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Becoming a Physician

What do physicians do?

Physicians do patient care in offices, hospitals, and other locations. They generally work some 50-60 hours a week and make \$100,000 or more a year. They take a minimum of 11 years of college, medical school and residency after high school. They must be willing to listen to and care for all types of patients. Physicians also manage programs, clinics, labs, and research projects. One translation of the word "doctor" is teacher and a physician continually works to teach patients better health practices, to teach students medicine, and to teach people in the community how to improve the health care in the community. Remember that what you see on TV is only a small and distorted part of what medicine is about.

What will physicians do differently in the future?

There are many changes going on in medicine. Doctors are unlikely to be replaced by computers, but information searches and retrievals are becoming more a part of medicine. Physicians are more and more becoming employees and are fewer owners of their practices. This allows more time for patients, but presents certain challenges. When physicians saw the need to send a patient to a specialist, they just did it. Now they must provide some evidence for the need for the referral and sometimes must insist on this, even when their bosses initially say no! Doctors will be doing more primary care and more geriatric (elderly) care. They will also be doing more behavioral and mental health care.

The role of the physician is changing. No more are physicians lonely captains of the ship. They work with other types of health professionals in teams to care for patients. Physicians are doing more with wellness and people care. The more medicine advances, the more we realize that we rarely "cure" disease with new discoveries and other high tech stuff. Medicine is about helping people to live their lives better, not stamping out disease. How successful physicians are in the future depends on their willingness to improve in communications and working with others.

Physicians also do more work with the community or groups of patients to identify sources of disease at the root level rather than wait to treat the diseases that result (alcohol, drugs, tobacco, fatty foods, lack of exercise, teen pregnancy, educational failure, mental health, parenting skills, sexually transmitted diseases, AIDS). The societal

need for physicians is related to our willingness to address these important areas as well. The more society tolerates the above risks, the more need for physicians.

What are the main challenges of being a physician?

It is difficult to be nice to patients when they are not nice to you or are very different than you, but despite these differences, a physician must do their best consistently. Sometimes caring for people can even cause physical (sleep), emotional (problems too close to home), spiritual (different beliefs), or financial problems.

It is tough to find a balance between knowing enough to do the best care, and not getting overwhelmed by what all there is to know. Remember it is more important to know how to find out what is necessary for patient care than it is to know everything. It is also tough to keep medicine from being so fascinating that it absorbs your life, your family, etc.

It is also difficult to do painful procedures or ask invasive questions, even when you know it is in the patient's best long-term interest. It is tough to do self-examination to find out areas that you need to improve, and devote time to learning about these areas. Many worry about whether they can tolerate surgery, cadavers, or the sight of blood. The trick is getting you and others involved in problem solving and helping people, not being overwhelmed at their problems.

The main rewards of being a physician come later after you have withstood the challenges and your patients get the best treatment. Most times only the physician and the patient know when this happens; official recognition may never come.

How do I become a physician?

You must finish college and take certain science and other courses to qualify. Then you apply to a public medical school (state school), private medical school (Creighton, Baylor, Loma Linda), or osteopathic medical school (Des Moines, Kansas City, Kirksville). Remember that many do not get in their first year and some come to medical school after ten or more years of different work. Admission applications are going up, but 95% of public medical students come from the home state. Private medical schools are generally more competitive. Osteopathic medical school emphasizes primary care approach more and osteopathic graduates make just as good a physician with some advantages in the musculoskeletal and whole person areas. Both Osteopathic and Private schools have much higher tuition (\$20-30,000 per year), but loans and scholarships are readily available and there is some advantage to being poor or oriented toward serving the underserved in order to obtain these. Doctors do well enough financially to pay off all debts, provided they don't spend themselves greatly into debt during or after medical school.

What are the types of physicians?

Basically there are primary care physicians who see patients mostly in office settings, and specialist physicians who see patients with more specific problems such as heart disease, stomach trouble, brain tumors, cancer, etc. Primary care physicians include family physicians, general internists, and general pediatricians. Sometimes obstetrician-gynecologist doctors do primary care, but mostly on the women that they care for. Specialty physicians often work to do certain types of surgery, or specialize in the care of a specific body organ, or assist other physicians with lab tests (pathologists), putting surgical patients to sleep (anesthesia), or x-rays (radiologists).

