

2019 Companion
to the AAMC Official Guide
to Medical School Admissions

2019 Companion to the AAMC Official Guide to Medical School Admissions

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About the AAMC

The AAMC serves and leads the academic medicine community to improve the health of all.

Founded in 1876 and based in Washington, D.C., the AAMC is a not-for-profit association dedicated to transforming health care through innovative medical education, cutting-edge patient care, and groundbreaking medical research. Our members include all 154 accredited U.S. and 17 accredited Canadian medical schools; nearly 400 major teaching hospitals and health systems, including 51 Department of Veterans Affairs medical centers; and more than 80 academic societies. Through these institutions and organizations, we serve the leaders of America's medical schools and teaching hospitals and their more than 173,000 full-time faculty members, 89,000 medical students, 129,000 resident physicians, and more than 60,000 graduate students and postdoctoral researchers in the biomedical sciences.

The AAMC's many programs and services strengthen the world's most advanced medical care by supporting the entire spectrum of education, research, and patient care activities conducted by our member institutions. The AAMC and our members are dedicated to the communities we serve and are steadfast in our desire to earn and keep the public's trust for the role we play in improving the nation's health.

The AAMC develops and administers the Medical College Admission Test® (MCAT®), operates the American Medical College Application Service® (AMCAS®), and provides detailed admission information to medical schools and undergraduate premedical advisors.

Commitment to Diversity and Inclusion

The AAMC's commitment to diversity and inclusion in medicine and biomedical research spans more than three decades, demonstrated by ongoing leadership and engagement in activities — starting as early as high school — that promote diversity and inclusion through programs, advocacy, and research. As the U.S. population ages and grows more diverse and disparities in health care persist, understanding the benefits of diversity and inclusion becomes more and more critical to effectively addressing the health of the nation. Information about AAMC initiatives is available at aamc.org/diversity.

Notice About Charts, Figures, and Information

The information in this book is based on the most recent data provided by member medical schools at the request of the AAMC.

We edited and, in some instances, condensed the material to meet space limitations. In compiling this edition, we made every reasonable effort to ensure the accuracy and timeliness of the information, and, except where noted, the information was current as of April 2019. All the information, however, especially figures on tuition and expenses, is subject to change and is nonbinding for the medical schools listed and the AAMC. All medical schools listed in this edition, as with other educational institutions, are subject to federal and state laws prohibiting discrimination on the basis of race, color, religion, sex, age, disability, or national origin. Such laws include Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act, and the Age Discrimination Act of 1975, as amended. For the most current and complete information about costs, official policies, procedures, and other matters, please contact individual schools.

In applying to U.S. or Canadian medical schools, applicants need not go through any commercial agencies. The AAMC does not endorse any organization or entity that purports to help applicants gain admission to medical school, other than undergraduate premedical advisors and medical school admissions officers.

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How to Use This Companion Guide

The AAMC works through many avenues to support medical education and help aspiring physicians succeed on their path to medical school. We created this companion guide as an update to *The Official Guide to Medical School Admissions: How to Prepare for and Apply to Medical School, 2018 Edition*, which is a resource for students who are considering a career as a physician.

Skim the table of contents before you begin reading. Not everyone takes the same path or is in the same place when they use this guide. You may want to read the sections in the order that most relates to where you are now and what you need to know to move forward.

Use and update the worksheets. At the end of this guide, you'll find helpful worksheets to prepare for the application process. Topics include keeping track of your volunteer experiences and determining the right time to take the MCAT exam. You can make copies or complete them using a fillable PDF form at aamc.org/msar-resources.

We encourage you to share your work with your prehealth advisor as you fill out the worksheets. Your advisor or mentor can guide you through this process. If you don't have a prehealth advisor at your school, find one at NAAHP.org.

To understand the national picture, look through the data in this book. Part of what will make you a well-prepared applicant will be knowing more about the national applicant and acceptance data. While every applicant is different, and while every medical school accepts applicants with a range of scores and experiences, seeing how you compare with other applicants across the country can be helpful. This will help you to decide, along with your prehealth advisor, when you're ready to apply to medical school. The data in this book come directly from the AAMC Data Warehouse, the AAMC Data Book, the American Medical College Application Service® (AMCAS®), the Medical College Admission Test® (MCAT®), and surveys conducted with entering and graduating medical students such as the Graduation Questionnaire (GQ) and the Matriculating Student Questionnaire (MSQ). The data are comprehensively updated each year with the most current information available at the time of printing. Because the information comes directly from the source, you can trust it is the most up-to-date and accurate available. For more information, check the AAMC Facts Tables available at aamc.org/facts.

Check the AAMC Medical School Admission Requirements™ (MSAR®) site when you're ready to look at individual schools. One of the most important decisions you'll make is where to apply to medical school. The MSAR® website provides the most comprehensive, up-to-date information and data. When you're ready to start researching medical schools, tap into this powerful online database of information on U.S. and Canadian medical schools and baccalaureate-MD programs at aamc.org/msar. As the gold standard for information about admission requirements, this is the only comprehensive resource of accurate and current data that comes directly from the MCAT program, the AMCAS program, and medical school admissions offices. Your one-year subscription allows you to search, sort, and save information.

Use the AAMC resources, from inspiration through practice. We have many resources to help you, whether you're just beginning to consider a career as a physician or you're in the middle of applying to medical school. Look at these premed and applicant resources and tell other applicants about them if you find them useful.

Aspiring Docs®

- Aspiring Docs Diaries (aspiringdocsdiaries.org)
- Inspiring Stories (aamc.org/students/aspiring/inspiring-stories)
- Fact Sheets (aamc.org/students/aspiring/community/fact_sheets)
- Ask a Medical Student (youtube.com/user/AAMCvideo)

Financial Aid and Financial Literacy Resources

- Fact Sheets (aamc.org/first/factsheets)
- MedLoans® Organizer and Calculator (aamc.org/medloans)
- AAMC Financial Wellness (aamc.org/financialwellness)

Medical College Application Test® (MCAT®)

- MCAT® Essentials (students-residents.aamc.org/mcatessentials)
- Official Guide to the MCAT® Exam (store.aamc.org/the-official-guide-to-the-mcat-exam-fifth-edition.html)

American Medical College Application Service (AMCAS)

- 2019 AMCAS® Applicant Guide (aamc.org/amcasguide)

Careers in Medicine® (CiM) (aamc.org/cim)

Keep up and communicate with us on social media. Find out what's going on by following us on Facebook and Twitter and check out our videos on YouTube:



Facebook: facebook.com/aamcpremed



Twitter: twitter.com/aamcpremed



YouTube: youtube.com/user/AAMCvideo

A note about “MD versus DO” programs: This guide explains the process of preparing for and applying to medical doctor (MD) programs accredited by the Liaison Committee on Medical Education (LCME®). You may have heard of osteopathic medicine programs that grant doctor of osteopathic medicine (DO) degrees. DO and MD programs have many similarities; both types of physicians are fully certified to practice medicine in the United States after passing board examinations. For more information about DO-granting schools and admission requirements, consult the American Association of Colleges of Osteopathic Medicine site (aacom.org).

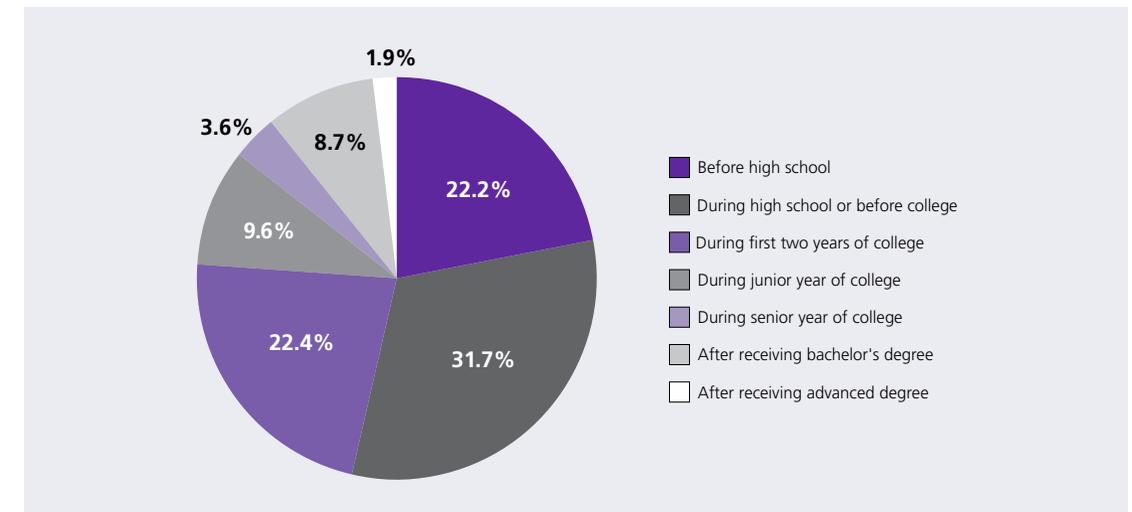
SECTION 1

So . . . You Want to Be a Doctor

Tomorrow's Doctors, Tomorrow's Cures®

Many applicants have dreamed of becoming a doctor from an early age. In fact, a recent AAMC survey shows that half of all medical students who responded to the survey had chosen a medical career before they entered college — and one in five had chosen before they even started high school (see Figure 1.1).

Whether you have always known you wanted to be a doctor or are just starting to consider the idea, being a physician is an extremely rewarding profession. A career in medicine offers numerous opportunities to make a real difference in the lives of countless people.

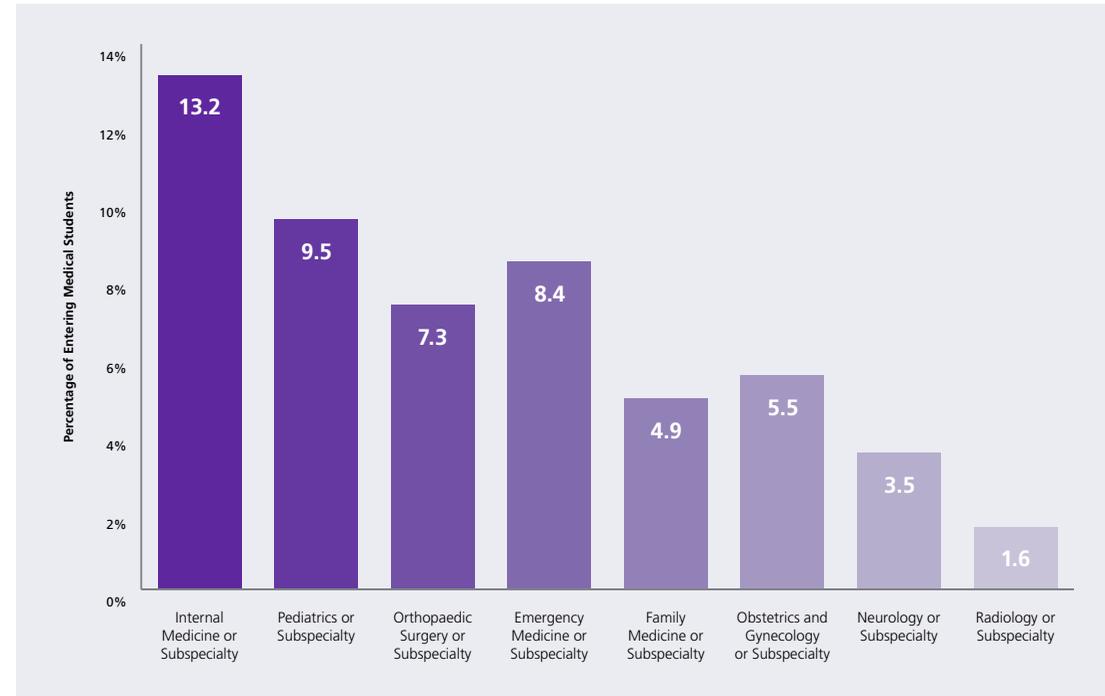


Source: AAMC 2018 Matriculating Student Questionnaire.

Figure 1.1. When did you decide to study medicine? Most applicants knew early on they wanted to be a doctor.

Your Medical Career Driven by Your Interests

Another benefit of the profession is that you can choose from many and varied ways to practice. From clinical practice to biomedical research, from public health to medical education — the choices are plentiful. Many students change or refine their specialty preferences as they gain experience and knowledge in medical school. Entering medical students typically have clear preferences for the areas they plan to specialize in after graduation (Figure 1.2). If your interests change with time and experience, medicine — because of its emphasis on lifelong learning and ties to research and technological developments — will allow you to refine your skills and reorient your practice.



Source: AAMC 2018 Matriculating Student Questionnaire.

Figure 1.2. What specialties are entering medical students considering?

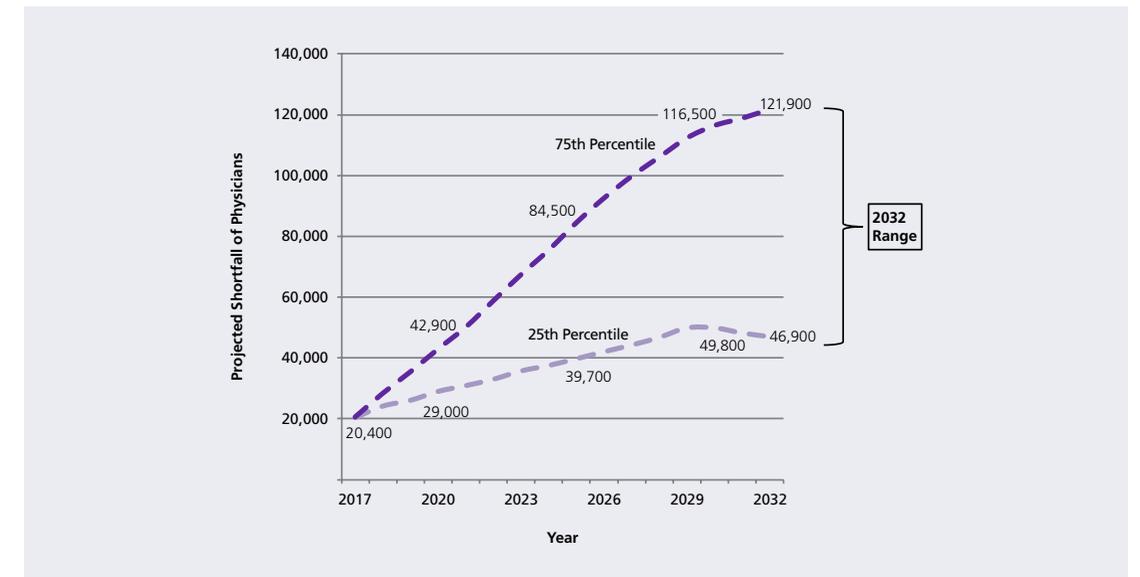
Once you enter medical school, you'll start actively learning about the many career options and consider where you fit best.

Workforce Issues

Above all, know this: Whatever specialty you choose, your services as a physician will be needed.

According to a study commissioned by the AAMC, there will be a shortage of 46,900 to 121,900 physicians by 2032. The shortage is being driven in large part by the rapid expansion of the number of Americans age 65 or over. Our doctors are getting older, too. Nearly one-third of today's physicians will be of retirement age in the next decade, just as more Americans need care. A continued demand for physicians and other medical professionals is projected.

Figure 1.3 illustrates the growing physician shortages between 2017 and 2032. Still, the shortages will be experienced unevenly, and some geographic areas will feel the effect more strongly than others.



Source: AAMC Center for Workforce Studies, 2016.

Figure 1.3. Projected physician shortfall range, 2017-2032.

Although the nation is facing an overall shortage of physicians, many people are particularly concerned about the growing deficit of primary care doctors. Within the overall shortage of physicians, experts expect a shortfall of between 21,100 and 55,200 primary care physicians by 2032.

Applicant and Acceptee Data

This section summarizes data about the entire applicant pool, accepted applicants, and applicants who weren't accepted for the 2018 entering class. The data, from the AAMC Applicant Matriculant File, are accurate as of Jan. 7, 2019. In the figures:

- “All applicants” refers to all applicants to the 2018 entering class.
- “Accepted applicants” refers to those accepted to at least one medical school.
- “Not-accepted applicants” refers to those not accepted to any medical school.

We include data related to performance on the MCAT® exam, undergraduate grade point average (GPA) and major, sex, age, medical/clinical and other experiences, and race and ethnicity.

