as well. Refer to the figure above for a summary of these points.

## What Makes a Good Personal Statement?

There are several features that define a good personal statement and we will discuss each of them below. These features should all be included at an absolute minimum if you are aiming for a winning piece.

### What Makes an Interesting Writing Style?

Your writing style will set the tone of your personal statement, so it is extremely important to get it right. You want to show the committee what kind of person you are, but this does not have to be explicit: Rather, let your personality be revealed through the way you write. See the figure to the right to understand how two sentences that essentially give the same amount of information can vary. Try not to go overboard though. As we talked about earlier, a good personal statement is not meant to be convoluted and confusing. A reader should never have to read a sentence twice to figure out the meaning of it.

**Show the admissions committee who you are through interesting writing**



- **Boring:** *"I went to Columbia University and majored in Biomedical Engineering"*
- **Interesting:** *" $x$  equals negative  $b$  plus or minus the square root... these were the formulas that dominated my life for many years."*

### Personal Stories

They call it a "personal statement" for a reason: it should be essentially about you – not about the doctor you saw on TV or the one who you shadowed. The best statements are the ones that tell your own story in a unique way. The goal is that, after reading the personal statement, the reader should be able to feel like they know more about you as a person.



## A Great Introduction

The first lines of your essay are sometimes all that might be read, so you want them to be perfect. The point of a good introduction is to engage your reader immediately and hold this interest through the rest of the piece. Even if your statement as a whole is good, if the introduction is dull it will likely not be read.

The key to a great introduction is to be as original as possible without overdoing it. The reader should want to continue reading after glancing at the first few lines. How can you make him or her do that? There are a variety of ways and as you write, be sure that this introduction is going to segue into something you want to readers to learn about you is important or significant. Take a look at some examples of interesting and boring introductory sentences below. This will help you get a feel of what works and what does not.

### Interesting Introductions

- *"I am a geek..."*
- *"As I stared out the window, I saw a city that was as foreign as any I had ever been to..."*
- *"I grew up on a tomato farm..."*

### Boring Introductions

- *"Ever since I was born, I loved science"*
- *"I knew I wanted to be a doctor since I was young"*
- *"I always wanted to help people"*
- *"The human body is very interesting to me"*

## An Introduction to the AMCAS Personal Statement

For the majority of applicants, the American Medical College Application Service (AMCAS) will be the first application they fill out for med school, and so it is important to point out that the application essay has specific requirements that need to be met. Keep in mind that your personal statement will go to all schools, so avoid mentioning any particular school in this piece. For the DO application, please see the figure below.

### Differences of a DO Personal Statement

- *A good personal statement tells the admissions committee why you want to be a doctor, not why you want to be an MD. Therefore, the DO and MD personal statements can be identical.*
- *However, you may want to expand on why you feel osteopathic medicine is for you in your personal statement to DO schools. This does not have to be explicit, but it is something to add subtly.*
- *AMCAS has a character limit of 5,300 characters. The DO application has a limit of 4,500 characters.*

## The AMCAS Question

Let's take a look at the way the statement question appears on the AMCAS application:

*"Use the personal comments essays as an opportunity to distinguish you from other applicants. Some questions you may want to consider while writing this essay are:*

*Why have you selected the field of medicine?*

*What motivates you to learn more about medicine?*

*What do you want medical schools to know about you that hasn't been disclosed in another section of the application?*

*In addition, you may wish to include information such as: special hardships, challenges or obstacles that may have influenced your educational pursuits. Commentary on significant fluctuations in your academic record that are not explained elsewhere in your application"*

As you can see, the topic is vague, but includes instructions to basically write anything you want. Unless you have something dire that needs explaining, you should stick with the instructions given elsewhere in this guide to set you on the right course for your personal statement.

## The Length

The AMCAS application requires your personal statement to be no more than 5,300 characters. This constitutes about one and a quarter page of single spaced, text with a size 12 font. The reality is that most essays should not even be this long and actually one page is ideal. This is a good enough length that a person sitting down to read it will not get bogged down by details at the end of the paper.

## Formatting Issues

The AMCAS still uses just a plain text box. You should NOT type directly into this text box. Instead, type the essay into Microsoft Word, but save the file as a \*.rtf. This will allow you to avoid formatting issues later on, while still having the advantage of Word's grammar and spelling check to avoid spelling and other usage errors that can count against you with the admissions committee. Once you have your final essay, you can copy paste it into the text box. See the box for special points to look out for when it comes to formatting.

## Proofing Via the PDF

Once you upload your text, you can see the PDF that AMCAS creates. This is the PDF that interviewers will have in front of them. Make sure to read over your essay on the PDF file for any formatting mistakes.

## Common Formatting Errors

- *Apostrophes come out wrong. Reread your essay in the text box multiple times and correct all mistranslated apostrophes.*
- *Quotations frequently are misplaced.*
- *Line breaks misformat. Make sure whenever you want a new line, it is a distinct line in the text box.*

## How to Go About the Task of Writing the Personal Statement

Now you understand more about what the goals of your personal statement should be, pitfalls to avoid, and what to include in your essay. Armed with the knowledge, it is time to actually begin the writing process!

### The First Steps

Before you write anything down, think about the point you want to make with your statement. What exactly is it that you want to tell the admissions committee about yourself? Once you have answered this question, think of the stories and anecdotes you will use as examples. Will it be the story about being in the OR with a surgeon or the one about helping the elderly lady who was in the hospital? Perhaps it will not be in the healthcare setting, but rather something you have done that has solidified your interest in medicine. Or maybe it will be your research interest. Jot these supporting stories down, then pick two of them to write about in your personal statement. Boggling the reader down with tons of examples will not prove your point. Show passion through a few examples. Once you know what you are going to talk about, start writing!

### Writing as Brainstorming

It is important to write as much as possible. Sometimes people think and brainstorm for too long. Brainstorming is very helpful, but if you think you have an idea for your personal statement, get out your computer and just start typing. It is oftentimes easier to delete material, but relatively harder to add. Even if your idea is completely different from the one you had before or what your earlier personal statement was about, just type. You can always combine ideas into one final draft.

### How Many Drafts?

Do not start with the expectation that you will sit down at the computer and immediately write a Pulitzer prize-winning personal statement! Getting the polished piece you want will take many revisions. We suggest writing a draft, thinking about it for a few days, and then writing a completely new, fresh draft. This will basically give you two personal statements to work with. You can then combine the best of both. Often you'll look back at your first draft and wonder what you were thinking when you were writing it. A minimum of two distinctly different drafts will give you a great starting place. The more drafts you write, the better your final essay will be.



## Avoiding Writer's Block

Writer's block is a common problem, especially if you are writing under stress. If you get to the place where you just can't think of anything to write, take a break. You may have to do this a dozen times during your initial draft. That is okay. Taking a break will help you clear your mind. Come back to the personal statement after you've worked on something completely different for a while. As you may have noticed, this can be a time-consuming process, which is why it is important to start on your statement as early as possible.

## Getting the Right Proofreaders and Reviewers

They say it takes a village to raise a child: it arguably also takes a village to write a spectacular personal statement. This is one piece of work you do not want to do alone. Have multiple people review the essay. You want your reviewer to look at it not just for grammar, spelling and typos, but for content as well. We recommend having the following people look at your essay:

1. **A family member** – they know you best and can often provide great insight.
2. **A friend** – again, someone who knows you well and can help you develop your thoughts.
3. **A professional editor** (not an English major or a PhD, but someone who has sat on the admissions committee and knows what to look for) – the editor can help you really nail down the content of the essay. Here are some things to keep in mind when you are choosing an editor:
  - a. Of course, we recommend you hire MedSchoolCoach to look over your essay. Whether you do or not is your prerogative, but the important thing is not to hire someone who does not know about medical school admissions. An English major, for instance, may know about grammar and content, but may not understand what it is like to be a doctor. Find someone who knows about medicine, has sat on admissions committees and has gone through the process themselves.
  - b. Do not hire grammar services. Grammar is important and your essay does need to be grammatically correct, but a really good editor will consider the content and overall style of your essay first.
  - c. Avoid paying per edit. You do not want your essay to be edited twice and then left alone: this amount of editing is just not adequate. MedSchoolCoach offers unlimited edits with our advisors. We work with you until the essay is where it needs to be.

## Who should look over your personal statement



- *A family member*
- *A friend*
- *A trusted professor*
- *MedSchoolCoach.com or another professional editor who is an M.D.*

## Final Thoughts on the Personal Statement

Writing the personal statement is stressful – but don't come off as stressed! Relax. Be yourself. Have fun. An essay that you've written with these three points in mind will be far superior to the one that you have written under duress. You really can make personal statement writing fun. For some, it involves using humor in their writing. For others, this may not work well. The key is to find out who you are and translate that to paper. If you are the guy who cracks jokes all day, then let that come across. Or maybe you are the type of person who likes to pontificate about problems in modern day medicine – go for that. There is no one right way to write a personal statement. Whoever you are, make sure your writing reflects that. If you do this, you will write an essay that will get you into medical school.

See the appendix for examples of some personal statements that we think are great, and really stand out!

# SECTION 3: THE INTERVIEW

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At this point in your application process, no matter how impressive your application and personal statement are, you are still just a name and information on paper. The interview gives medical schools the opportunity to meet the real, flesh-and-blood you. It is one of the last hurdles between you and your entrance to medical school and should be taken very seriously.

## **How is the Interview Used by Medical School Admission Committees?**

If you are terrified about the prospect of an interview for medical school, keep in mind that if you have made it to this vital step, this is a signal that the school feels your GPA, MCAT, extracurricular activities, letters of recommendation, and personal statement are strong enough for you to get into the school. Basically, it means you have a foot in the door.

Your interview will determine whether you walk through that door or if that door closes on you. The interview is your chance to shine and to assure that school that accepting you would be a great choice for them to make.

## **A medical school's chance to get to know you and your chance to shine**

Again, the interview is your chance to shine. While the general number for acceptance rate varies, when you realize that only 25% of applicants can get an interview (i.e. 250 out of 1000), this means that you are already in the top 25% of the all applicants. However, this is no time to rest on your laurels because the battle is not over. You most likely have to be in the top 50% of interviewees (i.e. 125 out of 250) to get an acceptance to the medical school, but keep in mind that this does not include waitlist positions.



Therefore, your starting goal is to appear better than at least half of your fellow interviewees. These numbers vary from school to school, but the idea remains the same. A poor interview can result in a quick rejection. A mediocre interview can result in a waitlist position. And an excellent interview can get you a quick invitation to the school. Which group do you want to be in?

Often, the students who make it to the interview stage have strong grades, test scores, and a compelling personal statement. The interview often becomes the deciding factor in choosing between these well-qualified candidates. As you would expect, if one student has an excellent interview and the other does not, it is an easy decision for the school to decide which student to accept. From the school's point of view, the interview serves a dual purpose: to choose the students who will best fit with the ethos of the school and to weed out those who look good only on paper.

How quickly is the interview used to judge you? Sometimes instantly! When an applicant makes a good first impression, it goes a long way towards achieving an acceptance. So be sure to put your best foot forward on interview day, because a bad or mediocre interview will put you on the reject list quite quickly.

## Summary



- *The interview may determine if you get accepted or rejected, so prepare yourself.*
- *An interview means the school likes you on paper, now you have to prove in person that you will be a good fit for the school.*



## Goals for the Interview

Now that you understand what the goals of the interview are and how it is used by the admissions committee, let's take a look at what the specific goals of the interview should be for you. These may sound similar to the personal statement goals but the approach towards achieving them will be different.

