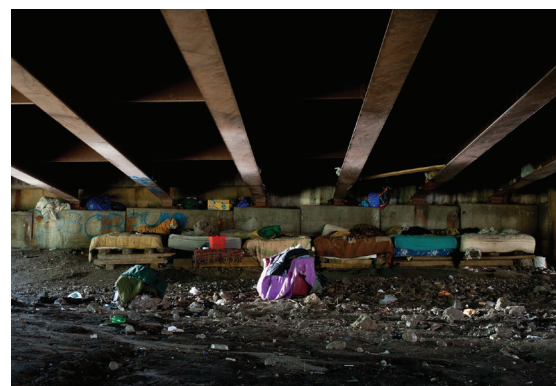




# FRONTLINE MEDICINE



Boston University School of Medicine





# OUR MISSION

Boston University School of Medicine is dedicated to the educational, intellectual, professional and personal development of a diverse group of exceptional students, trainees and faculty who are deeply committed to the study and to the practice of medicine, to biomedical research and to the health of the public.

We, as a community, place great value on excellence, integrity, service, social justice, collegiality, equality of opportunity and interdisciplinary collaboration.

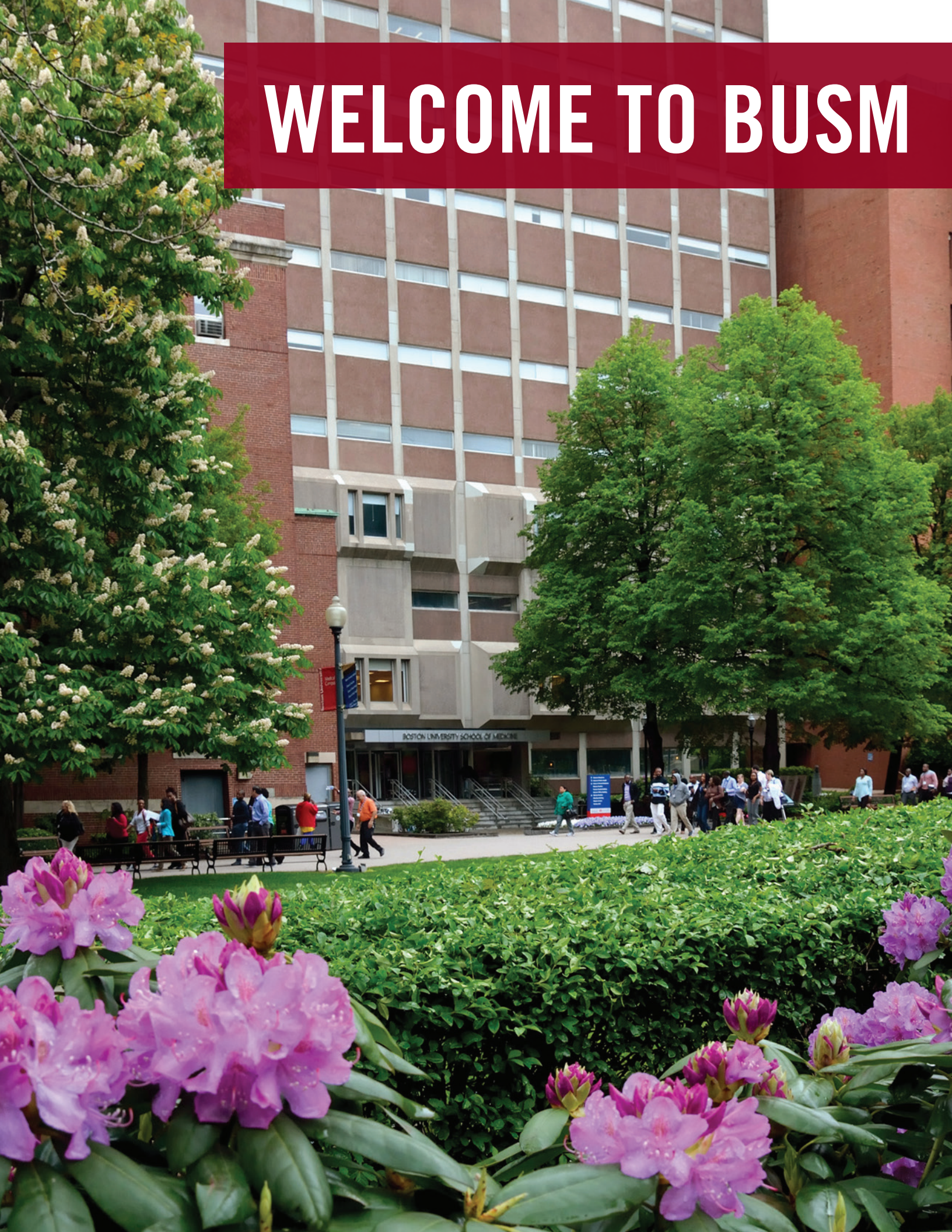








# WELCOME TO BUSM







## **We do more than teach medicine and conduct research, we live it – in Boston and all over the world.**

Our campus comprises a medical school, a dental school, a school of public health, a large division of graduate medical sciences and a very busy hospital. Despite our size, we pride ourselves on the individual attention and support we offer every student. We never lose sight of our responsibility to guide, support and teach our medical students. During the course of my career I have had the privilege to work at other major health sciences centers, and I believe our BU faculty is second to none.

BU School of Medicine (BUSM) is inextricably linked to our principal teaching hospital, Boston Medical Center (BMC). BMC is the largest safety net hospital in New England, and serves as the base for an extensive network of sites providing ambulatory and inpatient care for patients representing all of our society. From core primary care services for the city of Boston, to complex, cutting-edge referral services for patients from all over the world, students are part of the clinical team. Here at BU, students learn the basics of clinical practice by directly contributing to the care of extremely challenging patients.

Boston University Medical Campus is a thriving academic medical center with outstanding opportunities for medical education, faculty dedicated to our diverse patient population, opportunities for electives in South America, India and Africa, and exposure to interdisciplinary, groundbreaking research.

Graced by a large number of exceptionally well-qualified applicants, BUSM is a leader in the holistic approach to recruiting students, which, in addition to academic metrics, emphasizes attributes associated with excellent physicians and considers a wider view of an applicant's life experiences. If, in the end, the admissions process brings you to BU, I will be delighted to help you begin your journey into the remarkable profession of medicine.

**Karen Antman, MD**  
Dean, School of Medicine  
Provost, Medical Campus



# THIS IS FRONTLINE MEDICINE

**This is no ordinary medical school. Here you'll find students, researchers and faculty with a roll-up-your-sleeves attitude, fierce empathy and a global drive. We not only pay special attention to the underserved, but work tirelessly at the edges of modern medicine. Whether it's tackling the resurgence of an infectious disease, uncovering brain injury in a retired linebacker or analyzing health care patterns in rural Zambia, we've built our classrooms at the very frontlines of the human condition.**

It means speaking 70 languages a day. It means meeting people where they are—in rural villages, on street corners, in community health centers, and at our teaching hospital affiliates, including Boston Medical Center. It is direct engagement with complex and even controversial problems—CTE, Ebola, Zika, addiction, PTSD. It is a relentless emphasis on basic science, because the next treatment (or even the next cure) might lie in the next gene sequence or test tube.

In frontline medicine, the stakes are high. They were high when our predecessor school graduated the first black female physician, as they were when we took responsibility for the Framingham Heart Study, one of the great longitudinal research programs in the history of medicine. And they are high every day for the people we serve – often those most at risk of falling through the cracks.

We always have treated and always will treat the underserved. We always have championed and always will champion diversity and inclusion. And we always have provided and always will provide a rich education to the physicians and scientists of tomorrow. Our values and principles are consistent, yet our work changes every day, because medicine does, too.









**FRONTLINE MEDICINE** means being trained to care for any and all people who present with medical needs. This includes patients from a wide variety of different backgrounds; whose languages, cultural traditions, understanding of health, illness and healing, and educational experiences are worlds apart from what our students have experienced. In a national survey, 99% of our graduates report that BUSM prepared them well to care for patients from cultures not their own.

## DIVERSITY AND INCLUSION

In 1848 the New England Female Medical College was established as the first school in the nation to grant MD degrees exclusively to women. The school was integrated shortly thereafter, graduating the first African-American female physician in 1864, Dr. Rebecca Lee Crumpler. In 1873, a merger with Boston University created the first co-educational medical school in the United States - Boston University School of Medicine.

Inclusion and accessibility have been touchstones of Boston University since its founding; these principles are also embraced and embodied by BUSM. Cultural competency plays a major role in shaping a student's approach to patients. Medical students learn how to approach patients entering the health care system with respect, seeking to understand each patient's background and its implications.

