Spring 2020 Family Webinar Series: A Conversation About Pre-Health Advising Transcript

Reggie Gacad: Hello all. My name is Reggie Gacad, and I want to welcome you to the 10th webinar of the year and the second webinar of the 2020 Spring Family webinar series. I am the Assistant Director in the First Year Center, and tonight I am joined by my colleague, Carolyn Herman, associate dean and director of PreHealth advising in the College of Arts and Sciences. We are excited that you have chosen to join us for tonight's conversation. Some information before we get started-- first, you will notice that we've given you the ability to submit messages to us during the webinar using the chat function. Please use this feature to ask us questions. These questions will only be seen by staff in the First Year Center, and our panelist, Dean Herman. Two of our professional staff members within the First Year Center are helping to field these questions. We will answer those we find applicable to the audience as a whole on this webinar and will respond to more nuanced or personal questions via email next week. Let's go ahead and make sure you know how to use the chat feature. Send us a chat with the location you are watching from, and we'll name a few of these on the air. While that's going on, this webinar is being recorded live. Next week, we will upload this webinar to families.wustl.edu website. Lastly, in a moment, we will hear from our panelist about premed advising-- or pre-health advising, rather, here at Wash U. If something our panelist says sparks a question, don't forget to chat us. After hearing from our panelist, we'll move to the Q and A portion of the evening. Before passing things off to Dean Herman, I want to share some of the places people are joining us from. We have families tuning in from New York, St. Louis, Missouri, among other places. Now, since I know you want to hear more about pre-health advising, I will turn it over to Dean Herman.

Carolyn Herman: Thank you so much for having me, Reggie. Thanks to all the families who are joining us here in this webinar. I just wanted to say a few things about sort of how pre-health advising works at Wash U. We assign prehealth advisers in the middle of the sophomore year, so that has already happened for this year. So if you have a sophomore or a junior or a senior who has either came to college with pre-health intentions or has recently started considering those, ask them who their pre-health adviser is. And if they don't know, they might not have been assigned one, and we'd love for them to be in touch, and we'd love to fix that. We are not trying to keep first-year students at arm's length. We love working with first-year students. We don't assign them a specific adviser because we don't want them to feel obligated to come and meet with someone before they may really be ready. So we want them to focus more on making a really strong academic transition and not worrying too much about what's going to happen after Washington University right as they arrive on campus. But if your student is a planner-- if they started preparing for college in ninth grade, and you know that they are going to want to speak with an adviser as early as possible, we would love to see first-year students. We have online calendars. We have walk-in hours. Those are posted on our website. There's lots of great information on our website, actually, which is at PreHealth P-R-E-H-E-A-L-T-H. So PreHealth.wustl.edu. There are a couple of tabs on there. There's all kinds of information, but one of it is Meet our Advisers. So they can see a list of walk-in hours and then online calendars that they click on a specific person's name-- a specific appointment calendar will be part of the information there. I find that students don't really use the website that much, and I think that's possibly a generational thing. But there really is a lot of good information on there, so if you want to learn more about how pre-health works at Wash U, it is a public site. There's nothing that is WUSTL key or password protected on it, and we certainly invite you to spend time on it. If questions come up that if you read something on there that you don't understand or that you want more information about, I absolutely welcome questions from parents by email as well. So check that out and feel free to be in touch with me. The other, I think, misconception that I end up clearing up a lot with students and sometimes their families as well is that students often are very focused on their numbers, they're worried about their grades, they're worried about their science grades, they're worried about their MCAT score, and I certainly don't want to suggest that those numbers aren't relevant because they have an impact, but the application is so much more than numbers. And I think that because of it's difficult to quantify the rest of the application that sometimes students deemphasize it.

So making sure that your student has a really nice track record, in-service exposure to clinical medicine, experiences that will help them describe their goals and motivation and help them have a compelling narrative about why this path in health whether it's medicine or optometry or physical therapy or whatever it is, why is this the place for them to make their contribution that they have to make to society? That's super important and sometimes tougher to articulate and tougher for students to self-evaluate on. So I think their pre-health advisor will help them and coach them on that, but you can do some coaching at home too to help them.

Reggie Gacad: Great. And as a note, we posted the URL for the website in the webinar chat. So if you're looking for that, it is in the webinar chat.

Carolyn Herman: Well, why don't we take some questions?