### Sell Yourself

This is your main goal and should always be kept in mind whenever you are answering questions during the interview. You want to make sure that you present yourself to the interviewer as a vital, hardworking, diverse, and unique incoming student that will go on to accomplish accolades in your future profession as a physician. However, you have to be doing this in a way that makes you seem humble and eager to work with others –to be self-confident without being arrogant. The best way to achieve this is through stories and “showing” your true personality during the interview. Sound difficult? Well that's what practice is for.

### Tell Them Why You Want to Go into Medicine

Often the first question and one that will most likely come up during interviews is the question “why do you want to be a doctor?” Even though you have written about this in your personal statement and have spent at least the last four years of your life working towards this goal, you still need to provide a convincing and personal story that persuades the interviewer that you have a good idea of what you're getting into as a future medical professional.



## **Make it a Conversation**

The best interviews are the one that don't feel forced. Instead, they feel like a conversation with an old friend you are catching up with. While it may be difficult to get to this point, once you go through practice and preparation, it should be easy to provide answers in a way that seems both natural and conversational.

## **Be Memorable**

This is perhaps the hardest part of the entire interview. Many would-be medical students have similar backgrounds and experiences. They have volunteered in hospitals, shadowed doctors, done a little bit of research, and in general are good people. However, in order to separate yourself you really need to make your interview memorable. The easiest way to do this is to have a pleasant and fun conversation with your interviewer. If you talk about your interviewer's favorite sports team or a shared interest in photography, this makes for a better interview than talking solely about the time you pushed a patient around in a stretcher at the hospital. Remember, faculty members and students on the admissions committee want to be your advocate, and the easiest way to get them there is to get along with them.

## **Be Normal**

The admissions committee knows that the interview is a stressful experience because they have all been there themselves! This being said, relaxing and being normal in spite of the pressure shows the committee that you have grace under fire –an important characteristic for a future physician. If you are the kind of person with whom it is easy to have a conversation, chances are the interview process will go well for you. A relaxed demeanor can help, but don't get so relaxed that you are unprofessional!

## **Be Yourself**

You should always be yourself above all else. Unless you are not normal (and I'm not talking the quirky/intriguing kind of not-normal) in which case, please, just put on your best pretending hat and act normal. But you already knew that.

## Building Blocks of a Great Interview

- Sell yourself
- Be memorable
- Be normal
- Make it a conversation
- Be yourself

## What Makes a Bad Interview?

So now that you have a better understanding of just how important the interview is, it might be helpful to look first at what makes for a bad interview. If you understand the common errors that people make while interviewing – and avoid them – you are already well on your way to standing out from the crowd and leaving a good impression in the minds of your interviewer.

Here is a quick medicine lesson for all the pre-meds out there. To use an example from the personal statement section, sometimes tests, drugs, and conditions are absolutely contraindicated, meaning if a patient has condition X, then you never give them drug 1 (for example, if a patient has a head bleed, you never start them on heparin). Sometimes, things are relatively contraindicated, meaning that a patient has condition Y, you probably should not start them on drug 2, but you can do it if you absolutely need to. We can think of the interview similarly. There are a few absolute contraindications in the interview – these are things you should not do during your interview at all costs. If any of these do end up in your interview, you will likely automatically be rejected. There are also a few relative contraindications – these are things you should try your hardest to avoid unless they serve a specific point in your interview. Finally, there are some points that are trite; applicants have made them for years and admissions committees are bored of hearing about them. You will want to try to avoid these as well. The figure below summarizes these points.

### Absolute Contraindications

- *Being arrogant.*
- *Not being prepared to answer questions about anything you listed in your application (especially research).*
- *Making up stories.*
- *Being rude, impolite or unprofessional to ANYONE you come across (from the secretary to the Dean, it's all being watched!).*



## Relative Contraindications

- *Listing your honors and awards.*
- *Being the same as everyone else—answers such as “want to help people, make a difference, etc.”*

## Try to Avoid

- *Bad eye contact and body language.*
- *Being long winded and not letting the interviewer get a word in.*
- *Bringing up irrelevant details.*
- *Using memorized or scripted answers which sound like you rehearsed them.*

## What Makes a Good Interview?

Now that you understand just how important the interview is, you are probably wondering about how to make yours the best it can possibly be. The advice we will give you about a good interview is going to sound similar to the advice we gave you about creating a good personal statement. Some of the points we'll make will help you set up for a good interview, whereas others will help you while you're actually interviewing. Keep in mind that the points are not exhaustive, but if you can keep them in mind, they will help to establish that you are well prepared for the interview and are a worthy candidate for medical school.



## A Great Personality Combined with Great Stories

You want your personality to shine during the interview. It is best to demonstrate your traits by showing enthusiasm, sincerity, providing well-thought out responses. And when you are telling stories that relate to the questions, you want to show that you really are passionate about those events. Furthermore, you should be able to answer any follow up questions because you are being sincere about the story. Lastly, the answers that are well prepared and thought out are often the ones that can demonstrate this style the best.

### Be Interesting



- *Question: Why do you want to be a doctor?*
- *Boring: I grew up interested in medicine and have shadowed lots of doctors...*
- *Interesting: I once saved a woman's life...*

Of course any of the stories you use to illustrate your points will need to be based on a personal experience. In addition, you want your answer to be directly related to the question, and to be a powerful and convincing answer.

Again, the interview should be focused on you and why you are a great candidate for their school.

## A Great Introduction...

One of the major differences between interviews and the personal statement is how much your first impression will count towards the interview. Remember, this is the first look that the school is going to have of you, so you want them to be impressed! In this regard, you want to be professional both in dress and demeanor. A firm handshake and a smile when meeting the interviewer are also important in making that good first impression.

## ... And A Great Finale

At the end of the interview, you will often get asked, "Do you have any other questions?" This is your chance to have the school sell themselves to you. It is also important because good questions will show that you have done your research about their school and are genuinely interested in attending it.

Your question should be designed to address a specific aspect about the school that you like and would want more information on. It could range from how students interact with one another in the classroom, how the overarching curriculum is structured, etc. You want to show you are knowledgeable about the school, and that they need to prove that this is the right school for you.

Furthermore, at the end of the interview you want your interviewer to be an advocate for you. They will be playing an important role in your admission and you want them to have a favorable impression of you. If you feel comfortable, ask for a business card or contact information so you can send a hand-written thank you card. If that is not feasible, an email also works. Do your best to keep in touch with them because they can help notify you of where you may be on the wait list or what you can do to improve your chances of getting in the school.

## Pre-Interview & Incremental Assessments

Prior to and in addition to interviews, many medical schools are requiring applicants to complete the [Altus Suite](#). This multi-part assessment evaluates applicants for people skills in a fair and reliable way. It also provides applicants with multiple opportunities to showcase their unique personal and professional strengths.

### Altus Suite Components

Most medical schools require all three components of the Altus Suite.

- **CASPer** – An online situational judgment test that screens applicants for 10 non-cognitive competencies, such as ethics, empathy, problem-solving and collaboration.
  - 12 scenarios (8 video-based and 4 text-based).
  - 60-90 minutes to complete.
  - Casper test must be reserved and taken on a specific date .
- **Snapshot** – A short, one-way video interview to highlight your communication skills and motivation for the profession so you can bring your personal statement to life
  - 3 questions with two minutes to respond to each.
  - 10-15 minutes to complete.
  - Can be taken any time after reserving your Casper test until the earliest program distribution deadline.

- **Duet** – A value-alignment assessment that compares what you value in a program with what the program has to offer.
  - Program characteristics are compared in pairs within several categories.
  - No time limits, but shouldn't take longer than 15 minutes to complete.
  - Can be taken any time after reserving your Casper test until the earliest program distribution deadline.

## The Specifics of Your Interview Day

Given the new landscape, interviews are now being conducted both in-person and virtually. Although the fundamentals of how to prepare, what to wear, and how to behave are the same for both types of interviews, there are some differences when it comes to interview preparation.

The day of your interview may be somewhat stressful, but having an idea of what is in-store can make it a little less nerve wracking.

## Typical In-Person Interview Agenda

### Night Before: 7:00 p.m. Applicant Dinner

- **Interview Day**
- **7:30-7:45 a.m. Check in at Admissions Office.** During check-in, you will receive a complete agenda and enjoy a light breakfast.
- **8:00 a.m. Welcome by the Dean.** Usually a talk highlighting the medical school's curriculum, students, hospitals, etc.
- **9:00 - 12:00 p.m. Interviews!**
  - Two to three 30 minute interviews
  - Down time in between to mingle, meet students, etc.
- **12:00 - 2:00 p.m. Applicant Lunch**
  - A chance to sit down and eat lunch with current medical students behind closed doors and ask all the questions you want
- **2:00 - 3:30 p.m. Campus Tour**
  - Walk around the campus and hospital with a current medical student.
- **3:30 p.m. - Done**

# Virtual Interview Preparation

- **Identify a Location** – Find an interview spot that is quiet and private where there will be no distractions, such as people coming in and out of the room.
- **Stage Your Background** – Make sure your background is appropriate. While it doesn't have to be a blank white wall, you don't want it to distract from the interview itself. If possible try to integrate some facet of your application into your background, such as a painting if you noted being an artist or your saxophone if you wrote about being in the band. Such visuals can serve as conversation starters.
- **Be Hollywood** – Make sure that your lighting is good, test your internet connection, and make sure that your camera and microphone work perfectly and on the day of your interview. Silence any gadgets on screen alerts. Also, be sure to frame yourself head and upper body take up most of the screen. This way, there are no distractions.



## Agenda

While all schools are a little different, your interview day will typically be structured in a similar way (see the figure on the right for more details). Knowing what to expect ahead of time will make you more comfortable on the day itself.

## Types of Interviews

Be aware that there are several different types of interview formats that could take place on interview day. The most common formats are listed below.

### **MMI**

The MMI is covered later on in “A Special Note on the MMI”.

### **Open File**

This is the most popular type of interview where the interviewer has your whole AMCAS application, including grades and MCAT scores.

### **Blinded to Grades**

This type of interview is where the interviewer has your AMCAS application (including your personal statement, activities, secondary and LOR) but does not have your grades OR MCAT scores.

### **Closed File**

No application material will be available to the interviewer. This means you'll have to divulge your activities and other information to him or her.

### **Group**

This could mean two or more people in a panel interviewing you at once. It could also mean that you will be interviewing with other candidates.

Be sure to prepare for all types of interviews. Usually, the school tells you the format it will use beforehand. If they don't, assume it's a traditional, open file interview.

## Types of Interviewers

Your interview can be conducted by various people affiliated with the university. Always realize your audience when interviewing. Just as it is important to be aware of the interview format, it is also good to keep in mind just who you are talking to during the interview itself. The most common types of interviewers are listed below::

### **Faculty**

The most common type of interviewer is a faculty member who is a practicing physician, but also sits on the admissions committee.

## **Admissions Committee Member (non-physician)**

Schools often have non-physicians on their committee. Be sure you realize whom you are talking to so that you do not say something inappropriate or offensive. A good example of this would be telling a committee member who is a registered nurse (RN), that you would never consider a career in nursing because you actually want to *care* for a patient (yes, this has happened!!!).

## **Medical Student**

Current medical students may often sit on an admissions committee or perform separate interviews of their own. While it may be tempting to do otherwise, take this interview seriously because it is actually a huge component of the admission process. It is important because it helps the medical school determine if you are a team player who can get along with your peers; an important consideration in the present era of collaborative medicine.