A Quick Look at the 2018 Entering Class

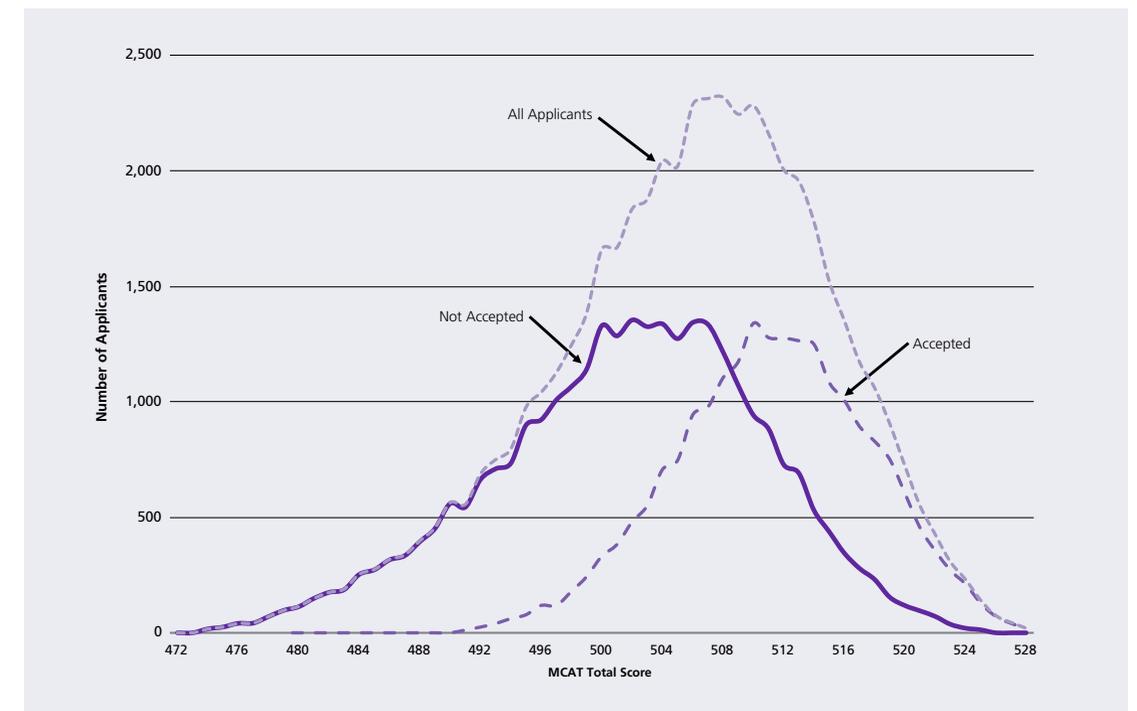
- In 2017-2018, 52,777 people applied to the 2018 entering class at all MD-granting medical schools in the United States.
- By fall 2018, 22,483 applicants had been offered an acceptance to at least one medical school, and 21,622 accepted applicants had matriculated. A small number of accepted applicants — 862 — chose not to matriculate in 2018.

The accepted applicants had broad ranges of MCAT scores and undergraduate GPAs and a wide variety of personal characteristics and life experiences. Applicants were distributed across numerous racial and ethnic groups. Although a few applied through the Early Decision Program, the vast majority used the regular application process.

Performance on the MCAT Exam

Figure 2.1 summarizes the overall performance of the 2018 applicants who submitted scores from the MCAT exam. The figure shows that these 2018 applicants achieved total scores from 472 to 528; the median score for applicants for 2018 was 507. Accepted applicants had total scores ranging from 480 to 528; about 10 accepted applicants had total scores of 487 or below (an average of almost 121 on each section of the test). The total MCAT score most commonly achieved by accepted applicants was 510.

No score on a single MCAT section and no total MCAT score will “guarantee” admission to medical school. Figure 2.1 shows that a substantial number of applicants with total MCAT scores of 512 and above were not accepted. This finding reveals the importance of factors other than MCAT performance — including undergraduate academic performance and a variety of personal characteristics and experiences — in the medical student selection process.

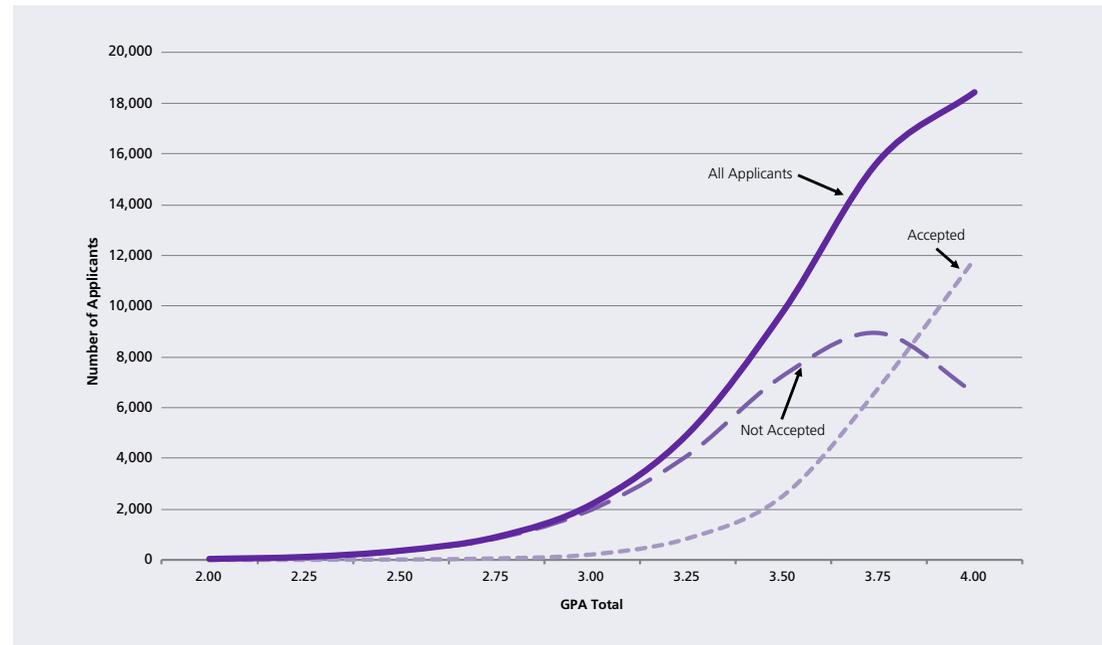


Source: AAMC Data Warehouse as of Jan. 7, 2019.

Figure 2.1. MCAT total score distribution, 2018 applicants.

Undergraduate Grade Point Average

Figure 2.2 presents information about the undergraduate academic performance of 2018 applicants. All applicants had cumulative total undergraduate GPAs from just under 2.00 to 4.00, and most were between 3.75 and 4.00. Accepted applicants' total undergraduate GPAs ranged from just over 2.00 to 4.00; 76 accepted applicants had total GPAs 2.75 or below. The turning point where more applicants were accepted than rejected began with a GPA between 3.75 and 4.00.



Source: AAMC Data Warehouse as of Jan. 7, 2019.

Figure 2.2. Grade point average (GPA) total distribution, 2018 applicants.

As with the MCAT data, the GPA data in Figure 2.2 show that no undergraduate GPA ensures admission to medical school. Although applicants with total GPAs in the range of 3.75 to 4.00 were more likely to be accepted, a significant number of such applicants were not accepted. Again, these findings underscore the importance of other factors in the medical student selection process, such as personal characteristics and life experiences.

MCAT Score

Table 2.1 combines MCAT scores and undergraduate GPAs for all 2018 applicants to medical school who submitted scores from the exam. These results are presented without regard to any other selection factors. For more information, go to aamc.org/data/facts to see acceptance rates for specific demographic groups.

Table 2.1. MCAT Total Scores and Total GPAs of Applicants and Acceptees, 2017-2018 (Aggregated)

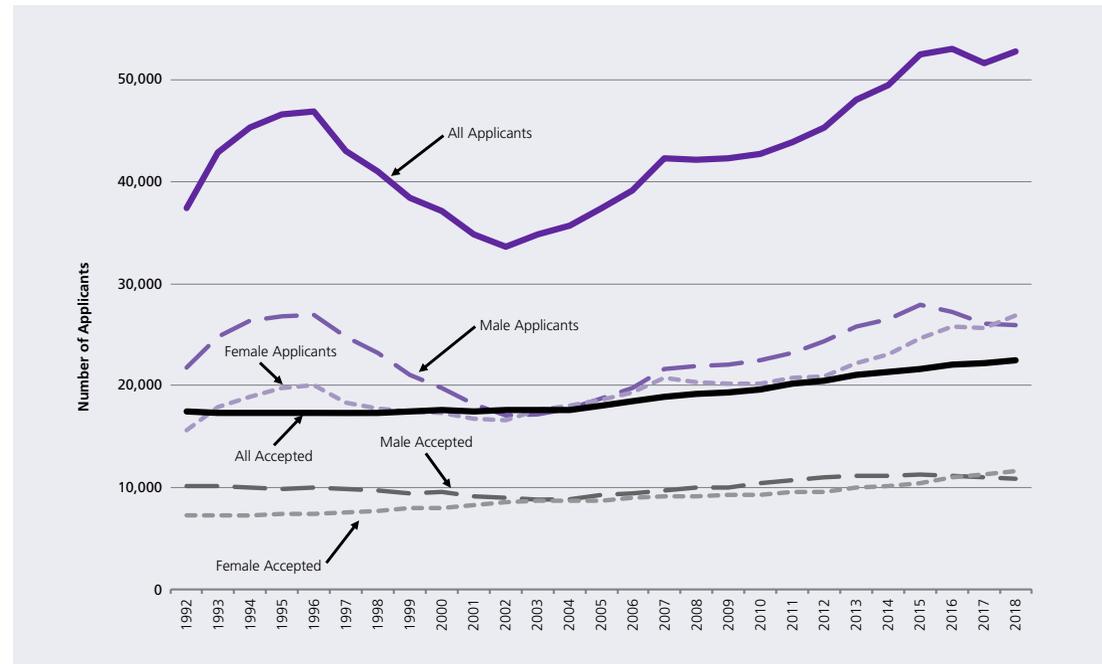
GPA Total	Acceptees (Accs), Applicants (Apps), and Percentage of Applicants Accepted	MCAT Total									
		472-485	486-489	490-493	494-497	498-501	502-505	506-509	510-513	514-517	518-528
3.80-4.00	Acceptees	3	7	40	204	668	1,782	3,207	4,156	3,971	4,213
	Applicants	107	217	482	1,061	2,141	3,500	5,009	5,492	4,772	4,743
	Accs/Apps	2.8%	3.2%	8.3%	19.2%	31.2%	50.9%	64.0%	75.7%	83.2%	88.8%
3.60-3.79	Acceptees	0	6	40	221	707	1,520	2,538	3,014	2,209	1,478
	Applicants	250	416	884	1,692	2,869	4,177	4,929	4,549	2,944	1,774
	Accs/Apps	0.0%	1.4%	4.5%	13.1%	24.6%	36.4%	51.5%	66.3%	75.0%	83.3%
3.40-3.59	Acceptees	5	7	41	190	510	939	1,359	1,475	979	565
	Applicants	382	577	1,108	1,865	2,691	3,366	3,554	2,835	1,559	791
	Accs/Apps	1.3%	1.2%	3.7%	10.2%	19.0%	27.9%	38.2%	52.0%	62.8%	71.4%
3.20-3.39	Acceptees	1	2	26	118	290	471	584	556	347	158
	Applicants	455	559	1,001	1,483	1,864	2,138	1,919	1,383	695	273
	Accs/Apps	0.2%	0.4%	2.6%	8.0%	15.6%	22.0%	30.4%	40.2%	49.9%	57.9%
3.00-3.19	Acceptees	1	5	13	62	136	223	237	228	103	57
	Applicants	499	515	710	959	1,070	1,034	908	650	245	123
	Accs/Apps	0.2%	1.0%	1.8%	6.5%	12.7%	21.6%	26.1%	35.1%	42.0%	46.3%
2.80-2.99	Acceptees	3	2	9	23	37	75	76	48	31	14
	Applicants	459	367	439	481	504	462	361	190	110	36
	Accs/Apps	0.7%	0.5%	2.1%	4.8%	7.3%	16.2%	21.1%	25.3%	28.2%	38.9%
2.60-2.79	Acceptees	0	2	1	10	22	31	17	11	18	-
	Applicants	306	212	278	254	257	175	124	69	42	-
	Accs/Apps	0.0%	0.9%	0.4%	3.9%	8.6%	17.7%	13.7%	15.9%	42.9%	-
2.40-2.59	Acceptees	0	1	2	5	3	11	10	8	3	-
	Applicants	229	120	122	124	87	63	39	30	10	-
	Accs/Apps	0.0%	0.8%	1.6%	4.0%	3.4%	17.5%	25.6%	26.7%	30.0%	-
2.20-2.39	Acceptees	0	0	0	1	4	6	2	2	-	-
	Applicants	126	67	55	37	34	26	21	14	-	-
	Accs/Apps	0.0%	0.0%	0.0%	2.7%	11.8%	23.1%	9.5%	14.3%	-	-
2.00-2.19	Acceptees	0	0	1	0	-	1	-	-	-	-
	Applicants	76	22	20	18	-	11	-	-	-	-
	Accs/Apps	0.0%	0.0%	5.0%	0.0%	-	9.1%	-	-	-	-
1.41-1.99	Acceptees	0	-	1	-	-	-	-	-	-	-
	Applicants	38	-	10	-	-	-	-	-	-	-
	Accs/Apps	0.0%	-	10.0%	-	-	-	-	-	-	-

Note: Cells with dashes contain less than 10 observations, and blank cells contain no observations.

Source: AAMC Data Warehouse as of Jan. 7, 2019.

Sex

Figure 2.3 presents information about the number and sex of the entire applicant pool and accepted applicants for the 1992 to 2018 entering classes. In 2018, the applicant pool for the 2019 entering class decreased 2.1% from the pool for the 2018 entering class. This means the largest annual applicant pool during the past 25 years is the 2018 entering class, a pool of 53,042.



Source: 2018 Matriculating Student Questionnaire.

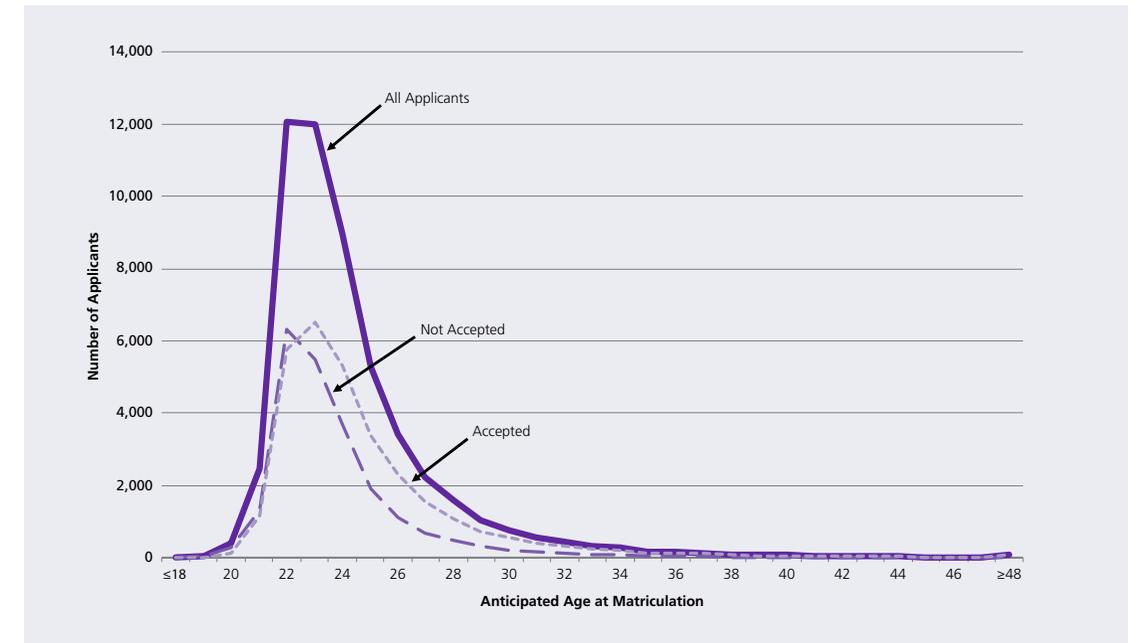
Figure 2.3. Applicants by sex and acceptance status, 1992-2018.

The number of male applicants to the 2018 entering class decreased by 183 from the number of male applicants to the previous year's entering class. The number of female applicants to the 2018 class increased by 1,282 over the number to the previous year's entering class.

Although the number of accepted applicants remained fairly constant from 1992 to 2002, it started to increase in 2003, from 17,542 in that year to a high of 22,483 in 2018. The number of accepted male applicants has fluctuated since 1992, with a low of 8,810 in 2003 and a high of 11,611 in 2018. The number of accepted female applicants has increased, with small fluctuations, from a low of 7,255 in the 1994 entering class to a high of 11,287 in 2017. In 2018, 1,007 more females than males applied to medical school. During the same time span, the gaps between accepted male and accepted female applicants decreased. Accepted male applicants outnumbered accepted female applicants by 2,951 for the 1992 entering class, but for the 2018 entering class, 747 more females than males were accepted.

Age

Figure 2.4 shows that the age distribution for all applicants to the 2018 entering class was broad. The applicants who were between 21 and 28 years of age when they were expected to matriculate totaled 48,015; the number of applicants under 21 was 466; and applicants over 28 numbered 4,296. Figure 2.4 shows a similar finding for accepted applicants to the 2018 entering class; they were between 18 and 53 years of age at the time of expected matriculation.