Reggie Gacad: Great. So thank you so much for sharing that insightful information. While hearing you speak, we had an initial question that I think many family members may be wondering. Other than becoming an MD, what are other pre-health careers that the student might consider?

Carolyn Herman: We actually have a whole tab on our website that is entitled Health Career Options, and we really encourage students to shadow and/or do informational interviewing with a number of different health careers. If nothing else, even if they do decide that MD is right for them, I think you're a better team leader if you understand the different positions on the team. So we encourage students to work in healthcare positions in less glamorous roles like CNA maybe or scribe because it helps them understand the entire healthcare setting. So it's really a great idea to go and really check out a number of healthcare professions. The popular ones here, besides MD, are dentistry, nursing, physical therapy, occupational therapy. We have very strong programs in both physical therapy and occupational therapy at our own school of medicine. And we actually have a three-two program with the occupational therapy program. So those draw a lot of people. But we've got specialized support for a lot of other eventual sort of healthcare intentions as well. So there're lots of great options out there.

Reggie Gacad: Thank you. So we are going to move on now to the question and answer portion of the evening. As a reminder, chat us the questions you have, and we'll answer as many as possible during this webinar. Our first question is, "Will my student be better prepared for a career in healthcare if she were to choose a major focused in the sciences?"

Carolyn Herman: It really, absolutely, does not give your application an advantage to have a science major. There are, certainly, some courses that you have to take in order to be prepared for the curriculum in medical school or dental school or sort of whichever profession you're pursuing. But those courses can live alongside absolutely any major in arts and sciences. So I have students who are science majors who are applying to medical school. I have students who are non-science majors who are applying to medical school. I have students who double major in a science and a non-science. And there is absolutely no benefit or disadvantage to any of those choices. As long as students are choosing to study things they're genuinely enthusiastic about so that in those conversations and the interview when they're asked about their course of study, they can sound genuine and enthused and excited about their academic work. That's what's key.

Reggie Gacad: Great. Thank you. So we have a family member whose student is a rising senior and has not yet had an internship or an opportunity to shadow in the healthcare field. Are there still opportunities available to them?

Carolyn Herman: So if they're in the middle of their junior year, there's still certainly a lot that can happen. We really encourage students to connect, first of all, with their network at home. They should be in touch with their pediatrician, especially if their pediatrician was part of their inspiration to pursue this path. [inaudible] would love to hear from them, and love to know that they touched a young person, the student's own doctors, their parents' positions, friend's parents, and parents' friends who are involved in healthcare. They should be in touch with all those people when they're home over breaks. If they're home for the entire summer, there's lots of opportunity there. But even if they're just coming home for spring break or for a couple of weeks before they come back to campus to do some research or something. There could be time for some substantial shadowing with healthcare professionals they know at home. So that's one opportunity that we encourage students to pursue.

We have courses as well that they could take in their senior year. So there's a course where they can shadow in the adult emergency room called MEDPREP. There's also a course where they can participate in clinical research in the

children's emergency room called PEMRAP. There are some other courses where they might get involved in more sort of individual clinical research projects. So they should certainly be strategizing with their pre-health advisor if they're already a junior. They need to be in touch with their pre-health advisor and making a plan. But there's definitely opportunities, still.

And the other thing I would say is that if students arrive at the end of their junior year or at the end of their senior year or whenever it is, and they feel like they don't have the kind of rich experiences that allow them to craft a compelling application, they should just wait. They should get a job at postgraduate and apply after they've been working in healthcare for a year as a medical assistant in a private practice or a physician facilitator at an urgent care or whatever it might be. But they could work for a year and take two gap years. There's nothing wrong with that, and lots of my students do actually make that choice.

Reggie Gacad: That's pretty wonderful. Thank you. So you mentioned CNA positions in your opening remarks. What is a CNA?

Carolyn Herman: A CNA is certified nurse's assistant. So it is not a glamorous job. You're going to basically be doing all the sort of chores that the RNs are kind of-- their qualifications mean that they're going to be doing something else. But it is certainly first-hand and sometimes hands-on patient contact. So maybe administrating medications and obviously anything that you would that would require actually touching the patient. I mean, you're trained for it. It's a job, and so you get trained. But yeah. And nursing homes a lot of times have CNAs.

