I don’t care how they do it here. I’m from New York
From The Outside Looking In: Questions and Confusions Of Non-Traditional Students

by Richard Levy, MA
Executive Board Member
National Society for Non-Traditional Premedical and Medical Students
www.OldPreMeds.org

AACOM Annual Meeting April 7-10, 2010
Presented by www.OldPreMeds.org
National Society of Non-Traditional Premedical and Medical Students
The Purpose of this Presentation:

• Present questions and confusions of non-traditional premedical students
• Disseminate accurate information between non-traditional students, admissions officers, recruiters and pre-health advisors
• Based on issues and situations frequently seen over the past 5 years in the OldPreMed forums
• Start a forum for discussions. So please interrupt with questions, comments, corrections, etc

What do you get when you cross a dolphin with Ajax?
The Goal of this Presentation:

- If non-traditional students have accurate information on preparing for and applying to osteopathic schools, they would be more likely to do so.
- If pre-health advisors, admissions officers, and program recruiters understand questions and confusions of non-traditional students, they would be likely to attract more of them.
• “The osteopathic profession has a longstanding tradition of commitment to diversity and second career students. Osteopathic medical schools and AACOM encourage diversity and have many recruitment programs aimed at attracting and training underrepresented minority physicians to serve our nation’s diverse populations.”

Osteopathic Medical College Information Book 2010 entering class
The National Society for Nontraditional Premedical & Medical Students
www.OldPreMeds.Org (OPM)

• Professional and pre-professional society and educational conduit for non-traditional students who seek to become Physicians.

• For those whose path to medicine is not the traditional high school to college to medical school, OPM’s mission is to assist and advise on how to successfully prepare, apply, and succeed in both medical schools and residency training programs.

• Founded in 1998, our now over 7,000 registered members span from the very early pre-med through attending-level physicians. Many are enrolled or have graduated from DO, MD & other clinical health fields, here in the US as well as abroad.

• www.OldPreMeds.org, is a website community built upon peer-based forums providing resources for all levels of premedical students, medical students, medical residents, pre-health advisors, admissions officers, and other faculty & staff at undergraduate, post-baccalaureate, medical, and post-graduate programs. Averages monthly over 15,000 unique visitors and 1.3 million search engine hits.
Who Are Non-Traditional Premeds?

- College Age Demographics Have Changed
- Average Age of Harvard Undergraduates 27 y/o
- 38% of all undergrads 25 y/o and above
- Community and Online Colleges maybe higher
  - Example: university of phoenix average age 35-37 y/o

- Non-Traditional Premedical and Medical Students:
  - can be roughly defined as those students who do not follow the typical path of going from high school immediately to college and then directly onto medical school, often those on a second career
  - Generally, an OldPreMed
Non-Traditional Premed Student Segments

• **Non-traditional premeds are not homogenous**
• **Can be viewed in 3 broadly overlapping segments**

1. **Near-College Graduates or near-grads**:
   - These students are usually a decade or less beyond their original degrees, took few, if any, required premedical courses, and typically have good to excellent academic records.

2. **Middle-College Graduates or middle-grads**
   - Frequently experienced healthcare workers who have decided to become physicians. Their initial degrees are usually a decade or older and often too specific to their current medical fields to be used fully, if at all, towards fulfilling premedical course requirements.

3. **Far-College Graduates or far-grads**
   - Original college work of these students is usually a decade or more old and is often punctuated with poor to mediocre academic records. Many of these students originally entered college as premeds and have taken much of the prerequisite coursework.
Growth of Post Baccalaureate Programs

- Thriving PB programs best example of the growing number of non-traditional students
- Over 125 formal PB programs listed by AAMC
- PB Programs shows segmentation of non-traditional students
- 80 undergraduate programs
  - all non-degree, split between certificate and non-certificate
- 48 graduate programs
  - non-degree with both certificate and non-certificate
  - degree with traditional masters with thesis/hard science
  - degree special masters program with applied/medical science, some have thesis
Motivational Factors for Osteopathy

Anecdotal Evidence Suggest Two Main Factors

1. Desire to be in primary care or “traditional” doctor role
   - There is some evidence that strongly suggests a higher percentage of non-traditional students will seek primary care as a medical specialty. Osteopathic programs, on track to provide a one-fourth of all new physicians and fully half of all new primary care physicians, is attractive to these students

2. Application mechanics/repeated grade
   - Application process provides a mechanism, particularly for far-college graduates, to recover from previous mediocre academic records by allowing repeated course grades to be used in the GPA calculations in place of the original course grades.
Many of the truths we cling to depend greatly on our own point of view.
How Old Is Too Old?

• And the answer is?
• Common first posting to OPM: Am I too old to go to medical school and become a doctor?
• Many examples for non-trads being told by pre-health advisors directly they are too old
• Age discrimination - unprofessional and illegal
• Also reports of age questions coming up in medical school interviews
• Please as you work with pre-health advisors, let them know, age is not a factor in applications decisions. Advisors could be best recruiters and marketers for Osteopathic schools
How Old Is Too Old?