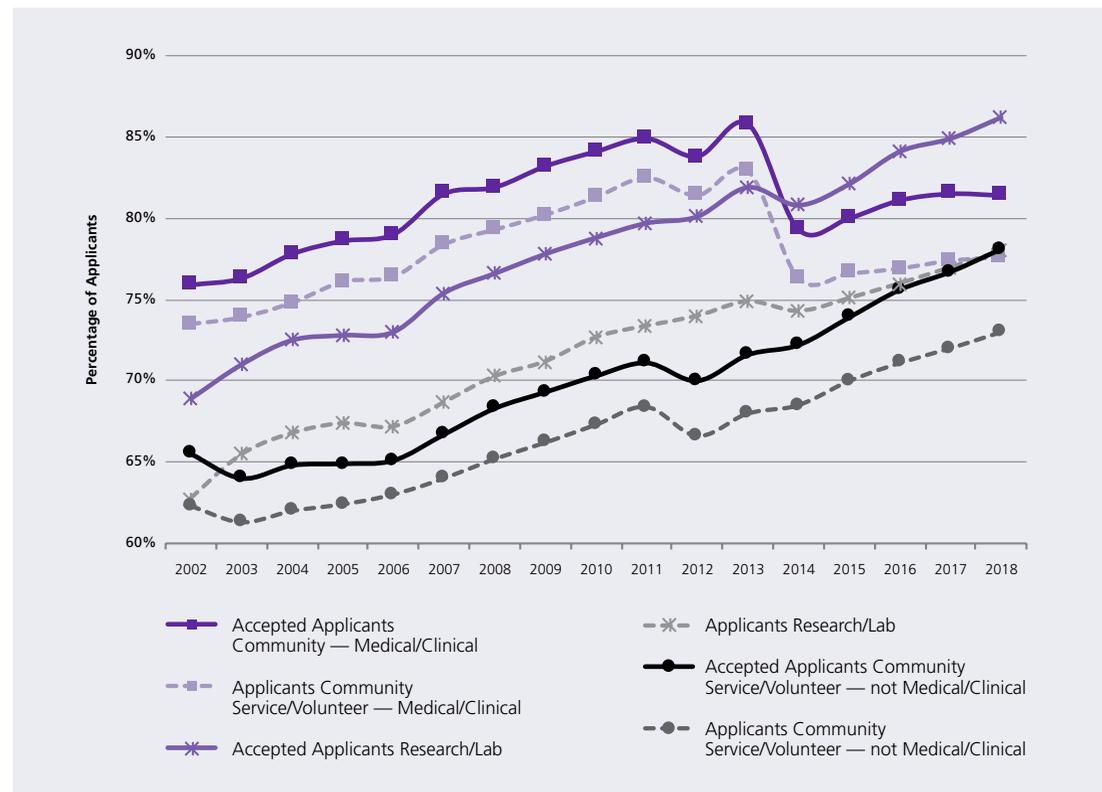
Source: AAMC Data Warehouse as of Jan. 7, 2019.

Figure 2.4. Age distribution, 2018 applicants.

Applicant and Acceptee Experiences

Figure 2.5 summarizes the volunteer and research experiences of AMCAS® applicants and accepted applicants to the 2018 entering class. The figure clearly shows the increase in the percentage of both applicants and accepted applicants reporting volunteer medical, community service, and research experience since 2002:

- 81% of accepted applicants reported community service and/or volunteer medical or clinical experience, an increase of about 5% since 2002.
- 78% of applicants reported community service and/or volunteer medical or clinical experience, an increase of about 4% since 2002.
- 86% of accepted applicants reported research and/or lab experience, an increase of about 17% since 2002.
- 78% of applicants reported research and/or lab experience, an increase of about 15% since 2002.
- 78% of accepted applicants reported nonmedical or nonclinical community service and/or volunteer experience, an increase of about 13% since 2002.
- 73% of applicants reported nonmedical or nonclinical community service and/or volunteer experience, an increase of about 11% since 2002.

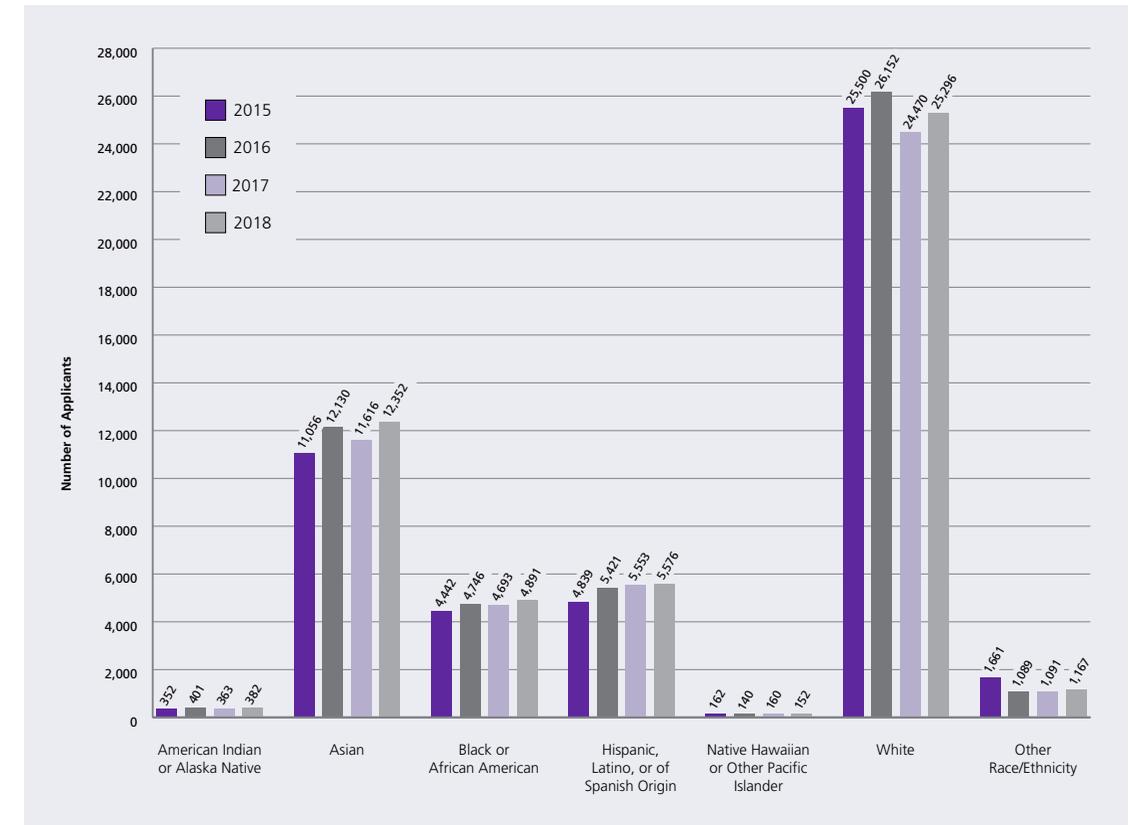


Source: AAMC Data Warehouse as of Jan. 7, 2019.

Figure 2.5. Percentage of AMCAS applicants and accepted applicants reporting selected experiences, 2002-2018.

Self-Identity

Figure 2.6 shows self-reported race and ethnicity data for applicants to the 2015 entering class through the 2018 entering class. Applicants can enter multiple races and ethnicities, so the sum of those shown does not equal the total number of applicants. Also, we couldn't include applicants for whom we have no race and ethnicity data. Additional information for applicants from groups underrepresented in medicine is available in Section 2.



Source: AAMC Data Warehouse as of Jan. 7, 2019.

Note: Self-identities are reported for U.S. citizens or permanent residents only and may be alone or in combination with some other self-identity.

Figure 2.6. Distribution of self-identity, all applicants, 2015-2018.

SECTION 3

Building Toward Greater Diversity

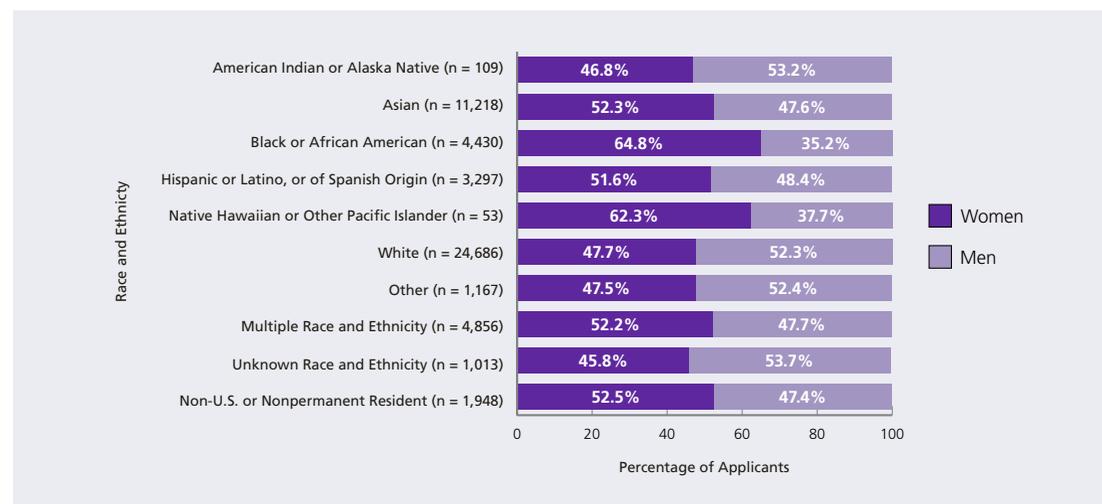
Benefits of Diversity

Increased diversity brings benefits that extend beyond the classroom. Research has shown that diversity in the physician workforce contributes to increased access to health care. Diversity among clinician scientists has been linked to an increase in research dedicated to diseases that disproportionately affect racial and ethnic minorities. This makes increasing diversity and inclusion critical to advancing quality health care for all.

When people hear the word *diversity*, many probably think in terms of race and ethnicity. While representing more racial and ethnic minority populations in medicine is certainly important, the concept of diversity is much more expansive.

Diversity refers to the richness of human differences — socioeconomic status, race, ethnicity, language, nationality, sex, gender identity, sexual orientation, religion, geography, disability, age, and individual aspects such as personality, learning styles, and life experiences. Let's look at diversity through the lens of available AAMC data.

- **First, consider race and ethnicity.** While diversity extends beyond these characteristics, they remain critical components of diversity. The data show, for example, that only 8.2% of applicants are black or African American, 6.2% are Hispanic or Latino, and 0.2% are American Indian or Alaska Native. The AAMC collects detailed data about medical students from different racial and ethnic groups, and a large collection of this data is available at aamc.org/facts. See also Figure 3.1 and Table 3.1. (For more about American Indians and Alaska Natives in medicine, see the AAMC report *Reshaping the Journey: American Indians and Alaska Natives in Medicine* [aamc.org/reshapingthejourney].)

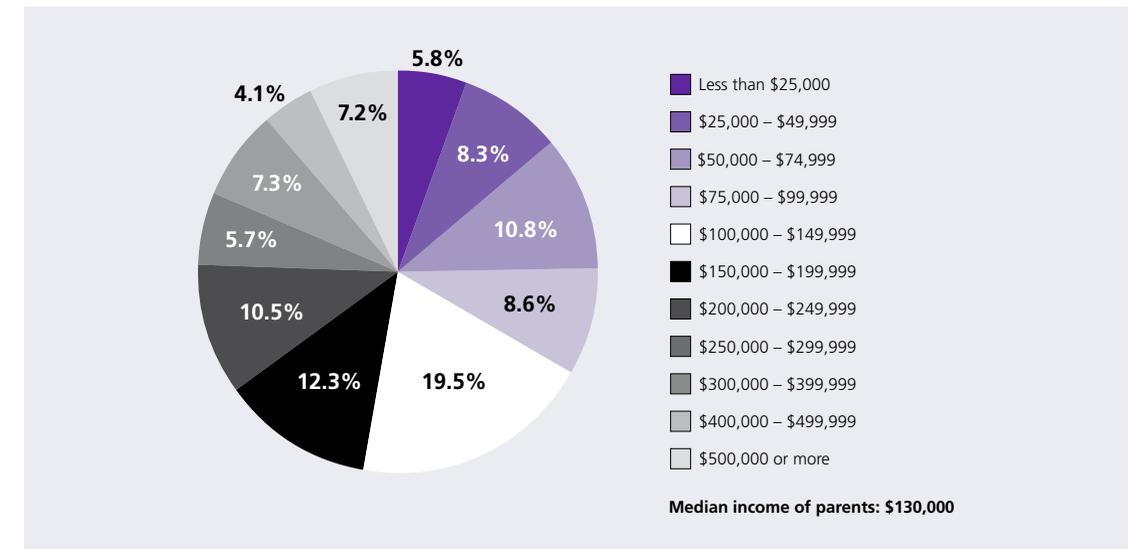


Source: AAMC Data Warehouse as of April 2019.

Note: Applicants who did not report sex were excluded. The Multiple Race and Ethnicity category includes those who selected more than one race/ethnicity response.

Figure 3.1. Applicants to U.S. medical schools, by race, ethnicity, and sex, 2018.

- **What about family income?** This is an area of great imbalance. Parental income of students entering medical school skews heavily to the upper range, with a median income of \$130,000. (That's almost double the estimated U.S. median family income of \$56,516 reported by the U.S. Census Bureau.) Looking at it from another angle, more than one in five students come from a home in which their parents earn \$250,000 or more a year. (See Figure 3.2) For more about family income of medical students, see the October 2018 Analysis in Brief, "An Updated Look at the Economic Diversity of U.S. Medical Students" (aamc.org/download/493046/data/october2018anupdatedlookattheeconomicdiversityofu.s.medicalstud.pdf).



Source: AAMC 2018 Matriculating Student Questionnaire.

Figure 3.2. Parental income of entering medical students, 2018.

- **Another perspective — sex.** On the surface, it appears that male and female applicants are fairly equal in number, but there are instances where that's not the case. You'll see, for example, in Figure 3.1, there are significantly fewer black or African American male applicants than female applicants. To better understand this trend and explore solutions, see the AAMC report *Altering the Course: Black Males in Medicine* (aamc.org/blackmalesinmed).

For more about topics related to diversity in academic medicine:

- Xierali IM, Castillo-Page L, Conrad S, Nivet MA. Analyzing physician workforce racial and ethnic composition associations: geographic distribution (Part II). *Analysis in Brief*. 2014;14(9). <https://www.aamc.org/download/401814/data/aug2014aibpart2.pdf>. Accessed July 6, 2018.
- Walters KL, Simoni JM. Decolonizing strategies for mentoring American Indians and Alaska Natives in HIV and mental health research. *Am J Public Health*. 2008;99:S71-S76. doi:10.2105/AJPH.2008.136127. Accessed July 6, 2018.

Table 3.1. Matriculants by U.S. Medical School, Race, and Ethnicity, 2018

State	Medical School	American Indian or Alaska Native	Asian	Black or African American	Hispanic, Latino, or of Spanish Origin	Native Hawaiian or Other Pacific Islander	White	Other	Unduplicated Total
AL	Alabama	0	35	15	15	1	127	10	186
AL	South Alabama	2	6	5	4	0	59	2	74
AR	Arkansas	4	16	12	7	0	138	3	173
AZ	Arizona	7	22	12	21	2	69	6	117
AZ	Arizona Phoenix	1	22	1	9	0	47	3	80
CA	California	0	31	3	5	0	26	1	64
CA	California Northstate	1	54	2	5	0	35	4	96
CA	Loma Linda	0	67	16	19	3	66	1	168
CA	Southern Cal-Keck	0	81	13	26	0	71	7	186
CA	Stanford	3	40	7	12	1	25	7	90
CA	UC Berkeley/SF Joint Prog	0	6	0	2	0	11	0	16
CA	UC Davis	2	49	3	29	2	42	8	119
CA	UC Irvine	0	52	5	7	1	46	7	104
CA	UC Riverside	0	33	2	12	1	21	7	70
CA	UC San Diego	1	48	12	21	0	58	5	134
CA	UC San Francisco	2	55	25	29	0	56	4	149
CA	UCLA Drew	0	2	12	10	0	0	1	24
CA	UCLA-Geffen	2	82	7	17	1	48	2	151
CO	Colorado	5	43	15	19	0	123	10	184
CT	Connecticut	2	20	16	5	0	68	2	106
CT	Quinnipiac-Netter	0	19	8	16	0	61	2	98
CT	Yale	1	43	6	12	0	46	5	104
DC	George Washington	3	63	18	19	0	87	7	180
DC	Georgetown	2	48	18	15	0	117	7	200
DC	Howard	4	19	79	9	1	8	1	120
FL	FIU-Wertheim	0	24	17	35	0	53	8	120
FL	Florida	1	20	17	16	0	87	5	134
FL	Florida Atlantic-Schmidt	0	13	5	11	1	42	1	65
FL	Florida State	2	15	15	16	0	77	7	120
FL	Miami-Miller	0	42	20	43	0	110	6	205
FL	Nova Southeastern-Patel	0	16	2	6	1	28	5	53
FL	UCF	0	37	1	15	0	75	3	120
FL	USF-Morsani	2	44	11	24	0	113	3	178
GA	Emory	1	29	28	7	0	73	5	136
GA	MC Georgia Augusta	1	72	30	17	0	127	2	230
GA	Mercer	1	17	10	8	0	91	2	122
GA	Morehouse	0	15	61	7	0	13	7	100
HI	Hawaii-Burns	2	48	1	2	10	30	2	72
IA	Iowa-Carver	0	33	6	9	2	111	4	152
IL	Carle Illinois	0	17	3	3	0	7	1	32
IL	Chicago Med Franklin	0	54	12	6	0	104	8	189
IL	Chicago-Pritzker	0	30	14	9	0	38	3	90
IL	Illinois	1	80	21	38	0	182	14	310
IL	Loyola-Stritch	2	44	21	33	0	66	10	165
IL	Northwestern-Feinberg	5	59	11	15	0	82	10	160
IL	Rush	0	32	14	13	0	89	7	144
IL	Southern Illinois	0	5	12	2	0	52	2	71
IN	Indiana	1	58	24	49	2	251	6	360
KS	Kansas	4	28	8	11	0	170	5	211
KY	Kentucky	1	14	6	9	0	143	1	166
KY	Louisville	2	21	11	7	0	131	6	162
LA	LSU New Orleans	2	36	17	16	1	132	3	192

