

Why An Obsession with Clinical Hours is Harmful to Medical School Applicants

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If you take a visit to a prospective medical school blog, you will immediately enter into a frenzy of future applicants comparing their clinical experiences. They are counting up the hours and strictly categorizing it. Is it shadowing hours, clinical service hours, or non-clinical volunteer hours? You might even come across future applicants fighting over the only thing that matters: **Does this experience count as clinical in the eyes of medical school admission?** I am here to share how this perspective can be problematic to those seeking admission. While well intended, this check-list mentality is actually hurting you. Here's why:

The most troubling thing about an obsession with clinical hours is it causes the applicant to have an **admissions centered** mindset. The applicant is primarily focusing on what Admissions Deans at medical schools want, and therefore will only act if it might benefit their application. If the applicant believes that Admissions will not recognize experience as beneficial to their application to medical school, they just won't do the action. I have seen this phenomenon in increasing numbers during the pandemic. For example, students have been resistant to engage in virtual shadowing or serve in COVID-related roles, such as COVID screening, vaccination clinics, or contact tracing. There is a significantly high need for these roles in the healthcare field right now and they can provide tremendous professional development growth, yet applicants avoid it because they think it's not "competitive."

No Defined Goals Yet I am unsure how my actions benefit anyone.	→	Admissions Centered How will my actions benefit admissions?	→	Patient Centered How will my actions benefit patients?	→	Mission Centered How will my actions benefit a greater purpose in healthcare?
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When I tell prospective medical applicants that the number of clinical hours is not as important as the competencies gained from the experience, I am immediately met with doubt. So I took this topic a step further and compared it to actual applicant numbers! I looked at successful applicants from Brandeis University from the 2020 cycle and calculated all the listed numbers of clinical hours in activity lists. **There was no statistically significant difference in**

clinical hours between accepted and applicants with no acceptances. In fact, we saw successful matriculants with no shadowing hours who instead volunteered in a high-impact clinical field for a year or more. We also saw applicants who did not have any direct patient experience as an EMT or CNA, and instead made this up through shadowing or observations. There were some applicants with over ten thousand hours of clinical experience who were not accepted due to lower academic performance, and applicants with a very small number of hours who were accepted by many schools given that they balanced it with higher MCAT scores. As medical schools conduct holistic admissions, applicants benefit when one strength in the application can balance another area (to a limited extent). My findings were conclusive; it's not about the hours but about the reflections gained from their experiences.

HOW DO ADMISSIONS READ YOUR APPLICATION?

To learn more about how medical school admissions review applications, our office reached out to Kristen Goodell, MD, the Associate Dean of Admissions at Boston University School of Medicine. Dean Goodell shared that their **admissions team does not count hours**. Instead, they are looking for the motivations behind the hours.

1. The duration of your clinical experience says way more than the number of hours. Instead of completing a one-time summer internship, their team is much more impressed by a long-term position that requires a couple hours a week for a year (or more) commitment. Here's why:

- Are you demonstrating dedication or growth in your position?
- Are you showing you are committed to the patient population?
- Do you like clinical work enough to make time for it despite classes, extra-curriculars, etc?
- Making a difference takes some time - Are you thinking about your contributions, or what you'll get out of the experience?

2. The specific position you held is less important than what you learned from it. Here's why:

- Did you really invest yourself into the experience?
- Are you motivated to serve in a way that relates to your other hobbies and interests?
- Did this position open up a new area of interest for you, or teach you something new about health care, or enhance your motivation?

SO WHAT DO YOU DO INSTEAD?

The most successful applicants I have witnessed apply to medical school have long forgotten the admissions centered mindset. They have instead transcended onto a **patient centered or mission centered** approach. Instead of asking about whether their actions can benefit admissions, they are critically asking how their actions will benefit patients or their overall mission in the healthcare field. The most impressive applicants can clearly define their own

strengths and how this will serve as a tool to a specific patient population. Here's a specific example. Many students at Brandeis choose to volunteer with Family Van, a Harvard Medical School run mobile health clinic that provides health screenings to the local Cambridge area. Students initially join to gain experience for medical school (admissions centered), but find the patient interactions so meaningful they begin to prioritize the needs of the patient (patient centered). Through long-term commitment, they begin to realize the severe complications caused by healthcare disparities in these communities. The applicants make it their mission to dedicate their careers to addressing and recognizing these disparities (mission centered). This is taken to an even higher level when the applicant can connect their own missions to the mission of medical schools.

So the next time you begin to ask yourself: **“Will this experience count for medical school applications?”**, I am begging you to instead reflect **“Will this experience benefit my development as a future physician?”**