In recent years it has become more difficult to find jobs for specialists. Primary care physicians have seen increasing need and salaries in recent years, especially those interested in rural health and geriatrics. There is a great need for psychiatrists and others skilled in mental health care (treating depression, behavior problems, substance abuse, and children's mental health).

What do medical schools look for?

Successful applicants have good grades, especially in the science courses. They also have good scores on the Medical College Admission Test (MCAT), but grades and MCAT scores are not the only qualifications. Applicants interviews at the medical school and the application contains information about past experiences in life, health care, volunteer work, awards, accomplishments, and more. The major function of the interview is to determine the ability of the applicant to succeed in medical school. This involves both academic ability as well as the ability to relate to others. Medical schools have begun to pursue applicants with varied backgrounds and interests such as experiences with other cultures or in other nations. Medical schools have been accepting older candidates over the past two decades because they value their maturity and dedication. Students interested in rural practice can find that their rural background, family practice interest, or marriage to a rural spouse is factors that could influence admission in states where rural physicians are in demand.

Why don't more rural people get into medical school?

They don't apply or they think that they are not quite good enough to go one of the ivory tower medical schools. Rural applicants often have more extracurricular activities, more awards, and more work experience, but they worry that their grades or scores are not good enough. They sometimes do not have much exposure to health professionals as they are growing up. Some start in other health professions, and then choose medicine. Although this may cost them some loss of time in school, it is valuable in terms of what they later bring to medicine and patient care.

What if my grades or scores aren't that great?

Many students do poorly in their first year. Others have some problem with a year for various reasons. The interview will give you a chance to demonstrate improved performance in the later years as you settled down, applied better study habits, got more motivated, or whatever. Health experiences and job experience can count too.

Again the best advice is to prevent problems before they happen. Try not to take more than 15 or 16 hours a semester in the first year. If you have trouble adjusting to major change, 13-14 might be better the first time. In later years you can prove that you can handle the 20+ hour loads common in medical school. Be sure to seek advice from premed advisors sooner rather than later. If a family member is ill or other problems crop up, it may be better to decrease your load or lay out a semester rather than perform poorly.

What college should I pick?

The most important thing about the college is that it be a good match with you and your needs. Some need a challenge, some need less distraction and fewer students around, and some need to be closer to family. The college should have some form of premedical group and premedical majors. It should have strong science courses and hopefully a good track record for getting students accepted into medical school. I prefer a college like UWF (with approximately 12,000 students) with good sciences rather than one with 40,000 students and lots of tempting entertainment. This was a good fit for me, what about you?

What challenges do I face in medical school?

Medical school is challenging educationally and emotionally. You must practice good study habits, learn to prioritize important areas despite lots of information, and keep a good balance in your physical and emotional needs (exercise, good food, friends, family, church, etc.). There is much new information. Even if you took a lot of biology and chemistry courses, you would still have new material. People from small towns also face adjustments as well (feeling safe, less friendly folks, folks who might take advantage of you in rent, purchases, etc.). Others find it difficult to be as involved as they were in college or high school.

Areas for Consideration for Medical School Candidates

Middle school - science fairs (check with state medical schools and science colleges), scouting awards

High school - visits to local doctors, hospital volunteer work, Eagle award, medical explorers, volunteer for EMS squad, scholarships, leadership in clubs and team sports, community work, volunteer/leader in community organizations, foreign language courses

College - make sure of good study habits, show ability to manage challenging material and courses at the same time in one semester, **establish connections with premedical**

club and premed advisors, do volunteer work as a leader (Habitat for Humanity, Christian missions, school or community organizations), cultural immersion experience of one or more months, visits to medical school campus, take medical school orientation or science course or do research there or community project with the medical school, prepare and take MCAT, take required medical school courses

Work - many work experiences tie in to medicine. Teachers and teaching are also needed. We could use more social workers and those with mental health interest and experience.

Remember that medicine is about serving people. If you enjoy serving and learning and problem solving, you could not ask for a better opportunity.