(continued)

Table 3.1. Matriculants by U.S. Medical School, Race, and Ethnicity, 2018 (continued)

State	Medical School	American Indian or Alaska Native	Asian	Black or African American	Hispanic, Latino, or of Spanish Origin	Native Hawaiian or Other Pacific Islander	White	Other	Unduplicated Total
LA	LSU Shreveport	3	6	6	5	0	122	1	136
LA	Tulane	1	40	15	8	1	121	12	191
MA	Boston	3	58	14	19	3	75	6	160
MA	Harvard	0	45	15	17	1	67	8	165
MA	Massachusetts	2	43	5	6	1	111	8	162
MA	Tufts	1	49	15	17	0	130	5	200
MD	Johns Hopkins	2	44	10	14	0	47	7	118
MD	Maryland	1	47	6	13	0	95	7	156
MD	Uniformed Services-Hebert	4	30	15	20	3	123	5	173
MI	Central Michigan	0	19	3	6	0	67	9	99
MI	Michigan	2	36	20	13	0	108	5	168
MI	Michigan State	3	32	31	24	0	96	14	190
MI	Oakland Beaumont	0	38	6	8	1	70	10	123
MI	Wayne State	3	71	23	27	0	156	25	288
MI	Western Michigan-Stryker	0	22	6	7	0	54	1	84
MN	Mayo-Alix	2	22	14	12	1	49	3	103
MN	Minnesota	10	32	21	12	0	184	6	240
MO	Missouri Columbia	1	17	12	6	1	75	5	112
MO	Missouri Kansas City	0	48	9	1	0	48	1	115
MO	Saint Louis	2	63	9	6	0	94	3	177
MO	Washington U St Louis	0	45	12	9	0	64	2	124
MS	Mississippi	2	18	10	8	0	129	5	165
NC	Duke	2	39	18	13	2	61	3	129
NC	East Carolina-Brody	0	15	18	10	0	46	2	86
NC	North Carolina	3	30	27	6	0	128	9	190
NC	Wake Forest	0	26	4	12	0	104	5	140
ND	North Dakota	7	9	1	0	1	63	2	77
NE	Creighton	0	51	3	8	2	115	4	167
NE	Nebraska	0	11	1	4	0	114	1	126
NH	Dartmouth-Geisel	2	18	5	9	0	53	5	92
NJ	Cooper Rowan	0	47	4	4	0	54	3	107
NJ	Rutgers New Jersey	2	70	13	25	0	71	11	178
NJ	Rutgers-RW Johnson	0	64	21	14	0	74	8	179
NJ	SHU-Hackensack Meridian	0	20	5	8	0	27	3	60
NM	New Mexico	2	19	5	33	1	59	6	103
NV	Nevada Las Vegas	1	14	7	8	0	36	0	60
NV	Nevada Reno	1	16	3	13	1	45	2	70
NY	Albany	4	46	2	12	0	76	8	140
NY	Buffalo-Jacobs	2	31	22	13	0	122	5	180
NY	CUNY	1	28	21	11	0	6	0	82
NY	Columbia-Vagelos	0	36	13	14	0	74	6	138
NY	Cornell-Weill	0	49	14	12	1	39	2	106
NY	Einstein	0	53	9	25	1	87	9	183
NY	Mount Sinai-Icahn	2	45	13	12	0	67	4	140
NY	New York Medical	0	66	6	10	0	124	14	210
NY	New York University	0	31	7	8	1	58	2	101
NY	Rochester	2	25	12	13	0	56	2	103
NY	SUNY Downstate	2	73	27	23	1	88	7	203
NY	SUNY Upstate	0	36	19	13	0	97	3	169
NY	Stony Brook	0	47	3	9	0	67	3	136
NY	Zucker Hofstra Northwell	2	30	7	8	0	54	8	99
OH	Case Western Reserve	2	76	29	17	0	94	6	215

(continued)

Table 3.1. Matriculants by U.S. Medical School, Race, and Ethnicity, 2018 (continued)

State	Medical School	American Indian or Alaska Native	Asian	Black or African American	Hispanic, Latino, or of Spanish Origin	Native Hawaiian or Other Pacific Islander	White	Other	Unduplicated Total
OH	Cincinnati	0	24	17	15	1	138	5	179
OH	Northeast Ohio	0	60	7	3	0	63	9	145
OH	Ohio State	2	51	22	24	2	119	9	202
OH	Toledo	1	51	10	7	0	103	9	175
OH	Wright State-Boonshoft	1	26	20	4	0	73	3	120
OK	Oklahoma	17	39	6	4	0	118	2	165
OR	Oregon	1	34	1	8	1	120	9	160
PA	Drexel	1	76	19	14	0	145	9	256
PA	Geisinger Commonwealth	0	28	5	11	0	72	3	110
PA	Jefferson-Kimmel	1	62	7	16	0	178	7	268
PA	Penn State	0	37	5	5	0	100	11	152
PA	Pennsylvania-Perelman	0	36	18	26	1	88	6	152
PA	Pittsburgh	0	43	21	5	0	90	4	162
PA	Temple-Katz	1	39	18	27	0	120	7	200
PR	Caribe	1	0	3	74	0	8	0	75
PR	Ponce	0	4	3	83	0	12	1	94
PR	Puerto Rico	1	0	2	110	0	10	0	110
PR	San Juan Bautista	0	2	2	57	0	4	0	61
RI	Brown-Alpert	2	37	16	19	1	78	4	143
SC	MU South Carolina	3	16	24	11	0	125	3	171
SC	South Carolina	1	19	6	3	1	74	3	100
SC	South Carolina Greenville	1	9	12	6	0	78	2	104
SD	South Dakota-Sanford	4	1	0	1	0	64	1	67
TN	East Tennessee-Quillen	0	9	1	1	0	62	4	72
TN	Meharry	4	10	80	12	1	9	4	113
TN	Tennessee	0	27	6	9	0	132	1	170
TN	Vanderbilt	1	17	10	9	0	64	1	93
TX	Baylor	0	70	4	24	0	98	3	186
TX	Texas A & M	1	57	2	11	0	63	4	126
TX	Texas Tech	0	40	11	28	0	113	5	180
TX	Texas Tech-Foster	1	50	2	24	0	35	1	100
TX	UT Austin-Dell	0	16	2	8	0	28	1	50
TX	UT Houston-McGovern	1	83	21	32	0	123	4	240
TX	UT Medical Branch	2	62	21	41	0	124	6	230
TX	UT Rio Grande Valley	0	14	8	16	0	21	1	54
TX	UT San Antonio-Long	2	56	14	43	0	139	2	216
TX	UT Southwestern	4	103	21	37	0	99	2	230
UT	Utah	0	13	0	6	1	105	5	125
VA	Eastern Virginia	2	43	18	9	2	86	4	151
VA	Virginia	0	39	12	18	0	100	4	156
VA	Virginia Commonwealth	0	69	9	3	0	101	9	184
VA	Virginia Tech Carilion	0	13	0	2	1	31	0	43
VT	Vermont-Larner	0	17	9	9	0	91	5	119
WA	U Washington	7	51	8	12	2	204	7	271
WA	Washington State-Floyd	0	16	0	5	0	41	1	60
WI	MC Wisconsin	0	44	14	14	5	181	6	250
WI	Wisconsin	4	42	5	9	2	119	0	171
WV	Marshall-Edwards	1	10	5	1	0	69	0	79
WV	West Virginia	1	16	3	6	1	87	1	112

Note: Data are not reflective of the number of individuals in each demographic category, but rather the number of times a particular race or ethnic category was selected. One individual can self-identify with multiple groups.

Source: AAMC Data Warehouse as of April 2019.

SECTION 4

Academic Preparation

Premedical Preparation

College coursework plays a large role in your preparation for medical school. Your major field of study, the mastery of specific scientific principles, and advanced coursework all contribute to that preparation.

Choice of Major

Contrary to what many college students believe, there's no such thing as the "best" major. **In fact, no medical school requires a specific major of its applicants.** Admissions committees welcome students whose intellectual curiosity leads them to a wide variety of disciplines. Regardless of the major you choose, getting medically related experience can help you learn more about what working in a medical environment is like. To create a handy resource, fill out the Getting Medically Related Experiences Worksheet.

Table 4.1 displays MCAT scores and GPAs for applicants and matriculants to U.S. medical schools for the 2018-2019 school year by primary undergraduate major. MCAT scores and GPAs are displayed by mean or median and standard deviation (SD).

There's very little difference in median total MCAT® scores among those who major in the humanities, social sciences, and biological sciences. Table 4.1 shows that students from many different majors are accepted to medical school, as long as they have the basic science preparation.

College students take advantage of a variety of programs to prepare for medical school and a career in medicine. Figure 4.1 shows the percentage of students who participated in several popular programs.

Table 4.1. MCAT Scores and GPAs for Applicants and Matriculants to U.S. Medical Schools, by Primary Undergraduate Major, 2018-2019

Applicants	MCAT CPBS		MCAT CARS		MCAT BBLs		MCAT PSBB		Total MCAT		GPA Science		GPA Non-Science		GPA Total		Total Applicants
	Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD	
Biological Sciences	126.3	2.7	125.7	2.7	126.7	2.7	126.8	2.7	505.5	9.2	3.48	0.42	3.73	0.27	3.58	0.34	29,443
Humanities	126.4	2.6	127.0	2.5	126.7	2.6	127.4	2.6	507.6	8.6	3.42	0.45	3.69	0.29	3.57	0.32	1,689
Math and Statistics	127.8	2.8	126.8	2.8	127.4	2.8	127.5	2.8	509.4	9.7	3.57	0.39	3.71	0.29	3.62	0.34	353
Other	126.1	2.7	125.7	2.7	126.4	2.7	126.7	2.8	505.0	9.3	3.46	0.43	3.71	0.28	3.57	0.33	9,546
Physical Sciences	127.5	2.6	126.3	2.7	127.0	2.6	127.1	2.7	508.0	9.0	3.54	0.39	3.68	0.30	3.60	0.33	4,807
Social Sciences	125.9	2.7	126.2	2.7	126.2	2.8	127.3	2.7	505.6	9.3	3.37	0.47	3.64	0.32	3.51	0.35	5,143
Specialized Health Sciences	125.4	2.9	125.2	2.8	125.7	2.9	126.1	2.9	502.4	10.1	3.41	0.47	3.68	0.31	3.55	0.35	1,796
All Applicants	126.3	2.7	125.9	2.7	126.6	2.7	126.8	2.7	505.6	9.3	3.47	0.43	3.71	0.28	3.57	0.34	52,777

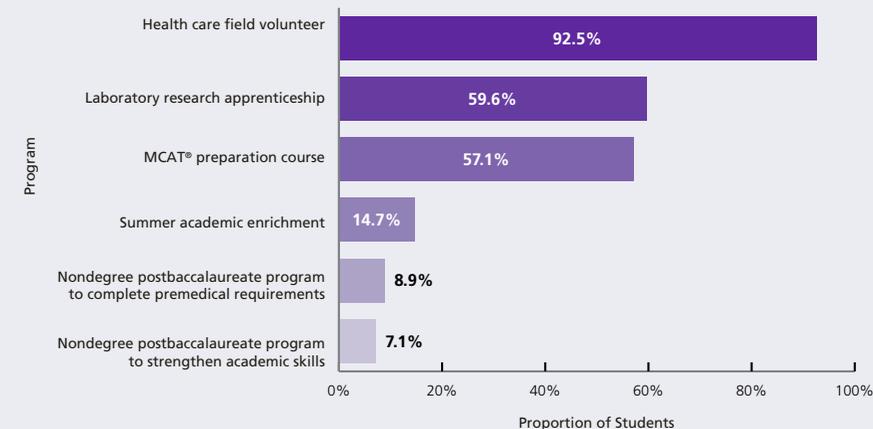
Matriculants	MCAT CPBS		MCAT CARS		MCAT BBLs		MCAT PSBB		Total MCAT		GPA Science		GPA Non-Science		GPA Total		Total Matriculants
	Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD	
Biological Sciences	127.7	2.1	127.0	2.3	128.1	2.1	128.2	2.1	511.0	6.5	3.67	0.30	3.82	0.20	3.73	0.24	11,843
Humanities	127.6	2.1	128.0	2.1	127.9	2.0	128.6	2.0	512.1	6.0	3.62	0.32	3.79	0.21	3.71	0.23	797
Math and Statistics	128.9	2.0	127.9	2.2	128.5	2.1	128.8	2.0	514.1	6.5	3.71	0.28	3.80	0.22	3.74	0.24	168
Other	127.6	2.1	127.0	2.3	127.9	2.0	128.3	2.0	510.8	6.3	3.63	0.31	3.79	0.21	3.72	0.23	3,843
Physical Sciences	128.6	2.0	127.4	2.3	128.2	2.1	128.4	2.1	512.6	6.5	3.69	0.29	3.77	0.23	3.73	0.24	2,214
Social Sciences	127.3	2.2	127.5	2.3	127.7	2.2	128.7	1.9	511.2	6.4	3.60	0.32	3.75	0.24	3.68	0.25	2,107
Specialized Health Sciences	127.3	2.1	126.8	2.4	127.5	2.2	128.1	2.1	509.7	6.6	3.63	0.31	3.78	0.24	3.71	0.25	650
All Applicants	127.7	2.1	127.1	2.3	128.0	2.1	128.3	2.1	511.2	6.5	3.65	0.30	3.80	0.21	3.72	0.24	21,622

Notes: In April 2015, the AAMC launched the current version of the MCAT exam. Scores are reported in four sections: (1) Chemical and Physical Foundations of Biological Systems (CPBS), (2) Critical Analysis and Reasoning Skills (CARS), (3) Biological and Biochemical Foundations of Living Systems (BBLs), and (4) Psychological, Social, and Biological Foundations of Behavior (PSBB). Some medical schools accept scores from both the current and previous versions of the exam. Accordingly, applicants vary in which scores they include with their applications.

In 2018, 52,777 individuals applied to U.S. medical schools. Among them, 51,816 applied with MCAT scores, and 52,518 provided undergraduate GPAs (UGPAs). Among those who applied with MCAT scores, almost all applicants (i.e., greater than 98.6%) applied with scores from the current version of the exam. The means and SDs of MCAT scores are calculated based on data from applicants who applied with MCAT scores from the current version of the exam. Specifically, 51,067 applicants and 20,642 matriculants in 2018 were included in the MCAT score calculations.

The means and SDs of UGPAs are calculated based on data from applicants who applied with UGPAs. Specifically, 52,518 applicants and 21,441 matriculants in 2018 were included in the calculations. Each academic year includes applicants and matriculants who applied to enter medical school in the fall of the given year. For example, academic year 2018-2019 represents the applicants and matriculants who applied to enter medical school during the 2018 application cycle.

Source: AAMC Applicants and Matriculants Data Table A-17; Nov. 9, 2018.



Source: AAMC 2018 Matriculating Student Questionnaire.

Figure 4.1. How do students prepare for medical school?

Scientific Preparation

Medical schools do recognize the importance of a strong foundation in mathematics and the natural sciences — biology, chemistry, and physics — and most schools have established minimum course requirements for admission. See a list of commonly required or recommended subjects in Table 4.2.