• So how should advisors, recruiters, admissions officers counsel older, non-trads?
• Where do you want to be in life?
• Example: two mid-30 y/o students
• Student A: has BA, good grades, no children
• Student B: has not yet finished BA, poor grades, 3 children (middle school and younger)
• Can be done by both, but discuss assessment of what they have, what they need, “life style” of osteopathic student, and financial impact
• www.MomMD.com site for Mom’s in Med School, much discussion on raising kids while learning medicine
Am I Bananas?

• New registrations at OPM average 10 weekly
• Often posted as “Thank God I Found You”
• Many non-trads feel isolated from school
  – Most have been out of school for some time
  – Many who have gone back to school not well integrated into the college setting for both formal (i.e. academic advising) and informal (i.e. networking) venues
  – dissemination of basic information about the opportunities osteopathic medicine offers non-traditional students appears greatly reduced.
Am I Bananas?

- Isolation often result of discouragement
  - Poor original academic records and/or lack of support
  - Often families not-supportive
  - Undergraduate advisors non-supportive
  - Current practicing physicians, particularly primary care are “actively” non-supportive.
  - Often reported that when asking their own doctors, get torrid of negativity and complaints.
  - Need to work with Primary Care Societies to use their own members to recruit and sell (yes, tough sell)
**Prerequisites: How Old Can a Course Be?**

- Is there a general standard/rule of thumb?

Example Situations:

- Student A:
  - Some early pre-reqs 8-10 y/o
  - Some more recent including advanced bio and chem

- Does/Should Student A need to retake freshman bio and general chem?

- Student B:
  - Same as Student A except presents MCAT 28-30

- Does/Should Student B need to retake freshman bio and general chem?
Prerequisites: How Old Can a Course Be?

• How long can I take to do my course work?
  – Might Take 3-4 years working full time to do PB
  – Might take 5-8 years to do new degree
  – Will freshman courses in biology and chemistry still be valid?
Prerequisites: Repeating Courses?

- Often posted are questions such as
  - I failed calculus 10 years ago, should I retake?
  - How can I raise my old low GPA?
  - Do adcoms consider my PB GPA separately?
  - How do they see my graduate GPA?
Prerequisites: Repeating Courses?

• Example Situation:
  – Student A has an original UG GPA of 2.9 with a few F’s and W’s from more than 10 years ago
  – Has non-science MA (30 credits) GPA 3.8
  – Has recent post bacc, all pre-reqs, additional advanced bio courses, health policy and others (42 credits science 3.9, 18 credits non-science 3.8)

• Should student repeat non-core courses with grade of F or W from original UG?
Prerequisites: Repeating Courses?

- "AACOMAS may calculate up to three sets of GPAs for each applicant - undergraduate only, undergraduate and post-baccalaureate, and all course work - although in many cases there is no difference among them." 

**AACOMAS Applicant Pool Profile 2009 Entering Class**

<table>
<thead>
<tr>
<th>GPA</th>
<th>Science</th>
<th>Non-science</th>
<th>Overall</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mean 4 year FR - SR</td>
<td>3.25</td>
<td>3.52</td>
<td>3.40</td>
</tr>
<tr>
<td>SD</td>
<td>0.49</td>
<td>0.35</td>
<td>0.35</td>
</tr>
<tr>
<td>Mean Undergrad FR-SR, PB</td>
<td>3.30</td>
<td>3.52</td>
<td>3.41</td>
</tr>
<tr>
<td>SD</td>
<td>0.40</td>
<td>0.34</td>
<td>0.33</td>
</tr>
<tr>
<td>Mean All including graduate</td>
<td>3.31</td>
<td>3.53</td>
<td>3.42</td>
</tr>
<tr>
<td>SD</td>
<td>0.38</td>
<td>0.33</td>
<td>0.31</td>
</tr>
</tbody>
</table>
Prerequisites: Repeating Courses?

• If course from original UG retaken in PB
  – Does new grade replace original course grade?
  – Does this new grade now get calculated into GPA twice? (once as replaced grade in UG GPA, once in PB?)

• How is a vastly improved PB GPA viewed?
  – Should I explain in my essays?
  – Will a separate line item show it?
Prerequisites: Substituting Courses?

- If good but old general biology grade, should I
  - Repeat the course?
  - Take advanced biology course instead?
Post-Baccalaureate Premedical Programs:

• What? Where? How?
  – Does a formal program carry more weight?
  – Is a certificate program better than a non-certificate?
  – How is an informal program (do it yourself) viewed?
  – Will a UG program be better to help my GPA?
  – Will a PB graduate-level program in hard science show I can do the level of work?
  – Will a traditional hard science MA be better than a SMP?
  – Does the prestige of a program carry that much more weight?