## **Interview Length**

Most interviews will last between 20 and 40 minutes although there will be exceptions. Your goal, however, is to make the interview last as long as you can without it interfering with the rest of your day. The longer you can speak with the interviewer, the more likely it will be that you have formed established rapport with them – and left a good impression in their minds.

## **Miscellaneous Things about the Day**

Be sure to be nice to everyone you come across. This includes the secretary, other interviewers and students.

However, do not be a “brown nose.” Baking cookies for the secretary will get you noticed in the wrong way!

## **A Special Note on the MMI Interview**

We are including a special section on the MMI Interview format because of how much it differs from other interview styles that you might encounter on this important day.

The Multiple Mini Interview (MMI) format has been modeled on the Objective Structural Clinical Exam and has been used by Health Sciences Programs. This format was developed in Canada and has now become widely accepted in the United States. Typically, the interview consists of up to 10 timed stations through which the applicants rotate and play various roles.

It is important for students to realize going into this that the task or question will not necessarily be directly related to medicine. It is also important to understand that the point of this interview is not to test your clinical knowledge on any one particular subject: instead, it evaluates how well you take your knowledge and personal skills, and apply it to the kind of situations that doctors might find themselves confronting every day.

It is also good to understand that there will not be set, specified guidelines for what to do in each situation. Students may well walk into a scenario as vague as: "the person in this room is your new neighbor. Please start the conversation." Again, this is deliberate to see how well you can think on your feet and evaluate your reaction to events as they happen – very important qualities for a doctor.

The reason the MMI format was introduced and has become accepted by multiple schools is that there have been several studies correlating performance on the MMI interview and performance as a medical student. Another reason why this is becoming more popular is that the format allows medical schools to use a more standardized approach to their interviewing process. Since each interviewee will go through the same scenarios, and the same questions, they can be graded and compared to one another in a more impartial way. With an increasingly diverse population applying for medical school and students coming in from a variety of backgrounds, an objective testing method is more important than ever.

Awareness of the advantages of this format is increasing. The following is an excerpt from a recent New York Times article highlighting MMI:

*One-on-one interviews are offered but provide poor assessments of a candidate's social skills because they reflect only one person's view, often focus on academic issues and elicit practiced responses to canned questions like "Why do you want to become a doctor?"*



The MMI approach hopes to better assess the skills you will need as a physician, which include not only a broad base of medical knowledge, but also strong interpersonal and communication skills to effectively communicate with patients, families, and other members of the healthcare team.

MMI's are a flexible format and can take many different forms. Typical scenarios can range from ethical questions about patients, health policy questions, interactions with an actor, more standard interview questions or even a task requiring teamwork. These tasks and stations are meant in some ways to simulate what you will face in real life as a physician.

Preparing for an MMI is different in some ways than preparing for a more traditional interview. In order not to be caught off-guard, it is important to review potential questions and scenarios. Although the scenarios may not be the same ones you find on interview day, understanding the types of questions that *might* be asked will be very helpful to you. Make sure to read about healthcare policy and current events as well.

A recent New York Times article recapped the situation you will face on interview day well:

*At Virginia Tech Carillon, 26 candidates showed up on a Saturday in March and stood with their backs to the doors of 26 small rooms. When a bell sounded, the applicants spun around and read a sheet of paper taped to the door that described an ethical conundrum. Two minutes later, the bell sounded again and the applicants charged into the small rooms and found an interviewer waiting. A chorus of cheerful greetings rang out, and the doors shut. The candidates had eight minutes to discuss that room's situation. Then they moved to the next room, the next surprise conundrum and the next interviewer, who scored each applicant with a number and sometimes a brief note.*

Some students may cringe at the thought of this kind of interview format, which forces you to think on your feet and for which you can only prepare so much. However, one of the most important things to remember about the MMI interview is that the tips and tricks that you learned for a more traditional interview apply here as well. Make sure to be a normal, likable human being no matter the situation. Do not get frazzled or upset and stick with what you know. These guidelines can help regardless of the scenarios you find yourself thrown into!

To help give you a better feel for what the MMI might be like, we are including some sample formats/scenarios that might come up during this interview format. General areas might include ethics, role play or critical thinking:

### **Ethical Decision Making:**

Dr. Smith recommends homeopathic medicine to his patients. There is no scientific evidence to suggest that homeopathic medicines work, and Dr. Smith does not believe in them either. However, he recommends homeopathic medicine to people with mild and nonspecific illnesses such as fatigue, headaches and muscle aches and he believes that will do no harm to them, but will instead give them reassurance. Consider the ethical problems that Dr. Smith's behavior might pose. Discuss these issues with the interviewer.

### **Critical Thinking:**

A message has recently appeared on the Web to warn people of the dangers of an artificial sweetener that might cause multiple sclerosis. The biological explanation provided was that at body temperature, aspartame releases wood alcohol, which turns into formic acid, a chemical in the same class of drugs as cyanide and arsenic. Formic acid, the message argued, causes metabolic acidosis. Clinically aspartame poisoning was found to be the cause of joint pain, numbness, cramps, vertigo, headache, depression, anxiety, slurred speech and blurred vision. The authors claim that aspartame remains on the market because the food and drug industry have powerful political lobbies.



They quoted Dr. Smith, who said "the ingredients stimulated certain parts of the brain simultaneously thereby causing brain damage to various degrees". Critique this message in terms of the strength of the arguments presented. Your critique might include an indication of the issues that you would like to delve into further before assessing the validity of the claims.

## Role Play:

1. You are a family physician. One of your patients, Mark, did not attend one of his classes and missed an important exam. He told you that his teacher would like a doctor's note explaining his absence from class; otherwise, he will receive zero, and he'll fail the class. He wants you to write a note for him, indicating that he was not feeling well enough to take the exam. Not able to find any physical symptoms, explain how you would deal with this. Enter the room and talk to Mark.
2. You are a 3rd year medical student doing hospital rotations. A fellow medical student who is doing rounds with you often shows up to these sessions tired, messy, hung over, or even drunk. One day you find him in the lunch room unaccompanied, so you decide to talk to him. Please enter the lunch room.
3. Your friend Jason hasn't come to class for a few days. Being a hardworking pre-med student, he seldom skips classes. You called his house and he said you can visit him. You decide to pay him a visit after your classes. Enter the room and talk to Jason
4. You are a cardiologist at a local hospital who just finished a shift and have to hurry to your daughter's high school graduation ceremony. As you are headed out the door, Jennifer, a patient who you know well, sees you from the waiting room and grabs your attention. "Doctor! I have bad chest pain. Please stay for a bit. I'll feel much better if you were here." Enter the waiting room and talk to Jennifer.
5. You are a current undergraduate student. During the week of graduation, you attend a number of parties with your best friend, Kelly. The morning after the party, you receive a call from Kelly. She asks that you come over and talk. Kelly reveals that she left early and drove home despite drinking alcohol that night. Enter the room and talk to Kelly.
6. You are an emergency room physician at a local hospital. A patient comes in requesting painkillers for his back. Upon reviewing his file, you realize that he frequently comes to the hospital requesting painkillers and he has already capped his prescription for the month. Upon examination, you notice no new injuries to indicate an increase in painkillers. You politely tell patient that you will not increase his dosage or re-fill out another prescription for him. He tells you that he will go and inject himself with heroin right now if he does not get the painkillers. What do you say next?

Your company needs both you and a co-worker (Sara, a colleague from another branch of the company, who is gripped by fear of flying) to attend a critical business meeting in San Diego.

7. You have just arrived to drive Sara to the airport. Sara is in the room, enter and talk to her.
8. As a physician at a local hospital, you notice that there is a man with alcohol dependency who keeps on consuming the hand sanitizer offered at the hand sanitizer stands throughout the hospital. Consequently, there is often no hand sanitizer for public use. He is not a patient at the hospital at present but has been many times in the past. What do you do? Do you remove/change location of hand sanitizer stands? Do you approach him?

## More MMI Sample Questions

1. An 18-year old man is diagnosed to have suspected bacterial meningitis, which can be fatal if not treated and very contagious. He refuses therapy and returns to the college dormitory. What should a physician do in this situation?
2. Is it ethical for doctors to strike? If so, under what conditions?
3. There is an outbreak of an incredibly contagious, life -threatening disease. The disease is spreading across the country at a rapid rate and the survival rate is less than 50%. You are a senior health care administrator, and when the vaccine is developed, you have priority to receive the drug. Do you take the vaccine or give it to another person? Why or why not?
4. You are a health researcher at an academic institution. You have been asked to work on a top -secret vaccine that would treat conditions developed as a result of biomedical warfare. The vaccine could also be used to treat other communicable diseases. Before your breakthrough, you are instructed by the government to stop all research and turn over all materials and copies of your work to be destroyed. You are very close to finding a cure. What do you do?
5. A patient requests needles and syringes at his local pharmacy. He does not have a prescription, and based on the records you can access, they are not receiving treatment for diabetes. Do you sell the syringes or not?
6. You are a general practitioner and a mother comes into your office with her child who is complaining of flu -like symptoms. Upon entering the room, you ask the boy to remove his shirt and you notice a pattern of bruises on the boy's torso. You ask the mother where the bruises came from, and she tells you that they are from a procedure she performed on him known as "cao gio," which is also known as "coining." The procedure involves rubbing warm oils or gels on a person's skin with a coin or other flat metal object. The mother explains that cao gio is used to raise out bad blood, and improve circulation and healing. When you touch the boy's back with your stethoscope, he winces in pain from the bruises. You debate whether or not you should call Child Protective Services and report the mother. When should a physician step in to stop a cultural practice? Should the physician be concerned about alienating the mother and other people of her ethnicity from modern medicine?

7. A patient with Down's Syndrome became pregnant. The patient does not want an abortion. Her mother and husband want the patient to have an abortion. What should a physician do in this situation?
8. A 12-year old boy is diagnosed with a terminal illness. He asks the doctor about his prognosis. His parents request that the doctor not tell him the bad news. What should the doctor do in this situation?
9. A couple has decided to have a child through artificial insemination. They asked the physician for sex selection of the child. What should a physician advise in this situation?
10. A physician became sexually involved with a current patient who initiated or consented to the contact. Was it ethical for the physician to become sexually involved?
11. A 17-year old boy lives independently. He is married and has one child. He wants to participate in a medical research study. Does he need his parents' permission?
12. A physician went on vacation for 2 weeks. He did not find another physician to cover him. One of his patients with hypertension developed a severe headache. The patient has an appointment with the doctor as soon as he comes back from vacation. The patient did not look for another physician and decided to wait. The patient suddenly collapses and is diagnosed with intracranial hemorrhage. Is the physician responsible for this patient?
13. A 40-year old schizophrenic patient needs a hernia repaired. His surgeon discussed the procedure with the patient who understood the procedure. Can the patient give consent?
14. A physician picked up a car accident victim from the street and brought him to the ER in his car. He did not want to wait for an ambulance because the patient's condition was critical. Physical examination in the ER reveals quadriplegia. Is the physician liable for this consequence?
15. A 14-year-old patient requests birth control pills from you and asks that you not tell her parents. What do you do?
16. If you have the choice of giving a transplant to a successful elderly member of the community or a 20-year-old drug addict – who do you choose? Why?
17. You are a family physician seeing Jane, a 67-year-old woman with a recent history of multiple fragility fractures. You diagnose her with osteoporosis and prescribe some bisphosphonate drugs and other pharmacological treatments. Jane tells you that she has heard some good things over the Internet about alternative medicine treatments such as Chinese medicine, and she is adamant on trying these as well. You are concerned about the use of these alternative medicine treatments and the possible negative effects they could have on Jane's health. How would you handle the situation and what would you recommend Jane do? Discuss any ethical considerations that are present.