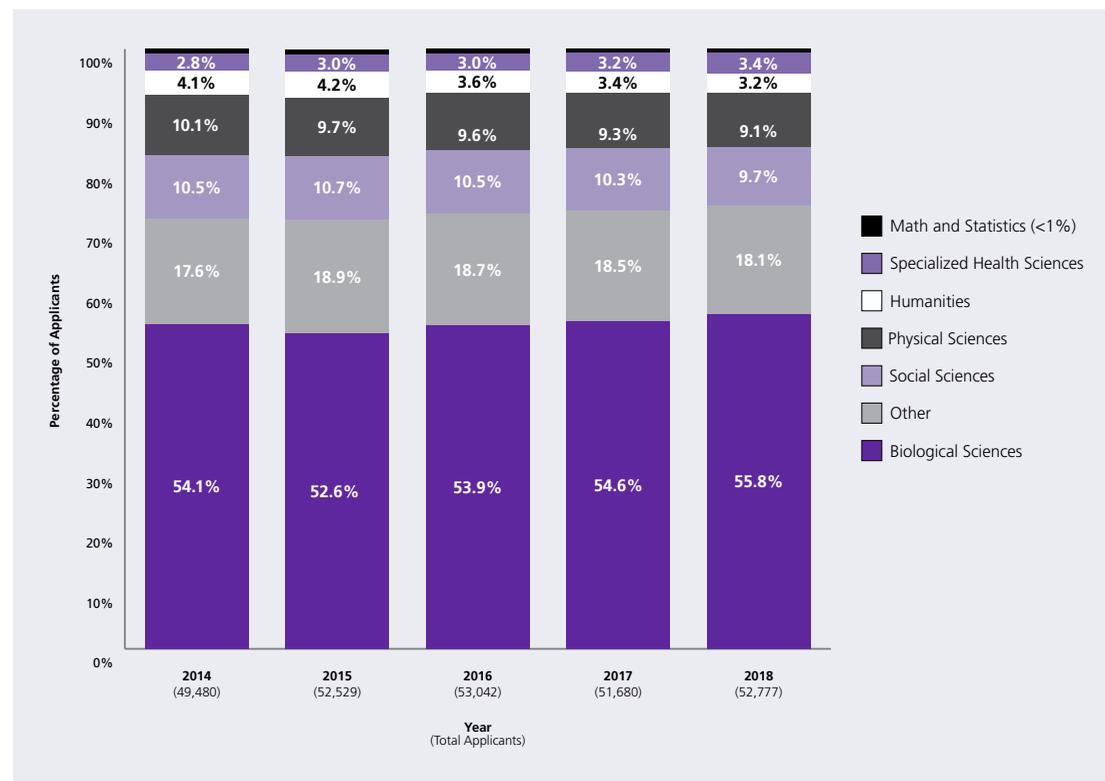
Table 4.2. Subjects Often Required or Recommended by U.S. Medical Schools*

Required or Recommended Subject
Biochemistry
Biology
Biology/Zoology
Calculus
College Mathematics
English
Humanities
Inorganic Chemistry
Organic Chemistry
Physics
Social Sciences

*For specific requirements and recommendations, see the individual school profiles on the Medical School Admission Requirements™ website: aamc.org/msar (subscription required). You can also view coursework requirements on individual medical school websites.

Source: AAMC Medical School Admission Requirements website, 2018.

Figure 4.2 presents information about the undergraduate majors of all medical school applicants to entering classes for the years 2014-2018. Over the past five years, more than half of all applicants reported undergraduate biological science majors, while the remainder reported a variety of majors in the humanities, mathematics and statistics, physical sciences, social sciences, specialized health sciences, and a broad “other” category. The proportion of these majors has remained relatively constant over time, despite annual fluctuations in the number of applicants.



Source: AAMC Data Warehouse as of April 2019.

Figure 4.2. Undergraduate major distribution, all applicants, 2014-2018.

Career Changers and Gap-Year Students: Not All Coursework Is “Evergreen”

If you’ve had a significant break between completing coursework and applying to medical school, check with the schools or look at the MSAR® site for details on the oldest date coursework can be accepted (aamc.org/msar).

Prehealth Advisors

Depending on the individual school, prehealth advisors work on a full- or part-time basis and may be a faculty member (often in a science department), a staff member in the office of an academic dean or in the career center, the director or staff in an advising office for preprofessional students, or a physician in part-time practice. If your school does not have a prehealth advisor, contact the National Association of Advisors for the Health Professions (NAAHP) about getting a member volunteer to help you. For more information, visit naahp.org/student-resources/find-an-advisor. You can find a link to each school’s admission requirements page here: students-residents.aamc.org/applying-medical-school/article/required-premedical-coursework-and-competencies.

You can use the Tracking Lab, Volunteer, and Work Experiences Worksheet to track your experiences as you go along.

SECTION 5

All About the MCAT® Exam

Role of the MCAT Exam

The MCAT exam helps admissions officers identify which students are likely to succeed in medical school. That’s done by identifying those students who not only have a basic knowledge of the natural, behavioral, and social sciences — which provides the foundation necessary in the early years of medical school — but also those with strong critical analysis and reasoning skills.

It can be argued that college grades essentially do the same thing. But because an “A” at one school is not necessarily equivalent to an “A” at another, admissions officers don’t have a standard measure against which to evaluate students. The MCAT exam fills that void. As a result, virtually every medical school in the United States, and many in Canada, requires applicants to submit recent MCAT scores.

The AAMC has developed resources and practice products to help you throughout your preparation to take the MCAT exam. To get started:

- Review **What’s on the MCAT Exam?**, the complete list of content and skills you will need to know for test day (students-residents.aamc.org/mcatexam). It offers an overview of the exam sections and details about the foundational concepts and skills you’ll be asked to demonstrate on the exam. Each concept or skill has a link to a relevant Khan Academy MCAT Collection Tutorial.
- Create a study plan (offers.aamc.org/mcat-study). This will keep you organized, focused, and on track.
- Discover free resources to help you study for the exam. These resources include:
 - **How I Prepared for the MCAT Exam Testimonials**, where students share study tips and approaches they used in preparing for the MCAT exam. students-residents.aamc.org/applying-medical-school/taking-mcat-exam/how-i-prepared-mcat-exam.
 - **The Khan Academy MCAT Collection**, which contains sample content from all four sections of the exam plus thousands of videos and review questions. (The collection was created by Khan Academy with support and funding from the AAMC and the Robert Wood Johnson Foundation.) khanacademy.org/test-prep/mcat or students-residents.aamc.org/applying-medical-school/article/khan-tutorials-practice-cars.
 - **Road Maps to Psychology, Sociology, and Biochemistry Textbooks**. Publishers of introductory psychology, sociology, and biochemistry textbooks have provided detailed information about where in their textbooks to find the concepts tested on the exam. Some textbooks in these road maps are free and available online and in e-book format. aamc-orange.global.ssl.fastly.net/production/media/filer_public/af/5c/af5c52a7-3e4a-4f61-889e-a5edd7490e5e/essentials_2019_final_10152018.pdf
Find more free resources at students-residents.aamc.org/applying-medical-school/article/creating-study-plan-mcat-exam/.

The AAMC has official test-preparation products, written by the test developers, to help you practice. Full-length practice tests and other products allow you to practice with large banks of questions. Learn more at [aamc.org/mcatprep](https://www.aamc.org/mcatprep). Everything in this section can be found there.

Test Dates, Registration, and Fees

The MCAT is administered from January through September at testing locations in the United States and around the world. (The dates are posted on the MCAT website at students-residents.aamc.org/mcatregister.) For the policies and procedures related to registration, test day, scoring, and more, see the *MCAT® Essentials* (students-residents.aamc.org/mcatessentials), required reading for all examinees!

Get the most complete and up-to-date information about the MCAT exam by reading the *MCAT® Essentials* before you register for the exam. After you've read it, you can register online through the MCAT Registration System. There's a \$315 fee for the exam, which covers both the cost of the test itself and the distribution of your scores. If you register late, change your registration, or test at an international site, there are additional charges.

Many medical schools prefer that applicants take the MCAT exam in the spring rather than in the summer because of the short time between the availability of late-summer scores and school application deadlines, so consider taking the MCAT exam 12 to 18 months before your expected entry into medical school. However, it's important to remember that you should not take the exam before you feel ready. With limits in place for how often you can take the MCAT exam in a given year or over a lifetime, you should have completed basic coursework and feel comfortable with your knowledge of introductory-level biology, physics, psychology, and sociology and first-semester biochemistry, as well as general chemistry and organic chemistry, before you take the exam.

Testing With Accommodations

The AAMC is committed to giving everyone an opportunity to demonstrate proficiency on the MCAT exam, and that includes ensuring access to people with disabilities in accordance with relevant law. If you have a disability or medical condition that you believe requires an adjustment to the standard testing conditions, we encourage you to apply for accommodated testing. For information about application timeframes and types of documentation needed, as well as how to apply, please see [aamc.org/mcat/accommodations](https://www.aamc.org/mcat/accommodations).

Score Reporting

Your scores will be available in the MCAT Score Reporting System, accessible through the AAMC website at apps.aamc.org/score-reporting-web. No matter which option you use for sending your scores to medical schools, all scored attempts will be sent to them. You can't withhold any of your MCAT scores from your applications.

You have two options for sending your MCAT scores to medical schools:

- **Send your scores to the AMCAS® service:** The AMCAS service is the American Medical College Application Service®, which most U.S. medical schools take part in and which you can use to manage sending your application to participating institutions. Your MCAT scores are automatically released to AMCAS. This means you don't need to take any additional steps to insert your scores into your application. View a list of participating schools at [aamc.org/amcas](https://www.aamc.org/amcas). Read more about AMCAS in Section 7.
- **Send your scores to non-AMCAS schools:** If you're applying to non-AMCAS schools and programs, you'll need to send your official score report electronically or by mail. Instructions are detailed in the MCAT Score Reporting System (apps.aamc.org/score-reporting-web).

Filling out the Getting Ready to Take the MCAT® Exam Worksheet can help you prepare for the exam.

SECTION 6

Choosing Your Schools

Overall Mission of the School

Many of the differences among medical schools are obvious. Some schools are located on the East Coast, some on the West. Some are private; others, public. The important thing is that all LCME-accredited medical schools use the same standards to prepare their students to become physicians. Some have a large entering class; others, small. Some have multiple regional campuses. And medical schools vary in the content of their courses, in the way they teach, and even in the way they grade and evaluate students.

But the differences go even deeper, and at a core level, medical schools have diverse missions and priorities.

Kicking Off Your Research

You can research schools in several ways to identify the ones that best match your strengths, interests, and goals. Here are some factors to consider in making your selection:

- Research reputation and opportunities.
- Community-based experiences and opportunities.
- Geographic location.
- Teaching methods.
- Program of elective courses.
- Faculty mentorship.
- Placement of recent graduates in specialty residencies.
- Residency programs at hospitals affiliated with the school.

The Medical School Admission Requirements™ website: Start your research with the medical school profiles on this site, [aamc.org/msar](https://www.aamc.org/msar). Here, each institution includes a clear mission statement and a description of its selection factors.

School websites and literature: Review information provided by the schools themselves. Although the specific content varies by school, each includes detailed material for prospective students.

Advisors: Your prehealth advisor or career counselor can recommend schools likely to be a good fit for you. These advisors have a lot of insight about the application process, so don't overlook this resource. Also, attend health career fairs to speak with admissions staff from medical schools and participate in premed or prehealth student organizations.

Educational Program

There's likely going to be a strong relationship between a school's mission and its curriculum. You'll be able to gauge whether an institution's objectives align with your interests by analyzing course requirements and elective programs. A medical school with a mission to graduate more primary care doctors may, for

example, have a track that provides additional training in that area. A school that emphasizes research may require students to write a thesis or devote an extended period of time to scholarly pursuits.

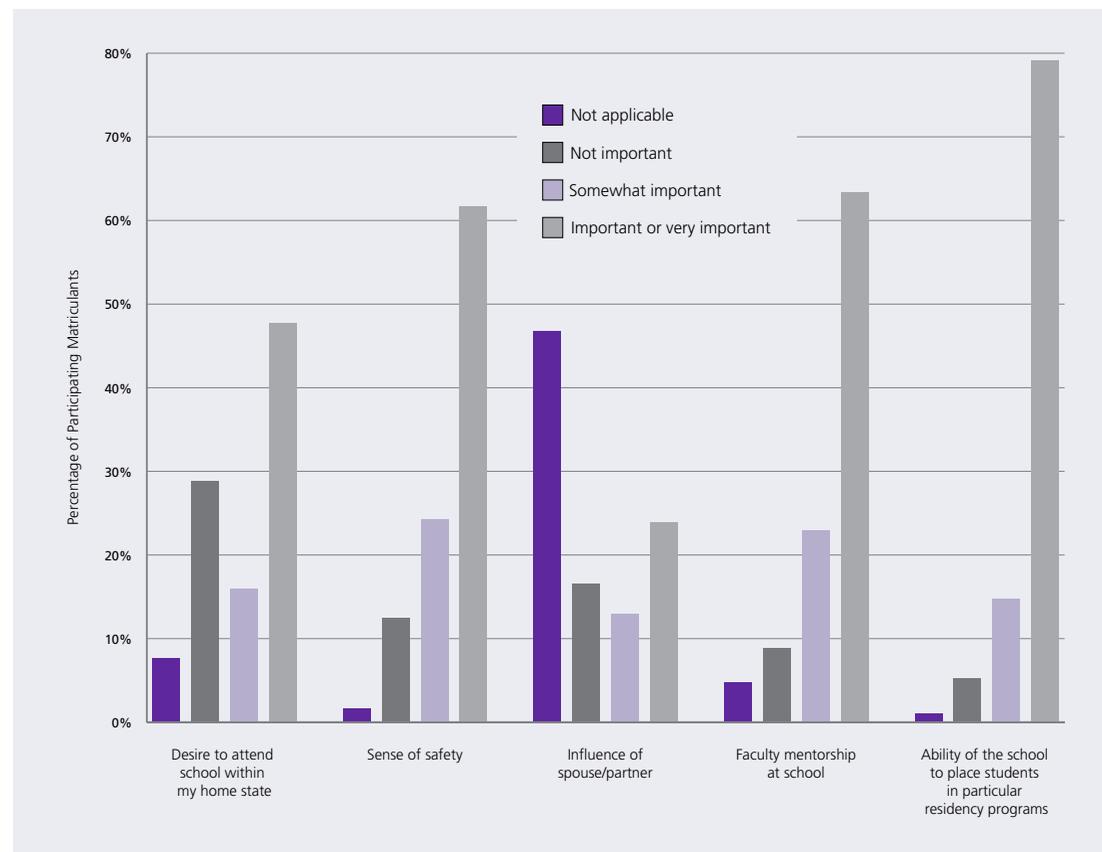
As you research, also consider what teaching methods you find most effective. Although most medical schools use an educational model that combines a variety of methods, every program adopts its own design. A good starting point for your exploration is a school's website, as well as the AAMC curriculum directory (aamc.org/initiatives/cir).

How Do GPA and MCAT Scores Factor In?

Don't choose schools based solely on where you think your grades and MCAT® scores will be accepted. While your educational record is important and admissions officers seek candidates who are likely to succeed academically in their programs, it's important to realize that academics alone do not predict who will become an effective physician, and admissions officers know that all too well.

The fact that there are many instances in which a "high-scoring" applicant is not accepted to a medical school — and in which an applicant with lower-than-average grades and scores is — tells you admissions officers must be looking at other factors.

Students weigh many factors when deciding where to apply and attend medical school. See which ones were most important to current students in Figure 6.1.



Source: Matriculating Student Questionnaire 2018.

Figure 6.1. Matriculating students' responses to this question: In choosing your medical school, how important were the following factors?

Special Regional Opportunities

Finally, be aware that some states without a public medical school participate in special interstate and regional agreements that give their residents access to public medical schools in other states. Currently, there are five interstate agreements:

- The Delaware Institute of Medical Information and Research
dhss.delaware.gov/dhss/dhcc/dimer.html
302-577-3240
800-292-7935
- The Finance Authority of Maine's Access to Medical Education Program
famemaine.com/fi
800-228-3734
- University of Utah School of Medicine Idaho Contract
medicine.utah.edu/students/programs/md/admissions/residency-non-residency.php
801-581-7498
- The Western Interstate Commission for Higher Education (Alaska, Ariz., Commonwealth of the Northern Mariana Islands, Colo., Hawaii, Mont., Nev., N.M., N.D., Utah, Wyo.)
wiche.edu/psep/medi
303-541-0200
- The WWAMI Medical Education Program (Wash., Wyo., Alaska, Mont., Idaho) Program
uidaho.edu/academics/wwami
208-885-2029.

Learn more about these regional opportunities by visiting their websites or calling their program offices.

The Factors to Weigh Before Applying Worksheet can help you determine which factors are most important to you.

Applying to Medical School

Responsibilities of the Medical School Applicant

As a medical school applicant, you have certain responsibilities. Some of the most critical are:

- Meeting all deadlines.
- Completing the AMCAS® application accurately.
- Knowing the admission requirements at each school.
- Promptly updating your AMCAS application with any change in contact information.
- Responding promptly to interview invitations.
- Filing for financial aid as soon as possible.
- Withdrawing from the schools you will not attend.

For more details, read “AAMC Application and Acceptance Protocols for Applicants and Admissions Officers Overview” at the end of this section.

AMCAS

AMCAS is a centralized medical school application processing service offered by the AAMC and used by almost every medical school in the country. This service does not screen applicants; rather, it provides admissions officers with information and tools to select the applicants who are the best fit for their institution.

AMCAS offers many benefits to applicants. The most obvious one is it allows you to apply to as many medical schools as you want with a single application (although many schools require a secondary application, too). It also gives you a single point of transmission for official transcripts, letters of evaluation, and other supporting documentation.

Even if you’re not yet ready to begin the application process, you can familiarize yourself with it at aamc.org/amcas. There, you’ll find an application overview, tips for completing an application, frequently asked questions, video tutorials, and the comprehensive *AMCAS® Applicant Guide*.

If you have previously registered for the MCAT® exam, the Fee Assistance Program, or other AAMC programs and services, you’ve already created an AAMC username and password and received an AAMC ID number. Use this same information to access the AMCAS application site. If you don’t already have an AAMC ID number, you’ll need to register online to create a username and password before you begin your application.