Reggie Gacad: And you mentioned that this is something that really gives students an opportunity to see healthcare from one of the many different opportunities that they would be-- or one of the many positions that they may be interacting with when they eventually get there. Is that something that students would consider doing, say over the summer or in between academic years?

Carolyn Herman: Yeah. Most of my students who actually work in a healthcare setting start in some kind of a summer job. I wouldn't say always, but that's common. So a lot of times, they'll start in a summer job at home, possibly here in the area. And then, maybe they work part-time during the school year on a limited basis. Obviously, we don't want them spreading themselves too thin. But most students can work a little bit and still do excellent academic work. And sometimes, that also then matures into something they do in a postgraduate year either while they're applying and interviewing or while they're kind of collecting experience to prepare to apply.

Reggie Gacad: Great. Thank you. When do you suggest that students take the MCAT?

Carolyn Herman: I think the best time to take the MCAT is when they are really pretty prepared for it. So that's definitely going to be after they've had all the coursework that is relevant to or tested over on the MCAT. For most students, the earliest that would be January of their junior year. Very few students will have had all the coursework that's going to be covered on it before then. So earliest would be January of junior year, but plenty of my students really don't want to try to balance studying for the MCAT across a full load of academic coursework, and they'd prefer to take it in the summer. I recommend that they take it then the summer after their junior year so that they've had all the coursework and had some upper-level bio courses in particular will help them prepare and help them develop some skills for the biology section of the MCAT. And then, if they take it at the end of that summer, they spend the summer studying maybe while they're doing some research or some type of a clinical job working part-time. They still will have time to study. Most students, if they study for a full summer, will be well-prepared, take it at the beginning of the fall of their senior year, and then they'll apply at the end of their senior year, be working while they're interviewing in a gap year.

Reggie Gacad: Great. We have a number of folks who are asking, "Are medical schools okay with folks taking prerequisites such as physics or organic chemistry over the summer at a different institution other than their home institution?"

Carolyn Herman: Yeah. A lot of my students do that and my students are going to medical school, so it really just can't be that big a problem. I don't think it's any huge disadvantage. I think if a student appears to be avoiding difficult coursework, if they've really sort of been struggling academically, then they should think through carefully sort of how they plan to demonstrate sort of a recovery and skill-building, and that's a strategy conversation to have

with your PreHealth advisor. But by and large, if students have been performing relatively well in their coursework, I don't think schools are sort of investing that much meaning in any particular course and the requirements.

Reggie Gacad: If my student graduates from Wash U, will they also be able to attend medical school here as well?

Carolyn Herman: They might. The class at Washington University School of Medicine right now is 80 students. They've scaled it back just a little bit as they do some curriculum changes over there. They wanted to have a little bit smaller group to work with while they sort of maybe ironed out any wrinkles and new curriculum. And so we have probably, on my sort of summary report right now, I have 350 people applying, so they're obviously not all going to Washington University School of Medicine, but our students do get a little bit of an advantage there. They get a little bit of a bump, and we will have-- the largest number of students at any one institution is at Washington University School of Medicine. So we send more students there than to any other single medical school.

Reggie Gacad: Great thank you. Are there systems in place to support students who may not have the financial capability to actually do the application for medical school, or to take the entrance exams, or MCAT, or those pieces?

Carolyn Herman: That is such a great question. I'm glad you asked that. Because it's really a tricky space. So I just somewhat recently learned, within the last few years, that our financial aid awarding package cannot include things for post graduate. Student financial services cannot award, as part of the financial aid, the cost of a GRE prep course, or an MCAT prep course. The federal financial aid laws actually restrict that. That's not considered part of cost of attendance. I think that's wrong, but my opinion does not matter here. So we have had to really work hard and really be creative in terms of finding resources. Because it can't just be part of the financial aid package. If students are part of a program, like Deneb STARS or encompasses some first-generation students and some students who are from lower-income families, they should certainly be asking their program directors about resources. Because certainly students who are TRIO eligible, there is some money in the TRIO program for things like that. So if they're already connected to any kind of a program, they should absolutely be asking how can you help me get this done. If they're not connected to any program, they still should come and talk to somebody in the college. We don't want anybody to not pursue their dreams, or not achieve their goals, because they've got financial barriers. And we really want to try to find the resources that students need. So their first point of contact would be any program that they're already affiliated with and known by. But if that is not working for them, or they just don't have a home like that, they should come to a college office.