18. A close friend in your 1st-year medical school class tells you that his mother was recently diagnosed with breast cancer. He feels overwhelmed by his studies and is considering dropping out of medical school to spend more time with his mother. How do you counsel your friend?
19. Joe is a pizza delivery worker. The pizza shop he works for has a 30 minutes or less delivery guarantee or else the customer does not have to pay. On Joe's most recent delivery, he spots a woman bleeding on the street. There is no one else around and the woman seems to be unable to move by herself. However, Joe knows that if he returns empty handed again, he will be fired from this job which he most desperately needs. What do you think Joe should do? Justify your solution in terms of practical and ethical considerations.
20. "Liberation Therapy" (LT), a vascular operation developed to potentially cure multiple sclerosis (MS) in certain patients, has recently come under very serious criticism - delaying its widespread use. Among other experimental flaws, critics cite a small sample size in the original evidence used to support LT. As a healthcare policy maker, your job is to weigh the pros and cons in approving novel drugs and therapies. Please discuss the issues you would consider during an approval process for LT.

## Interview Day Attire

With all the things to think about on interview day, you don't want to be worried about what you should be wearing! We make the choices easier for you with the following guidelines for both men and women candidates.

### Interview Attire Guidelines for Men

- Suit: A two-piece matching suit is always the best and safest choice.
- Conservative colors/fabric: Navy and dark gray are safe; other colors may come and go depending on trends, so avoid anything extreme.
- Cost/quality: You are not expected to be able to afford the same clothing as a corporate CEO. However, you should invest in attire that will look appropriate during your first two or three years in medical school. One good quality suit is sufficient for all of your medical school interviews if that is all that your budget allows. You can vary your shirt/tie/accessories.
- Details: Everything should be clean and well pressed. Carefully inspect clothes for tags, dangling threads, etc.
- Don't combine a suit jacket with pants that don't match.
- Ties: Select good quality silk ties. Avoid fashion extremes, like character ties, in interviews. Definitely don't wear a tie with a stethoscope on it!
- Facial hair: If worn, should be well-groomed.
- Jewelry: Wear a conservative watch. If you choose to wear other jewelry, be conservative. Remove any earrings. Observe other men in your industry to see what is acceptable.

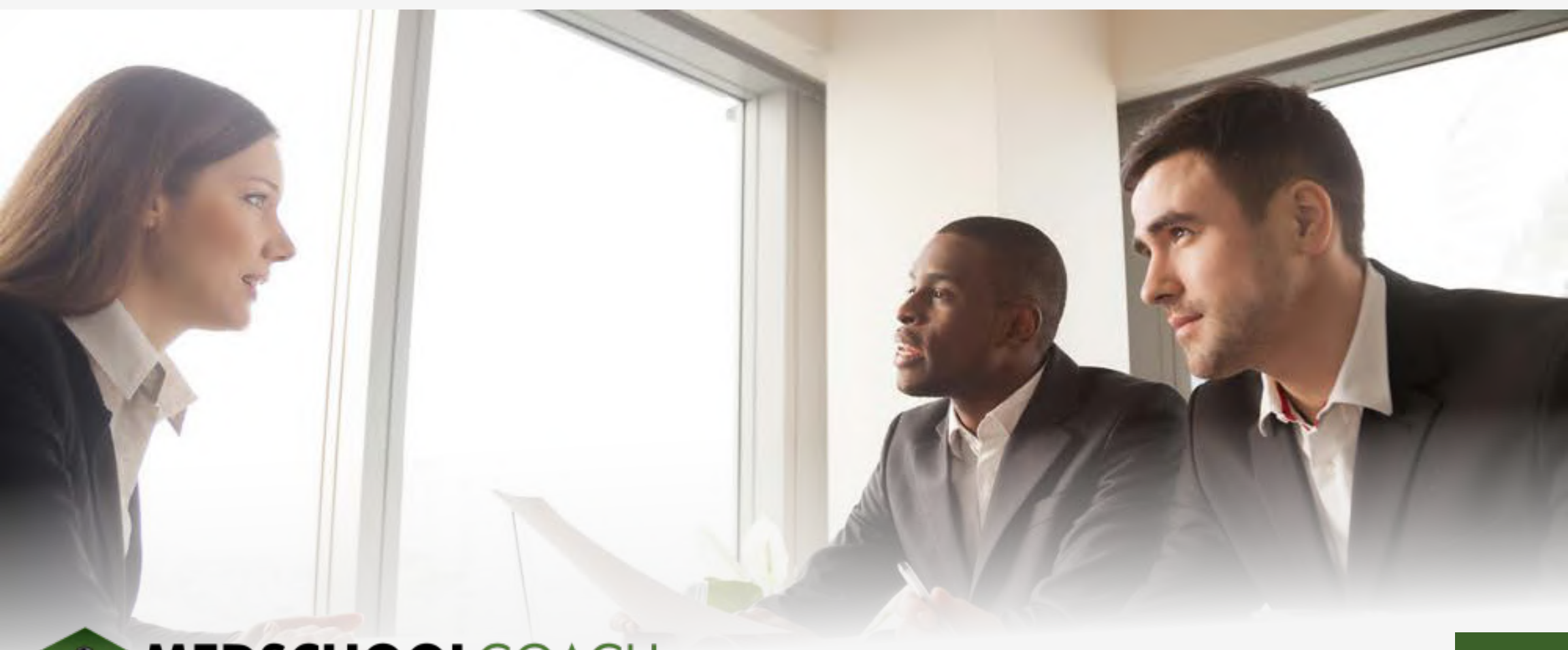


## Interview Attire for Women

- Don't confuse club attire with business attire. If you would wear it to a club, you probably shouldn't wear it in a business environment.
- Suit: Wear a two-piece matching suit.
- Suit – pants/skirts: Tailored pant suits are appropriate for women and are particularly convenient for site visits, such as at a medical center. The pants ideally should be creased and tailored, not tight or flowing.
- Skirt lengths: There is a lot to consider if you choose a skirt for your interview! To begin with, much of what you see on television shows that masquerades for professional attire is actually inappropriate for a work environment. Your skirt should cover your thighs when you are seated. Showing a lot of thigh makes you look naive at best, foolish at worst. A skirt that ends at the knee when you're standing looks chic and professional. If you touch your hands to your side, and the skirt touches to the ends of your fingertips or beyond, you should be good. Longer skirts are professional too, as long as they are narrow enough not to be billowing, but wide enough to make climbing stairs comfortable.

Don't purchase a skirt or decide on a hem length until you sit in the skirt facing a mirror, because this is the way that your interviewer will see you. If you are in doubt about a particular skirt, ask yourself whether it will be distracting or whether it will reinforce your image as a person who looks appropriate for a business environment or gathering. Apart from hem length, keep slits in mind as well. High slits in skirts are not appropriate. A small back, center slit in a knee-length skirt is appropriate. On a calf length skirt, a slit to the knee to facilitate walking and stair climbing is appropriate.

- Jewelry/accessories: Wear a conservative watch. Keep your choices simple and lean toward conservative. Avoid extremes of style and color. Earrings should be small and not distracting. Minimize piercings on the face.



- Cosmetics: Keep makeup conservative. A little is usually better than none for a polished look. Nails should be clean and well groomed. Avoid extremes of nail length and polish color. It should be noted that fake nails are discouraged in the healthcare field for sanitary reasons.
- Shoes: When choosing a pair of shoes, you should first keep in mind that you will be walking around! The ideal shoe should be a close-toed pump in leather or fabric/microfiber in a conservative rather than a trendy style (in other words, avoid stilettos or chunky platform shoe. The heel should be two inches heel or less). Make certain you can walk comfortably in your shoes; hobbling around in fashionable but impractical shoes does not convey a professional appearance when walking around the hospital.
- Purse/bag: If you carry a purse, keep it small and simple. Purse color should coordinate with your shoes. You may choose to carry a small briefcase or business-like tote bag in place of a purse. Leather is the best choice for briefcases; micro fiber or fine woven fabrics are also acceptable.
- If your hair is past your shoulders, you should pull it up in either a clean bun or a low ponytail. Do not leave your hair down if it's long.

## Miscellaneous Items

- Should I carry a portfolio?

Most people feel weird not carrying one, only because they have nothing to hold. There is absolutely nothing in those portfolios that you may need during an interview as your interviewee has your file beforehand. However, you might want to carry one just in case so you can jot down some notes and to keep organized. If you ask for the interviewer's business card for later contact – as mentioned in the interviewing section – it can be a good place to keep items organized so that you can write thank you letters.

- What kind of pen should I have?

It does *not* have to be a Mont Blanc. Just a nice looking cheap \$2 knockoff will do just fine.

- What about weather extremes?

A lot of interviews are conducted in the winter. Be prepared to have a matching overcoat that is professional and warm.

Conversely, you can experience hot weather when interviewing - especially at west coast schools. Try to keep your dress jacket on, however, if you are overheating, it is appropriate to take it off. Ensure that your shirt on underneath your jacket is appropriate. For men - this should be a long sleeve dress shirt. For women- you should have a shirt conservative neckline and with sleeves.

- Should I have my resume or AMCAS application?

The interviewer should have the information about you that is allowed to them prior to the interview. You don't need to carry a copy of your resume or AMCAS application.

What should I do with my luggage?

Lots of times you will arrive the day before you interview and stay at a hotel or a student host house. You will usually check out before your interview and not return back to your lodging. This means that a lot of people get stuck with luggage. Most schools are prepared for this and will have a place for your luggage to be stored during the interview day. If at all possible, try to have your luggage look professional as well.

## Other Interview Tips and Tricks



Apart from understanding the flow of the interview day, the kind of interviews you might be facing, and the kind of clothing that is appropriate for the occasion, there are other tips and tricks that can make the interview day not only successful but also enjoyable.

### Use Your Surroundings for Clues

One of the most often asked questions is about how an interview should be started. One great way is to look around the office for something you can talk about.

The moment you walk into an interview you have an opportunity to separate yourself from others. Take a look at your interviewer's office and see if you can find something that you can relate to. This could be a piece of artwork, a poster of a sports team, or a picture of your interviewer playing golf. Whatever it is, if you have an in, use it. If you love the same sports team the interviewer does, you should bring it up. Even if you love another sports team, you should take that opportunity to comment on the poster. If you see a piece of artwork that sticks out to you, bring it up during the interview. These can be the opening lines of your interview. Talking about something personal certainly beats the "it's cold outside today" start to an interview. Look around, find visual cues and connect with the interviewer. Making this personal connection can get the interview started on the right foot and make it a more enjoyable experience for you both!

### Research the School

Be sure to research the school thoroughly before hand. Understand their curriculum, the extracurricular clubs and organizations available, and what each school views as their strengths.

If possible, work this knowledge into your interview in a way that shows your interviewer that you have done your homework and are sincerely interested in their school.

