



Celebrating Our “Genetic Educational Code”

The Admissions Selection Process at the College of Medicine

This isn't your father's med school application. Your mother's either, for that matter.

The process for applying to medical school has changed astronomically in recent years, with technology and online applications further accelerating new developments. The entire procedure can take up to a year and cost hundreds of dollars. Candidates find the process to be exhausting and stressful, and for the Admissions Committee at the Drexel University College of Medicine, it is certainly even more time consuming and labor intensive than ever before. It is clear, however, that reviewing and meeting candidates is a labor of love for the Admissions Committee, a personal dedication engendered at the College's legacy schools long ago.



Indeed, the admissions process at the College of Medicine has been nationally and professionally recognized for its innovative approach to selecting candidates. Their holistic review process is literally setting the standard across the country. Many on the Admissions Committee are quick to note, however, that this “innovation” has been historically part of the College's tradition.

Admissions Committee members Samuel K. Parrish, Jr., M.D., senior associate dean for student affairs and student services, Anthony R. Rodriguez, M.D., associate dean for student affairs and diversity, and David K. Wagner, M.D., professor and former chair of emergency medicine, as well as first-year medical student Tanya Olszewski, share their varied perspectives on this lengthy, demanding, expensive, yet ultimately rewarding process.

June – July

Medical school candidates are required to submit their application packets to the American Medical College Application Service (AMCAS®), the national clearinghouse created for that purpose. AMCAS begins accepting applications June 1, and there is tremendous pressure for candidates to submit the application packet as close to that date as possible. The reasoning is that the sooner one submits their application, the sooner one will hear back from the medical schools regarding a coveted interview.



Samuel K. Parrish, Jr., M.D., Senior Associate Dean for Student Affairs and Student Services

The AMCAS application includes the student's transcripts, MCAT scores, letters of recommendation, and personal statement. There is also a section for describing up to 15 activities in paragraph format. Some candidates have already invested significant time and resources at this point in terms of MCAT prep, supplemental courses, or post-baccalaureate programs. There is a furious rush of activity, though, as the June 1 deadline draws near. Applicants are also attempting to familiarize themselves with the various schools to which they are applying. It's common these days for a candidate to apply to – and pay the associated fees for – 30 schools.

Ms. Olszewski began her application process as a post-baccalaureate student at the College of Medicine. A pre-med biology-chemistry major at Colorado State University, she wanted to pursue medical school but did not score as well as she had hoped to on her MCAT. She decided to take post-baccalaureate courses to bolster her application and chose Drexel because of its program's strong reputation.

Olszewski describes the application process as "daunting." For the AMCAS, "you have to pick 15 activities and write a short paragraph for each of those, *on top of* writing your whole personal statement, which is really what sells your application." Although Olszewski is confident in her writing abilities, crafting the short essays and personal statement was nonetheless stressful and "chaotic." She explains, "It was really hard to sort out how I defined myself on paper or [in the] online application within these set limits of what you're allowed to say."

Once the application is submitted to AMCAS, it takes about six to eight weeks to process. Drexel University College of Medicine receives nearly 13,000 to 14,000 applications each year for about 260 spots. Each candidate is then asked to complete a secondary application more specific to Drexel. Dr. Parrish says that the Drexel application "asks for information in a more brief, streamlined form," including whether the candidate has any familial connections to the heritage institutions. At this stage of the process, the candidate also ensures that any tardy material safely gets to the Admissions Committee. The College must receive all materials by January 1.

August- September

For the Admissions Committee, this is where the "real" story begins.

The College of Medicine receives 9,000 to 10,000 secondary applications out of the initial 13,000 to 14,000 AMCAS submissions. Four individuals personally review every one of those 10,000 applications. For those at home doing the math, that's 2,500 applications per admissions officer.

During the beginning of the application season, Drs. Parrish, Rodriguez, Barbara Schindler, vice dean for educational and academic affairs, and Kelli Kennedy, director of admissions, meet to review their criteria. They read every essay, personal statement, transcript, letter of recommendation, and MCAT score. "We want some consistency to the process," explains Dr. Parrish. "If I were to review [an application] versus Kelli, versus Dr. Rodriguez, I don't think anybody would see differences in terms of the decisions that were made. I think they're pretty consistent."