Reggie Gacad: Great. Thank you. Are there clubs or organizations that exist that can add to my student's experience as a pre-health student?

Carolyn Herman: There are so many clubs and organizations that students participate in that can really sort of enrich their understanding of medicine. There are lots of clubs that have-- as part of their activity together, they volunteer together at children's hospital, like Project Picasso goes over to children's centers art projects with the kids. Einstein Explorers goes over to children's hospital and does little science demonstrations in kids' rooms and stuff. So there are lots and lots of clubs and activities where students can get great patient-facing experience, learn more about healthcare, learn more about even health policy and healthcare systems. There's almost too many-- so sometimes I think it's hard for students to figure out sort of which to engage with. Because there are, on this, like too many options. I encourage students to talk with the upper-level students. Their [inaudible], their RAs. Even if they're not premed, they have friends here who are. Talk with them about what kinds of experiences they've either had or if they've had-- heard their friends really enjoying. And talk with them about why they liked those. And then that, I think, will help them sort through a little bit what would be a good fit for them. So any of that mentoring from upper-level students is really helpful there.

Reggie Gacad: So if a student has an opportunity to shadow a professional in the medical field, what would you suggest they do to get the most out of that experience?

Carolyn Herman: I mean, the first piece of advice is really just be very professional. Dress appropriately. Medicine is conservative. You should be wearing a tie if you're a young man. You should be wearing slacks or a conservative dress if you're a young woman. But then when you're there, also always let the healthcare professionals take the lead. You should be in the background unless you're invited to step forward. In terms of what you can do, really journaling afterwards so that you capture those experiences, you capture those emotions that you had during the

experience. You capture any learning that you had, any questions you had that you might be able to ask either a healthcare provider or research on your own in some way later. That journaling, I think, is really crucial.

Reggie Gacad: So we have a parent who asks, "My student wants to take a gap year before medical school. Besides staying for the entrance exams or MCAT, what do you recommend they do during that year?"

Carolyn Herman: I assume that all of my students are going to work during a gap year. Because I assume that they're going to be at least partly financially responsible for themselves. When I first went to graduate school, my parents still paid my car insurance and I'm sure that many students and their gap year. Their parents will still be paying for their phone or whatever it might be. But they're probably going to be paying some of their own bills as well. So we expect them to work. There are lots of great jobs that will actually be helpful to them as they're headed to interviews or writing their application materials. Lots of my students work in clinical research. There are lots of one and two year jobs in clinical research, there's a little bit of revolving door at our own school of medicine that people have this sort of gap-year jobs and then pass them onto other people. They could work in a medical office of some kind, or a direct health care setting, ER tech, scribe, in an urgent care, or an emergency room, working in a nursing home something like that. The third most popular option is some type of structure gap-year program like AmeriCorps. A lot of those are under resource schools. There's a teacher assistant or something. I still think that that can be a genuinely beneficial way to really understand the day in, day out lives of people who will be part of your patient population particularly if you're training in a medical school whose teaching hospital is in an Urban Core or is a safety [non-hospital?].

Reggie Gacad: Yeah. We have some family members asking, "Does lab work that is paid versus through course work differ in credibility towards medical school applications?"

Carolyn Herman: No, not at all. I think medical schools don't care at all whether you're being paid or whether you received course credit. I think what they do care about is you can talk about what you did. You need to understand what you were doing and being able to articulate the contribution that you made as well as sort of the lab's purpose. Why are they bothering to study this?

Reggie Gacad: Yeah. Yeah. So we have a family member who asked, "My student has been struggling academically in the pre-health courses here. What support systems are in place at WashU to help them? And what advice do you have to help me support them as well?"

Carolyn Herman: So the science courses are challenging. There is no doubt about that. And depending on what their high school situation was like, people come in with different levels of preparedness for these very challenging courses as well. So I think if they are struggling, I would be asking them. They are a lot of resources here. There are a lot of study groups. There are a lot of-- we have what we call residential peer mentors. So there are students who are actually being paid to hold sort of office hours in the dorms to answer questions over chemistry, and biology, and math. So asking students sort of which of the resources they're taking advantage and how they're utilizing them is a good way to sort of open a conversation. Sometimes, part of the problem is that students are really just too embarrassed to ask for help. It's a very big identity shift to not be the smartest kid in the room all the time anymore because that's where most of them have come from. So sometimes, it really is just getting over that hump of being willing to admit to somebody that you really need some-- you really need some assistance. So letting them know that that's okay, maybe sharing the time in your own life when you had to-- be very humble about something and ask somebody for a lot of help and assistance. And then in the end, you were really successful. That could be powerful.