## **Know About Health Care Policy and Economics**

Apart from a good scientific knowledge base, understanding the politics and economics of healthcare is also incredibly important. No one expects you to be an expert on this, but if you don't know the first thing about the Affordable Health Care Act, for instance, you are going to be in trouble. If you feel like you have some knowledge gaps in this area, regularly read recent health care policy articles from the New York Times, Wall Street Journal or other reputable magazines. You don't have to be a pundit, but you should be aware of the political and economic issues that affect the medical profession and if you can talk about these issues in a well-informed manner, this will greatly enhance the image you are conveying. On the other hand, if you appear uncomfortable or uninformed about important issues of healthcare policy, this can be a serious black mark against you.

In order to avoid getting caught off-guard, the next section talks specifically about interview questions that may come up. Read through these and take some time to think about and prepare the kind of answers that will help you gain admission into medical school.

## **Sample Medical School Questions and Answers**

The following sample questions and answers are not intended to be memorized. Rather, we hope to provide you with a general guideline with which you can frame your own individual answers. There are, in fact, many great ways to respond to these questions. The key is to be able to speak well about them and prepare for them as much as possible ahead of time.

We suggest that you go through each sample question and at least think about the way you would respond if it came up during an actual interview. You do not have to write out an answer to every question and you certainly shouldn't memorize long blocks of answers. However, you definitely want to have thought about answers to some of the most common questions you'll get.



## ***Tell me about yourself.***



This is one of the most popular starting points of an interview – after all, learning all about you is the whole point of this exercise! In answering this question, it is wise to avoid simply reciting your GPA or MCAT scores because this is the information they can get for themselves from your application. Tell them instead about your upbringing, important events in your life, or something more personal that will make you memorable and separate you from the crowd of other qualified candidates.

## ***Why medicine?***

Some form of this question will inevitably be asked during the interview process. While it may seem like a simple question, take great care in how you answer it. Saying you want to “help people” is not enough and it is, furthermore, an answer that is greatly overused and will not help you stand out in the interviewer’s mind. MedSchoolCoach recommends that during your medical school interview, you lay out a brief timeline of how you came to the decision you wanted to pursue medicine. Don’t simply say “I always dreamed of it since I was little”, as this has become a cliché too. Provide concrete examples and scenarios that have shaped you and made you choose medicine as a career.

Do not be afraid to talk candidly. If you overcame a personal tragedy, or a family member did, and this truly led you to medicine, tell us about it. For example, talking to the committee about how you took care of your mother when she had cancer and that these experiences truly led you to the desire to practice medicine, this can be hard to talk about emotionally but it will have the mark of authenticity to it – and will leave a deep and lasting impression on the minds of the admissions committee.

## ***Where do you see yourself in 10 years?***

This old-school job interview question still pops up from time to time, and can trip up even the most confident interviewee. While the question may seem simple, the answer often isn’t. Be realistic. The admissions committee will not reasonably expect you to have your entire career or even your specialty choice mapped out. But if you do have a strong interest in academic medicine, research, or a particular specialty, now is the time to talk about that. Also, if you are interested in becoming a general practitioner and working in a traditionally underserved area, it’s good to bring that up at this point. Avoid saying that you want to be a plastic surgeon doing breast implants all day in LA, as this fails to make a good impression.

## ***What are your strengths and what are your weaknesses?***

This, or some variation of it, is another question commonly used for medical school interviews. The best way to prepare for this type of question is to create an honest list of what you think are your strengths and weaknesses. Then, pinpoint the few things on your list that you believe most accurately describe these characteristics. Practice talking about these points so that these responses sound natural and show that you are prepared for the question.

An example of a strength would be communication skills: “I work very well with all kinds of people, and understand that everyone has different perspectives about projects and work tasks – so when I work with others, I realize that everyone comes to the table with different priorities and objectives. I keep this in mind when I communicate tasks that need to be accomplished with positive reinforcement and awareness of what others are working on.”

When talking about your weaknesses, don’t pick one that will potentially disqualify you from entrance into medical school! Even more importantly, be prepared to talk about the ways in which you are trying to improve upon or make up for this weakness. The most important point of this question is that you are self-reflective enough to understand your weaknesses, learn from the mistakes you have made, and will take corrective action to make sure that these faults are addressed. For example, you can say that your weakness is you are afraid of speaking in front of the public. Then tell the interviewers that you have joined a *Toastmaster* club or public speech course to overcome the problem. Remind them that when you identify a problem, you actively take actions to correct it, and that is how you do things.

## ***What are the current challenges in health care and what can we do to improve it?***

This question will be asked and you need to have an answer. Read articles from *The New York Times*, or *The Economist* — even the editorials in the *New England Journal of Medicine* – to gain an understanding of the current healthcare climate so that you can better answer this question on your medical school interview. It requires you to not only have a good knowledge of the *science* of medicine, but also the various economic and political issues, such as inequality of access to medicine, that impact that way that medicine is practiced in this country.

Other common questions given the status of COVID-19 are: How the pandemic has impacted your view of medicine? or What weaknesses do you see in the healthcare system due to COVID-19?

Here are more sample questions that can often come up during the interview process. Again, while you don’t have to write down or memorize answers to these questions, you should at least consider them in your mind so that you are well-prepared if they are asked.

## Additional Sample Questions



1. What are your career plans and what led you to these decisions?
2. What do you feel is the purpose of medical school?
3. Tell me about why you are interested in this program.
4. Describe your style of communicating and interacting with others.
5. Describe a situation in which you were not as dependable as you would have liked.
6. What experiences have you had working with diverse populations?
7. How do you handle stress?
8. From what you understand of medical school, what part of the program will be most difficult for you?
9. If you were a cookie, what cookie would you be?
10. Describe how you can effectively deal with someone in crisis.
11. What was your favorite college course and why?
12. What do you hope to gain from this experience?
13. Give an example of a situation in which you had to utilize effective interpersonal skills.
14. Tell me about a time when you demonstrated initiative.
15. Tell me about a time when you faced a conflict or anger with an individual.
16. Tell me about a time you failed.
17. How do you handle failure?
18. Tell me about a time when you were criticized unfairly.
19. Tell me about a time when you've been disappointed in a teammate or fellow group member. What happened? How did you approach the situation?
20. Describe a situation in which you have worked with a diverse group of people. What did you learn from that situation?
21. How do you go about making important decisions?
22. If you could start your college career all over again, what would you do differently?
23. How do you handle change?
24. What was your most memorable accomplishment in your college?
25. What does the word "success" mean to you?
26. What attracted you to this program?
27. What do you do when you are not at work or school?
28. How would your teammates describe you?
29. How would your professors describe you?
30. If we contacted your references now, what do you think they would say about you?
31. If you could change one aspect of your personality with a snap of your fingers, what would you change?
32. In what course did you get the worst grade? Why?
33. What two things would you consider your greatest strengths?
34. What two things would you consider your greatest weaknesses?
35. What else do you want us to know about you before you leave today?



36. Who would you say has been the most influential person in the last 100 years?
37. What are your hobbies?
38. Do you have a medical specialty you are most interested in?
39. What stimulated your interest in medicine?
40. What do you think about HMO's and the changes taking place in medicine?
41. What schools have you applied to?
42. What are you most excited about in medical school?
43. What do you think about euthanasia?
44. Why do you think so many people want to be doctors?
45. Do you think a physician should tell a patient he/she has eight months to live?
46. There are 1,000 applicants as qualified as you. Why should we pick you?
47. What steps have you taken to acquaint yourself with what a physician does?
48. How would your plans differ if you knew that all physicians would be working in HMOs in the future?
49. What do you think is the most pressing issue in medicine today?
50. What will you do if you don't get into medical school?
51. What are your positive qualities and what are your shortcomings?
52. What is your relationship like with your family?
53. How do you think your role as a physician fits in with your role as a member of the community?
54. Describe your personality.
55. What are the best and worst things that have ever happened to you?
56. If you could go to dinner with any person, living or deceased, who would it be?
57. What do you have to offer this school?
58. Is medicine a rewarding career? Why?
59. Would you practice in the inner city?
60. If there were an accident on the highway, would you stop and help the victims, knowing that doing so might lead to a malpractice claim against you?
61. What aspects of your life's experiences do you think make you a good candidate for medical school?
62. If your best friends were asked to describe you, what would they say?
63. How do you plan to finance your medical education?
64. What is a physician's role in race relations?
65. Discuss a book that you have recently read for pleasure.
66. Why did you select that book?
67. If you wrote a book about yourself, what would it be called?
68. A patient who has been in an accident needs a blood transfusion. She states that her religion does not allow them. You are the physician in charge. What will you do? Will you override her strong objection? Why or why not?
69. Should drug addicts be considered for organ transplants?
70. How can you better your application to medical school?
71. What newspapers, journals, etc., do you read on a regular basis?
72. Why did you choose your undergraduate major?



73. What extracurricular activities were you involved in during your undergraduate education?
74. What qualities do you look for in a physician?
75. Where do we stand in your list of medical school preferences?
76. How would you expand access to healthcare?
77. What experiences have you had in your community that demonstrate your commitment to medicine?
78. How do you think your personal background will affect your practice?
79. What are the negative aspects of medicine from a professional standpoint?
80. Would you like academic medicine as a career?
81. How might you deal with a terminally ill patient?
82. If you want to help people, why not social work?
83. Describe any travels that you have undertaken and exposure to other cultures than your own, if any.
84. Do you prefer the idea of basic research or of working with people?
85. Do you have an alternative career plan?
86. When you need counseling for personal problems, whom do you talk with?
87. Describe your childhood and present living conditions.
88. How will you keep in touch with community needs?
89. How do you handle blood and gore?
90. Tell us your opinion of this medical school's curriculum.
91. Discuss the positive and negative aspects of the Affordable Healthcare Act?
92. Do you feel that medical students receiving federal loans should spend time practicing medicine in a rural area to give something in return to society?
93. What are some differences between a foreign healthcare system and ours?
94. What is the biggest problem in the world today?
95. What is your solution to terrorism?
96. What is success to you?
97. How can we expand preventive medicine?
98. If you discovered a classmate cheating, what would you do?
99. Tell me about your family. How do they feel about your decision to attend medical school?
100. What impact do you want to have on the medical profession?
101. What do you think the importance of treating the patient as an entire person is?
102. How do you think the connection between mind and body fits into patient care?

Some helpful books to read regarding medical care and bioethical concerns are discussed here. There is the biography about the medical-scientist who discovered penicillin –*Jonas Salk: A Life* by Charlotte DeCroes Jacobs. Oliver Sacks, a professor of neurology at NYU School of Medicine, wrote extensively on neuro-atypical case studies in *The Man Who Mistook His Wife for a Hat* and *Awakenings*.

A successful neurosurgeon who was diagnosed with terminal cancer details his journey from physician to terminally ill patient in *When Breathe Becomes Air* by Paul Kalanithi, M.D. For a patient's perspective on acute illness, read Susannah Cahalan's *Brain on Fire: My Month of Madness*. For bioethics reading, consider Peter Singer's *Stem Cell Issues: The Ethical Issues*, *Bioethics: An Anthology*, and *Embryo Experimentation: Biological, Legal, and Social Issues*. For further bioethical/public policy concerns regarding the quarantine of a patient, the case study of typhoid Mary is an interesting one – *Typhoid Mary: Captive to the Public's Health* by Judith Walzer Smith.

## Questions for the Interviewer

At some point in the interview, your interviewer will ask you what questions you have for them. Your questions at this point will be as important as the answers you have already given, for they need to show interest in the particular school and program during this part of the interview, so it is important to have some questions ready. The more school specific they are, the better. This will require researching the school online and asking students during your interview day about particular programs. **You should also have a different list of questions for faculty interviewers and for student interviewers ready.**

The following is a generic list of questions if you need to fall back on them (this list is from Association of American Medical Colleges). Remember each question may not be appropriate for every interviewer. Ask questions that the interviewer will be able to answer, i.e. ask a student about the note-taking service, or a faculty member about the curriculum.