In a typical class, our students came from 38 states. Ranging in age from 19 to 31, they represented a wide variety of backgrounds and included many first- and second-generation Americans from 19 countries of origin.

Our commitment to inclusion extends to the community as well. One example is CityLab, an innovative science-education outreach program designed to provide inner-city and under-resourced public school systems with access to state-of-the-art biotechnology laboratories and teaching materials. High school students and their teachers attend two on-campus labs for an intensive learning experience and we in turn visit them via our MobileLab, which takes the laboratory to the school.

More than 70,000 students and 2,000 teachers have reaped the benefits of CityLab; in addition, universities in California, North Carolina, Washington and Glasgow, Scotland have replicated the CityLab model.

At BUSM, inclusion has long been not only the right and fair approach, but also the only way to deliver on our mission of service to a society that is constantly changing and evolving.



## DIVERSITY SPOTLIGHT

ANDREA ALONSO '20



Growing up in a multicultural family, I was raised on the stories of hopeful Cantonese families traversing vast oceans to the unknown mountains of South America, of the stowaway child escaping Franco's Spain, the beautiful Yunque rainforests of Puerto Rico, the dark times of terrorism in Peru and the immigrant experience in America.

Hearing these stories of diverse people, I naturally gravitated toward literature, music, poetry and ultimately, the art and science of medicine. I developed a passion for the arts because they stimulate the mind and evoke universally shared emotions for an array of human experiences. As an undergraduate at Boston College and a master's student at Tufts University, I was involved in areas that combined my passions: working as a music therapy volunteer, a behavioral neuroscience research assistant and a teacher at a program for underprivileged and immigrant children. Throughout my journey, I realized that the practice of medicine is an art deeply rooted in stories and an understanding of the fundamental biology we must creatively traverse with each patient.

I chose to attend BUSM because I wanted to receive my medical education at a strong institution that values diversity in all aspects and accepts all patients with open arms. As a student, I have been grateful to find faculty and mentors who stress the importance of listening to each patient's story and who support a diverse medical experience. I have seen diversity at BUSM everyday through the curriculum; patient visits; a health fair assisting the Latino community in the South End; playing jazz in the BUMC band and engaging with peers working towards the eradication of social disparities in medicine and advocating for the most vulnerable in society. At the heart of BUSM, is the undying belief that through diversity in medicine we will find more creative and innovative methods to provide exceptional care, without exception.

“One of our most important priorities is to increase the presence of all aspects of diversity at the Medical Campus and to explore every alternative for enhancing our commitment to recruit and retain a heterogeneous student body and faculty. We firmly believe that in order for our society to be the strongest it can be, we need to have diversity in the broadest sense in all our institutions—not only diversity of culture, race, and gender, but also diversity of ideas, solutions and perspectives.

No institution in today's world can achieve excellence without widespread cultural inclusion and robust intellectual pluralism.”

**Rafael Ortega, MD**

Associate Dean, Diversity & Inclusion





# ACADEMIC AFFAIRS



## FIRST YEAR

The first year prepares students for their entire four-year journey through BUSM, centering around foundational medical science, human behavior from the individual to the population level and basic clinical skills.

**Principles Integrating Science and Medicine (PrISM)** includes Gross Anatomy, Histology, Biochemistry, Physiology, Genetics, Neuroscience, Endocrinology and Immunology. The emphasis is on normal structure and function along the size spectrum from molecules to entire humans, and clinical content is integrated into all topics. The material is taught in lectures for introduction and explanation of major principles, and emphasized in our small-group, faculty facilitated, case-based discussions called “Integrated Problems.” A primary goal of these integrated courses is not simply learning new information, but developing the clinical reasoning habits required for successful medical practice, and the lifelong learning skills that are essential for a physician. Many of the basic scientific principles introduced in these foundational science courses are revisited in the clerkship curriculum during the third and fourth years, cementing students’ understanding of essential concepts and linking them inextricably to the care of real people.

**Patient to Population Health** prepares students for health care at a larger scale; focusing on understanding principles of human psychological development and behavior at the individual and population levels. Essentials of public health are included in this course, providing the context for health and health care delivery by addressing health policy and law, health disparities, social determinants of health, quality improvement, medical socioeconomics, and medical humanities. Students are trained in evidence-based medicine and biostatistics so that they enter the clinical years with a solid understanding of how to identify and evaluate the best available medical evidence to support patient care.

In **Introduction to Clinical Medicine**, students begin with interviewing patients in groups, progress to learning physical exam skills in small group settings and ultimately work with physician faculty in clinical settings for a 1:1 experience where they see patients and practice their interviewing and physical exam skills under direct supervision.

The Office of Enrichment also works with interested students to plan their summer after the first year, offering opportunities in clinical medicine, bench science and clinical research. In addition to on-campus and local experiences, students can venture out into the world.



Our Global Health program offers clinical, public health, research and culture/language immersion experiences, broadening students' perspective on health and human illness in diverse, societies and far-flung parts of the world.

## SECOND YEAR

The second year curriculum builds on the structure of first year, but focuses on abnormal physiology and treatments. Like the first year, it is based in a year-long, integrated, organ system-based course called **Disease and Therapy (DRx)**. DRx brings foundational science and clinical faculty together to teach pathophysiology and disease management using case-based discussions and workshops with clinical faculty and patients. **Integrated Problems** small-group discussions continue in the second year, again further refining student's clinical reasoning by encouraging students to consider all aspects of a case, from basic science principles to how to gather information to promulgate and refine a differential diagnosis to personalized treatment strategies that take into consideration the whole patient, their story and the broader context of community and health systems.

Introduction to **Clinical Medicine** also continues in year two, adding specific interviewing, physical diagnosis, and procedural skills to repertoires and giving them experience with real patients to develop their problem-solving skills and comfort with the medical environment and with standardized patients who are trained to provide detailed, actionable and behaviorally-oriented feedback.

Both first and second year incorporate advanced technology and active pedagogical methods; including clinical simulation with state-of-the-art simulation models, virtual anatomy and microscopy and direct observation and feedback. Assessment includes written evaluations, knowledge exams and OSCE-style formative and summative exercises. The Office of Academic Enhancement offers a comprehensive suite of learning support services to all students by holding panel discussions and workshops, providing information and materials and helping students develop individualized study plans, including for the USMLE board exams.





## THIRD YEAR

The third year curriculum immerses students in core clinical experiences in all of the core disciplines of modern medicine (Family Medicine, Internal Medicine, Neurology, Ob/Gyn, Pediatrics, Psychiatry and Surgery) and allows for four weeks of a clinical or research selective, and two weeks for Step 2 Board Review. Clinical rotations include both ambulatory and inpatient settings. Clinical training is organized around a progressive increase in responsibility as experience and skills grow.

Students rapidly develop proficiency in patient assessment and information-gathering, use of laboratory testing and imaging, case presentation and clinical problem solving. Each clerkship provides students with learning objectives focused on developing the medical knowledge, clinical and procedural skills and an understanding of the major challenges faced in that field. Students work with residents and attending physicians at the bedside, participate in educational sessions focused on the learning needs of students and join the major teaching conferences of each clinical discipline.

## FOURTH YEAR

The fourth year curriculum is designed to give students ample opportunity to explore career interests or deepen their expertise in areas of interest. Twenty four weeks in the fourth year are dedicated to electives. These can be clinical electives at Boston Medical Center, one of our clinical affiliates, or a different institution entirely. Some students rotate at a hospital or site of interest for their residency training to gain an insider's view of another institution. Elective time can also be used to conduct research – a new project or a continuation of earlier work – or can be devoted to global health by completing research or clinical work abroad.

In response to the urgent and evolving medical needs of our nation's aging population, we train each medical student in geriatrics by requiring a four-week clerkship in the fourth year. In this rotation, students work with interdisciplinary teams to understand community resources for the elderly and to develop skills in complex care management in a variety of settings including nursing facilities and in a patient's home.

Students are required to complete a four-week "sub-internship" in which they assume significant responsibility for patient care, including diagnosis and treatment planning. These rotations are highly intensive, with students serving as a go-to team member for patient care, and requiring an intern-like schedule and independent learning. Fourth year students find sub-internships to be extremely high-yield, with more than 50% of students electing to complete more than the one that is required for graduation.







## EDUCATIONAL PROGRAM

The mission of the Doctor of Medicine program at BUSM is to educate physicians who will have the knowledge, skills, and dedication necessary to provide the best care to patients from all communities in our diverse society.

