

The Art Of Getting Into Medical School

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Novice aspirants, after completing their four years of graduate education, try hard to get into medical schools but face rejection because of many factors. One of them is the lack of research about medical schools in every county, leading to the majority of the medical school applicants' rejection due to the limited number of medical school spaces available. Other factors include insufficient qualifications, as graduate-level professional educational programs and residency training are required for admission to medical school (Feldstein, 2015). This paper seeks reasons why students are rejected from medical schools, the market for medical education, and the recommendations for the current medical education system.

Reasons Why Students Are Rejected from Medical Schools

Rejection is always a horrible feeling whether it is faced by a medical student, a professional doctor, or a person applying for any arena of the educational field in his/her early years. Similarly, when an aspirant has put enough energy and time into crafting a solid application to get into medical school, rejection would be a huge emotional setback for him. Some of the potential reasons why students can not get the chance to enter medical schools or get rejected when applying for medical education are curated as follows:

Uninspiring Content Given by the Students

Students, in order to get admission to a medical school at any cost, present uninspiring content in their applications that reduces their chances of getting in. Students who really want to get into a medical school should meet a pre-medical advisor to have better information about where they should get admission, what to include in the application, and also have a clear understanding of qualifications, co-curricular activities requirements, faculty, and all that they must-have for getting accepted.

Underestimation of Competition

The biggest reason medical school applicants face rejection is the underestimation of the competition in the medical education market. Medical schools usually seek out individuals who have a full-fledged package of a solid academic record and a high MCAT score (Turner and Nicholson, 2011). Medical school enrollees must fulfil minimum MCAT and GPA requirements to pass the initial screening tests

for enrolling in medical school. A medical school enrollee should understand that medical school applicants typically have higher MCAT scores and grades or GPAs than average applicants in other educational fields.

Lack of Significant Extra-Curricular Activities

Medical school admission departments usually seek competent individuals who demonstrate both leadership qualities and commitment during the initial screening process when they are striving to get into medical schools while they have been undergraduates. To showcase their interpersonal skills, an aspirant should be able to talk about his aspirations and goals in an informed way. Besides, he should present a track record of his involvement in different extra-curricular activities other than his good academic grades. One shortcoming that ultimately leads to rejection is that medical school applicants leave no stone unturned to “impress” the admission committee in their applications, which should not be the sole purpose as the weak extra-curricular background gets revealed when a student is being interviewed (Turner and Nicholson, 2011).

The Market for Medical Education

The global market for medical education is, however, different from other markets and is more attractive than other careers around the globe. Therefore, demands for more medical education spaces have increased with the passage of time and have largely exceeded the available number of spaces. The 4.30% projection ending in 2025 is an expired market forecast. Current AAMC data show that U.S. MD-granting medical schools enrolled more than 100,000 students in 2025–26, while 54,699 applicants competed for 23,440 matriculation places, indicating that demand still exceeds available first-year places. One of the major initiatives through which the medical education market can cope with the problem of fewer available spaces is higher tuition, as it would aid medical and educational schools with a financial incentive to raise funds for increasing the number of medical spaces. Moreover, this initiative will help the existing number of spaces to invest effectively in faculty and facilities so that the administration can accommodate a large number of enrollments. The reason behind the increase in tuition to eliminate the shortage of spaces is that medical schools lack financial incentives to expand as they only have finances for their operating expenses. Therefore, they do nothing to alleviate the shortage, which results in the permanent shortage of space, and it becomes a far more serious situation due to higher demand (Feldstein, 2015).

Recommendations for the Current Medical Education System

Without financial incentives, no industry or business can ever excel in the global market. Similarly, the not-for-profit education sector of healthcare, instead of relying on innumerable unimplemented

commissions, should propose some reforms to meet the increasing demands of the students. To contribute to the fast-emerging global medical education market, three recommendations, as Feldstein (2015) suggested, should be considered for the quality assurance of the current medical education system.

Ease the Entry Requirements for Starting New Medical Education Spaces

In order to start new medical education schools, LCME should change its criteria to allow for-profit organizations to start new medical schools. The admission committee of the medical schools should emphasize quality along with quantity and ease the entry requirements of the medical institutions based on their interpersonal skills and aspirations to recruit enough students each year (Feldstein, 2015).

Reduce Medical School Subsidies

Government and healthcare authorities should reduce the subsidies to encourage medical schools to become more efficient. The reduction in subsidies by the government would help institutes cut down the cost of medical degrees, resulting in more enrolled students, new teaching methods, more advanced faculty, innovative curricula, and better use of the medical students' time and energy (Feldstein, 2015). The requirement can be met by reducing the cost of the medical degree and shortening the time required to complete it.

Monitor Physician Practice Patterns

The medical education market should emphasize quality outcomes by examining physicians and monitoring their practice behaviours, which is an effective way to protect the people who often visit hospitals when they become sick against incompetent physicians. To achieve transparency and accountability in the healthcare sector, regular inspections of the medical institutes should be conducted in connection with the care provided (Feldstein, 2015).

Conclusion

In conclusion, every year, hundreds of medical school applicants face rejection and are forced to turn away their desire to get into medical college, and subsequently, they are compelled to reconsider their career paths. However, prior research can help people understand the art of getting into medical school. Moreover, government and medical education institutions should propose new reforms so that this market can effectively be concerned with the efficiency and quality outcomes responding to the

increased students' demand for medical education spaces.

References

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Turner, R., & Nicholson, S. (2011). Reasons selectors give for accepting and rejecting medical applicants before interview. *Medical Education*, 45(3), 298-307.