

## Advisement Pointers For Applicants to Programs in the Health/Medical Professions

Each individual is “in continuous development” throughout his or her life. As we mature, our responsibilities increase, but our experiences better enable us to cope with the challenges and tasks of life. How one has met and accomplished the challenges of life are an important consideration for acceptance into a particular health program. There is no unique starting time when you begin this preparation. Preparation is a continuous process as you mature, beginning in high school or college and continuing throughout life. For entry into most health professions today, admission is not automatic, but selective, and based on a competitive ratings in several categories. The common categories that Health Program Admission Committees use to select candidates for admission are listed below. The importance of each of these categories in the selection process depends on the attributes and skills that are needed in a particular health profession. Also to be considered is the philosophy and image that the educational program wants to achieve. Do not make the mistake of considering the minimum requirements for acceptance as being the same as the competitive requirements. Being aware of the approximate ratios of general applicants, qualified applicants, interviewees, and matriculates usually provides a measure of the competition for entry into a particular health program. Have confidence in yourself, but be realistic.

1. **College “Grade Point Average” or GPA.** Your high school record may determine whether you get into college, but as far as health professional programs are concerned, your record for admission into a professional program begins with your first semester of college. Sometimes professional programs will consider specific areas of performance in college. For example they may look at your SGPA (science GPA), your BCPM GPA (Biology, Chemistry, Physics and Math GPA) and your OGPA (overall GPA), or your “last 30” or “last 60” semester hour GPA.

The applicant’s college GPA should include evidence of a broad science and liberal arts education that includes the fine arts, business, mathematics, humanities, computer science, etc. Your college GPA not only indicates your ability to handle an educational program, but also indicates your attitude toward achieving consistent and high performance. Students of high ability, but low GPA performance, are viewed as “red flags”. You must remember that the professional school curriculum is more demanding than that of your undergraduate curriculum. Professional schools want evidence you can handle the load and stress of the professional program. Taking minimum loads as an undergraduate may cause admission committees to question whether an applicant can handle the rigorous course loads in a health professional program.

2. **Standardized Test Scores.** Occasionally, health professional committees may take a look at your high school SAT or ACT scores, but usually they are most interested in your Professional Program Admission Test Scores. Your Admissions Test Scores (DAT [dentistry], MCAT [medicine], OAT [optometry], etc.) allow Admission Committees to rank you in comparison to all other applicants seeking admission. These scores are important in receiving an initial consideration of your application. Applicants may take these examinations several times if needed, but without a major preparation effort, the student must consider the possibility that the re-take scores on admission examinations might turn out to be lower than the original scores.

In an initial screening of applicants, performance on the two above items often determines whether further consideration of the application is continued. If this threshold is met, further considerations of admission will be based on an assessment of the applicant’s attributes. How well do the attributes of the applicant fit the demands of the profession and what attribute potential and level best represent the future graduate of their program? The point to be made here is that above the threshold, the applicant’s achievements, personal qualities, and motivation become the sole determinants of admission. Studies have shown that applicants above the threshold who are admitted may vary somewhat in performance in different aspects of medical training, but that difference is not significant.

3. **Exposure to the Health Field.** Applicants must **demonstrate** enough of an exposure to the field to be knowledgeable of the role of the health care field they are entering. The best exposures involve enough contact “to smell, taste, and touch the activities of the profession”, not just to visualize it. Applicants are expected to have sought out these experiences on their own, volunteering if necessary to become exposed to the professional day-to-day environment. Be careful about expecting the profession to be as depicted on television shows. If choosing a health profession depicted on popular TV shows, you must be even more convincing that you know what the field is about on a day to day basis, not the fictionalized portrayals seen on TV.
4. **Commitment to Life-Long Learning.** What evidence is there that the applicant enjoys, accepts, and expects to be a continual learner? Advancements in health fields occur rapidly and health care practitioners must be able to

provide the best services possible using the most up-to-date knowledge and technologies available. The comment sometimes made by an applicant about his or her excitement in “getting finished with the course work” and getting into the “real profession” can be revealing in a negative way. Education for any health profession today is a life-long continuing activity. The commitment must be strong enough to be natural and motivated after the formal educational program is completed.