An integrated, hybrid curriculum incorporates elements of a traditional lecture style with small group discussions, laboratory exercises and problem-based learning seminars. To focus on the learner and to ensure ample time for small group discussion, no student spends more than three hours per day in lecture. Clinical experience starts in the first week of the first year and expands steadily so that by the time clinical clerkships begin in the third year, students are ready to apply the tools of evidence-based medicine in hands-on clinical practice.

In addition to the traditional priorities of education, research, and clinical service, more than 1,200 full-time faculty members also focus on our public health mission. Students learn to weave these themes into an integrated approach to treating individuals within communities.

### Educational Objectives

- A grounding in basic science that will allow students to keep pace with the rapid advances in science relevant to medicine;
- The motivation, skills, and intellectual resources to be lifelong learners;
- The concepts, principles, and practices associated with the ethical and honorable practice of medicine;
- An appreciation for the principles of preventive medicine such as the fundamentals of diet and exercise as well as the broader public health perspective; and
- A dedication to advocacy on behalf of patients at both the clinical and societal levels.

## BU CARES

BU CARES stands for the BUSM education program's seven fundamental objectives that describe the knowledge, skills, and attitudes every graduate should possess. The principles behind BU CARES guide the management of the curriculum, inform student assessments, and form the basis of all course and clerkship learning objectives.

### The BU CARES Institutional Learning Objectives

The objectives are linked to the Accreditation Council for Graduate Medical Education (ACGME) competencies in parentheses.

#### The BUSM Graduate

**B**ehaves in a caring, compassionate, and sensitive manner toward patients and colleagues of all cultures and backgrounds, using effective interpersonal and communication skills  
**(Interpersonal and Communication Skills; Professionalism)**

**U**ses the science of normal and abnormal states of health to prevent disease, to recognize and diagnose illness, and to provide an appropriate level of care  
**(Medical Knowledge; Patient Care)**

**C**ommunicates with colleagues and patients to ensure effective interdisciplinary medical care  
**(Interpersonal and Communication Skills; Patient Care)**

**A**cts in accordance with the highest ethical standards of medical practice  
**(Professionalism)**

**R**earches and critically appraises biomedical information and is able to contribute to the advancement of science and to the practice of medicine  
**(Practice-based Learning and Improvement; Medical Knowledge)**

**E**xhibits commitment and aptitude for lifelong learning and continuing improvement as a physician  
**(Practice-based Learning)**

**S**upports optimal patient care through identifying and using resources of the health care system  
**(Systems-based Practice; Patient Care)**



## FIRST YEAR



## SECOND YEAR



## THIRD YEAR

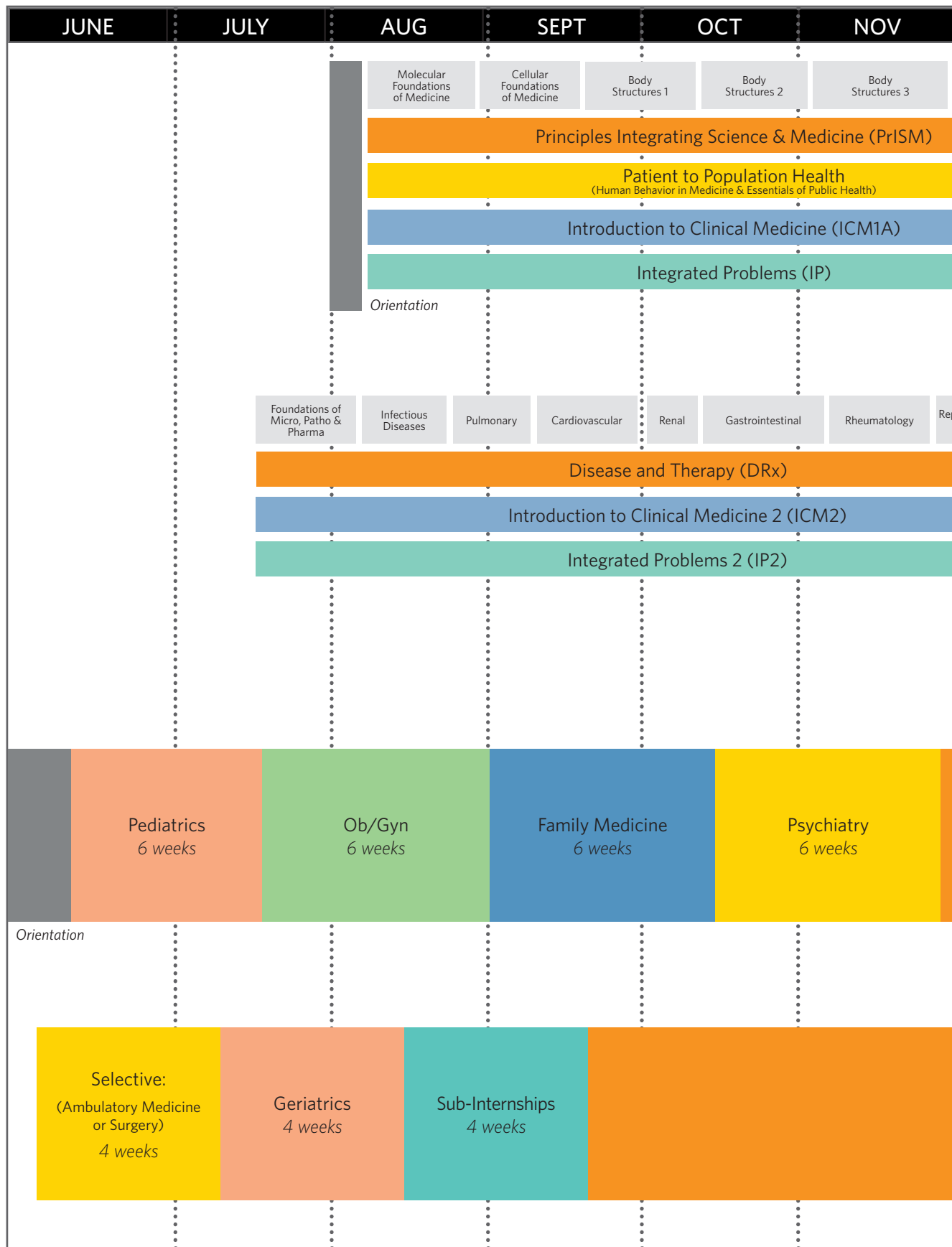


Sequence of rotations and timing of vacations varies for each student

## FOURTH YEAR



Sequence of rotations and timing of vacations varies for each student









# STUDENT AFFAIRS



## OUR VISION

To provide students with a unique PATH to personal and professional excellence.



## OUR MISSION

To provide advice, guidance, and opportunities for creativity, service, reflection and growth.

In medical school, students develop the knowledge, skills and attitudes necessary to become a physician. To limit this process to the simple acquisition of new information is to focus on only a segment of the process of becoming a doctor. Through the years at BUSM, students develop a new identity, gradually taking on the role of physician. The Student Affairs office provides the critical structure for this transformation to take place, as students adopt relevant experiences, concepts, ideals and goals as their own to truly become physicians. The Student Affairs office supports students through PATH, which organizes the components of this process:



- P** - Professional identity formation
- A** - Advancing to residency through mentoring and advising
- T** - Technique acquisition in lifelong learning, resiliency and wellness
- H** - Humanism

### Professional identity formation (P)

Professional identity formation results from the gradual development of professional values, practices and personal goals, influenced by decisions made and experiences in the clinical and nonclinical environment. The many student-run, faculty-supported extramural activities at BUSM complement our academic rigor and clinical opportunities.

#### Student Activities

The Student Affairs office (OSA) encourages students to get involved in campus life through the myriad activities available to them. The office supports more than 90 student organizations, career interest groups, service learning activities and the Wellness Initiative. Research and community service opportunities and academic interest groups are available to all students to develop professional identity and nurture humanistic qualities throughout the four years of a medical education.

Some examples:

- American Medical Association/Massachusetts Medical Society
- American Medical Women's Association (AMWA)
- Latino Medical Student Association (LMSA)
- Physicians for Human Rights (PHR)
- Emergency Medicine Interest Group (EMIG)
- Pediatric Education and Development Society (PEDS)
- Integrative Medicine
- Resources and Education for Adolescents and their Children (REACH)
- Outreach Van Project
- Cuddling Assists in Lowering Maternal and infant stress (BUSM CALM)
- Student Nutrition Awareness and Action Council (SNAAC)

• For more information and a complete listing of student activities, please visit:

• [bumc.bu.edu/busm-osa](http://bumc.bu.edu/busm-osa)



## Advancing to residency through mentoring and advising (A)

Throughout medical school, students connect with faculty and colleagues and learn to actively seek advice and mentoring in order to prepare themselves for their future careers.

### Advising Network

BUSM students have many opportunities to obtain mentoring and career advice, both informally and through the Advising Network program, which connects students with faculty and peers.

