



ALBERTA COLLEGE *of*
FAMILY PHYSICIANS



ALBERTA
MEDICAL
ASSOCIATION

Section of
Rural Medicine
Section of
General Practice

Final Report
November
2008

2008
INCOMING
MEDICAL
STUDENT
SHADOWING
PROGRAM

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1.0 BACKGROUND

In August 2005, the Alberta College of Family Physicians in collaboration with the Alberta Section of Rural Medicine and the Section of General Practice, Alberta Medical Association (AMA), launched a shadowing pilot project for incoming medical students at the University of Alberta. The program was initiated as a way to ensure and provide a positive and genuine understanding of the scope of family practice for students at the very beginning of their medical education and prior to exposure to other medical specialties.

Based on the success of the 2005 trial, this program was expanded to provide a similar shadowing opportunity for students at the U of A and the U of C over the past three years. Historically, the enrolment has been as follows:

	U of Alberta		U of Calgary		Total
	Rural	Urban	Rural	Urban	
2005	1	6	-	-	7
2006	4	7	4	2	17
2007	4	3	6	4	17

In the spring of 2008 the ACFP, with agreement for financial support from the AMA's SGP and ASRM, agreed to continue this program for incoming medical students entering medical school in 2008.

2.0 IMPLEMENTATION OF 2008 SHADOWING PROGRAM

2.1 Confirmation of University Support and Contacts

Both the U of A and U of C were supportive of the Shadowing Program and offered their assistance as needed. Contacts were:

- U of A: Dr. David Rayner, Associate Dean for Undergraduate Medical Education
- U of C: Dr. Jean-Francois Lemay, Director of Admissions and Student Affairs
- Jeanette Kunkel, Program Coordinator, Office of Admissions and Student Affairs Undergraduate Medical Education

2.2 Invitation to Participate in the Program

The invitation to medical students (see [Appendix 1](#)) was drafted by the ACFP with final approval from Drs. Rayner and Lemay. The invitation for U of A students was included in the students' acceptance to medical school, while the invitation for incoming U of C students was circulated independently by email.

2.3 Student Selection and Response

Student response to this program was considerably higher than in previous years as a total of 44 responses from incoming medical students were received. This included 24 responses from U of A and 20 from U of Calgary. All students except eight were placed - five students changed their plans, one student never responded, and two students decided to go to another University.

Given the enthusiasm for this Program, the ACFP Executive Committee agreed to increase the number of approved placements for incoming students with the following conditions:

- Rural placements would remain capped at 5 students per university due to cost implications.
- Remaining students would be matched with local physicians.
- Additional costs of the placements would be kept to a minimum.
- While ACFP administrative time would increase, Executive Committee members agreed that the Shadowing program is a value-added activity.

The revised Student and Physician Guidelines were distributed (see [Appendix 2](#)).

Note: In 2008, the Guidelines were revised to reflect changes in the College of Physicians and Surgeons of Alberta (CPSA) registration requirements & eligibility for medical practice observation/experience. According to the CPSA, changes were made to registration requirements for observers (such as the incoming medical students) in July 2007, and students no longer had to be pre-registered with the CPSA to participate in the Shadowing program. This information was included in the Guidelines.

2.4 Final 2008 Placement

Placements for the U of C incoming medical students occurred during the week of July 21-25, 2008. U of A students were placed during the week of August 25-29, 2008.

	U of A Students		U of C Students		Total
	Rural	Urban	Rural	Urban	
2008	5	17	2	12	36

UNIVERSITY OF CALGARY				
	Student Initials	Student Preference	Match	Location * Rural ♦ Travel/Food costs ✘ Accommodation costs
1	AW	Urban	Dr. Derek Heldzinger	Calgary
2	SG	Urban	Dr. John Edwards	Calgary
3	VC	Either	Dr. Laureen Ross	Calgary
4	RF	Either	Dr. Marc Klasa	Calgary
5	GL	Urban	Dr. Mary-Jo Woolgar	Calgary
6	EW	Either	Dr. Rick Bolduc	Calgary
7	JH	Either	Dr. Rod Crutcher	Calgary
8	LB	Urban	Dr. Rohan Bissoondath	Calgary
9	JT	Urban	Dr. Yasmin Majeed	Calgary
10	AS	Urban	Dr. Shmuel Yablonsky	Edmonton
11	JS	Rural	Dr. Wouter Dehaeck	* ♦ ✘ Grimshaw
12	PD	Either	Dr. John Slanina	* ♦ Lamont
13	DW	Rural	Dr. Ron Garnett	♦ ✘ Lethbridge
14	JL	Rural	Dr. John Pasternak	♦ ✘ Medicine Hat