1. Are there any special programs for which this medical school is noted?
2. Describe this school's curriculum in the pre-clinical and clinical years. Are there overarching curriculum themes such as Problem- Based Learning?
3. Are there opportunities for students to design, conduct, and publish their own research?
4. Is there a note-taking service?
5. Is there flexibility in the coursework (the number of electives) and the timing of the courses (accelerating, decelerating, and time off) during the pre-clinical and clinical years?
6. How do students from this medical school perform on the National Board Examinations? How does the school assist students who do not pass?
7. How are students evaluated academically? How are clinical evaluations performed?
8. Is there a formal mechanism in place for students to evaluate their professors and attending physicians? What changes have been made recently as a result of this feedback?
9. What kind of academic, personal, financial, and career counseling is available to students? Are these services also offered to their spouses and dependents/children?
10. Is there a mentor/advisor system? Who are the advisors — faculty members, other students, or both?
11. Does this school have strengths in the type of medicine (primary versus specialized care, urban versus rural practice environment, academic medicine versus private practice) that I will want to practice?

12. How diverse is the student body? Are there support services or organizations for ethnic minorities and women?
13. Tell me about the library and extracurricular facilities (i.e., housing and athletic/recreational facilities).
14. How active is the Student Council/Government? Are there other student organizations?
15. What type of clinical sites—ambulatory, private preceptors, private hospitals, rural settings—are available or required for clerkships? Does this school allow for students to do rotations at other institutions or internationally?
16. Is a car necessary for clinical rotations? Is parking a problem?
17. What is the current tuition and fees? Is this expected to increase yearly?
18. Are there stable levels of federal financial aid and substantial amounts of university/medical school endowment aid available to students?
19. Are there students who have an “unmet need” factor in their budget? If so, where do these students come up with the extra funds?
20. Are spouses and dependents/children covered in a student’s budget?
21. Is someone available to assist students with budgeting and financial planning?
22. Does this school provide guidance to its students, and to its graduates/alumni, on debt management?
23. What medical school committees (e.g., curriculum committee) have student representation?
24. Are students involved in required or voluntary community service?

## A Word on Thank You Letters

Thank-you letters can be a major source of stress for medical student applicants! The bottom line is that, while they are necessary and polite, they do not need to be dissertations. The best way to communicate is to send an e-mail to your interviewer(s) within 48 hours of your interview. In it, you should recap why you like the school, but more importantly remind them of something memorable that happened. If you talk about a movie that you both enjoy or a sport that you both partake in or a hobby that you share, remember to mention it in your letter.

Some admissions committee members also enjoy getting small postcards or thank you notes in the mail. You have to gauge your interviewer yourself and see if you think this is somebody who would enjoy that. Sometimes, it shows a more personal touch than an e-mail. We would recommend that you send an e-mail anyway, but follow-up with a simple, handwritten thank you note on simple stationery is advised. Often, notes get lost in hospital mail and so you don't want your interviewer to think you did not send them any kind of thank you for their time.

If you had a group interview, try to send a letter to each interviewer. In the case of an MMI interviewer, you can send one letter directly to the admissions committee.

If you are at a loss for what to say, here is a quick, but incomplete, sample of something you could say:

*Dear Dr. X,*

*It was such a pleasure meeting with you last week. Thank you so much for taking the time out of your day to talk to me about the school. I really love many facets of the program. As you know, I would love to come back to New York for medical school so school X is a perfect fit.*

*It was great to meet a fellow golfer! I know some great courses in the area and can't wait to start playing again. Perhaps one day we can go out for round together.*

*Thank you again and I hope to hear from the admissions committee soon.*



# SECTION 4: REJECTION

Although this book is meant to help you be successful in your journey towards medical school, the reality is that getting into such a school in the United States remains a difficult task. With more than 60% of applicants being rejected every year, it's more likely than not you'll find yourself being rejected. This section covers what to do next if you are rejected by the medical schools that you have applied to.

There are several important factors to consider if this happens. We recommend a multistep approach to your application if you find yourself without a seat in medical school.

**1. Breathe.** Yes, it's disappointing. Yes, it can be devastating. Yes, your dreams of becoming a doctor have been put on hold for one year.

But take a deep breath and remember that there are literally thousands of physicians practicing today who found themselves in the exact same situation you did. They are taking care of patients, performing surgeries and enjoying their careers today without any evidence of the rejection anywhere to be found. You can make it there too! Putting the situation into perspective can make it easier to cope with.

**2. Evaluate.** This is an excellent time to begin evaluating what went wrong with the application process. There are many people who can help you do this, but remember that not everyone has a current and in-depth understanding of the process. You can contact schools who rejected you, but their advice is sometimes generic ("get more clinical experience" is something we hear a lot of). If you can afford the help, we suggest you get a professional company like MedSchoolCoach to help you evaluate your application and figure out how to make it stronger for the following year.



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- 3. Take action.** Once you have evaluated the situation and have identified your deficiencies, it's time to correct them. If academic weaknesses were the reason for your rejection, consider taking extra classes or even a Master's program to strengthen your qualifications. Strengthening your qualification may involve getting a research or clinical job if your activities in this area were not up to par. The most important thing is that you don't go ahead and submit the same exact application you did the previous year. That is a formula for a sure rejection.
- 4. Rewrite.** Yes, it's painful, but you will have to rewrite your personal statement and activities to better reflect your strengths. It is okay to "recycle" similar material that you did for last year's application, but you should definitely not reuse word for word.
- 5. Think about when to reapply.** Because you have to make additions and improvements to your application, you may want to think about putting your next application on hold for another year. This should be evaluated on a case-by-case basis because the bottom line is that you don't want to simply rush into another application without addressing the issues at hand.
- 6. Think about alternative paths for your next application.** One possibility to consider is applying to osteopathic programs if you are interested (and you should be! DOs are physicians who perform the same exact functions as MDs in virtually every manner). Osteopathic programs are often "easier" to get into, but you will still need to be a strong student to get accepted into a DO school. Browse through Section 6 of this book for more details.
- 7. Keep your head up.** We circle back to keeping your confidence up because it's so important. It's a tough time for you after getting rejected, but make sure not to let it get you too down. Again, many physicians have been through the same process and come out just fine on the other side!



# SECTION 5: INTERNATIONAL SCHOOLS

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This book would not be complete without a mention of international medical schools. According to a recent article by U.S. News and World Report, American students going abroad to study medicine is becoming more of a trend. However, while many international schools have a higher acceptance rate and will take students with lower GPAs and MCAT scores, it is important to look at the *whole picture* before applying.

International medical schools are another option for students to consider – and they come in many different varieties. To understand if one is right for you is not a simple task and requires a critical analysis of where your application stands.

Typically, we consider these options for students who have been unable to get into US medical schools (both MD and DO) for at least two years. Why the hesitation? Because it's significantly more difficult to get a residency position in the United States from an international school than from one in the U.S. If your application is borderline or better and you got rejected, we'd suggest reapplying to US schools before jumping into the international pool.

What if you've considered your options and decided that international schools are right for you? At this point you should consider which international schools make sense. They come in many varieties, some of which don't even require you to take the MCAT. While this may sound enticing, we would strongly suggest not jumping to one of these types of schools!



Anecdotally, you may hear about X% of their graduates getting residencies or passing the boards, but in our experience these numbers are inflated and not reliable. We've also seen many candidates struggle to get a residency due to poor reputations of these schools. What's worse is that many of these schools are profit machines that don't care much about your education and this can easily leave you scrambling for 3rd and 4th year rotations. It is not a great situation to be in and for that reason there are a whole plethora of international schools we do not recommend.

This is not to denigrate many worthy international schools that will give you a first-rate medical education! There are a lot of very successful physicians practicing in the United States who have graduated from abroad. To be clear, for the purposes of this conversation, we are distinguishing between physicians who grew up in other countries and went to medical school there, and students who grew up in the United States but went to medical school internationally. There are of course, thousands of brilliant and highly qualified physicians born and educated abroad, but we want to focus in on the second group, which are students who struggled to get into an American medical school and chose to matriculate at an international school instead. Of those students who leave the US to get their education elsewhere, many are very successful. Oftentimes, these students did not have the highest GPAs as undergraduates which hurt their chances of a U.S. med school acceptance, but to compensate they worked extremely hard when they got into medical school in order to graduate at the top of their respective classes. This kind of international graduate can get a good residency (typically at community type hospitals, but also some at University hospitals), and reputable fellowships and jobs thereafter. Once you get a residency, you are set and on your way.

The best schools to set you up for a good residency are those with solid reputations and a large alumni base in the United States. This alumni base is important because it makes it easier for you to reach out to residencies who have had alumni of a particular school there in the past and were a good fit for that particular school. Two big schools with excellent reputations and an alumni base are **Ross and Saint Georges**, but there are a few others as well. There are also new intriguing options in Australia (**University of Queensland** and **Oschner Hospitals**). This program may be very good because it has a set experience with Oschner in Louisiana.

The programs that make the most sense for a particular individual vary, but here we lay out some basics to make sure to consider in a school below.



## MedSchoolCoach Insight - What to Consider in an International School



- *Accreditation: Will your degree be accepted by states for licensing?*
- *Board pass rate and average score: how well do students perform on boards (USMLE Step 1 and Step 2). This is an important factor in getting a residency in the States.*
- *3rd and 4th year rotations: Where are they and how are they set up?*
- *Are they guaranteed?*
- *Graduation Rate: What percentage of students graduate?*
- *Match Rate: What percentage of students match on their first try?*
- *Match List: Take a look at a schools match list to see where the majority of their students are matching geographically and into what specialties.*

# SECTION 6:

# OSTEOPATHIC SCHOOLS (DO)

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Should you consider osteopathic schools? The short answer is YES! If you want to become a physician in the United States, osteopathic schools are a great option for many people. These are becoming more popular and of the seven new medical schools opening soon in the United States – in Washington, Alabama, Indiana, North Carolina, Mississippi and Oregon. All of them are osteopathic medical schools!

## What is osteopathic medicine?

Osteopathic medicine refers to a branch of medical practice that emphasizes the treatment of medical disorders through the manipulation and massage of bones, joints and muscles.

## Will my education be different?

Mostly no. Medical education is fairly similar across medical schools. While there are certainly some variations, you will learn core subjects like biochemistry, physiology, microbiology and anatomy in any medical school. During your third and fourth year, you will learn how to care for patients regardless of if you are in an MD or a DO school. There is a certain set of knowledge you need to know to become a physician and any US DO or MD school will teach you this. So how does the DO education differ? Well, you actually learn a skill that MDs won't, specifically osteopathic manipulations similar to what a chiropractor may be able to provide.



## MedSchoolCoach Insight - How is the DO application different from the MD

- *Broadly, the applications to DO schools and MD schools are very similar. There is a centralized primary application (AMCAS for MD and AACOMAS for DO schools) each which will require a personal statement, activities descriptions and transcripts*
- *The personal statement length for DO schools is 4500 characters versus 5300 for MD*
- *The DO science GPA does not include math classes*
- *The DO GPA is calculated with your highest grade if you retake a class (it is simply averaged for your MD application)*
- *You can submit LORs directly to the school(s), or AACOMAS or Interfolio*
- *The timeline is similar (application opens up in May), but slightly more extended as deadlines aren't until as late as February. As with everything, it helps to apply as early as possible!*

### **On a day-to-day basis, will I practice differently?**

Probably not. DOs and MDs work side by side in practices across the country. They see the same patients and prescribe the same treatments. In certain settings, you will find absolutely no difference in the way a DO sees, evaluates and treats a patient than an MD does.