The associate dean and assistant deans in the Student Affairs office play an important role in advising and mentoring students throughout the medical school experience.

“All the assistant deans in the office join me in encouraging students to meet with us. We have an open-door policy and welcome students—both individually and in small groups—for discussions on any topic,” Dean Angela Jackson stresses.

In the first and second year, students are assigned to a small group for Integrated Problems (IP). Faculty members who lead the small group discussions serve as faculty advisors (IP Advisor) during all four years of the curriculum. In their third year, students also select a Field Specific Advisor to help them through the career selection and residency match process.



Angela Jackson, MD, Associate Dean for Student Affairs, Associate Professor of Medicine

Throughout the year, the Advising Network offers opportunities including:

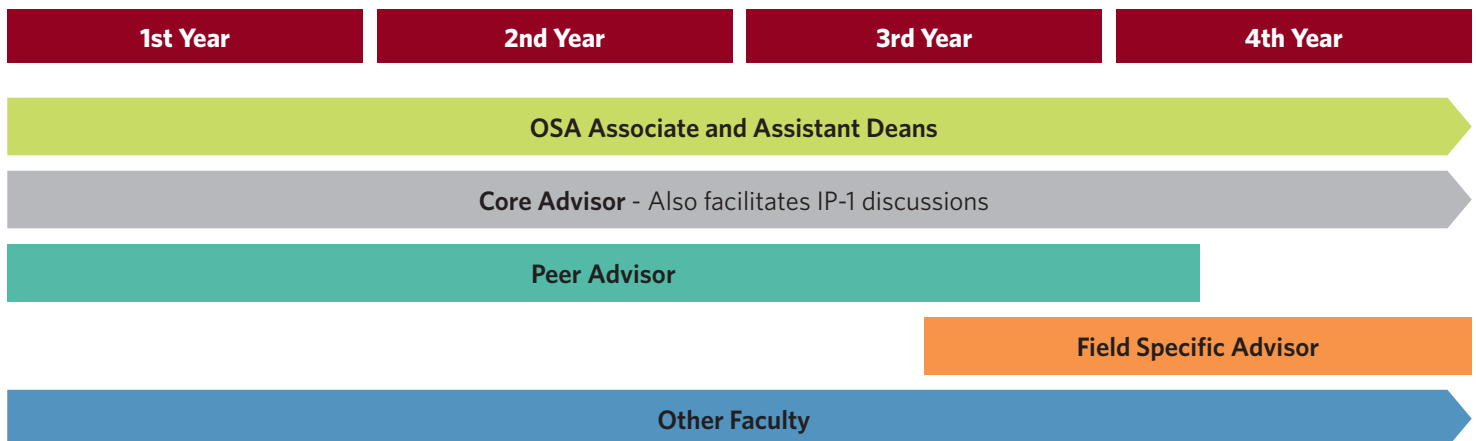
- Dinners hosted by faculty
- Breakfast meetings
- Social events
- Regular one-on-one and small group meetings with advisors

### Peer Advising

The Peer Advising Program gives incoming students advice about life and learning at BUSM in an informal manner. Prior to arriving on campus, incoming first-year students are paired with second- and fourth-year students.



### Advising Network: Assigned Advisors





## **Technique acquisition in lifelong learning, resiliency, and wellness (T)**

Students develop and nurture lifelong learning and resilience skills throughout their time at BUSM. Student Affairs plays an important role in partnering with students to support wellness promotion and overall balance.

Housed within the OSA, the Academic Enhancement office helps students achieve their full academic potential and offers a variety of resources for course and licensing exam preparation. The office hosts a series of educational workshops and panel presentations focusing on study strategies, time management, work-life balance and strategic ways to navigate the medical school curriculum.

The Board Review Program helps students prepare for the Step 1 & 2 exams. Components include student panels, academic conferences, planning sessions, faculty review sessions, creating intensive study schedules and the Comprehensive Basic Science Self-Assessment (CBSSA).

Academic Enhancement also offers peer tutoring free of charge to all medical school students. Course and clerkship directors hire knowledgeable students

who have excelled in the curriculum and completed the Tutor Program training to serve as tutors for each course and clerkship.

BUSM has a long history of actively supporting and accommodating students with disabilities. Information regarding reasonable accommodations for disabilities can be found on the School of Medicine's Academic Enhancement office website at [bumc.bu.edu/busm-osa/academic-enhancement](http://bumc.bu.edu/busm-osa/academic-enhancement).

## **Wellness Initiative**

This student-run, OSA-supported program's mission is to advocate for a healthy balance of mental, emotional, and physical well-being for all students; to enhance the medical student experience and to provide students with resources for personal and professional development. Activities include the Wellness Fair and Wellness Initiative Calendar, which includes upcoming wellness-related events on campus and around town and makes it easy for students to connect and schedule activities.

## **Humanism (H)**

The Arnold P. Gold Foundation describes humanism in health care as "characterized by a respectful and compassionate relationship between physicians, as





well as all other members of the health care team, and their patients. It reflects attitudes and behaviors that are sensitive to the values and the cultural and ethnic backgrounds of others.” Some of the initiatives specifically designed to support humanism in our students include:

### “Letter to Yourself”

During First-Year Orientation, students write a letter to themselves that they will receive back in their last year of medical school. In the letter, students answer the question, “What does it mean to you to be a doctor?” and, as fourth-year students, reflect on their journey through medical school.

### Human Connections

First-year students are paired with an at-risk individual from a variety of clinical settings. During the two-hour session, the discussion focuses on the person—their life story, their community, and their experiences with the health care system—in contrast to the patient, with the necessary focus on diagnosis or symptoms during coursework.

This gives students the opportunity to better understand the impact doctors have on the lives and well-being of the people they see.

### Portfolio

An online platform offered to students at the beginning of their first year at BUSM to help them catalog, track and reflect on their progress in medical school. The portfolio is used to review their progress with their advisors and the Student Affairs dean.

### Service Learning

Service Learning at BUSM is an eclectic group of experiential educational activities supporting the well-being of our students by nurturing humanism, professionalism and leadership. Service Learning complements the BUSM curriculum by giving students the opportunity to work collaboratively with faculty in order to better understand the social determinants of health in our most vulnerable populations.

Instilling a dedication in students to advocate for patients at the clinical and societal levels is one of the objectives of a BUSM education. The unifying theme of this experience is that medicine and the health sciences exist in a larger social context, and students learn to care for—and about—people who may be wholly unlike themselves.







## SCHOLARLY CONCENTRATION IN ADVOCACY

The groundbreaking BUSM program **Spectrum of Physician Advocacy** trains students to become leaders in medical advocacy. Patients more adversely affected by societal inequalities often face a host of issues that threaten their health and well-being; simply providing them with medical care is not enough to improve their health. To appropriately and effectively treat these patients and promote their health, physicians must become advocates, yet advocacy training is not generally part of formal medical education.

A group of fourth-year students at Boston University School of Medicine (BUSM) developed a program to meet that need, an elective that offers curriculum throughout the four years of medical school: the **BU Advocacy Training Program (BU ATP)**. This student-run and faculty-mentored initiative successfully develops students into physician advocates who are both anchored in the social determinants of health and leaders in the field of physician advocacy.

The program consists of a first-year course focused on the social determinants of health taught by students who have already taken the course and faculty engaged in advocacy, and a second-year course focused on interdisciplinary learning taught by medical and law students, and physicians and lawyers engaged in advocacy. In the third year, students learn from case-based online modules related to the rotations they are taking that year, and in the fourth year they choose a faculty-mentored advocacy project. The curriculum addresses how advocacy can be applied to direct patient care, why advocacy is linked to the mission of medicine, health disparities

that exist at all levels and local trends in health outcomes and potential interventions to ameliorate the inequities. Students learn how to translate patient information and community trends into data that can help inform health and public policy making, and recognize opportunities for greater involvement in the promotion of individual patient health and well-being, community development, health policy and global health. They also learn how to create research-based advocacy tools; how to screen for housing, food and energy insecurities; and how immigration status and eligibility for benefits influence health or health outcomes.

Mentorship is a significant component of the program. Aligned with the BU Medical Campus mission to care for the underserved, there are many faculty members who are deeply involved in and committed to physician advocacy.

A 2012 grant awarded to BUSM by the Josiah Macy Foundation and the Institute on Medicine as a Profession built on BUSM's now well-established and innovative advocacy elective. According to Dr. Angela Jackson, the principal investigator for the project and associate dean for students, "Inoculating Against the Hidden Curriculum: Professionalism through Advocacy" incorporates an emphasis on patient advocacy throughout the four years of the medical school curriculum. All students are introduced to the concept of a physician's broader role and responsibility to society, using advocacy as a platform to showcase professionalism in action.