5. **Meaningful Letters of Evaluation.** An applicant’s credentials usually include supportive letters of recommendation. Letters of recommendation must be from credible and recognized sources, particularly those accustomed to evaluating applicants to health professional programs. Personal references from politicians, a person of the clergy, or a neighbor has no value to a health professions admission committee. Letters of recommendation are expected to be **letters of evaluation** that summarize the strong and weak points of an applicant with examples and indications of progress in recognizing and overcoming weak areas. **Specific examples** should support strong assessments. These letters should include general comparisons with other applicants to allow the admission committee to rank applicants. Letters of recommendation should be consistent with impressions that are likely to be made during an admission interview.
6. **Community Orientation and Commitment to Community Service.** These attributes involve not only what an applicant has demonstrated in terms of numbers of hours donated, but what has the applicant has learned and how has the experiences molded their attitude.
7. **Leadership.** This attribute involves interest and participation in community, activities, and hobbies, especially those in which significant leadership roles have been taken.
8. **Personality and People Skills.** There is room for many types of individual personalities in any health profession, however, that personality must outwardly engage others and quickly instill confidence. There is often limited time to build a trusting relationship and initial impressions need to be strong to begin to build the confidence of patients and others. Patients are not as interested with what you know about your profession, but your interest in them and their problems. What kind of initial impression do you make? Many otherwise highly qualified applicants should be working on this attribute throughout their undergraduate years.
9. **Transferable Skills.** Transferable skills are those skills that are not limited to any one discipline or knowledge area, but are transferable to many occupations. Transferable skills are developed through various jobs, volunteer work, hobbies, sports, or other life experiences. Transferable skills can be grouped into five areas. In the area of **communication**, these involve the skillful expression, transmission, and interpretation of knowledge and ideas. In the area of **research and planning**, these involve the search for specific knowledge and the ability to conceptualize future needs and solutions for meeting those needs. In the area of **human relations**, these involve the use of interpersonal skills for resolving conflict, relating to, and helping people. In the area of **organization, management, and leadership**, these involve the ability to supervise, direct, and guide individuals and groups in the completion of tasks and fulfillment of goals. In the area of **work survival**, these involve the day-to-day skills that assist in promoting effective production and work satisfaction.
10. **Effective Time Management Skills.** Has the applicant demonstrated the ability to balance full academic schedules with extracurricular involvements and/or employment in an effective and efficient manner? Students should be careful when blaming outside activities for poor academic performance.
11. **Writing Ability.** Are applicants able to communicate effectively and accurately? Are they careful in grammar, paragraph organization, expression, and particularly, spelling.
12. **Evidence of Critical Thinking/Problem Solving Abilities.** What was the applicant’s performance in situations requiring this skill, such as laboratory work, discussion groups, or formal logic or in research experiences? Was “originality” expressed or was the applicant just carrying out busy-work activities? Did the activity culminate in an oral or written presentation?
13. **Demonstration of Ability to Work at Intellectual Capacity.** Bright students often work below their intellectual capacity. A grade of B or C in a course may indicate this characteristic to an admission committee. Tragically, when questioned, such students will offer the excuse that “they could have earned a grade of A if they had worked harder or wanted to”. Such types of excuses can be very negative in the eyes of admission committee members. Students who have had “to work really hard to earn a B in a course” tend to be much more favorably considered than those students who earned a B, but were capable of earning an A.

14. **Stamina/Endurance.** Have applicants demonstrated stamina and endurance in academics by taking full and demanding course undergraduate loads? Have applicants demonstrated emotional stamina and endurance in meeting the challenges of life? Do applicants possess the stamina and endurance to meet the demands of the professional program?
15. **Ability To Succeed With a Demanding Life Schedule.** The primary challenge for the first year professional program students is a very heavy course load during the first two years, probably heavier than any the student has had in their undergraduate program. Some admission committees consider the course loads of applicants and the outside demands of living. The student should be able to demonstrate that they can handle a demanding, heavy course load at the undergraduate level of up to 18 (or more) credit hours and still meet the demands and responsibilities of living.
16. **Interview Skills.** Do applicants show interest, sincerity, confidence, and expression? Does the applicant readily provide answers to the types of questions expected in an interview? Is the applicant polite, present a comfortable and appropriate posture, and is appropriately dressed to show respect and awareness of the importance of the interview. Are gestures appropriate? Is the applicant free of behavior or speech tics, such as tapping their foot and interspersing speech tics such as the “you know” into every remark. Does the applicant demonstrate knowledge of the activities, problems, and challenges of the world in which they live at the level expected for an educated person? Finally, is the medical school using the interview to weed out applicants or is the interview being used as a recruitment tool?