• Seems little consensus and much confusion amongst non-traditional students on this issue
Course Mechanisms:

- part-time vs full-time
  - Is it important I do some of my course work fulltime?
- summer classes
  - Are they viewed as not as rigorous?
  - Example: Semester of Organic Chemistry in 5 weeks
- community college course
  - How much will this impact my chances?
- online programs
  - Can they be used? Are they acceptable?
  - Example: UNECOM on online PB
**MCAT and GPA**

- In 2007, Kaplan test prep (not the most unbiased parties to this I'll grant you) reported that in a survey sent to all allopathic medical schools (about 125 at the time) and admissions officers from 83 schools responded
  - 77% of the responding schools reported that GPA was the first or second factor considered in applications
  - 75% of the responding schools reported that MCAT was the first or second factor considered in applications
  - This implies that about 75% of the MD schools consider GPA and MCAT to the first two factors considered in an application
  - It should be noted that is the 2007 survey, 34% listed MCAT as the top factor but in 2009 survey by Kaplan where admissions officers from 85 schools responded, 44% listed MCAT as the top factor.
**MCAT and GPA**

- It should also be noted that the previous research and statistics come from allopathic applications. There is some research and adcom perceptions from the osteopathic community that indicate science GPA is the best predictor for success in medical school and on COMLEX.

- Often questions posted on
  - Which is more important, MCAT or GPA?
  - What weight does each carry?
  - Is there a numeric cut off or formula of the two?
Admissions Committee Process

• How does the “black box” of admissions really work?
Rejected/Reapplying

- What should I do if I am rejected
  - Should I write reconsideration letter?
  - What should it say?
  - “I respectfully ask for reconsideration of my application. As an older student returning to school after some years away, the application scoring process may not adequately reflect my recent Post-Baccalaureate Premedical GPA of 3.8 and my graduate GPA of 3.7 over my original undergraduate GPA of 2.9 from over a decade ago.”
Additional Questions/Issues

• What questions or issues have I missed?

• What questions or confusions do you have about non-traditional students?

• What would be the one thing or piece of advice you would tell non-traditional students?
Very Special Thanks To

• AACOM for this opportunity to speak today

• Gina Moses, Associate Director of Application Services, AACOM, who is a long time supporter of OPM, who encouraged me to submit a proposal to speak, and who suggested the title of this presentation

• To all the OldPreMeds who shared their questions, confusions, thoughts, doubts, advice, encouragement and above all support in the forums on OldPreMeds.Org

• To all you for your input, questions, and information that I will share on OPM’s website.
Shameless Plug for

10th Annual OldPreMeds National Conference and Workshops, Chicago, IL, June 10th-13th
Holiday Inn – O’Hare Airport
Summary of Rules That I Give Non-Traditional Students

1. Take a Breath
2. Trust Your Gut
3. It Depends
4. Don’t Bite Off More Than You Can Chew
5. Do Not Risk Bad Grades By Taking Too Much
6. The MCAT Is Your Friend
7. Learn To Be a Student
8. Premature Application
9. The “6P” Principle
10. The FUD factor: Fear, Uncertainty and Doubt
Rule 1: “Take A Breath”  
(aka Anne’s Rule)

• If you have spent an hour and half on an organic chem problem and are ready to throw your book out the window – take a breath.

• If you have finished the last physics exam question but turn over the page and find that there are three more left to do – take a breath.

• If you have 4 chapters of bio to study but the water heater blew up, your kid is sick, your spouse has to work, & the coffee is gone – take a breath.

• If you are questioning if english is really your first language after reading that last MCAT verbal reasoning passage – take a breath.

• If you are rewriting your personal essay for the 17th time and still can’t seem to explain why you want be a doctor – take a breath.
Rule 10: The FUD Factor: Fear, Uncertainty, & Doubt
(aka IBM rule)

• FUD is the fear, uncertainty, and doubt that IBM sales people instill in the minds of potential customers who might be considering [other] products
• Likely the most common reason for failure in this journey.
• “If we are facing in the right direction, all we have to do is keep on walking.” Ancient Buddhist proverb
• “Predictions are hard, especially about the future.” - Niels Bohr
• “Nothing is certain but uncertainty” - G.K. Chesterton
• “There is nothing to fear but fear itself.” - Franklin D. Roosevelt
• “Great Faith. Great Doubt. Great Effort. - The three qualities necessary for training” unknown
Rule 10: The FUD Factor - Fear, Uncertainty, & Doubt (continued)

- Have Heart, Discipline, Depth, Endurance
- Don’t Focus On Odds or Chances, You Are Not a Statistic
- Don’t Mope, Complain or Kvetch
- Apply When Ready or Reapply if You Need To
- Don’t Focus on a Bad Grade/Exam, Focus on the Next Task
- Planning is Good But You Need to Take Action
- Working Hard/Taking Action is as Important as Being Smart
I DON'T TALK TO STRANGERS. Please introduce yourself.