# ON THE SHOULDERS OF GIANTS

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**Rebecca Lee Crumpler**<sup>1</sup> holds a place in American history as the first African American woman to receive an MD. Crumpler received a Doctress of Medicine degree in 1864 from the New England Female Medical College (which merged with Boston University in 1873). After her graduation, Crumpler moved to Virginia where, amidst the severe racism of the postwar South, she worked with other black physicians treating freed slaves, a group that otherwise would not have had access to medical care. She later returned to Massachusetts and practiced medicine in Boston's black community.

**Robert W. Wilkins**<sup>2</sup>, a longtime member of the BUSM faculty who eventually became chairman of the Department of Medicine, is known for his groundbreaking research in hypertension. In the 1940s, he challenged the common medical reasoning that high blood pressure was necessary to pump blood through the narrowed arteries of hypertensive patients. He and his researchers later developed the first drug therapies to control hypertension. In the 1950s, Wilkins served as head of the Council of High Blood Pressure Research and as president of the American Heart Association.

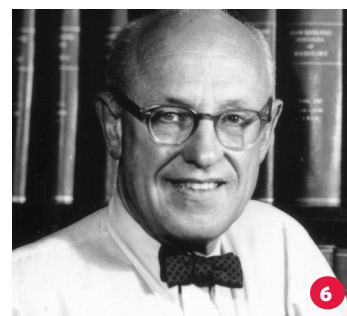
**Louis W. Sullivan**<sup>3</sup>, a BUSM alumnus, founded the Morehouse School of Medicine in Atlanta, Georgia, and served as secretary of the US Department of Health and Human Services from 1989 to 1993. Sullivan earned his medical degree from BUSM in 1958 and returned to the School as a member of the hematology faculty in 1966. After nine years at BUSM, he returned to his hometown of Atlanta to become director of the Medical Education Program at Morehouse College, which later became the independent Morehouse School of Medicine with Sullivan as its dean and first president.

**Chester Scott Keefer**<sup>4</sup> was dean of BUSM from 1955 to 1960 and is credited with brokering the merger of BUSM and Massachusetts Memorial Hospital (the

associated teaching hospital) to form the academic health center that exists today. While director of the Evans Memorial Department of Clinical Research from 1940 to 1955, he greatly expanded the physical space of the department and recruited investigators who also had teaching roles at the Medical School and patient-care duties at the hospital. During World War II, Keefer served as chairman of the National Research Council's committee on chemical therapy and was in charge of administering the nation's severely limited supply of penicillin, a function that earned him the nickname "Czar of Penicillin."

**Mary Jane Safford**<sup>5</sup> was one of BUSM's founding faculty members. She joined the School as a professor of diseases of women in 1873, and from 1878 to 1886 she was a professor of gynecology. Safford is best known for her nursing efforts on the battlefields of the Civil War. During the Battle of Belmont in 1861, she courageously treated the wounded, walking the battlefield with a white handkerchief tied to a stick amidst enemy fire. She also nursed soldiers wounded in the Battle of Shiloh and worked on the hospital ship Hazel Dell. After the war, Safford attended the New York Medical College for Women, receiving her MD in 1869.

**Franz J. Ingelfinger**<sup>6</sup> dedicated 27 years (1940-1967) to research and teaching in gastroenterology at BUSM before finishing his medical career as editor of *The New England Journal of Medicine*. Ingelfinger is credited with significant clinical advances relating to the esophagus and small intestine and is often referred to as the father of modern gastroenterology. He served as director of medical services at Boston City Hospital (a predecessor of Boston Medical Center) from 1961 to 1967, developing the medical services into a nationally recognized teaching unit. Ingelfinger was a recipient of the George M. Kober Medal, the highest honor bestowed by the Association of American Physicians.





# BOSTON UNIVERSITY MEDICAL CAMPUS

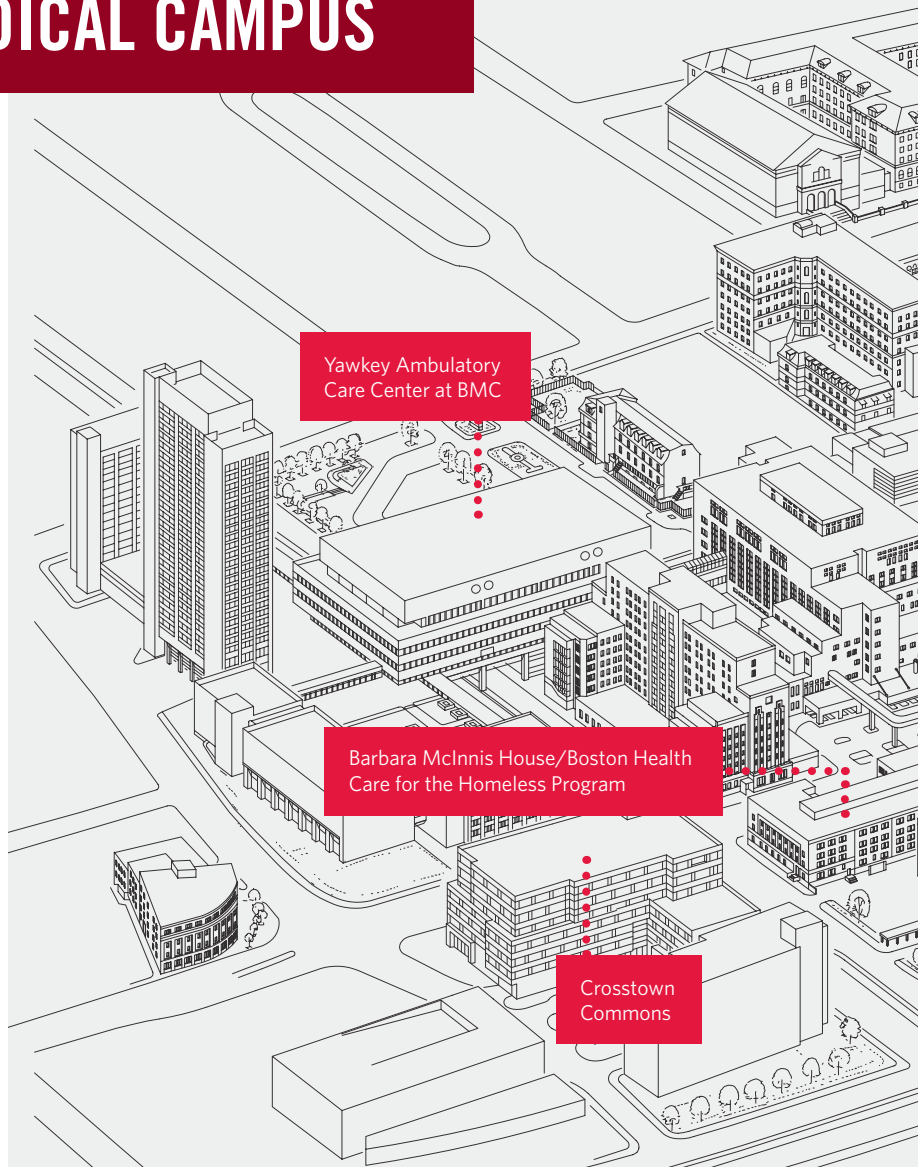
## A SCIENTIFIC COMMUNITY

In addition to the medical curriculum, the School of Medicine boasts a vibrant Division of Graduate Medical Sciences with innovative master's and doctoral programs—including a new Master in Clinical Investigation—and a very strong Continuing Medical Education department.

At the School of Public Health, students can complete a combined MD/MPH degree in five years.

Many investigators from the Henry M. Goldman School of Dental Medicine participate in research across the campus. BioSquare, a 16-acre biotechnology park adjacent to the campus, provides core research facilities for the faculty.

Boston Medical Center provides exceptional care without exception. The famous Boston City Hospital (1864) merged with University Hospital in 1996 to form the largest safety net hospital in the northeast as well as New England's busiest emergency department.



Left | Due to popular demand, a new student lounge for medical students was created in early 2018.

Right | The Medical Student Residence opened in 2012 and houses more than 200 students. See more on page 31.



Instructional Building: most events, lectures and small group discussions occur here. The spectacular view of the Boston skyline from the 14th-floor lounge makes it a popular spot. The building includes a new student lounge and renovated library.

Solomon Carter Fuller Mental Health Center

Henry M. Goldman School of Dental Medicine

School of Public Health

Moakley Integrated Care Center

National Emerging Infectious Disease Laboratories

The Shapiro Ambulatory Care Center houses the BMC's Emergency Department, a Level 1 trauma center with 130,000 visits per year.