The AMCAS application has nine sections. You can save your work and return to your application as many times as you like until you finish and are ready to submit it. Here’s what you’ll need to include:

1. Identifying information.
2. Schools attended.
3. Biographical information.
4. Coursework.

Application and Admission Cycle

The AMCAS application usually opens to applicants in early May of each year and opens for submission in early June. Participating schools receive verified application data from AMCAS in late June.

The deadlines for receipt of primary applications to medical schools that participate in AMCAS are from the Early Decision Deadline in early August to mid-December. However, there’s no single application timetable because each school establishes its own deadlines. Find specific dates on medical schools’ websites and in the school listings on the Medical School Admission Requirements™ website (aamc.org/msar).

Medical schools vary in the timing of their admission decisions. Most schools use a system of rolling admissions, selecting students for interviews and making admission decisions as applications are received, rather than waiting until after a specific deadline date to begin their evaluation process. All medical schools must wait until mid-October to start offering acceptance letters. Find out if a medical school uses a rolling admissions system by checking its website.

For the 2019 AMCAS application cycle, students applied to 16 schools, on average. The U.S. medical schools that are not participating in AMCAS for the 2018 entering class are mostly in Texas. The seven public medical schools in Texas listed below participate in the Texas Medical and Dental School Application Service (TMDSAS). Learn more about this application service and apply to these schools through TMDSAS at utsystem.edu/tmdsas. Applicants pursuing MD-PhD degrees at all but the Paul L. Foster School of Medicine can apply through AMCAS, however.

If you’re interested in schools that don’t participate in AMCAS, please contact them directly for application instructions.

- Sophie Davis Biomedical Education Program/CUNY School of Medicine.
- McGovern Medical School at the University of Texas Health Science Center at Houston.
- Texas A&M Health Science Center College of Medicine.
- Texas Tech University Health Sciences Center School of Medicine.
- Texas Tech University Health Sciences Center Paul L. Foster School of Medicine.
- University of Texas Southwestern Medical School.
- University of Texas Medical Branch School of Medicine.
- University of Texas Health Science Center at San Antonio Long School of Medicine.

You should also contact schools directly for application information if you wish to pursue a joint degree program, such as a baccalaureate-MD or an MD-PhD.

As far as interviews go, many admissions committees begin meeting with candidates in the late summer and continue through spring. However, most interviews are held during the winter months.

Application Fees

Medical school application fees fall into four general categories:

- **AMCAS Application.** For the 2020 application cycle, the AMCAS application fee plus designation to one school was \$170, and it cost \$40 for each additional school. Check the AMCAS website for the latest application fee information. Remember, some schools don't use AMCAS, and you may pay different fees in those instances.
- **Secondary Application.** In 2019, fees for secondary applications ranged from \$0 to \$200.
- **College Service Fees.** Your college registrar may charge a small fee to send your transcript to AMCAS. Occasionally, you'll incur a fee to send your letters of evaluation to AMCAS.
- **MCAT Exam Fees.** Although technically not part of the application fee, the costs associated with the MCAT exam are a necessary component of the overall process. The initial registration fee for the MCAT exam is currently \$315 and covers the cost of the exam and distribution of your scores. In addition, you may incur fees for late registration, changes to your registration, or testing at international test sites. Read more about the MCAT exam in Section 5 and get up-to-date information on the MCAT website (aamc.org/mcat).

For more information on application fees, go to aamc.org/first/factsheets.

Fee Assistance Program

The AAMC believes the cost of applying to medical school should not be a financial barrier to people interested in becoming physicians.

The AAMC Fee Assistance Program helps MCAT examinees and AMCAS applicants who, without financial assistance, would be unable to take the MCAT exam and apply to medical schools that use the AMCAS application. Visit the Fee Assistance Program website at aamc.org/fap for details about the program's eligibility requirements and to access the application. You'll be able to use your Fee Assistance Program award benefits for up to two calendar years. Benefits expire on Dec. 31 the year after they are awarded, regardless of when in the year you apply for, and receive, the award. **You may only apply for fee assistance once per calendar year. Fee Assistance Program benefits are never retroactive.**

Applicants who are approved for fee assistance in 2019 will receive MCAT, AMCAS, and MSAR® benefits.

MCAT Benefits

- Reduced registration fees for up to four MCAT exam dates.
- Reduced rescheduling fees for MCAT exam dates.
- A suite of MCAT prep products and resources (you'll receive more details about these benefits if you're awarded fee assistance).
- Up to \$800 toward an updated psychoeducational or medical evaluation if it's required to support your MCAT accommodations application.

Regardless of how many times you're awarded fee assistance, you'll receive MCAT prep product benefits only once.

MSAR Benefits

- Complimentary access to the MSAR website until Dec. 31, 2020 (\$56 value).

AMCAS Benefits

- Waiver for all AMCAS fees for one application submission with up to 20 medical school designations (\$930 value). Additional fees will be charged for each medical school designation beyond the initial set of 20.

AAMC Application and Acceptance Protocols for Applicants and Admissions Officers Overview

The AAMC recommends certain protocols, outlined in the following boxes, to help ensure that all MD and MD-PhD applicants receive timely notification of the outcome of their application and protect schools and programs from having unfilled positions in their entering classes. Admissions officers and prehealth advisors often refer to these protocols as "traffic rules." Prospective applicants, their advisors, and admissions staff at medical schools and programs should all be aware of these application and acceptance protocols.

What This Means for You (the Applicant)

These protocols were developed to ensure fairness for both applicants and medical schools. By reading and acknowledging the guidelines, and agreeing to adhere to them, applicants and medical schools affirm they understand the timelines and stresses involved with making these important decisions. They also acknowledge their decisions affect the choices of other applicants and schools that are also making acceptance and admission decisions. Admissions officers know most applicants are anxiously awaiting notifications, but their committees are also diligently working to build the next class for their medical schools. These rules help ensure that everyone does their best to make timely, ethical, and fair decisions during this hectic time. The protocols are periodically reviewed by the AAMC Committee on Admission and approved by the AAMC Council of Deans. The following protocols were approved May 7, 2018.

Application and Acceptance Protocols for Applicants

The AAMC recommends the following steps to help ensure that all MD and MD-PhD applicants receive timely notification about the outcome of their applications and to protect schools and programs from having unfilled positions in their entering classes. These protocols are often referred to as “Traffic Rules” by admissions officers and prehealth advisors. Prospective applicants, their advisors, and admissions staff at medical schools and programs should all be aware of these Application and Acceptance Protocols for applicants. An applicant’s actions during the admissions process should be conducted in the spirit of professionalism and ethics expected of a future physician.

These guidelines are not intended to supersede the policies, timelines, or discretion of individual schools or programs. Each applicant is expected to become familiar with the procedures and requirements of each school to which they apply. The AAMC understands that an individual’s circumstances (e.g., delays in receiving financial aid offer or other compelling personal reasons) may warrant exception from one or more of the following protocols and defers to each school’s judgment in such cases. Below are AAMC recommendations for applicants to an MD or MD-PhD program:

1. Understand and comply with these Applicant Responsibilities as well as with the application, acceptance, and admission procedures at each school or program to which you apply.
2. Provide accurate and truthful information in all aspects of your application, interview(s), acceptance, and admission processes for each school or program to which you apply.
3. Submit all application documents (e.g., primary and secondary application forms, transcript[s], letters of evaluation/recommendation, fees, etc.) on or before the school or program’s published deadline date.
4. Notify all relevant medical school application services of any change, permanent or temporary, to your contact information (e.g., mailing address, telephone number, and email address).
5. If you will be unavailable for an extended period of time (e.g., during foreign travel, vacation, holidays) during the application/admission process:
 - a. Provide instructions regarding your application, and if applicable, delegate the authority to respond to any offers of acceptance to a parent or other responsible individual in your absence.
 - b. Inform all schools or programs at which your application remains under consideration of this person’s name, contact information, and authority to act on your behalf. Include dates of your unavailability and inclusive dates for the designation of authority to act on your behalf.
6. Respond promptly to a school’s or program’s invitation for an interview. If you cannot appear for a previously scheduled interview, notify the school or program **immediately** that you need to cancel.
7. Begin promptly the steps necessary to determine your eligibility for financial aid. This may include filing need-analysis forms early and encouraging your parents (when required) to file the appropriate income tax forms.
8. In fairness to other applicants, if you have decided before April 30 not to attend a medical school or program that has offered you an acceptance, **promptly** withdraw your application from that school(s) or program(s).
9. Out of respect for other applicants, if you receive an offer of acceptance from more than one school or program:
 - a. Withdraw your acceptance from any school or program you do not plan to attend as soon as you have made that decision;
 - b. On or before April 15, narrow your selection(s) to no more than three schools or programs and withdraw your acceptance(s) from all other schools or programs; and
 - c. On or before April 30, choose the school or program to which you plan to matriculate and promptly withdraw your acceptances from all other schools or programs.
10. If you receive additional acceptances following April 30, it is your responsibility to promptly notify any school(s) you have decided to not attend. Your decision should be made by the deadline established by the medical school(s).
11. To the extent you have not already done so in furtherance of paragraphs 9 and 10 above, withdraw your acceptance(s) from all other schools or programs as soon as you matriculate at a U.S. or Canadian school or program. For the purposes of these protocols, *matriculation* means that a student has begun a pre-matriculation program, attended orientation immediately preceding enrollment, or enrolled in classes at a medical school.

Approved by the Council of Deans Advisory Board, May 7, 2018.

*If any date falls on a weekend/holiday the recommendation(s) will apply to the following business day.

Application and Acceptance Protocols for Admissions Officers

The AAMC application policies are established protocols for applicants and admissions officers.

The AAMC recommends the following guidelines to ensure that MD and MD-PhD applicants are afforded timely notification of the outcome of their applications and timely access to available first-year positions and that schools and programs are able to reasonably anticipate accepted applicant matriculation in order to avoid unfilled positions in their entering classes. For the purposes of these protocols, *matriculation* means that a student has begun a pre-matriculation program, attended orientation immediately preceding enrollment, or enrolled in classes at a medical school.

These protocols are often referred to as “Traffic Rules” by admissions officers and prehealth advisors. These recommendations are distributed for the information of prospective MD and MD-PhD students, their advisors, and personnel at the medical schools and programs to which they have applied, and they are offered in the spirit of undertaking the admission process with the high degree of integrity expected of the medical profession. These guidelines are not intended to supersede the policies, timelines, or discretion of the individual schools or programs. The AAMC understands that an individual’s circumstances (e.g., delays in receiving financial aid offer or other compelling personal reasons) may warrant exception from one or more of the following protocols, and defers to each school’s judgment in such cases.

The AAMC recommends that each MD or MD-PhD granting school or program:

1. Comply with established procedures to:
 - a. Annually publish, amend, and adhere to its application, acceptance, and admission procedures.
 - b. Abide by all conditions of participation agreements with application services (if using).
2. Promptly communicate admissions decisions:
 - a. By October 1, notify Early Decision applicants and the American Medical College Application Service® (AMCAS®) of Early Decision Program (EDP) admission actions.
 - b. From October 15 to March 15, notify AMCAS within five business days of all admission actions, either written or verbal, that have been communicated to an applicant.
 - c. From March 16 to April 30, notify AMCAS within two business days of all admissions acceptance, withdrawal, or deferral actions, either written or verbal, that have been communicated to an applicant. All admission actions are listed and defined on the AAMC website.
 - d. From May 1 to the first day of class, notify AMCAS of all admission actions within 24 hours.
 - e. Notify AMCAS of each student’s matriculation within 24 hours.
 - f. An acceptance action is defined as the point at which a medical school communicates a written or verbal acceptance offer to an applicant.
 - g. An acceptance offer to any dual-degree program that occurs after an initial acceptance should follow the above timelines.
3. Notify all Regular MD program applicants of their acceptance on or after October 15* of each admission cycle, but no earlier. Schools and programs may notify applicants of admission decisions other than acceptance prior to October 15.
4. By March 15 of the matriculation year, issue a number of acceptance offers at least equal to the expected number of students in its first-year entering class and report those acceptance actions to AMCAS.
5. On or before April 30, permit **ALL** applicants (except for EDP applicants):
 - a. A minimum of two weeks to respond to their acceptance offer.
 - b. To hold acceptance offers or a waitlist position from any other schools or programs without penalty (i.e., scholarships).
6. After April 30:
 - a. Permit all applicants:
 1. A minimum of five business days to respond to an acceptance offer. This may be reduced to a minimum of two business days within 30 days of the start of orientation.
 2. To submit a statement of intent, a deposit, or both.
 - b. Recognize and respect the challenges of applicants with multiple acceptance offers, applicants who have not yet received an acceptance offer, and applicants who have not yet been informed about financial aid opportunities at schools to which they have been accepted.
7. In addition to any condition included in a school’s offer letter, after April 30, each school may exercise its school-specific procedures to confirm an accepted applicant’s intention to matriculate or to ensure that it fills each seat in its entering class. If a school is unable to confirm an applicant’s intention to matriculate, the school may choose to rescind the acceptance.
8. Each school’s initial deposit(s) should not exceed \$100 and (except for EDP applicants) and should be refundable at least until April 30. If the applicant enrolls at the school, the school should credit the deposit toward tuition.
9. Making an offer of admission to an applicant who has already matriculated at another school could result in the other school having an unfilled slot in its class. Each school is encouraged to take reasonable measures, including asking applicants under consideration whether they have already matriculated at another medical school, and carefully consider that information when deciding whether to make an offer to an applicant.
10. Each school, consistent with its own privacy policies, should appropriately safeguard information related to an individual’s application for admission or financial aid.
11. Each school should treat all letters of evaluation submitted in support of an application as **confidential**, except in those states with applicable laws to the contrary. The contents of a letter of evaluation should not be revealed to an applicant at any time.

Approved by the Council of Deans Advisory Board, May 7, 2018.

*If any date falls on a weekend/holiday the recommendation(s) will apply to the following business day.

You Can Afford Medical School

Building a Strong Financial Plan

You'll need to develop a strategy to cover the costs associated with your education. Don't let the numbers discourage you. Help is available.

When you look at the figures in Table 8.1, the financial challenges may seem overwhelming. Annual tuition, fees, and health insurance for the first year at state medical schools in 2018-2019 averaged about \$35,932 for residents and \$60,543 for nonresidents; at private schools, the average was \$57,492 for residents and \$58,895 for nonresidents.

Table 8.1. Tuition, Fees, and Health Insurance for 2018-2019 First-Year Students in U.S. Medical Schools*

Student Category	Range	Median	Average
Private Schools			
Resident	\$24,566-\$68,574	\$61,533	\$59,076
Nonresident	\$37,165-\$69,224	\$62,037	\$60,474
Public Schools			
Resident	\$0**-\$54,928	\$38,119	\$36,755
Nonresident	\$0**-\$99,014	\$64,147	\$60,802

*Analysis excludes the Brody School of Medicine at East Carolina University, University of Massachusetts Medical School, Mercer University School of Medicine, University of Mississippi School of Medicine, and Southern Illinois School University of Medicine. These schools do not accept nonresident medical students and, therefore, do not report nonresident tuition and fees. "Public Schools" excludes Uniformed Services University of Health Sciences (USUHS) F. Edward Hébert Medical School (USUHS), which does not charge tuition or student fees.

**Instead of paying tuition and fees, students at USUHS Medical School incur a national service obligation.

Source: 2018-2019 AAMC Tuition and Student Fees Questionnaire.

According to recent surveys conducted by the AAMC, 75% of newly graduated MDs have medical school education loans, and 63% reported receiving some degree of help through scholarships, stipends, and grants (which you don't have to repay). So, it can be done, and it is . . . by tens of thousands of medical students every single year. But first, you'll need a plan.

Before you borrow money, you should understand — and adhere to — the basic principles of successful money management. The following basic recommendations should help you build a strong financial foundation.

1. Live Within Your Means

All other efforts to "afford" medical school and handle your money wisely will be undermined if you don't have a plan of action for your finances. Having a spending plan is the cornerstone of a solid financial foundation. A well-crafted plan will help you control your spending, ensure you cover essential expenses, and prepare you for unexpected expenses by building an emergency fund.

Creating a budget involves only a few steps:

- Income — document incoming funds, which will likely be in the form of financial aid (loans, scholarships, or grants).
- Expenses — identify outgoing expenses, like rent, food, and tuition.
- Discretionary income — calculate your discretionary income to see if your spending plan allows you to live within your means.
- For assistance in creating a realistic budget, contact the financial aid office of the medical school you're interested in attending. Often, they can provide some approximations of the average amount of student loans available to live on and the expected costs of necessities while attending medical school.

$$\text{Your Total Income} - \text{Your Total Expenses} = \text{Your Discretionary Income}$$

2. Manage Debt Wisely

- Given the costs of medical school, the vast majority of medical students borrow money to fund their education — and, as of 2019, graduate with median education debt of \$200,000. The ability to manage debt wisely is important, regardless of one's situation, and it becomes even more critical for you — a prospective medical student — when you consider the degree to which you're likely to rely on loans to help pay for your education.
- Be conscious of the amount you're likely to borrow and be comfortable knowing your future income will allow you to repay your student loan debt.
- Educate yourself about various financing possibilities before you arrive at medical school and diligently search for free money, such as scholarships, grants, and repayment assistance programs.
- Understand your responsibilities — beyond making payments — that come with borrowing student loans. These include knowing what loans you borrowed, where to send payments, and when payments are due. You'll also be responsible for notifying servicers of any changes to your name, contact information, or enrollment status.
- Stay organized. Maintain accurate financial aid records, copies of application forms, and any related paperwork. This also means opening and reading all mail pertaining to your student loan debt. The MedLoans® Organizer and Calculator can help you organize your loans. Every accepted medical school student is given access to this free tool, found at aamc.org/medloans.
- Build a good credit score by meeting your financial obligations. In doing so, you'll strengthen your ability to qualify for and obtain attractive interest rates for credit-based loans, land a job, and rent an apartment. For more information, go to aamc.org/firstcreditscore.

