
Preparing For Your Medical School Interview

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Getting to the point where you are offered an interview

What to say in your application essay?

Should you take MCAT preparation courses?

How many times should you take the MCAT?

How important are your grades?

A few comments regarding study skills

What if your grades aren't so hot? You can still have a good chance at being accepted into med school (MD or DO), and you can still become a good doc. Be realistic in selecting the schools to which you apply. How good a doc you'll be is generally determined more by you than by where you go to school.

What to do if you don't get accepted the first year you apply? You still have a chance. Pick your activities to improve your application, and to create other career options.

Foreign medical schools – I suggest applying to lower tier American schools rather than to foreign schools

Preparing for the interview

I don't think interviews have much to do with proving intelligence. By the time a medical school applicant is offered an interview, the medical schools have basically decided the applicant appears intelligent enough to be a doctor. During the interview, applicants can prove that this initial assessment is wrong, but they would have to be exceptionally intelligent for the interview to improve this initial assessment of their intellectual ability. I think the purpose of interviews is to assess how the applicant applies his/her intelligence to several key areas: how they discuss difficult issues, how they treat patients, and how they relate to other health care professionals (colleagues, nurses, ancillary staff, secretaries, housekeepers, etc).

How well does the applicant deal with difficult issues?

Doctors frequently discuss difficult issues with patients, other doctors, nurses, other health care providers, hospital administrators, etc. I do not expect the applicant to agree with my answers to difficult questions. I do expect the applicant to show that they have considered these difficult questions already, or are capable of considering them now, and that he/she can discuss difficult issues rationally, calmly, intelligently, articulately, humbly, and politely, and show respect and empathy for those who disagree.

Questions about politics, economics, and medical ethics

Universal health care insurance

Is health care a right?

Rights vs. responsibilities vs obligations

Basic coverage for everyone?

Single-tier or multiple-tier system?

Increasing costs of malpractice insurance

Effects on availability of care

Caps on awards for pain and suffering?

Caps on the proportion of payment that can go to attorney's contingency fees

Balancing the need for compensating injured patients with the increased costs of care and decreased availability

Rationing of health care:
Implicit vs. explicit
By cost of care
By availability of care (i.e., by queue)

Design of the Oregon Health Plan: explicit rationing

Availability of physicians in underserved areas

The "Living Will"
Almost everyone needs one
"Do not resuscitate" or "no-code" orders
Situations in which DNR orders might be temporarily suspended
DNR orders and questions whether doctors are "playing God"

Physician-assisted suicide
No easy answers.
Improved pain control for terminally ill
Slippery slope argument
The experience in Holland
Can physicians choose to facilitate suicide when it is not legal?
Non-medical reasons why patients might request physician-assisted suicide
Potential external pressures on patients

Abortion
Distinguish the political issues from the biological fact that the fetus is genetically a distinct individual.
Remember the past – what happened when abortion was illegal?
Should the "abortion pill" be legal?
Non-medical considerations
Reasons why the pregnant woman might consider an abortion
Should society care about the ability of the pregnant woman to be a "good mother"?
Can physicians choose not to participate in abortions?
Can physicians refuse to refer patients for abortions?
Slippery slope argument

Patient autonomy
Meaning of "informed consent"
Situations in which society overrules patient autonomy

Confidentiality of medical records and all information regarding your patients
Physician patient privilege
Health Insurance Portability and Privacy Act (HIPPA)

Questions about your family

Do you have a spouse and children? Tell me about them.

So your spouse is in grad school - what will he/she do while you're in school?
Will she continue her education, start working in the career she desires, or just take the best job she can find to support the family while you are in school?

What are his/her career goals?
Might his/her career benefit by occasionally moving to new jobs and locations?
Do his/her career goals conflict in any way with your career goals?
How will you deal with these conflicts?
Who will raise the kids?
Are kids raised equally well by parents or child care providers?

Medical school and residency training can eat up all of your time. When I started medical school, the dean told us on our first day of orientation that 50% of students who were married at the start of medical school would be divorced by the end of residency training. What do you intend to do to prevent divorce? Keep your perspective regarding balancing your family and your career.

Suppose you get divorced at the end of your residency – do you know what courts have ruled regarding how the proportion of your future earnings to which your ex-spouse is entitled?

Some courts have argued up to 50%, because the ex-spouse made a business decision to invest in your education rather than furthering his/her own education or career. This is relevant because we want you to start medical school with a clear understanding of the sacrifices your family will inevitably make in order to support your education.

Questions regarding how doctors relate to patients

We all agree a doctor should treat all patients respectfully. Should a doctor maintain “professional detachment”, be a friend to his/her patients, or love his/her patients? Why?

Hippocratic Oath: First do no harm.

What does that mean?

Why is that so important?

Did you know the Hippocratic Oath also states a doctor will not induce an abortion? I never realized abortions were attempted so long ago. Is that part of the oath relevant today?

Prayer for physicians by Moses Maimonides, a 13th century physician and philosopher: “Inspire me with love for my art and for thy creatures. In the sufferer let me see only the human being.”

What does that mean?

Why is it so important?

Can you see only the human equally well when you treat a patient who is just like you (nice, educated, clean, well-groomed, cultured, and affluent – you may not be affluent now, but odds are you will be) as when you treat a patient who is rude, uneducated, dirty, unkempt, has values very different from yours, and lives very differently than you?

Can you see the same human being in all of your patients who are homeless, alcoholic or drug abuser, HIV-positive, and promiscuous as in your patients who are nice, educated, affluent, morbidly obese coach potatoes with diabetes, hypertension, and cardiovascular disease?

How much do these patient populations really differ?

They all need your love and respect – a major difference is the second group can pay you for it.

Motivating any of your patients to take care of themselves is difficult – the key is letting them know that you as a doctor and as a person respect them and care for them and will help them, and emphasizing that they deserve to take good care of themselves.

How will you deal with patients who don't follow your advice?

How many doctors or nutritionists don't follow their own advice?

Can you respect or love yourself when you're not perfect?

Can you respect or love your patients when they are not perfect?

Can you respect or love your spouse when he/she is not perfect?

Conclusion

I want a medical school applicant to discuss difficult issues with me calmly, rationally, thoughtfully, and humbly - and to be respectful and polite even if I disagree with them and even if I test them by being rude and argumentative. You will need these skills when you become a doctor. These skills will enable you to deal with almost any issue you might face during your medical career.

I want a medical school applicant to inspire me to believe that he/she will love being a doctor and will treat his/her patients with respect and with love. So long as physicians maintain these characteristics, I believe they will be respected, appreciated, and loved by the public. Indeed, many doctors have noted that patients and their families thank the doctor far less often for how smart he or she was as a doctor than for how nice he or she was as a person. That should not be surprising, because doctors do not have many opportunities to prove their brilliance, but have the opportunity to prove their kindness every time they meet a patient.