BioSquare: 16-acre biotechnology park

Office of the Chief Medical Examiner



↶ The library is everywhere, offering wireless round-the-clock access to MEDLINE, 6,593 e-journals, 8,782 e-books and 346 bibliographic databases. The Alumni Medical Library is open 106 hours a week and provides 143 student computers in 4 classrooms and multiple public locations. One the hospital side, BMC operates more than 6,000 PCs and utilizes computerized physician order entry, physician documentation, and state-of-the-art radiology, laboratory and pharmacy systems.

“ Diversity is the theme of this campus. We are a diverse community of scholars in the health sciences—clinicians, basic scientists, international health advocates and policy makers, students, dentists, public health professionals and nurses. We offer the traditional values of medicine—notably, caring for the patient—in a high-tech world. ”

**Robert A. Witzburg, MD**  
Professor of Medicine, Emeritus



# CLINICAL EXPERIENCE

Clinical training is one of the most critical and exciting parts of the medical school experience.

At BUSM, clinical training evolves over the entire four-year curriculum, beginning in the first week of medical school with Introduction to Clinical Medicine (ICM1). In this weekly half-day program, students begin with supervised patient interviews designed to help them understand the unique power of the doctor-patient relationship. Later in the year, each student joins an active clinical practice, completes some structured interviewing exercises, and participates in ongoing patient care in selected hospitals and office-based teaching practices.

During the second year (ICM2), students hone their information gathering skills by learning to perform targeted as well as general histories and physical exams. In addition, they begin incorporating diagnostic, laboratory and imaging tests and use simulators, modules, and standardized packets to practice advanced skills. A thorough end-of-year assessment and four required case write-ups ensures that students are ready to progress to year three.

The third-year program includes the core clerkships: Obstetrics and Gynecology, Medicine, Surgery, Pediatrics, Family Medicine, Psychiatry, Radiology and Neurology. Discipline-specific block rotations include both ambulatory and inpatient experience. Students work in clinical teams with interns, residents, fellows and faculty, and also take part in student-specific teaching conferences and clinical skills training.

Two new clinical clerkship sites are available for third-year students at Kaiser Permanente Medical Center San Jose and Kaiser Permanente Medical Center Santa Clara in California. Full-year, six-month, and three-month programs offer unique opportunities related to health care technology, preventive medicine and a progressive health care delivery model.

Students develop electronic health system mastery, participate in quality improvement training programs and develop their own quality improvement projects. The Kaiser partnership enhances BUSM's mission of social justice and service and continues its tradition of commitment to underserved patient populations, while allowing students who wish to do so to spend 3, 6, or 12 months of their third year in California.

During the advanced clerkships of the fourth year, students build on their basic skills and experiences and refine their career interests. Required clinical clerkships take place in multiple inpatient settings, including Boston Medical Center—our Medical Campus-based academic medical center—the Boston VA Healthcare System and a variety of community-based hospitals from Maine to Cape Cod (for a total of 26 inpatient affiliations). Outpatient clerkships take place at the Medical Center and other hospital outpatient clinics and in community-based practices and community health centers throughout Boston and the New England region.

## Learning Objectives for Patient Care

As a result of clinical training, students will be able to:

- Obtain complete and reliable histories using appropriate interview techniques;
- Perform appropriately focused and accurate physical examinations;
- Analyze clinical problems and identify relevant issues;
- Develop differential diagnoses and evaluation plans;
- Employ laboratory tests and imaging technologies in a cost-effective manner;
- Integrate and apply data to the management of clinical problems; and
- Create management plans that consider cultural issues in formulating treatment regimens and assessing compliance.





## **Boston Medical Center**

A 567-bed\* academic medical center that handles more than 25,000 admissions and one million patient visits annually, Boston Medical Center is BUSM's primary teaching hospital and provides the core clinical experience. About 800 residents and fellows participate in 66 separate training programs.

A large, urban, full-service hospital with the busiest emergency department in New England, BMC is the Level I Trauma Center for the city of Boston. BUSM students actively participate on patient care teams across the full spectrum of the modern practice of medicine. In addition to their activities at Boston Medical Center, BUSM students participate in clinical programs at a broad-based clinical and educational network. This network includes community hospitals and health centers, small and large practices, veterans' facilities and Boston University Geriatric Services, which has provided home-based care to frail elders in Boston neighborhoods for over 140 years.

\*Temporary increase in beds due to campus redesign

## **Boston HealthNet**

Boston HealthNet is a network affiliation of Boston Medical Center and BUSM with 14 community health centers that focus on disease prevention and health education. This integrated health care delivery system provides outreach, prevention, primary and specialty care and dental services to adult and pediatric patients at sites located throughout Boston's neighborhoods and Quincy.

Along with Boston Medical Center, major affiliates include:

### **Roger Williams Medical Center**

Providence, RI  
[rwmc.org](http://rwmc.org)

Roger Williams Medical Center is nationally recognized for innovative programs in health care, education and research. With 220 acute care beds, the medical center combines sophisticated teaching and research with the individualized care of a community hospital. Treating physicians are closely involved with innovative cancer treatments and up-to-date experimental therapies.



### **Boston VA Healthcare System**

Veterans Administration Medical Center  
boston.va.gov

The Boston Veterans Administration Medical Center is a major patient care, teaching and research facility. Inpatient tertiary care services are concentrated at the West Roxbury campus, while ambulatory care is provided at all three campuses and in many satellite clinics. The hospital offers primary care and also serves as a referral center for specialized care from other VA facilities throughout New England. The Boston VA Medical Center conducts a vigorous program of medical research, including major activities in epidemiology, health services research, women's health, cognitive neuroscience and a broad spectrum of basic laboratory research.

### **Bedford VA Medical Center**

Bedford, MA  
Veterans Administration Medical Center  
bedford.va.gov

The Bedford Veterans Administration Medical Center is a long-term-care facility specializing in geriatric and psychiatric care. Comprehensive health services include mental health, medicine, psychiatry, physical medicine, dentistry, geriatrics and ambulatory care. The Geriatric Research Education Clinical Center (GRECC) at the Bedford facility has been at the forefront of geriatric research and clinical care since its inception in 1975. The Medical Center maintains a comprehensive clinical Alzheimer's disease program and provides special programs in mental health intensive case management, compensated work therapy and peer services.

### **Mount Auburn Hospital**

Cambridge, MA  
mountauburnhospital.org

Mount Auburn Hospital has 213 licensed beds, and provides comprehensive inpatient services in all medical specialties. The emergency department and walk-in center serve more than 50,000 patients each year. Specialty services include obstetrics and level II neonatology with physician and midwife deliveries of more than 2,000 newborns annually. The hospital has been ranked among the top 100 hospitals in the United States for cardiovascular care and intensive care and provides a broad spectrum of oncology services.

### **MetroWest Medical Center**

Framingham, MA  
mwmc.com

MetroWest Medical Center is the largest health care system between Worcester and Boston, Massachusetts, and provides advanced care with a community touch. The 269-bed regional health care system includes Framingham Union Hospital, Leonard Morse Hospital in Natick and the MetroWest Wellness Center, an outpatient diagnostic imaging and rehabilitation center.

### **Beverly Hospital**

Beverly, MA  
beverlyhospital.org

Beverly Hospital is a full-service, 221-bed, community hospital providing quality, patient-centered care to residents north of Boston. Services include maternity, pediatrics, surgical, orthopedics, cardiology and several other specialties. The hospital has a medical staff of more than 500 physicians and its service area includes some 13 communities. It is part of Northeast Health System, Inc., an integrated health care system comprised of a network of hospitals and behavioral health, long-term care, and human service providers with a full continuum of services.

### **Kaiser Permanente Medical Centers**

San Jose and Santa Clara, CA  
kaiserpermanente.org

Kaiser Permanente is a leader in health care technology, preventive medicine and progressive health care delivery, and patient safety and quality improvement. Students rotate in family medicine, OB/GYN, internal medicine, psychiatry and neurology at San Jose, and pediatrics, surgery, radiology and psychiatry at Santa Clara. They may also participate in quality improvement programs by developing a quality improvement project.

### **Berkshire Medical Center**

Pittsfield, MA  
berkshirehealthsystems.org

Berkshire Medical Center and its Hillcrest and North Adams campuses are part of the Berkshire Health System (BHS). The three locations serve all residents of Berkshire County, Massachusetts, and communities in adjacent eastern New York, northwest Connecticut and southwest Vermont. Berkshire Medical Center is a 298-bed community hospital that offers a full continuum of medical specialties plus diagnostic imaging that is available 24 hours a day. Medical students rotate at BHS in surgery and medicine, family medicine and pediatrics.