- There's an abundance of resources help you through this process — including those provided by your prehealth advisor, the pages that follow in this book, and the AAMC Financial Information, Resources, Services, and Tools (FIRST) program. FIRST provides a wide range of resources to help medical school applicants and students make smart decisions about student loans, effectively manage their education debt, and expand their financial skills. A free financial literacy program called AAMC Financial Wellness is also available to help you maintain and improve your financial literacy. This program provides practical information on budgeting, money management, credit, debt management, and more. Sign up for your free account at aamc.org/financialwellness.
- The financial aid package offered by each medical school may be a significant factor when you're deciding which offer to accept. For information on this and other considerations, see Section 6, "Choosing Your Schools."

3. Maintain Good Credit

- Some medical schools require a credit history as part of the financial aid application and require that applicants resolve any credit problems before they matriculate. Some schools will grant a delay of matriculation to an accepted applicant who must address credit problems. Contact the financial aid office to discuss financial aid eligibility and, if necessary, resolve any outstanding credit problems.

Tips to Help Your Credit Score

- Pay your bills on time.
- Limit your credit accounts.
- Keep balances below your credit limit and pay off debt.
- Pay down debt whenever possible. If you can't pay off the debt, at least pay more than the minimum amount due.
- Stay current on all outstanding credit obligations.
- Check your credit report regularly at annualcreditreport.com.

Types of Financial Aid

How Will You Pay for Medical School?

First, remember you're not alone. While the ultimate financial responsibility for your medical education rests with you, many resources and tools can help. The financial aid officer at your medical school will assist you but also talk with your prehealth advisor and familiarize yourself with the Financial Aid Fact Sheets from the AAMC FIRST program (aamc.org/first). Examples of additional financial resources from FIRST include the Debt, Costs, and Loan Repayment Fact Card (Figure 8.1) and information on student loans (Table 8.2).

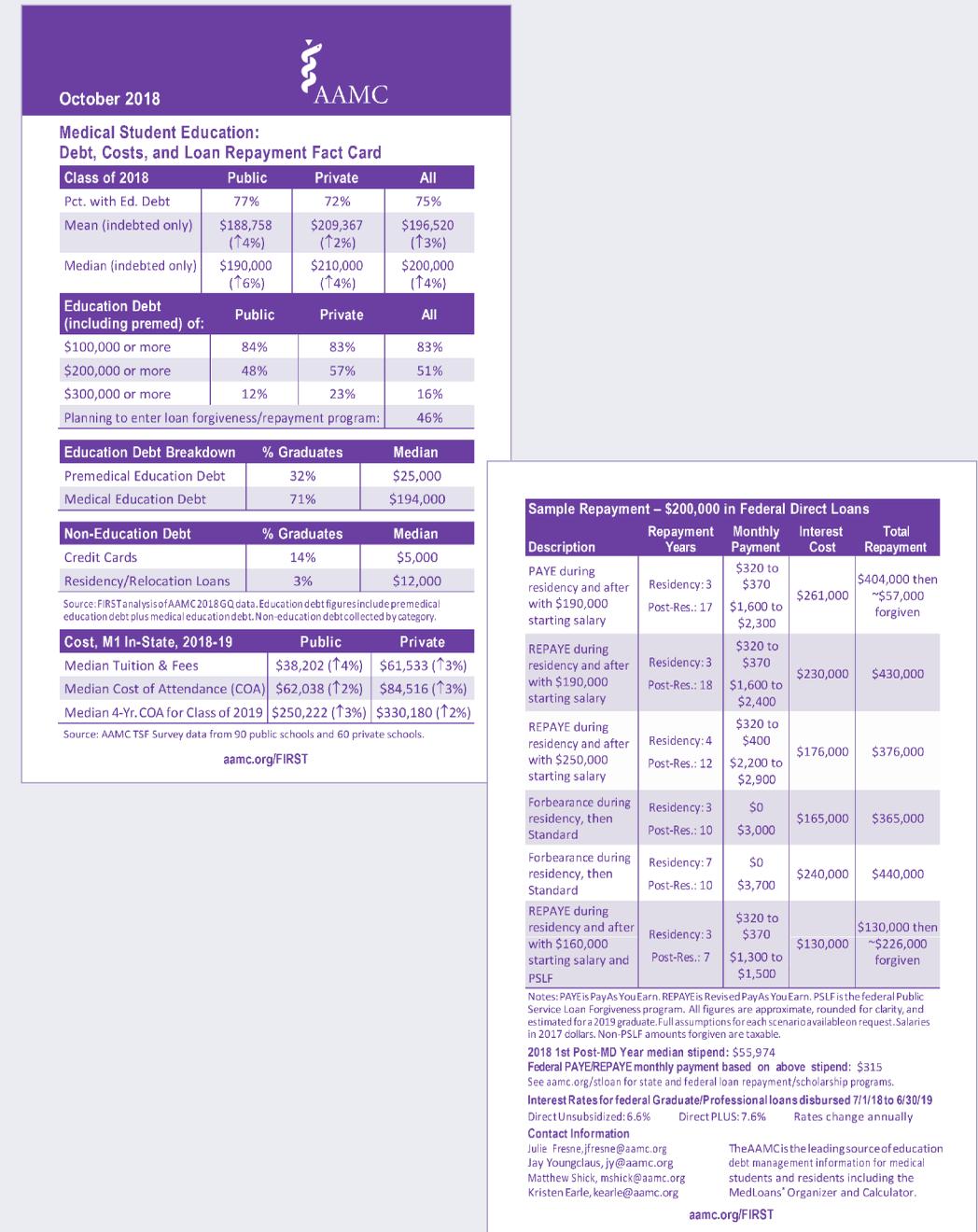


Figure 8.1. Medical student education: Debt, Costs, and Loan Repayment Fact Card.

Table 8.2. Federal Student Loans for Medical Students

Characteristics	Direct Unsubsidized Loan	Direct PLUS Loan	Loans for Disadvantaged Students	Primary Care Loan
Lender	The federal government	The federal government	Medical school financial aid office on behalf of the Department of HHS	Medical school financial aid office on behalf of the Department of HHS
Based on Need	No	No	Yes ¹	Yes ²
Citizenship Requirement	U.S. citizen, U.S. national, or U.S. permanent resident	U.S. citizen, U.S. national, or U.S. permanent resident	U.S. citizen, U.S. national, or U.S. permanent resident	U.S. citizen, U.S. national, or U.S. permanent resident
Borrowing Limits	\$40,500-\$47,167/year, \$224,000 cumulative maximum for premed and medical borrowing ³	Annual cost of attendance minus other financial aid	Up to cost of attendance (third- and fourth-year students may receive additional funds to repay previous educational loans received while attending medical school) ³	Up to cost of attendance (third- and fourth-year students may receive additional funds to repay previous educational loans received while attending medical school) ³
Interest Rate	For loans disbursed after July 1, 2013, the rate is fixed for the life of the loan. These fixed rates are calculated every July 1st and are effective for loans disbursed during the next academic year. For current rates, visit studentaid.ed.gov/types/loans/interest-rates .	For loans disbursed after July 1, 2013, the rate is fixed for the life of the loan. These fixed rates are calculated every July 1st and are effective for loans disbursed during the next academic year. For current rates, visit studentaid.ed.gov/types/loans/interest-rates .	5%	5%
Interest Subsidy	No	No	While in school, deferment, and grace period	While in school, deferment, and grace period
Grace Period	6 months	None	1 year	1 year
Deferments	While in school and other possible deferment periods based on eligibility (check your promissory note or ask your financial aid officer)	While in school and 6 months after separating from school (postenrollment deferment)	While in school and during approved eligible activities	While in school and during a primary care residency (check your promissory note or ask your financial aid officer)
Repayment Requirements	Repayment plans and postponement options exist during residency and beyond	Repayment plans and postponement options exist during residency and beyond	Minimum: \$40/month; 10 to 25 years to repay, at the discretion of the institution; may be eligible for federal loan consolidation	Minimum: \$40/month; 10 to 25 years to repay; not eligible for loan consolidation
Prepayment Penalties	None			
Allowable Cancellations	Death or total and permanent disability			

1. Parent financial information is required for consideration for dependent students.

2. Borrower must agree upon signing loan agreement to enter and complete a primary care residency and practice in a primary care field, which together must be a total of 10 years in length or until the loan is repaid in full, whichever occurs first. Parent financial information is required for consideration for dependent students.

3. Both annual and aggregate maximums are subject to change, pending congressional action.

Sources: *Health Resources and Services Administration, U.S. Department of Health and Human Services. School-Based Loans and Scholarships.* <https://bhwh.hrsa.gov/loansscholarships/schoolbasedloans>. Accessed April 2019. *Federal Student Aid, U.S. Department of Education. Parents: Need a Direct PLUS Loan?* <https://studentaid.ed.gov/sa/>. Accessed April 2019.

Loans

Your primary financial funding for medical school will likely come from federal student loans — a form of financial aid. They are normally the first type of loan suggested, before you consider private loans. Table 8.2 provides information about four of the most common federal loans medical students use:

- Direct Unsubsidized Loans.
- Direct PLUS Loans.
- Loans for Disadvantaged Students (LDS).
- Primary Care Loans (PCL).

Medical school is expensive. However, strong job security and excellent income potential should enable any medical school graduate, practicing in any specialty, to repay education debt, have a secure income, and save for retirement.

Grants and Scholarships

While grants and scholarships are likely to cover only a portion of overall educational costs, many students get some degree of funding from these sources. The source of gift aid can be from the federal government, the state government, other outside resources, and your medical school. Your medical school financial aid officer is the best source of information about which grants and scholarships may be available.

Financial Aid Application Process

The financial aid process may vary slightly by institution, so discuss each school's requirements with the financial aid officer. Most schools require that you're a U.S. citizen or permanent resident, you're making satisfactory academic progress, and you're in compliance with Selective Service registration requirements.

Regardless of the medical school, there's a standard process for applying for federal financial aid.

Step 1. Fill Out the FAFSA

Completing the Free Application for Federal Student Aid (FAFSA) is the first step toward getting federal aid for medical school. Completing the FAFSA online is free. The schools listed on your FAFSA will receive your financial information to then determine your eligibility for aid. Some schools may require parental information; check with the financial aid offices of the schools you're applying to for their requirements.

Step 2. Investigate Other Sources of Aid

Contact the financial aid offices at the medical schools you're interested in to investigate other sources of institutional aid, such as loans, scholarships, and grants.

Step 3. Receive and Reply to the Award Letter

Once your FAFSA and other required forms are received and processed by a medical school's financial aid office, you'll receive an award letter indicating the types and amounts of financial aid you qualify for — along with directions for accepting or declining the aid. Be sure to follow the instructions to receive your financial aid in a timely manner. For more information on award letters, review the fact sheet *What Is an Award Letter?* at students-residents.aamc.org/financial-aid/article/what-is-an-award-letter.

When awarding aid, each financial aid office has principles that are guided by multiple factors. The aid package is determined by eligibility for federal aid, available institutional resources, family resources, and the institution's mission. Additionally, the school compares the cost of attendance and other external variables before making a final determination of aid eligibility. For eligibility and additional details, talk with the financial aid officer at the medical school you plan to attend. If you're not sure what to ask, review the *Top 10 Questions Premeds Should Ask Medical School Financial Aid Officers* at students-residents.aamc.org/financial-aid/article/top-10-questions-pre-meds-should-ask-medical-school.

SECTION 9

U.S. Medical Schools

Accredited by the Liaison Committee on Medical Education (LCME)

Every medical school has a unique mission and focus. The Medical School Admissions Requirements™ (MSAR®) website can help you identify and apply to the schools that best align with your learning style and strengths. Your MSAR subscription includes detailed information about every MD-granting U.S. and Canadian medical school (aamc.org/msar).

U.S. Medical Schools as of June 2019

ALABAMA

University of Alabama School of Medicine
University of South Alabama College of Medicine

ARIZONA

University of Arizona College of Medicine - Phoenix
University of Arizona College of Medicine - Tucson

ARKANSAS

University of Arkansas for Medical Sciences
College of Medicine

CALIFORNIA

California Northstate University
College of Medicine
California University of Science and Medicine
School of Medicine
Kaiser Permanente School of Medicine
Keck School of Medicine of the
University of Southern California
Loma Linda University School of Medicine
Stanford University School of Medicine
University of California, Davis, School of Medicine
University of California, Irvine, School of Medicine
University of California, Los Angeles,
David Geffen School of Medicine
University of California, Riverside,
School of Medicine

University of California, San Diego,
School of Medicine

University of California, San Francisco,
School of Medicine

COLORADO

University of Colorado School of Medicine

CONNECTICUT

Frank H. Netter MD School of Medicine
at Quinnipiac University
University of Connecticut School of Medicine
Yale School of Medicine

DISTRICT OF COLUMBIA

The George Washington University
School of Medicine and Health Sciences
Georgetown University School of Medicine
Howard University College of Medicine

FLORIDA

Florida Atlantic University Charles E. Schmidt
College of Medicine
Florida International University Herbert Wertheim
College of Medicine
Florida State University College of Medicine
Nova Southeastern University Dr. Kiran C. Patel
College of Allopathic Medicine
University of Central Florida College of Medicine

University of Florida College of Medicine
University of Miami Leonard M. Miller
School of Medicine
University of South Florida Morsani
College of Medicine

GEORGIA

Emory University School of Medicine
Medical College of Georgia at Augusta University
Mercer University School of Medicine
Morehouse School of Medicine

HAWAII

University of Hawaii at Minoa John A. Burns
School of Medicine

ILLINOIS

Carle Illinois College of Medicine
Chicago Medical School at Rosalind Franklin
University of Medicine and Science
Loyola University Chicago Stritch
School of Medicine
Northwestern University Feinberg
School of Medicine
Rush Medical College of Rush
University Medical Center
Southern Illinois University School of Medicine
University of Chicago Pritzker School of Medicine
University of Illinois College of Medicine

INDIANA

Indiana University School of Medicine

IOWA

University of Iowa Roy J. and Lucille A. Carver
College of Medicine

KANSAS

University of Kansas School of Medicine

KENTUCKY

University of Kentucky College of Medicine
University of Louisville School of Medicine

LOUISIANA

LSU Health New Orleans School of Medicine
LSU Health Shreveport School of Medicine
Tulane University School of Medicine

MARYLAND

Johns Hopkins University School of Medicine
Uniformed Services University of the Health Sciences
F. Edward Hébert School of Medicine
University of Maryland School of Medicine

MASSACHUSETTS

Boston University School of Medicine
Harvard Medical School
Tufts University School of Medicine
University of Massachusetts Medical School

MICHIGAN

Central Michigan University College of Medicine
Michigan State University
College of Human Medicine
Oakland University William Beaumont
School of Medicine
University of Michigan Medical School
Wayne State University School of Medicine
Western Michigan University Homer Stryker M.D.
School of Medicine

MINNESOTA

Mayo Clinic Alix School of Medicine
University of Minnesota Medical School

MISSISSIPPI

University of Mississippi Medical Center
School of Medicine

MISSOURI

Saint Louis University School of Medicine
University of Missouri -
Columbia School of Medicine
University of Missouri -
Kansas City School of Medicine
Washington University
School of Medicine in St. Louis

NEBRASKA

Creighton University School of Medicine
University of Nebraska Medical Center
College of Medicine

NEVADA

University of Nevada, Las Vegas, School of Medicine
University of Nevada, Reno, School of Medicine

