

# Tufts University

## School of Medicine – 11/13/19

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Speaker: David Neumeier, MD, Dean for Admissions at Tufts Medical School

### A. About Tufts Medical School

- Tufts has one of three medical schools in the Boston Area
  - 4 in MA
  - Inter-city, private school with a bigger class
- Tufts offers different programs
  - Maine Track MD:
  - Dual Degrees:
    - MD/MPH
      - Both degrees are done in 4 years
    - MD/PhD
      - Students can only get this dual degree if they are in the Boston campus (not an option for the Maine track)
      - Ideal MD/PHD candidate
        - Typically, these have a lot of research and a lot of research success
        - Align with research that is going on in the medical school
    - MD/MBA
      - Degree in health management

How dual degrees work?

- Your application as an MD/MBA(PhD)(MPH) is part of the main AP pool and are evaluated
  - If you get accepted to medical school tufts and then application is sent to the PhD/MBA/MPH program for evaluation
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- Master's in law in diplomacy
    - Graduate program at tufts and is geared for people who want to be ambassadors
      - Good for international public health
  - Sam W. Ho scholars' program

- Once you get in tufts, you can apply separately from your application
  - Specifically, for people from Underserved populations- in Boston and outside of Boston
    - Cambridge health aligned
    - Low income underserved populations
  - Reason why: This shows you are interested in the program and not solely using this opportunity as an advantage to get accepted into the medical school

## B. Admissions Process

- Admission process
  - Too many applicants making it hard to select students
  - Hard to have meaningful communications with everyone
  - Admissions are trying to select ppl who will make outstanding Doctors so it's hard when you are looking at papers
    - Grades and scores don't matter on how good of a DR you are
      - What do they do?
      - Use grades and scores to see if you are successful in the Tufts curriculum
        - if you don't do well you might not succeed in advancing in medical school
      - grades should suggest you will do well in med school
  - Tufts medical school uses Science GPA to compare applicants
    - Easier to use science GPA to compare applicant's vs using overall GPA
    - Science GPA puts everyone at the same level as they all contain the same courses
  - "Looking beyond you"
    - Personal statement, letters of rec, determine if you get an interview
  - 12,000-13,000 applicants for a small class of 200 making the process daunting
- It doesn't really matter where you end up in medical school
- But if you are trying to win awards then where you go to medical school will come to affect

## Q&A:

1. How do admissions committee looks at people who decided to be a Doctor later in life?
  - This is not a factor the admissions committee look at!
  - Advice: understand to apply when you are ready
    - 70% have taken a gap year before going to medical school
  - Students who are career changers; have a solid GPA and goal is to take pre-med requirements but the goal is not to enhance the GPA

## 2. What is the Admissions perspective on going back to school to boost GPA?

- The Admissions look at applicants as who you are now and are evaluated based on recent academics
  - If you have a rising GPA they will evaluate your current GPA and not the past
- The admissions recommend if you do not do well as an undergrad: increase GPA

## C. Tips for Applying

- How to write your personal statement:
  - Your story; how you evolved and why you want to become a doctor
    - This statement subjective and nothing is perfect; as long as it's your story and
  - Typical: start with traumatic incident and ending is what you learned
  - No one will judge your personal statement
  - A lot easier to distinguish yourself in a negative way than in a positive way
    - Bad ones are more memorable – don't do this though
      - Ex. Poems, citations, spelling errors, grammatical errors,
  - Write it many times before its due
  - Summary: Your story and how you got to where you are and why
- How Co-op puts NU students at an advantage:
  - Everyone knows about co-op in tufts admissions
    - use that to your advantage
  - Doing a Co-Op Makes you a mature applicant
  - Research vs clinical co ops
    - You should have solid experiences of medicine
      - 1. Clinical exposure: NEED
        - Shadowing, medical scribe, etc.
          - what really matters if your experiences are enough to convince you that you have enough information in the medical field to be a DR
        - You need a good broad/exposure to the field
          - Such as in patient and out -patient that can be done outside of co-ops
      - 2. Research
        - Important but not a requirement
        - Strong applicants have this; could be done as a Co-op
        - Research does not have to be medical research but as long as you have enough experience to know how research works
          - Gives you an idea on how research is done

- Ex. Reading the new England journal of medicine; published every week and info is not always right so you will have an eye to understand faults and give you perspective
    - Medicine is good but we are not great
      - A lot of faults in our medical system and not everyone has the same access to health care
      - Super expensive
      - complicated and not always safe;
        - if you want to improve this then apply to tufts
  - Being Unique is a misconception
    - This is not necessary and is a misconception
      - You don't have to be unique to be a good DR
        - Ex. Be noble prize winner
      - ***Being a good person makes you a good applicant***

#### C. 4- year Curriculum

- Transitioning to a new curriculum that integrates health care systems, population health, population experience and personal/professional development
  - Year 1 and 2: Organ system based
    - First year of new curriculum so there is less classroom time
      - Day to day
        - Large lectures but are minimized with small groups
      - Different teaching methods: Reverse classroom, problem-based learnings, ethical courses that make the learning more relevant and less passive than before
    - Start with a health care system class to give you a background of the medical field
    - Organ system approach year one
      - Ex. Cardiology includes learning about the heart, talking to patients with heart conditions, and dissecting the heart to get a better visual understanding
    - Case-based learning
    - Clinical medicine
      - Practice at a primary care 1 day/week to see patients
        - At first students don't know much but doing this allows them to learn how to do exams, medicine reconciliation, nutrition counseling, listen to heart sounds, etc.
        - Selective
          - Career exploratory clinical experiences



- Students who are most successful set priorities straight and make sacrifices by giving up things to make more time to study
- Although the workload is hard, students are doing it with other people therefore you can support each other through hard times
  - Ex. Create study groups
- Remember: At the end of the day, it does not matter how smart you are as every student needs to do the same thing (wake up at 6am for clinical rotations)