# OPPORTUNITIES FOR RESEARCH

A robust research environment offers opportunities for research electives and advanced study.

### **BUSM offers:**

- Funded summer research opportunities for students
- Approximately 600 funded research projects
- \$385 million in sponsored research
- A combined MD/MA in Clinical Investigation

### **Building on More Than 100 Years of Excellence in Research**

The School's superior laboratories won gold medals at the St. Louis World's Fair in 1904 and earned recognition in the influential 1910 Flexner Report. In the past half century, the School has demonstrated particular expertise in arthritis, cancer, cardiovascular disease and hypertension, dermatology, endocrinology, geriatrics, immunology, infectious disease, nephrology and pulmonary disease. BUSM is home to the Framingham Heart Study, perhaps the single most influential clinical study in modern medicine.





## Equipment and Resources Core Facilities

- Analytical Instrumentation Core
- Animal Research Resource Center
- Biomedical Imaging Center
- Biospecimen Archive Research Core
- BU Clinical and Translational Science Institute
- Cellular Imaging Core
- Confocal Microscope Facility
- Developer Core
- Experimental Pathology Laboratory Service Core
- Flow Cytometry Core Facility
- High Throughput Screening Core
- Immunohistochemistry (IHC) Core Facility
- Infrared Imaging Core
- IVIS Imaging Core
- Metabolic Phenotyping Core
- Microarray Resource Core Facility
- Molecular Genetics Core Facility
- MRI/NMR High Field Imaging Core
- Proteomics Core Facility
- SPR Core
- Transgenic Center

## National Centers of Excellence

- Allergy, Asthma & Immunology Diseases Clinic/ Research Center
- Alzheimer's Disease Center
- Clinical Research Unit for Alcoholism Treatment
- Multipurpose Arthritis & Musculoskeletal Diseases Center
- Specialized Center of Research in Coronary Heart Disease in Blacks
- Boston Environmental Hazards Center
- Specialized Center of Research in Hypertension
- National Mass Spectrometry Center
- National Center for Post-Traumatic Stress Disorder
- Specialized Center of Research in Pulmonary Fibrosis
- Center for Sexually Transmitted Diseases
- National Center of Excellence in Women's Health



## NEIDL: Finding Cures, Saving Lives

**The National Emerging Infectious Disease Laboratories (NEIDL)** is part of a network of secure facilities that study infectious diseases - whether they occur naturally or are introduced through bioterrorism.

The NEIDL is dedicated to cutting-edge basic and clinical research on emerging and re-emerging infectious disease to develop diagnostic tests, treatments, and vaccines and will support a national response in the event of a biodefense emergency.

## BUSM Professor Earns Nobel Prize

Osamu Shimomura, PhD, Professor Emeritus of Physiology at BUSM and a Senior Scientist Emeritus at the Marine Biological Laboratory in Woods Hole, Massachusetts, was a joint winner of the 2008 Nobel Prize in Chemistry.

Shimomura is credited with the discovery of green fluorescent protein, or GFP, which he observed in 1962 in jellyfish found off the west coast of North America. Years later, other scientists developed techniques for fusing GFP to proteins in

an organism, allowing researchers to observe the locations and movements of the studied proteins by monitoring the GFP, which remains fluorescent.

According to the Royal Swedish Academy of Sciences, GFP has become "one of the most important tools in contemporary bioscience," allowing researchers to watch biological processes that were previously invisible.



# GLOBAL HEALTH EXPERIENCE



Boston University School of Medicine's Global Health Experience program takes students around the world with a mission. In every corner of the globe, BUSM students bring clinical skills to urban health centers, rural clinics and small villages. Judging from a sampling of their observations, these students make meaningful contributions to the sites they visit while significantly adding to their own fund of knowledge. Approximately 20 to 25 percent of fourth-year students complete an international health elective; others take advantage of the combined MD/MPH degree to devote more time and coursework to international health.

The following excerpts are stories from students who have participated in the Global Health Program. Learn more at [bumc.bu.edu/ghbusm](http://bumc.bu.edu/ghbusm).

## Vitoria, Brazil

### Nucleo de Doenças Infecciosas

My activities were structured around clinic time in the morning and a research project in the afternoon. I was introduced to the social realities of TB patients in Brazil and was welcomed into the homes of local people to talk with them about their lives, community and

health. I learned how the Brazilian health care system functions. By shadowing doctors in the TB program, I saw how directly observed therapy is managed and how patients receive TB and HIV drugs with no out-of-pocket cost. I heard many opinions as to how the Brazilian system compares to the US and how it can be improved. We visited community health posts and met staff members who provide primary care to patients in their communities.

## Riobamba, Ecuador

### Cacha Medical Spanish Institute

Between my first and second years of medical school I journeyed to Riobamba, a small city nestled in the Andean highlands of Ecuador. In the mornings, I ventured to the surrounding highlands along with a few other BUSM students to meet with families dispersed in different rural communities; each afternoon, I engaged in intensive medical Spanish instruction at Cachamsi, a nonprofit international medicine program. We pioneered a summer health camp for the indigenous children of two villages, teaching them basic health, hygiene and nutrition in their one-room schoolhouses.

Without enough writing materials for all, proficiency in the native dialect, or heating of any sort, together we creatively and resourcefully brought about learning in the purest sense. My experiences taught me lessons of persistence and humility. They inspired me to address global population health needs by pursuing clinical training and enriching my public health involvements.





My experience allowed me to see how infectious disease is approached in a clinical setting as well as in a research setting. At the pediatric infectious disease inpatient unit, I saw procedures being done, went on rounds with doctors and residents and interacted with medical students also being introduced to the field of infectious disease. At the Nucleo, I saw how blood sample analysis is accomplished, interacted with students completing their dissertations, participated in a community-based research household study of TB transmission and completed a research project with my BU classmates.

## Lambarene, Gabon

Albert Schweitzer Foundation Fellowship

In the beginning of the fellowship I was mostly shadowing; my first responsibility was to make sure things were organized for rounds. This was useful, as I learned what was needed for rounds: the nurse's sheet, where he/she records the main changes in the treatment plan and the medical record. I was responsible for ensuring that lab results were written in the medical record. I also learned how to discharge people quickly and when and for which cases we give a follow-up appointment and lab exams.

Next, I started to see the patients and began examining them, talking to them and proposing and executing treatment plans. At the maternity ward, I collected the medical records of babies born in the past 24 hours, then called the mothers to bring their babies in, which could sometimes be challenging due to language issues. I would then speak to the mothers or their family members, examine

the baby and give them prescriptions. I would also ensure that we knew the HIV status of every mother who gave birth. Village clinics were fun and it was a nice way to break up my week in pediatrics. We would go to a village, and I would help them weigh the patients, track their growth in the carnet and see pediatric consultations. Some days there were none, and some days I would see as many as nine.

## Hyderabad, India

LV Prasad Eye Institute

The hospital had an excellent pediatric vision center for children with disabilities, where they counsel patients and advise their families as to the opportunities available for the child to improve vision, speech and motor abilities. I spent time in the low-vision center, where they train patients with low vision to function and use appropriate aids. I had the chance to see how the tasks were done in each department and also meet with the directors to understand their approach, goals and objectives and how all that fits with the overall mission of the hospital. I also had the opportunity to visit a remote clinic, where a makeshift eye hospital had been set up.

We traveled to a rural hospital that had been built to serve a community of 500,000 people spread across 100 villages. We learned about the LV Prasad Eye Institute model for reaching rural citizens. Each village has one center that serves 10,000 people and another that serves 50,000. Ten of these secondary centers feed into the rural hospitals, all of which feed into the main hospital in Hyderabad.