Reggie Gacad: What resources has WashU have to help students prepare for the medical school interviews?

Carolyn Herman: Our career center does a great job with that. We've got several actual-- we've got several physicians who are part-time employees at the career center who conduct mock interviews for medical school, and they do a great job. But there are also just other career center specialists who really learned about interviewing at medical school, who conduct mock interviews and give great feedback and are really helpful to students as well. We've got some group programming too. There's an improv style sort of-- you practice thinking on your feet, practice sort of sharing your elevator pitch. So for younger students, I think you can never start that stuff too early. Go and participate in some of the group things at the career center. And then there is also an online tool called Big Interview that they can sort of practice individually with or get critical feedback from family or friends. But certainly,

in the academic year leading up to when they'll be applying, we want them over at the career center doing those on one-on-one mock interviews with professional staff.

Reggie Gacad: Great. Thank you. Does WashU host a PreHealth career fair? If so, how should my student prepare for an opportunity like that?

Carolyn Herman: We don't have a PreHealth specific career fair. A number of the companies that recruit a lot of students for gap year jobs just come to our regular career fair. And so I certainly encourage all of my students that I'm advising to go to that. They may connect with a great opportunity there. But we don't have, say, a fair where medical schools are all in a room at tables. We have a fair number of medical schools who do visit at various points over the year and come here to recruit. We advertise those through our PreHealth email Listserv. There's usually either some sort of lunch meeting or late afternoon-- an hour session where the medical school presents and answers questions. And so we certainly encourage students to attend some of those. Even if they don't think it's a medical school they're going to be super interested in, you can just learn a lot about how medical schools differ from each other by going to these.

Reggie Gacad: And then what is the best way for me to encourage my students to get on that PreHealth Listserv?

Carolyn Herman: If they are not already getting the PreHealth emails they definitely should email us at PreHealth@wustl.edu. and then we will add them to the Listserv. Sometimes they're on it and it's just going to their spam and sometimes that's because they got on the list very, very early and then we sent a lot of email that never interested them so they marked it as spam or their mail manager asked, "Do you want us to put this in the trash for you?" So sometimes they just have to reteach their mail manager to send it to their inbox instead of their junk.

Reggie Gacad: Great. Thank you. Where should students go to find research opportunities?

Carolyn Herman: We have an undergraduate research office and they want to work with students. They want to help students with that. I suggest to my own four-year advisees when they are-- early on, maybe first-year or first summer they want to start looking for a research opportunity. I urge them to go to the undergrad research offices' website. There's a Getting Started tab on the website and it is really full of great information. And I think if students will read through that and do some self-reflection and some thinking and then schedule a meeting with one of the advisors in the undergraduate research office, they will have better questions and they will get a lot more out of that visit.

Reggie Gacad: Great. We're going to go ahead and put both the PreHealth email as well as that website also in the chat function for you. Where will this webinar be posted afterwards so we can direct our students to watch it?

So I'm going to answer this one. The webinar will be posted on families.wustl.edu. and we'll also post that into the chat function for you all. So that way you can direct your students there. And it will be up next week. What are the chances of Washington graduates getting accepted to medical school? How many schools do most people apply to?

Carolyn Herman: So all of my students are going to be accepted to medical school, eventually. It's really true. It is a question of-- everybody here is smart enough to be a doctor. And if they really want it, and they're sort of going after it for the right reasons. They've done that sort of discernment piece. They know that it's a good fit for them, in terms of their values and the kind of work they want to do. They're going to be successful in the application process. 80% of our applicants are successful the first time. So the other 20% reapply, and then they go.

Reggie Gacad: Great. Do you find that pre-health students can study abroad while meeting all their requirements? If so, are there specific that they may be able to do?