Since 2008, the College of Medicine has been a practitioner of the holistic review application

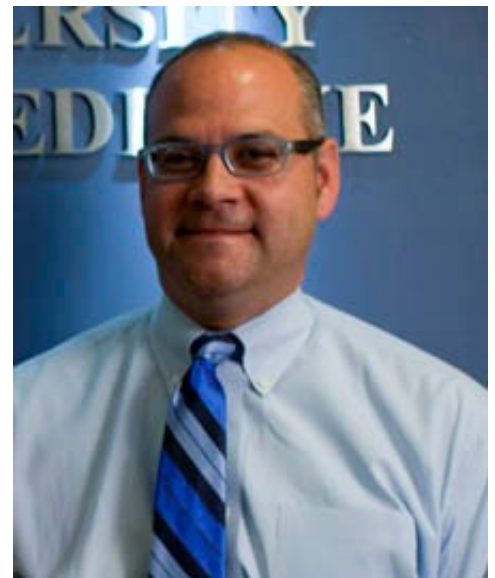
process. This means the school considers the candidate in his or her entirety (rather than, say, exclusively an MCAT score) in a manner consistent with the College's educational mission. The College of Medicine was one of the two first schools in the nation to pilot this Association of American Medical Colleges (AAMC)-encouraged method. The College's heritage institutions, Hahnemann and Woman's Medical, have a "long tradition of accepting nontraditional students," as Rodriguez observes. In a way, the holistic review merely formalizes and codifies what the school has been doing all along – looking at the big picture of what makes someone a good physician. Rodriguez goes on to explain, "While [alumni] may think, 'It was all about the numbers then, and now it isn't,' ... If it was all about the numbers, women wouldn't have gotten into medical school. People of color wouldn't have gotten into medical school when this school was doing it decades before other schools were."

The cornerstone of the holistic review is a three-pronged approach that weighs the candidate's experience, attributes, and metrics. *Experience* is what the candidate "has done with their life" – their activities, volunteering, work, research, etc. *Attributes* are those things they might not necessarily be able to change, such as economic background or certain family situations, i.e., if they are the first person in their family to attend college. *Metrics* is the data of their GPA, transcripts, and MCAT scores.

All three aspects provide a critical framework for the candidate's evaluation. No applicant is considered, however, if they are clearly unable to carry the academic rigor of medical school. "It's unconscionable to accept a medical student who cannot do the work," comments Parrish. Yet, he also acknowledges, "simply turning [admissions] into a competition of MCATs and grades is not what the admissions process should be.... Our discussions at the Admissions Committee have less and less focus on grades and MCATs and things such as that in the last few years, which I think is just wonderful. I think it's made the whole process a lot more positive." About 10 to 15 percent of every class "comes from a fairly nontraditional approach." Parrish says that career-changers, in particular, fit into this category.

Rodriguez observes that including experience and attributes in the admissions discussion has produced a better quality of medical student. He says a candidate's experience and attributes "probably have a lot more to do with them becoming a good physician, a compassionate physician, a culturally sensitive physician, than just the metrics – which is what we've been relying on in the past. In the past, the assumption was the higher the MCAT score, the better physician you'd be, and there's actually no data on that."

Dr. David Wagner has served on the Admissions Committee as an interviewer since he stepped down as chair of emergency medicine. A pioneer in that specialty, Wagner had been affiliated with Woman's Medical since the 1960s. From his vantage point, he praises the "commitment the institution has to its history and, as I call it, its 'genetic educational code', so to speak, both through the Hahnemann side and the Woman's/MCP side. Both of those institutions have a long history of commitment to the under-resourced and a commitment to a broad approach to medical education. That has held in my career here from during Woman's Medical...to now the largest private medical school in the country...."



Anthony R. Rodriguez, M.D., Associate Dean for Student Affairs and Diversity

So while Drs. Parrish, Rodriguez, and Schindler, and Ms. Kennedy patiently and meticulously review those 10,000 medical school applications, the candidates – such as Ms. Olszewski – wait

to hear whether they will be interviewing.

September – April

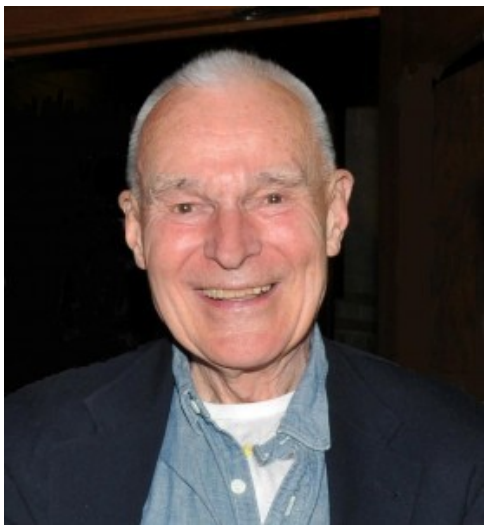
As part of the holistic review process, approximately 1,500 candidates are invited to campus for an interview. One's personal demeanor is a critical aspect of being a successful physician. As Rodriguez explains, "It's not just about how this person looks on paper."

For Olszewski, waiting to schedule her interview was "very stressful." She explains that post-bacs at Drexel are not allowed to interview until grades are submitted – in January. In addition, interviews are only guaranteed to those with a B or better in all their courses. Olszewski received a B- in one class.

She did interview that March with "a very nice gentleman." While she describes the overall process as having gone well, she and her interviewer discussed various careers in the medical field. Their wide-ranging discussion left Olszewski with the impression that this strategy was the interviewer's gentle way of suggesting that "I didn't have a shot at Drexel."