**◀ Kristen Goodell, MD**

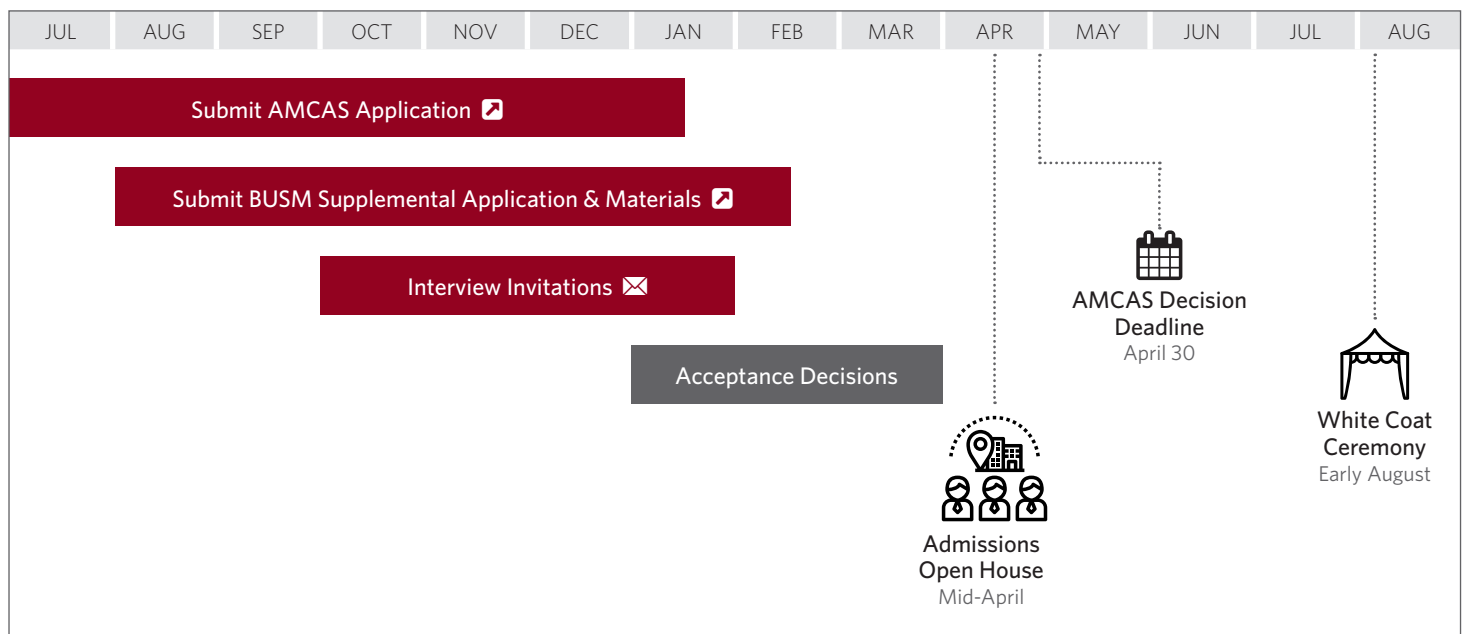
Associate Dean of Admissions; Assistant Professor of Family Medicine

The Committee on Admissions conducts a comprehensive, flexible, holistic review of all applicants to bring together a diverse student body constituted of academically gifted, highly motivated and resilient students who share a deep commitment to the values and goals of our profession and our institution. This review focuses on each individual applicant’s talents, accomplishments, experiences and potential to contribute to the learning community by drawing upon information from the academic record, life history, recommendations, essays and interview.

We select and recruit students who are diverse in numerous ways, including—but not limited to—their educational, social, cultural, linguistic, economic, racial, and ethnic backgrounds and their life experience.

## ADMISSIONS TIMELINE

Interested applicants are encouraged to initiate an application at the American Medical Colleges Application Service (AMCAS) at [www.students-residents.aamc.org](http://www.students-residents.aamc.org). All applications received from AMCAS will be invited to complete the BUSM Supplemental Application. Completed applications are reviewed, and selected applicants are invited for an on campus interview.





## Application Requirements

- English Composition or Literature (1 year)
- Humanities (1 year)
- General Chemistry (1 year) with Lab
- Organic Chemistry (1 year) with Lab
- Physics (1 year)
- Biology (1 year) with Lab
  
- MCAT scores must be no more than four years old.
  
- Junior or community college, CLEP, or AP credits are not considered desirable in fulfillment of prerequisites.
  
- Applicants must present a minimum of two years of education at an undergraduate institution *located in and accredited in* the US or Canada.
  
- A broad-based education in science, humanities, and behavioral and social sciences is expected.

## Financial Assistance Program

An applicant who accepts our invitation to attend BUSM will have adequate financial resources to do so. Learn about scholarships and loan funds at [bumc.bu.edu/osfs](http://bumc.bu.edu/osfs).

## Financial Aid Application Procedures

Students must apply annually for financial aid and may obtain application information from Student Financial Services at [bumc.bu.edu/osfs](http://bumc.bu.edu/osfs). Applicants are encouraged to apply after January 1 with a priority deadline of April 11 in order to ensure financial aid is secured for enrollment.

For more details on the admission process, visit [bumc.bu.edu/busm/admissions](http://bumc.bu.edu/busm/admissions)



## On-Campus Housing

Opened in the summer of 2012 and located two blocks from the School, the Medical Student Residence (MSR) is a state-of-the-art, 88,000-square-foot building featuring 104 fully furnished 2-bedroom suites, 8 of which are ADA compliant. Each suite offers a full bath, a kitchenette with new appliances, highspeed data capability and a common living area. The MSR also includes a student lounge, fitness center, laundry facilities and access to a 9,000-square-foot park surrounding the building. Additional university-owned properties are also available.

## Off-Campus Housing

We can help you locate suitable accommodations at a reasonable price, find a roommate or short-term housing and identify rental properties.

For more information on housing options at BUSM:

- Visit the Housing Resources office online at [bumc.bu.edu/ohr](http://bumc.bu.edu/ohr)
- Send an email to [ohr@bumc.bu.edu](mailto:ohr@bumc.bu.edu)





## THE CITY OF BOSTON

There's something for everyone here.

BUSM students enjoy the many advantages our Boston location offers—historical and cultural landmarks are at their fingertips, and major professional sports venues are just a short ride away. Fenway Park—home of the Boston Red Sox and often cited as America's most beloved ballpark—is just two miles down the road.

### **A Cultural and Intellectual Hub**

The largest city in New England and one of the truly unique metropolitan areas in the world, Boston glories in tradition and bursts with modern vitality. Home to more than sixty colleges and universities, the “Hub”—as the city is often called—is a thriving intellectual and cultural center, yet maintains a small-town feel through its diverse and charming neighborhoods. There's something for everyone here—the challenge is deciding where to begin exploring all this splendid city has to offer.

Boston's cobblestone streets and historic landmarks evoke images of the Boston Tea Party, Paul Revere's legendary ride and other significant events in early American colonial and Revolutionary history. A seaport that grew to prominence in the days of the China trade and the whaling industry, the city maintains a thriving

and picturesque waterfront. The always-popular New England Aquarium shares the harborside with cruise ships, New England fishermen unloading their catches, international cargo traffic and the USS Constitution, or, as it is affectionately known, “Old Ironsides.”

Boston is a city where historic treasures and modern technology intermingle, and Bostonians take as much pride in their busy financial and business communities, world-class health care facilities and abundance of research and technological centers as they do in their wealth of history.

The BU Medical Campus is located in Boston's South End, not far from the many cultural and recreational opportunities available in the heart of the city. Whether you want to shop in the elegant boutiques of Copley Square, sit back and relax at a sidewalk café on trendy Newbury Street, enjoy the sights and sounds of Faneuil Hall Marketplace, or cheer at a sporting event, travel from the BU campus is easy and convenient.





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BUSM students enjoy the many advantages our Boston location offers—historical and cultural landmarks are at their fingertips, and major professional sports venues are just a short ride away. Fenway Park—home of the Boston Red Sox and often cited as America’s most beloved ballpark—is just two miles down the road.

### **Restaurants to Red Sox—So Much to Do!**

Boston is home to the world-famous Boston Symphony Orchestra, the Boston Pops, and a wealth of music including opera, rock, jazz and reggae. Many dance and theatre groups appear here regularly, and students can also enjoy many annual performances at the Boston University College of Fine Arts. The city also boasts dozens of museums, including the renowned Museum of Fine Arts, the Isabella Stewart Gardner Museum and the Institute of Contemporary Art. Several smaller art galleries are mixed in with the stylish boutiques of Newbury Street, and visitors can participate in a variety of interactive exhibits at the ever-popular Museum of Science.

Famously passionate about its professional sports teams, Boston roots for the Red Sox, the New England

Patriots, the Celtics and the Bruins with a devotion that spans generations—and visitors often find themselves caught up in the excitement. The city also hosts the Boston Marathon every April, which passes through the Boston University campus and brings out huge and enthusiastic crowds that cheer on runners from all over the world.

Beautiful beaches—including the celebrated Cape Cod seashore—are located both north and south of the city and are easily accessible by car or public transportation. The scenic mountains of New Hampshire, the quaint bed-and-breakfasts of Vermont and the picturesque villages of Maine are also just a few hours away.

Given the wealth of educational opportunities, industry, culture and recreation that Boston offers, it’s no wonder that so many students come here from all over the world to study and work—and often stay long after graduation. Boston is truly a place like no other, and Boston University is proud to share in the city’s magnificent heritage.







**MEET US ON THE  
FRONTLINE.**





**Boston University** School of Medicine

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**[bumc.bu.edu/busm](http://bumc.bu.edu/busm)**