### **But I can't practice in academics right?**

This is a misconception as well. While many DOs end up in the community (which is where the vast majority of MDs do as well), some stay in academics. Many even rise right to the top of their academic fields. A good example of this is the head of cardiology at Massachusetts General Hospital, who is an osteopathic physician. It may be a hard road, but it's a hard road from anywhere to rise to the top of your specialty!

## Will I make less money as a DO than an MD?

No. While medical specialties obviously vary in pay (orthopedic surgeons, for instance, make more than primary care doctors) and can vary on where you work (such as the particular area of the country or academic versus private practice), if you are a DO, you can make the same amount of money as an MD in the same specialty. Insurance companies will pay you the same for the procedures you do or the services you provide.

So perhaps we have convinced you that osteopathic medicine should at least be on your radar – especially if you find yourself struggling to be an outstanding candidate for MD schools. It's not for everyone, but you should not dismiss the field without having put a lot of thought into it. If you are convinced, there are a few things you have to do in order to put forth a great osteopathic application outlined below.

### MedSchoolCoachInsight - How to get into a DO school



- *Shadow a DO - this is an extremely important step. Many schools require a DO LOR while others highly recommend it. The bottom line is you want to explore the field and make an informed choice. You also want to show DO schools that this isn't just a "backup" option and that you are truly interested in practicing osteopathic medicine. Many of these can points can be taken care of by shadowing an osteopathic doctor.*
- *Embrace helping your community - while MD schools are certainly also looking for you to be an altruistic person who have a love for helping those around you, many of the tenants of osteopathic medicine lead themselves nicely into activities that show you have helped your community.*



# SECTION 7:

# POST BACCALAUREATE &

# SPECIAL MASTER'S PROGRAMS

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If you are a pre-med student, the term post-baccalaureate or “post-bacc” has probably become a part of your vocabulary. These now ubiquitous programs are seemingly a rite of passage for many pre-med students. While these programs are a great utilization of time and resources for many candidates, they are not for everyone. You must weigh multiple factors before diving into these programs, including the very high cost.

Let's take a look at post-bacc programs for those making a career change or wanting to enhance their academic background.

## Career Changers

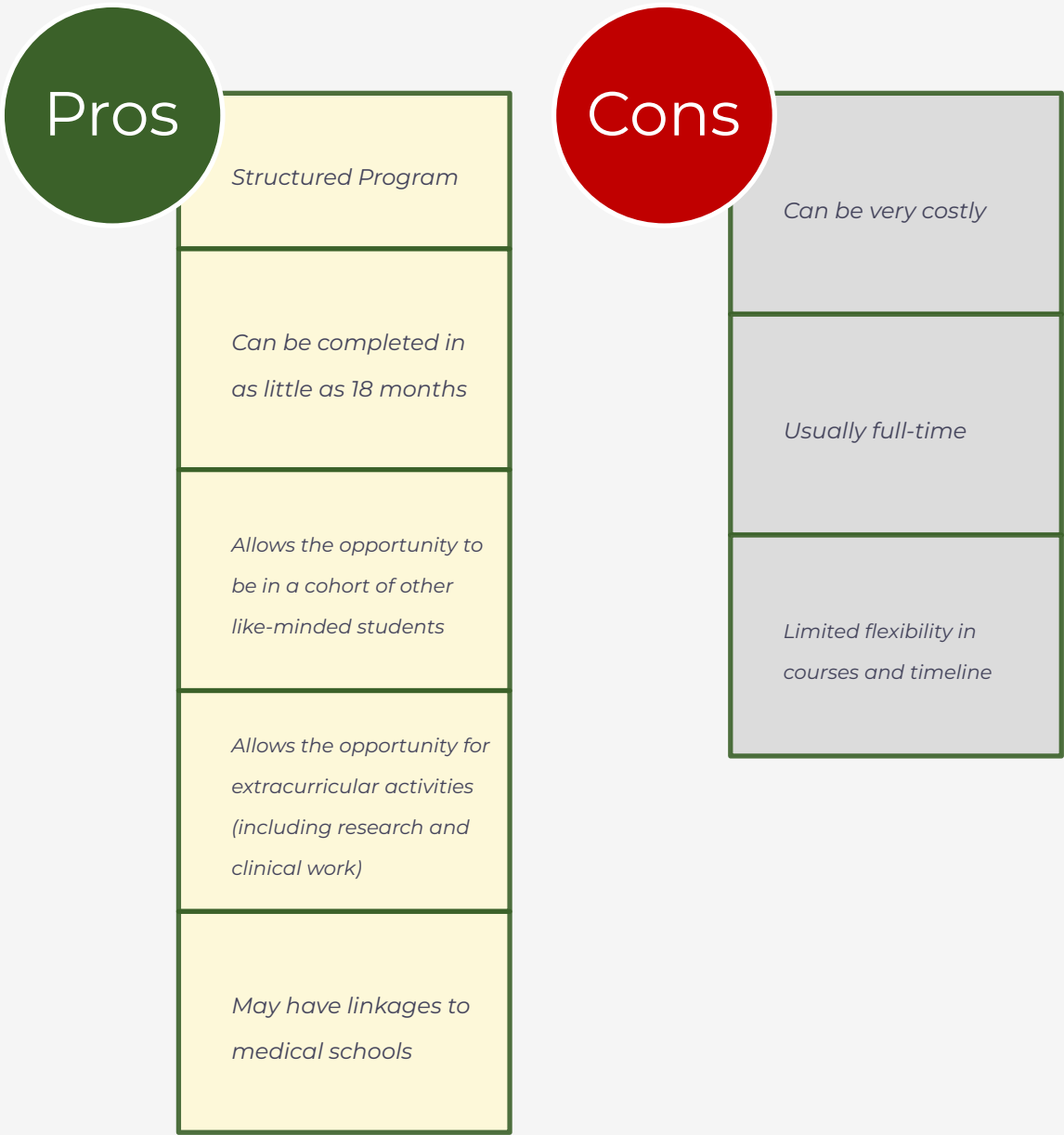
The first type of post-bacc program is for the career changer. These are programs that are specifically designed (usually over 18 – 24 months) for students who have decided that medicine is what they want to do later in life. If you were out in the finance world for multiple years, your 7-figure salary is not cutting it, and you instead decide that you want to help others lead healthier lives, then this kind of program is for you! Even if you started out pre-med and took one or two science classes, these career-changer programs may still be for you.



In essence, you will be taking the usual pre-med course load that includes general chemistry, biology, organic chemistry and physics with their lab components, plus math (typically Calculus 1 and Statistics 1), psychology courses or a corresponding series of social science courses meeting new medical school requirements, biochemistry and other courses to supplement your education.

Many of these programs are somewhat flexible in terms of which supplemental courses you have to take: for example, if you took calculus as an undergrad, you won't have to take it again and can instead take an elective course. These programs are great for those who are switching careers and allow you to do so in a structured manner. Some of these programs allow night classes as well, which is optimal if you need to work while going back to school. Most of the programs will provide some opportunity for extracurricular activities for their students, including research and clinical opportunities to improve your eventual medical school application. Most will also allow you to factor in at least some MCAT study time. Since the prerequisite classes are required for medical school, if you haven't taken them as an undergraduate, these career -changer post-bacc programs are a usually a viable option. The other option if you haven't taken the perquisite courses as an undergrad would be to find a four-year university and enroll in classes on your own. We'll call this the "do it yourself" option, which may allow you to continue working full-time while finding classes that fit your own schedule. This route has its pros and cons as well, so you have to find which one best fits your unique situation. We've outlined some of them below to get you thinking about which may be right for you.

## "Career Changer" Post-BaccProgram



Return to College“Do-it-Yourself”

Pros

*Can be completed cost effectively*

*Greater flexibly in terms of class times*

*Ability to extend the program over many months*

*Ability to work part or full time while taking classes*

*Flexibility to choose between many universities that may offer classes*

Cons

*Non-structured environment*

*Lack of formal advising*

*You must hunt for classes on your own (and sometimes they may be full)*

*Lack of linkages to medical schools*



## MedSchoolCoachInsight - If you did really bad in college, you could still qualify!

- While career-changer programs are geared towards those who have never taken pre-med classes, there are a small subset which may allow you to repeat classes you've taken as a pre-med if you did particularly poorly in them. This means if you got below a C, in multiple premed classes, but now are refocused on medical school, you can sometimes apply to a career-changer program to retake all your premed classes and show medical schools that you are a new person.
- The ability to redo classes is at the prerogative of each individual program, so you should contact each one to see who may or may not let you do this.

### Academic Enhancers

In their simplest form, academic enhancer programs provide a way to prove to medical schools you have the academic wherewithal to get through the first two years of medical school. These programs are for those students who took most or all of their pre-med classes in college but whose overall GPAs didn't quite shine. It is recommended that if your GPA is a 3.6 or below, you should at least consider an academic enhancer program. These programs may also benefit students who got rejected from medical school the first time around or simply want to enhance their academic record before applying. In these programs, students are typically enrolled in graduate level classwork. The exact subjects vary from school to school but could include topics like:

- Biochemistry
- Neurobiology
- Physiology
- Anatomy
- Medical Art

You'll find a lot of academic enhancer programs that have varied and interesting coursework. The goal of taking these advanced classes is to prove to medical schools that you can do well in classes that are science heavy and difficult.

There are subsets of academic enhancer programs that will even put you directly side by side in the same exact classes as first year medical students. We believe that these programs truly help medical school admission committees look past less-than-desirable grades in undergrad.



## MedSchoolCoachInsight -

### Why taking medical school classes before medical school can be so influential

- *Imagine you are on an admissions committee and come across an application that was a smattering of A's and B's in undergraduate level work. You may look at this applicant as a borderline applicant when it comes to academic promise and wouldn't be sure he or she could handle medical school work. You'll likely put aside that application. But now, imagine reading that same application with a whole year of first year medical school classes on it. If the grades are good, the student has unequivocally proven they have what it takes academically to succeed in medical school. Now the rest of the application actually gets looked at.*

## Grades

How are these grades factored into your application? It depends a bit on the program you join. Some programs will offer advanced undergraduate courses that will be directly factored into your overall undergraduate GPA. This can help in bringing the undergrad GPA up, but given that most of these programs are only a year long, and the fact that they will be factored into 4 years of undergrad courses, a student's GPA may not budge very much. Other programs will be considered graduate level and will actually be on a separate line in your application. This can help draw the eye of the admissions committee to a more impressive GPA that can help your application tremendously. Which route is best is dependent on your individual situation, but in general, always aim for the program that will give you the best opportunity to succeed.

A very important consideration about your grades in an academic enhancer program is the timing. If you are applying to medical school in the same year you are doing the program, your grades will not be on your AMCAS application (i.e. you are trying to get into medical school right after you graduate your post-bacc program). While the program will still be impressive, and you can always update schools, the full effect will not be felt because you will concurrently be taking classes and applying. This is why it's important to consider a post-bacc before you apply in many cases. Since most admissions decisions happen between November and April, the only schools that will typically wait for your full grades to come back before making a decision will be the school with which your program has a linkage.