Carolyn Herman: I encourage my students to study abroad. And that's probably the most that—the thing that has perhaps changed the most since the parents who might be my age watching, especially if they were science majors. Study abroad was not a thing when we were kids in college, if you were in science. And that's not really true anymore. Now, if you were going to—there are a couple of majors where it can be a little bit difficult to schedule it in, unless you move a sequence to the summer. And the question, is it really okay to take organic or physics in summer? A lot of my students are moving one of those sequences to the summer after their first year, so that they can free up their junior year. They're not doing a year-long sequence in their junior year, and they can study abroad one of those semesters, often junior spring. And that works really just fine, and that's a great reason to take course

work in the summer, "So that I can create room for study abroad." Is absolutely an answer that medical schools will value.

Reggie Gacad: Great. As a side note, we will be doing a study abroad webinar on Monday, March 9th, where you can find out some more information on the study abroad specifics and whatnot. Our next question. Do you assist students who have already graduated and are taking a year or two before the application to medical school?

Carolyn Herman: Absolutely. We love to work with [them lots?]. And we want people to apply when they're ready. The fact that we push that philosophy so assiduously means we really have an ethical obligation to follow up with that and be ready to advise them when they're ready to apply, and we are. I have students who go and serve in the Peace Corps, come back three years later, find that they have decided on medicine while they were in the Peace Corps. We love to help them apply. So there's no amount of time that you can be out that's too long where we're not interested in helping you anymore. You're always ours.

Reggie Gacad: And then, for those students who may be away and have an experience like that, what is the best way for us to get them in contact with you all?

Carolyn Herman: Mostly, students will email me first. And then, I've got an online calendar. We can work by phone. Some things are well-handled by email. Many are not, and a conversation is better depending on where they are and sort of what our hours are and stuff, maybe Skype will be good. But we can always figure out a way to communicate, and it does not mean they have to travel back to St. Louis. We're set up to work remotely with them.

Reggie Gacad: Great. So one family member asks, "My student decided that they wanted to join the pre-health track as a sophomore. Will they be on track to finish the pre-health timeline and or graduate within that four-year?"

Carolyn Herman: They will absolutely graduate on time. All of my students must graduate in four years. A few are going to have some really hard medical issue where they have to take a semester, maybe they'll have to stay another semester. But the goal is everyone graduates in four years. It may be depending on the pace at which they pursue the coursework. They may finish all the coursework before they graduate, that would be lovely, they might have one or two courses that they need to do after they graduate, and they could do that at home, inexpensively, at their state school. So it, generally, is not advisable to sort of cram everything in to get it done just to hurry through it, especially if a student's starting maybe not a [sub?] but students who are starting as a junior or a senior and have been away from the science coursework for a long time it now feels like a long time since 10th grade the last time they saw chemistry, for example, that you don't want to pile on a lot of coursework that you have a big distance from the sort of preparation for that all at once. So a gentle ramp into it is advisable. If that means that it's not all going to be done on graduation day, that's really okay.

Reggie Gacad: Great. How many schools do most people apply to?

Carolyn Herman: I would say that the number of schools that I recommend that students apply to is 15. A lot of my students get very scared. It's a very anxiety-inducing process. I understand that. And they add in a bunch at the last minute. I don't believe that improves their odds at all [laughter].

Reggie Gacad: "If my student has transferred into Wash U from another school and completed some prerequisites for a pre-health at their former institution, would those credits work for medical school applications?"

Carolyn Herman: Absolutely. They're going to send original transcripts from college or university they've ever attended. That includes summer coursework. That includes actually—if they have college transcripts from high school, like here if you went to one of the Catholic schools, they have that 1818 program the SLU. So a lot of kids that graduate from schools here have a college transcript from SLU before they ever go to college. We actually won't take that credit here at Wash U, but you still need to send your SLU transcript when you apply to med school. So all of those transcripts both will be acceptable and utilized by medical schools, and you're obligated to provide them.

Reggie Gacad: Great. "Now that MedPrep--" which is one of the courses that you mentioned earlier, "Now that MedPrep fall study abroad in China has been canceled, due to COVID-19, will there be a substitute MedPrep offered elsewhere?"

Carolyn Herman: Well, I mean, the main MedPrep is offered right here at the Barnes-Jewish emergency room. So this was sort of a spinoff that was offered in China. I don't know if we will set up another location, but it won't be this

year because it just takes too long. We set up field experiences for them, they have this-- it's just that there's a lot of groundwork and a lot of infrastructure involved in a program like that, and there's no way we're going to pull that off by next fall. That's not going to happen. So everyone feels terrible about that. Everyone very much regrets, but it really was a safety decision, so.