NEW HAMPSHIRE

Geisel School of Medicine at Dartmouth

NEW JERSEY

Cooper Medical School of Rowan University

Hackensack-Meridian School of Medicine
at Seton Hall University

Rutgers New Jersey Medical School

Rutgers Robert Wood Johnson Medical School

NEW MEXICO

University of New Mexico School of Medicine

NEW YORK

Albany Medical College

Albert Einstein College of Medicine

Columbia University Vagelos College
of Physicians and Surgeons

CUNY School of Medicine

Donald and Barbara Zucker School of Medicine
at Hofstra/Northwell

Icahn School of Medicine at Mount Sinai

Jacobs School of Medicine and Biomedical Sciences
at the University at Buffalo

New York Medical College

New York University School of Medicine

NYU Long Island School of Medicine

Renaissance School of Medicine
at Stony Brook University

State University of New York Downstate Medical
Center College of Medicine

State University of New York Upstate Medical
University College of Medicine

University of Rochester School
of Medicine and Dentistry

Weill Cornell Medicine

NORTH CAROLINA

Brody School of Medicine at East Carolina University

Duke University School of Medicine

University of North Carolina at Chapel Hill
School of Medicine

Wake Forest University School of Medicine

NORTH DAKOTA

University of North Dakota School of Medicine
and Health Sciences

OHIO

Case Western Reserve University School of Medicine

Northeast Ohio Medical University

The Ohio State University College of Medicine

University of Cincinnati College of Medicine

University of Toledo College of Medicine
and Life Sciences

Wright State University Boonshoft School of Medicine

OKLAHOMA

University of Oklahoma College of Medicine

OREGON

Oregon Health & Science University
School of Medicine

PENNSYLVANIA

Drexel University College of Medicine

Geisinger Commonwealth School of Medicine

Lewis Katz School of Medicine at Temple University

Penn State College of Medicine

Perelman School of Medicine
at the University of Pennsylvania

Sidney Kimmel Medical College
at Thomas Jefferson University

University of Pittsburgh School of Medicine

PUERTO RICO

Ponce Health Sciences University School of Medicine

San Juan Bautista School of Medicine

Universidad Central del Caribe School of Medicine

University of Puerto Rico School of Medicine

RHODE ISLAND

Warren Alpert Medical School of Brown University

SOUTH CAROLINA

Medical University of South Carolina
College of Medicine

University of South Carolina
School of Medicine - Columbia

University of South Carolina
School of Medicine - Greenville

SOUTH DAKOTA

University of South Dakota Sanford
School of Medicine

TENNESSEE

East Tennessee State University James H. Quillen
College of Medicine

Meharry Medical College School of Medicine

University of Tennessee Health Science Center
College of Medicine

Vanderbilt University School of Medicine

TEXAS

Baylor College of Medicine

McGovern Medical School at the University of Texas
Health Science Center at Houston

TCU and UNTHSC School of Medicine

Texas A&M Health Science Center
College of Medicine

Texas Tech University Health Sciences Center
Paul L. Foster School of Medicine

Texas Tech University Health Sciences
Center School of Medicine

University of Texas at Austin Dell Medical School

University of Texas Health Science Center
at San Antonio Joe R. and Teresa Lozano Long
School of Medicine

University of Texas Medical Branch
School of Medicine

University of Texas Rio Grande Valley
School of Medicine

University of Texas Southwestern Medical School

UTAH

University of Utah School of Medicine

VERMONT

Robert Larner, M.D., College of Medicine
at the University of Vermont

VIRGINIA

Eastern Virginia Medical School

University of Virginia School of Medicine

Virginia Commonwealth University
School of Medicine

Virginia Tech Carilion School of Medicine

WASHINGTON

University of Washington School of Medicine

Washington State University Elson S. Floyd
College of Medicine

WEST VIRGINIA

Marshall University Joan C. Edwards
School of Medicine

West Virginia University School of Medicine

WISCONSIN

Medical College of Wisconsin

University of Wisconsin School of Medicine
and Public Health

SECTION 10

Canadian Medical Schools

Accredited by the Liaison Committee on Medical Education (LCME)
and by the Committee on Accreditation of Canadian Medical Schools (CACMS)

Selection Criteria

Canadian medical schools vary in the number of years of undergraduate instruction they require of applicants. They also vary in the recommended content covered during premedical undergraduate education. Table 10.1 shows that physics, inorganic and organic chemistry, biology, biochemistry, humanities, and English are the most common required subjects there.

Language of Instruction

Three Canadian medical schools — Laval, Montréal, and Sherbrooke, all located in Quebec province — require students to be fluent in French because all instruction is in that language. Instruction in 13 other schools is in English, and the University of Ottawa offers the MD curriculum in both French and English.

Table 10.1. Subjects Often Required or Recommended by Canadian Medical Schools*

Required or Recommended Subject
Biochemistry
Biology
Biology/Zoology
Calculus
College Mathematics
English
Humanities
Inorganic Chemistry
Organic Chemistry
Physics
Social Sciences

*For specific requirements and recommendations, see the individual school profiles on the Medical School Admission Requirements™ website: aamc.org/msar (subscription required). You can also view coursework requirements on individual medical school websites.

Source: AAMC Medical College Admission Requirements website, 2017.

In Canada, universities fall under provincial jurisdiction, and the majority of places in each faculty of medicine are allocated to permanent residents of the province in which the university is located.

Not all faculties of medicine accept applications from international students. Conversely, some faculties of medicine may reserve positions for international students, possibly as part of agreements with foreign governments and institutions. Statistics compiled by the Association of Faculties of Medicine of Canada (afmc.ca)

show that most medical schools admit international students. In 2018-2019, for example, 120 U.S. students applied to 15 schools, and 5% of those students were accepted, according to the Canadian medical schools that supplied data. In the same year, 269 non-U.S. international students applied to the 15 Canadian medical schools that supplied data, and their success rate was 4%. The success rate for Canadian applicants to the same schools was 21%. Additional information about Canadian medical schools can be found in the Association of Faculties of Medicine of Canada 2018 publication *Admission Requirements of Canadian Faculties of Medicine* (afmc.ca/sites/default/files/documents/en/Publications/CMES/CMES2018-Complete.pdf?ver=20190415).

Positions filled by international students in Canadian medical schools are not necessarily subsidized by provincial or territorial governments. This means international students, including U.S. students, may pay higher tuition and fees than Canadian residents.

Academic Record and Suitability

Although an excellent academic record is a very important factor in gaining admission to a Canadian medical school, admissions committees also put a great deal of effort into assessing applicants' suitability for a medical career based on other factors, too. Personal suitability is assessed differently by each school, but in general, personal qualities related to medicine are very important. Applicants who can demonstrate they possess the qualities considered important in the practice of medicine may sometimes be admitted even if their academic record is not outstanding. Conversely, applicants with outstanding records who don't possess these qualities may not gain a place in medical school.

Most applicants to Canadian medical schools are interviewed before acceptance.

Medical College Admission Test® (MCAT®)

Twelve of the 17 Canadian medical schools require applicants to take the MCAT® exam: Alberta, British Columbia, Calgary, Dalhousie, Manitoba, McGill, McMaster, Memorial, Queen's, Saskatchewan, Toronto, and Western Ontario.

Tuition and Other Compulsory Fees

Because the medical schools in Canada fall under the jurisdiction of provincial governments, annual tuition and compulsory fees vary considerably. Applicants who reside in the province where the medical school is located may pay annual fees ranging from \$4,766 to \$29,745, with an average of \$17,645 (see Table 10.2). Applicants who are Canadian citizens or permanent residents in a different province may pay fees ranging from \$9,880 to \$29,745, with an average of \$19,709, and foreign student applicants can expect to pay fees ranging from \$28,713 to \$80,509, with an average of \$41,347.

Table 10.2. Tuition and Student Fees for 2018-2019 First-Year Students at Canadian Medical Schools (in Canadian Dollars)*

Categories of Students	Range	Average**
In-Province	\$4,649-\$28,201	\$17,224
Canada, Out-of-Province	\$9,550-\$28,201	\$19,154
Visa	\$27,966-\$74,962	\$38,837

*Figures based on data provided in fall 2017.

**Average in-province and out-of-province data were derived from all 17 Canadian schools. Average visa data were derived from six schools that accept foreign students.

Source: The Association of Faculties of Medicine of Canada, 2017.

Additional Resources

Other Considerations

Canadian faculties of medicine do not discriminate on the basis of race, religion, or gender in admitting new students. The admission of Aboriginal students (First Nations, Inuit, and Metis) is encouraged at Canadian medical schools, and most allocate positions specifically for Aboriginal applicants, including Laval, Sherbrooke, Montréal, McGill, Ottawa, Queen's, McMaster, Western Ontario, Northern Ontario School of Medicine, Saskatchewan, Alberta, and British Columbia.

The number of female applicants has leveled off in recent years, with correspondingly consistent proportions of women in schools' entering classes. Women made up 57% of the 2017-2018 applicant pool, and the success rate for women was slightly higher than that for men. The 2017 entering classes at the 16 Canadian medical schools reporting data about male and female matriculants included 56% women and 44% men. Overall, 21% of applicants received at least one offer of admission.

Expenses and Financial Aid

Tuition and student fees for Canadian and non-Canadian students in the 2018 entering class are provided in Table 10.2 and in individual medical school entries on the MSAR® website. Expenses vary from school to school and from student to student. Tuition at several Canadian schools is slightly higher for the first year than for successive years. Some financial aid information is provided in the individual school entries. Eligible Canadian students may apply for a Canadian student loan, or they may apply to the Department of Education in their province for a provincial student loan.

Canadian Medical Schools as of June 2019

ALBERTA

University of Alberta Faculty of Medicine and Dentistry
University of Calgary Cumming School of Medicine

BRITISH COLUMBIA

University of British Columbia Faculty of Medicine

MANITOBA

Max Rady College of Medicine,
University of Manitoba

NEWFOUNDLAND

Memorial University of Newfoundland
Faculty of Medicine

NOVA SCOTIA

Dalhousie University Medical School

ONTARIO

McMaster University Michael G. DeGroot School of Medicine
Northern Ontario School of Medicine
School of Medicine at Queen's University
University of Ottawa Faculty of Medicine
University of Toronto Faculty of Medicine
Schulich School of Medicine & Dentistry at Western University

QUEBEC

Faculty of Medicine at Université Laval
McGill Faculty of Medicine
Université de Montréal Faculty of Medicine
Université de Sherbrooke Faculty of Medicine and Health Sciences

SASKATCHEWAN

University of Saskatchewan College of Medicine

AAMC Resources

The AAMC offers a wide variety of publications, online tools, and other information at the Minorities in Medicine website at aamc.org/students/minorities and the Diversity and Inclusion website, aamc.org/diversity. Among the resources you'll find are:

Data About Applicants, Matriculants, and Graduates. The AAMC also collects and presents detailed data about medical students from different racial and ethnic groups, most of which are available free of charge on the AAMC website (and a good deal of which are included in this guide). (See also Table 2.1.) Several resources are likely to be of interest:

- A large collection of data about medical school applicants, matriculants, and graduates is available at aamc.org/facts.
- The AAMC publication Diversity in Medical Education, Facts and Figures 2016 provides race and ethnicity data on medical school applicants, accepted applicants, matriculants, enrollment, graduates, and faculty. You can access the full text without charge at www.aamcdiversityfactsandfigures2016.org.
- Data on medical school faculty, including information by self-identification, can be found at aamc.org/data/facultyroster/reports.

Enrichment Programs Online. This site includes a free database to help students locate summer enrichment programs on medical school campuses. You can search by school, state, region, area of focus, and length of program. To explore programs of interest, go to services.aamc.org/summerprograms.

Fee Assistance Program. The AAMC believes the cost of applying to medical school should not be an insurmountable barrier. Our Fee Assistance Program is available to students whose financial limitations would otherwise prevent them from taking the MCAT exam or applying to medical school. Details about the Fee Assistance Program can be found at aamc.org/fap and in Section 7 of this guide.

Medical Minority Applicant Registry (Med-MAR). During the MCAT registration, students who are either economically disadvantaged or from racial and ethnic groups that are historically underrepresented in medicine can join the registry by selecting the Medical Minority Applicant Registry (Med-MAR) option. This web-based program provides medical schools with basic biographical information and MCAT scores of registered examinees, thereby giving institutions opportunities to enhance their diversity efforts. For information about the definition of "underrepresented in medicine," visit aamc.org/urm. For more information, go to aamc.org/medmar.

Medical Students With Disabilities: Resources to Enhance Accessibility. This guide informs users about current resources available to medical schools as they accept and matriculate a growing number of medical students with a wide range of disabilities. It focuses on the assistive technologies available for medical students. Order a copy of the guide at members.aamc.org/eweb/DynamicPage.aspx?webcode=PubHome.

No advisor? Contact the National Association of Advisors for the Health Professions (NAAHP) for help. At their website, you'll find a list of advisors who have volunteered to help students without access to a prehealth advisor remotely. Learn more about what prehealth advisors do and how to locate one at naahp.org/student-resources/find-an-advisor.

Selected Worksheets

How to Get Medically Related Experiences Worksheet

Advising Office

Your prehealth advisor*: _____

Advising office phone number: _____

Advisor's email address: _____

Office location: _____

*If your school does not have prehealth advising or you don't have access to an advisor, see the National Association of Advisors for the Health Professions' (NAAHP's) Find an Advisor service (naahp.org/student-resources/find-an-advisor).

Clubs and Volunteer Opportunities

Premed club or society on campus: _____

Premed honor society: _____

Service organization club or fraternity: _____

Other Ideas to Make Contacts and Get Experience:

Contact science department about lab and/or research opportunities.

Notes: _____

Contact local clinic or health service provider for volunteer, paid, part-time, or internship opportunities.

Notes: _____

Contact health care providers you know about shadowing opportunities.

Notes: _____

Tracking Lab, Volunteer, and Work Experiences Worksheet

This worksheet will come in handy when you're writing application essays, tracking your experiences, identifying people to ask for letters of evaluation, and filling out the American Medical College Application Service® (AMCAS®) application. You can fill out the online form at aamc.org/msar-resources.

Contact name email, and phone	# of hours	How this prepares or influences me	What I did	Experience	Date
	25	I was able to observe patient-physician interactions and learned about an electronic medical record system.	Observed Dr. Adams in primary care role	Shadowing	[Example] January 15-April 1, 2018

■ Getting Ready to Take the MCAT® Exam Worksheet

Ask yourself these questions when you're getting ready for the MCAT exam.

- Am I familiar with what will be on the exam? Yes No Unsure
(Find out what's on the exam: students-residents.aamc.org/mcatexam.)
- If no or unsure, what content or sections am I unsure about? _____
- Have I allowed enough time to study and feel comfortable with my knowledge of the content on the exam?
 - Chemical and Physical Foundations of Biological Systems
 Yes No, I need more time Unsure
 - Biological and Biochemical Foundations of Living Systems
 Yes No, I need more time Unsure
 - Psychological, Social, and Biological Foundations of Behavior
 Yes No, I need more time Unsure
 - Critical Analysis and Reasoning Skills
 Yes No, I need more time Unsure

If you have areas where you need more study, check out the AAMC's preparation resources, which offer the opportunity to get familiar with the online testing environment. Also, consider forming a study group at your school or with other applicants who are preparing for the exam. Talk to your prehealth advisor about resources you may have on campus or through your institution.

- Am I within one to two calendar years of wanting to apply to medical school?
 Yes No Unsure
- Have I spoken with my prehealth advisor? Does my advisor agree that I am ready?
 Yes No Unsure
- Have I applied to see if I qualify for the Fee Assistance Program?
 Yes No Unsure
- Do I feel prepared and ready to take the exam?
 Yes No Unsure

■ Factors to Weigh Before Applying Worksheet

Use this form to identify and assess the schools where you may apply.

The Medical School Admission Requirement website allows you to filter your search for different medical schools by things such as class size, location, and community service requirement (aamc.org/msar). Every medical school has a different curriculum and style. This worksheet can help you determine which factors are important to you.

School name: _____

Factor	Ideal fit	Good fit	No opinion	Unsure	Not a fit	Notes
Course offerings						
Class size						
Location						
Research programs						
Technology						
Interviews and/or meetings with faculty						
Reputation						
Technology						
Tuition and financial aid						
Programs for minority or disadvantaged students						
Teaching methods						
Combined-degree offerings						
Campus tour						
Rural or community offerings						
Residency placement						

Impression of school: Favorable Undecided Unfavorable

Likelihood of applying: Will apply Undecided Unlikely to apply

Follow-up questions to ask: _____

Acronyms

AAMC

Association of American Medical Colleges
aamc.org

AMCAS®

American Medical College Application Service®
aamc.org/amcas

CIM

Careers in Medicine®
aamc.org/cim

COA

cost of attendance

EDP

Early Decision Program
students-residents.aamc.org/applying-medical-school/article/early-decision-program

ERAS

Electronic Residency Application Service®
aamc.org/eras

FAFSA

Free Application for Federal Student Aid
fafsa.ed.gov

FIRST

Financial Information, Resources, Services, and Tools
aamc.org/first

GQ

Graduation Questionnaire
aamc.org/data/gq

HHMI

Howard Hughes Medical Institute
hhmi.org/programs/science-education-research-training

HIPAA

Health Insurance Portability and Accountability Act

LCME

Liaison Committee on Medical Education
lcme.org

MCAT®

Medical College Admission Test®
aamc.org/mcat

Med-MAR

Medical Minority Applicant Registry
aamc.org/medmar

MSAR®

Medical School Admission Requirements™
aamc.org/msar

MSQ

Matriculating Student Questionnaire
aamc.org/data/msq

NAAHP

National Association of Advisors
for the Health Professions
naahp.org

NBME

National Board of Medical Examiners
nbme.org

NHSC

National Health Service Corps
nhsc.hrsa.gov

NIH

National Institutes of Health
training.nih.gov

NRMP®

National Resident Matching Program
nrmp.org

NSLDS

National Student Loan Data System
nsls.ed.gov

SHPEP

Summer Health Professions Education Program
shpep.org

TSF

Tuition and Student Fees Survey
aamc.org/data/tuitionandstudentfees

USMLE

United States Medical Licensing Examination
usmle.org

VSLO®

Visiting Student Learning Opportunities™
aamc.org/vslo