## MedSchoolCoachInsight - You may have to wait to make an impact

- *If you apply concurrently to medical school while completing a post-bacc, your grades will not make it onto your AMCAS application or into your calculated GPA.*
- *Make sure to send schools an update letter once you receive your grades in order to provide them with an idea of what you've been up to.*
- *If your GPA is too low, you may want to consider two gap years so that the grades from a post-bacc program make it onto your application.*

### Linkages

You'll hear the term linkage thrown out a lot when it comes to post-bacc programs and it is a great opportunity, but there are several important things to consider that we've outlined below. A linkage may allow you an interview at a particular school, but an interview isn't equivalent to an acceptance by a long shot. That said, there are many programs that take a substantial number of their own students who perform well in their programs. This can prove to be a great opportunity for someone who can shine during their post-bacc year. It also eliminates the "glide year" which means that you can start medical school the fall of the year you graduate your post-bacc program as opposed to waiting another year prior to having those grades be evaluated by medical school.

### Linkage Definition

- *Linkage is a formal agreement between the post-bacc premed program and a medical school (or several medical schools, of which you can typically choose one), which enables highly qualified students with a strong interest in one of these schools to accelerate the application process (i.e. apply while they are still in the post-bacc program).*

## MedSchoolCoachInsight - Beware of the "linkage"

- *An interview is not an acceptance. Just because a school offers 50% of their students an interview, don't get too excited. How many of these students are actually accepted is the important question to ask.*
- *Linkages are typically only good for 1 school. That means that you can guarantee yourself an interview at just one school by performing well.*

There are several other things to consider when deciding if a post-bacc program is right for you. Among them is the length of the program and the cost, as well as other opportunities that may be available to you at the program such as opportunities for research. Most programs will be fairly similar in the long run, but choose wisely and ask the right questions when applying.

### Questions to ask your potential post-bacc program

- *What percentage of students will be accepted to MD schools? To DO schools?*
- *How long does the average person take to finish the program?*
- *Is there career advising available?*
- *Is there built in MCAT studying time? Are there MCAT preparation classes included?*
- *What elective classes can I take?*
- *Are there research opportunities available?*
- *Are there clinical opportunities available?*

In conclusion, the medical school application is a long and sometimes grueling journey, but if you are successful, it will prepare you for the even longer and more arduous journey of medical school itself! This book will help to make the process of applying to – and being accepted by – a medical school smoother and less stressful so that you can go on to become the doctor you have always dreamed of being!

## Acknowledgements:

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As an advisor, Brian aims to help those who want to learn from his own story. He has helped hundreds of students get into medical school and successfully founded his own company (and also struck out on one). He believes that, with the right strategy, anyone can find their path to becoming a graduate or medical student.

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## Sahil V. Mehta, MD

Dr. Mehta is the founder of MedSchoolCoach. He graduated Summa Cum Laude from Columbia University in New York City with a Bachelors of Science in Civil Engineering. He finished his degree with the highest GPA of any graduating senior in the major. He was accepted to multiple top ten medical schools in the country and chose to attend the University of Chicago; Pritzker School of Medicine, where he graduated with research honors. At the University of Chicago, he was actively involved global health opportunities and in interviewing candidates for medical school.

After graduating from Pritzker, Dr. Mehta trained in medicine and surgery at Memorial Sloan Kettering Cancer Center in New York. He then completed his residency in Radiology with an emphasis on Interventional Radiology as well as Global Health. Actively involved in the teaching of Harvard Medical students, he constantly earned exceptional remarks as part of the senior teaching faculty for the Radiology Core Clerkship. Following residency, he became a fellow in Vascular and Interventional Radiology Fellowship at Massachusetts General Hospital. Academically, he has presented his work at multiple national meetings, including SIR and RSNA, and has been published in multiple peer reviewed journals.

Outside of his teaching and admissions consulting interest, Sahil has a keen interest in Global Health. He founded a teleradiology program with Scottish Livingston Hospital in Botswana and was awarded the Goldberg-Reeder Grant from the American College of Radiology for further development of the program and travel to Africa.

He has also spent extensive time in the Dominican Republic and India on global health endeavors.

Throughout his career, Dr. Mehta has been actively involved in education. He served as a teaching assistant for multiple premed classes at Columbia as well as for multiple medical school classes at the University of Chicago. He was also a top rated MCAT instructor at Examrackers for three years in the Northeast Region and eventually served as an Examrackers teacher trainer. Sahil also served as the Senior Editor on USMLERx QMax, an online question bank for medical licensing exams from the makers of First Aid, where he oversaw over 50 authors in their creation of a Step 2 Question Bank. As the founder of MedSchoolCoach, he has successfully guided thousands of students through the medical school application process. As one of the nation's leading experts in medical school admissions consulting, he has received innumerable accolades from the students he has helped.

Dr. Mehta is currently a practicing interventional radiologist at Beth Israel Deaconess Medical Center, with clinical interests in portal hypertension, women's health, interventional oncology and interventional pain management. He is a clinical faculty member and holds an academic appointment at Harvard Medical School.

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# Appendix

## *Personal Statement Examples*

### **Example #1**

I met Sayaka at a temporary shelter prepared for the Tohoku earthquake victims. She was a cheerful, young 11-year-old girl that lit up hearts with her bright smile, even in the midst of disaster. Despite her liveliness, Sayaka would become easily frightened and anxious from the occasional aftershocks following the infamous 2011 Japanese earthquake. With the assistance of the physician relief workers, we realized she was suffering from post-traumatic stress disorder (PTSD). With intense counseling and ample time, Sayaka gradually began to overcome the trauma she had experienced, and watching her benefit from this medical intervention was incredibly rewarding, reminding me of myself when I first came to Japan.

Following my father, a pastor, my family moved to Japan when I was only thirteen. Although through completely different circumstances, similar to Sayaka, I suffered many difficulties during that time. My family struggled financially, and I was isolated due to the stark cultural and language barriers. However, ironically, the ones who befriended me without any prejudice to a foreigner, were the Japanese children living in my neighborhood. Above all, they wholly embraced me, and with their selfless help, I grew into a stronger person during this difficult time and realized the value of helping and comforting others.

Growing up with a pastor as a father, and a mother who dedicated her life to others, service was something that was instilled in me from an early age. However, as the one being served, my friends showed me a whole new perspective on how helping others can actually heal and mend. With that in mind, and a newfound strength, I pursued different activities where I could bring care to others, eventually leading me to medicine.

When I first considered medicine, I immediately became enthralled with it and sought out every experience I could. To gain medical knowledge, I shadowed doctors from diverse specialties, ranging from internal medicine to surgery. And to continue fostering a service-minded attitude, I invested a considerable amount of time volunteering in various countries, including Japan, Korea, and the United States. Moreover, I finished a graduate degree in a counseling-related field to provide holistic treatment to my patients in the future.

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Although every activity was remarkable, one of the most memorable experiences was serving as part of the Earthquake Relief Volunteer Team following the devastation in Japan. Working as a team with various physicians and other healthcare professionals for the common goal of saving people enabled me to witness the powerful dynamic of medicine. I was greatly impressed by their perseverance and diligence despite terribly long hours with poor staffing in the face of such tragedy.

Seeing this dedication, I greatly respected the strong sense of duty the physicians possessed, and my desire to devote my life to heal the wounded and save lives grew even stronger. It was indeed a decisive time to confirm my calling as a physician to help others throughout the world.

After finishing the hectic volunteer work that lasted for several months, I could have gone back to the United States. However, the knowledge, experience, and the people I met during this time meant so much to me, I decided to stay an additional year in Japan to utilize my counseling skills for patients suffering from PTSD after the traumatic earthquake. Now, seeing Sayaka's bright smile again has truly confirmed my path, and I believe medicine is the next step in my journey to continue to provide healing and relief for those in need.



## Example #2

This place was muggier than I remember, almost as if the humidity had made a pact with my suit and tie to slowly strangle me. Or perhaps the gaze of our elected student assembly leaders, and the scrutiny of the politically active undergraduates frequenting these forums was tugging on my nerves. Whatever it was, it fought to take my focus away from landing my pitch. The chamber's speaker system crackled to life, "Up next is Rutgers GlobeMed." Although I was the acting president, I generally did not deliver speeches before large crowds as I trusted that role to members of my exuberant executive board. However, this speech was pivotal, this grant proposal could easily help us reach our fundraising goal for *Change-A-Life Uganda*. The decision of the voting assembly members was in my hands, and the success of our yearly water sanitation and female menstrual hygiene project was at my fingertips. Standing at the podium, as I spoke, it seemed as if my message began to resonate with the crowd. I presented GlobeMed's partnership mission with confidence and answered every question with authority as nods of acknowledgment and smiles of approval generated momentum. I had never felt more in control of a room filled with strangers. This is what pouring my heart and soul into a student organization did to a once weak-kneed, immature freshman over the years.

GlobeMed, a simple student-run, non-profit organization, had defined my college career. It challenged me intellectually and politically, put me at odds with my colleagues while knitting bonds of trust, and has made me a charismatic leader of peers and a meek servant to marginalized communities here and abroad. Above all, it has prepared me to be an asset to healthcare through strong leadership.

I had always underrated patience as a virtue. If I needed something done, my team worked diligently until we reached our goal, but I slowly learned that patience and consideration can strengthen my interpersonal relationships. Leading GlobeMed posed a considerable challenge, but served as a catalyst for personal growth. It wasn't until a particular member came to me in confidence, explaining that her medical issues and her demanding schedule were impacting her other commitments. Goal-oriented and haunted by deadlines, I had never thought to consider the personal lives of those I work with. Priorities are inspired by experiences, and as experiences vary, priorities clash, and as I recognized this, I softened my disposition in teamwork. Patience is understanding circumstances, accepting them as they come, and reorienting plans to fit a new trajectory. My leadership experience has made me realize the critical importance of patience in order to successfully function as a team and achieve a common goal.

Beyond patience in teamwork, a physician should display humility and exhibit mutual respect in leadership. I had the privilege of directing and selecting a staff of the most diverse, inquisitive students on campus to both give back to the local community and to become globally engaged. In developing my leadership skills through mentoring and advising, I built meaningful connections with my staff on a personal basis, and together, we worked towards executing successful campaigns and building our young organization.

I made coffee plans with members I had yet to know better, and organized hiking trips to build team chemistry. Seeing potential in some students, I mentored them to fill my roles after my graduation. My personal growth in maturity and leadership over the past year has been pivotal to our success. Medicine calls for leaders and decision makers, for physicians to know their patients and their peers, and to have confidence that, by way of their guidance, everyone is on the same page. When it calls for me, I know I will have been a friend and a leader to those around me, and that I won't have to answer that call alone.

A gesture caught the corner of my eye, advising me of my remaining time. "Thank you for your attention! I'll take any additional questions . . ." Zealous applause cut in mid-sentence, and who else could it be but a crew of GlobeMed members in the crowd that came to support me. The vote hadn't happened yet; we hadn't known we would win the grant over dozens of competing organizations or go on to exceed our yearly goal by \$3,000, but that moment emanated victory. We locked eyes and shared foolish grins that could only be inspired by tested loyalty. In that brief moment, I ceased to see them as individuals, or even as a group. I saw them as my contribution to the future of GlobeMed and as a testament to what kind of physician I will be in the future. I saw the fruits of heartfelt leadership and mentorship in my personal development and in our collective success, and I knew that I have what it takes to lead in the future of medicine.