Reggie Gacad: Yes. "What kinds of experiences should my student be looking for to help with medical school applications?" So you've talked about some pieces around research, some pieces around shadowing, some pieces around work. So what kinds of things should they be looking for?

Carolyn Herman: Every applicant must have a strong record of community service. Medicine is a service occupation. It's a well-compensated one, but it's still a service profession. And you're going to often prioritize your patient's needs over your own. Sometimes, you may prioritize your patient's needs over your family's needs. So you have to demonstrate if that comes naturally for you if that's just who you are. So that is not something they want to hear you talk about, that's something they want to has seen that you have done. So you can't have too much service. And the other thing they really need are those first-hand clinical experiences. You need to understand the role of the physician if we're talking about medical school, the dentist if we're talking about dental school. So you need to understand that provider role. You also need to have your own first-hand experience with patients. People are not at their best when they're in health-care settings. When they're ill or injured they can be cranky, they can be difficult. You need to first-hand engage with that and make sure that that's a good fit for you, that you enjoy that work, that you don't find it draining, that you find it energizing.

Reggie Gacad: Do medical schools put weight on the specific institution that you take your summer class at?

Carolyn Herman: I don't think that that's critical. And I especially want to assure families who are kind of struggling a little bit to scrape together money for summer tuition, that they do not have to send their kids here for summer school. Organic chemistry here is like \$10,000. I have a child here at the institution as well, if she needs any summer classes they will not be at Washington University because my faculty benefit does not cover any summer classes [laughter], and I can't afford it. I can't afford it. And so families do not need to feel like they have to take on large extra debt. If the resources are there and there's a convenient or really strong program, sure. That's lovely. But if the resources really are not there I think it is fine to choose something you can afford.

Reggie Gacad: Great. Does community service have to be health related?

Carolyn Herman: No. In fact, some medical schools, now this varies a little bit by school, honestly. Some medical schools actually really pay more attention to non-clinically oriented service because they feel like the students who did some volunteering at a hospital or whatever, but then they also engaged with the community beyond that, that their sort of commitment to service is sort of more genuine, it wasn't just a checkbox for the application. So different admissions offices sort of have a little bit different philosophies, it varies a little bit. But there are many that actually value the sort of non-clinical service above even the clinical service, although most will expect some clinical service.

Reggie Gacad: Right. Does it matter to schools what type of doctor you would like to be?

Carolyn Herman: No. And in fact, if you go in saying that you are for sure going to be an orthopedic surgeon and there's nothing else you're interested in, that may not net you an acceptance to medical school. It's good to be-- so medical school is another general education. And you declare your major in residency. So it's good to go in open-minded about exploring the majors that are possible and not declaring before you even start.

Reggie Gacad: Right. So how many students take a gap year after undergraduate, before attending medical school?

Carolyn Herman: So not just at Washington University, but nationally, slightly more than half of student medical students had time out in between undergrad and medical school.

Reggie Gacad: Wonderful. So we're going to ask one last question for the evening. As a reminder, any questions we were not able to answer during the webinar will be addressed directly via email to the person who posed the question. Dean Herman, thank you so much for the information you've shared tonight. What is one last piece of advice for families of Wash U students studying on the pre-health track that you'd give them?

Carolyn Herman: This is so hard, and I don't know how much impact families can have on this, but even if it's chipping away at the edge it can't hurt. Students here spend a lot of time comparing themselves to each other and

it's just not very productive. They're all going to be successful. They're all going to be successful. And they're good enough, they're enough just the way they are. And they generate a lot of anxiety, they do a lot of comparing. Helping your student focus on competing with themselves and not with their suite-mate, sort of their personal best, and tracking their own progress, charting their own path, doing things that they really enjoy for their own reasons, is probably the healthiest choice that they can possibly make.

Reggie Gacad: Dean Herman, thank you so much. We really appreciate the information you provided this evening. I know it was extremely helpful to many of our family members.

Carolyn Herman: Well, I'm happy to be here, thank you for having me.

Reggie Gacad: So, families, we hope you were able to learn some valuable information this evening. Stay tuned for our next webinar, a conversation about study abroad, occurring on Monday, March 9th. We'll be able to register for this webinar at, families@wustl.edu. We'll see you then.