Anywhere from 5 to 15 candidates are interviewed each day – by both a faculty member and a current student – during application season. Candidates also view an educational presentation about the College of Medicine, take a campus tour, and are asked to write an essay. Dr. Wagner says this impromptu essay typically concerns an ethical dilemma and provides a valuable window into the candidate's views on professionalism.

Wagner interviews about 100 candidates each year. Each 30-minute conversation entails about two hours of work for the interviewer. The candidate's file, particularly their letters of recommendation, provide the first impression. "Very often you have an idea, and that's confirmed in the interview," he says. However, there are times when "you do get some surprises."



David K. Wagner, M.D., Professor and Former Chair of Emergency Medicine

Wagner's goal in the interview process is to "try to make the interview situation as relaxed and as open a process as possible so that the applicant will feel free to reveal themselves, and not feel threatened by doing that. Not feel that they have to just give the standardized, formatted, pre-thought-out answers to the traditional questions. It's so much more rewarding to me to find an applicant that is relaxed enough – and we try to make them feel that way – so we can really have a conversation, and not just be parroting back standard answers to questions they're fairly certain they'll be asked."

The faculty and student interviews are evaluated quite seriously as part of the holistic review process. Many personal traits, both positive and negative, are simply not seen on paper. Wagner observes, "At this institution we look very seriously toward the broad-based student, the student who isn't just all about the numbers, but somebody who has a value system compatible with our mission. That's the sort of thing that can come out in an interview." He also notes that much insight is gained from the student interviews, where the candidates are interacting with their peers. "I personally listen, as do several other members of the Admissions Committee, very acutely to what the students have to say."

The faculty and student interviewers write an assessment of their interactions; then the whole application packet is sent to another admissions member who did not meet the candidate. This is considered a blind review. In the blind review, “that individual looks at the credentials, looks to see were the interviews satisfactory or were they not, and makes an overall impression of the application, which is then voted on at a meeting of the Admissions Committee,” says Dr. Parrish.

April – June

In late spring, applicants learn whether they have been accepted to the College of Medicine.

Ms. Olszewski says those who interview early learn of their acceptance through a letter in the mail, but those who interview late – as she did – find out through a phone call. She reasons that if you reject the school, the Admissions Committee just moves down their list to the next candidate.

Hearing from your top choice should be an exciting time, but for Olszewski it was a comedy of errors.

She missed the notification call from Drexel. There was no message regarding her acceptance, but a number to call was provided. Instead of calling this number, she redialed the number stored in her phone and was connected to a staff member at the College who was not familiar with her status. “All candidates will know in the next few weeks,” the staff member repeated. Olszewski insisted that this information was precisely what the call had to have been about, but the staff member could not help her, to the great frustration of both.

Another eight days passed. Olszewski figured, “the first call was a mistake.” She then missed a second call. This time she dialed the correct number and learned she had been accepted into Drexel University College of Medicine. It was June 3 – nearly 12 months after she initially applied to medical school. She later learned it is not College policy to leave an acceptance message on voicemail. With so much of today’s application process being conducted by the click of a mouse, it stands out that the College still relies on human contact – either by a formal letter or a personal message – to welcome its newest class.



Tanya Olszewski

Reflecting on the changes in medical school admissions, both Parrish and Wagner identify technology as having the greatest impact, both for good and for ill. It is now incredibly easy for students to apply to many schools; all they do is point and click. “Students will apply to 15 or 20 or even more [schools] because once you’re into the AMCAS file, it’s just a matter of sending the information on to other schools,” says Wagner. Parrish says that same technology has also made it easier for admissions to verify the veracity of candidates’ claims. “Technology has made it easier to apply. It’s also made it easier for us to screen. It’s a good thing and a bad thing in many respects,” he observes. While it may be physically easier to apply online rather than handwriting or typing information, it can be quite emotionally and financially draining to engage at the necessary level with 30 schools.

Parrish applied to four schools around 30 years ago. “I wasn’t quite aware that you could apply

to more schools," he comments. "I think the application process these days is a bit more daunting in that I didn't have to write an essay or personal statement... It was based almost exclusively on my grades and on my MCAT scores. I think it's gotten a bit more complex.... There's a focus on what else you're bringing to the table."

Wagner, who also applied to four medical schools, has the perspective of more than 50 years at the College of Medicine and has interviewed hundreds of candidates. His standpoint is one of optimism. "I am very upbeat about the caliber of the students we're getting," he relates. "It's just amazing to me the quality of student we're getting to apply and matriculate here.... I think a lot of this is the institution is really moving in a very positive direction."

Even though admissions practices have moved into a new millennium, and candidates are being evaluated in ways older physicians could never have imagined, the "educational genetic code" Wagner cited is still very much alive. He says that during his interviews, "I like to point out to our applicants the value system that originally attracted me here is still existent even though we've grown into this really rather large medical school." Perhaps in some small but significant way, this still is your father's – and mother's – medical school application.

For information on all our programs and admission information contact the Admissions Office at: 215-991-8202 or visit <http://www.drexelmed.edu/Home/Admissions.aspx>.