UNIVERSITY OF ALBERTA				
	Student Initials	Student Preference	Match	Location * Rural ♦ Travel/Food costs ✦ Accommodation costs
1	HG	Urban	Dr. Jamila Kureshi	Calgary
2	TC	Rural	Dr. Marc Klasa	Calgary
3	ML	Urban	Dr. Diane Brox	Edmonton
4	CS	Urban	Dr. Don Chan	Edmonton
5	KH	Urban	Dr. Janet Craig	Edmonton
6	PB	Either	Dr. Jennifer Minsos Kukla	Edmonton
7	MJ	Either	Dr. Jennifer Tse	Edmonton
8	JH	Urban	Dr. Linda Nguyen	Edmonton
9	KK	Urban	Dr. Shmuel Yablonsky	Edmonton
10	VC	Either	Dr. Tami Shandro	Edmonton
11	AB	Either	Dr. Tania Nordli	Edmonton
12	PK	Urban	Dr. Timothy Yeung	Edmonton
13	SL	Either	Dr. Oluwole (David) Odugbemi	♦Stony Plain
14	MH	Rural	Dr. Matt Meeuwissen	♦Stony Plain
15	KS	Rural	Dr. Marina Sapozhnikov	♦Tofield
16	GD	Grande Prairie	Dr. Obaid Afridi	Grande Prairie
17	AB	Rural	Dr. John Slanina	* ♦Lamont
18	ML	Rural	Dr. Tuhin Bakshi	* ♦Wetaskiwin
19	KR	Rural	Dr. Dr. Gokul	* ♦✦Edson
20	KC	Rural	Dr. Rebecca Leonard	* ♦✦Hinton
21	CS	Either	Dr. Sheila Eleason	♦✦Red Deer
22	TW	Rural	Dr. Christine Ellis	* ♦✦Rimbey

The average cost of placing the medical students in rural settings was \$465/student (compared to \$415. in 2007). This covered the students' expenses for accommodation, travel and food, and was slightly higher than anticipated due to increases in gas and accommodation.

2.5 Physician Recruitment

A list serve message was sent to all ACFP members in June 2008, asking for their consideration to participate in this program. ACFP received an overwhelming response to this message. Over 70 physicians replied, however not all could participate in the program primarily due to conflicts with preset vacation schedules. A second email was sent to all Edmonton and area FP/GP's in early August requesting placement for U of A incoming medical students.

The ACFP also invited family physicians to participate in this initiative by making personal phone calls to discuss the Program and determine interest and availability.

Participating family physicians practised in a variety of settings, for example, inner city, women's health, emergency, large and small practice offices, and some with hospital privileges.

2.6 Matching and Ongoing Communication

Once physician and student availability was determined, a fair amount of time was spent coordinating student and family physician schedules to ensure that all participants had correct information on placement location, shift times, accommodation for rural placements, and transportation arrangements.

3.0 EVALUATION

3.1 Surveys

In order to secure baseline information, the ACFP office prepared surveys with questions that were relatively quick to complete. There was no intent to measure individual performance; the completed surveys provided subjective data to generally assess the value of the Shadowing Program and to make improvements if the Program were offered again. Three surveys were circulated and completed:

1. Post-survey to physicians (see [Appendix 3](#))
2. Pre-survey to medical students (see [Appendix 4](#))
3. Post-survey to participating medical students (see [Appendix 5](#))

Overall, the Program proved to be successful in providing the students with a very positive and 'eye-opening' introduction into the world of family practice in Alberta. The physicians expressed enthusiasm and pride in sharing a small part of their professional lives with new students about to begin their careers in medical education.

3.2 Universities Medical School Orientation Sessions

ACFP attended the Medical Student Orientation Session at the University of Calgary on August 03, 2007 and at the University of Alberta on August 27, 2007. An email was sent to all student participants in the shadowing program, inviting them to visit the ACFP exhibit booth(s) at the University Orientation sessions, to further discuss their placements. ACFP had the opportunity to meet the majority of the students in person, and all shared their enthusiasm and appreciation for this shadowing opportunity.

3.3 2005 Pilot Project – Participant Survey

The ACFP surveyed the students who participated in the 2005 Pilot Project to see if the shadowing experience had influenced their current area of career interest. As these students are now entering their fourth and last year of medical school, ACFP gathered information on their choice of residency, if the Shadowing Program had influenced that choice, and if their participation in the Shadowing project affected their view of family practice. Their responses follow on page 6:

	<i>In what area do you plan to take your residency program?</i>	<i>Did your participation in the 2005 Shadowing Project influence your choice of residency?</i>	<i>Did your participation in the 2005 Shadowing Project change your view of Family Medicine? If so, in what way?</i>
1.	Cardiac Surgery	No. As expected, it's difficult to know what interests will develop when introduced to the vastness of clinical medicine.	To be honest, the experience provided me my first impression of family medicine. I had little idea what was involved in a family practice, and had no prior perspective to change.
2.	I'm planning on rural family medicine, with urban family medicine as a backup	-Very hard to say, as I haven't made my decision until just recently, and up until recently I was often confused. But I do believe it would have had an impact, as it was a positive experience, and I've considered going back to practice inner city medicine. While there are many factors, I believe this could be one of them.	Specifically for me, I wouldn't have thought "Family" medicine would include inner city with all its difficulties (HIV, HepC, drug addictions, STI's etc). So the breadth and depth was a surprise, certainly.
3.	At present, my top three choices, in order, are radiology, anesthesia and emergency, although I may do the latter two through family.	That experience itself did not affect my present choice, although at the time, it strongly made me consider family.	I am not sure as to how my view of family medicine changed (or maybe I just can't recall) from that experience. I think the biggest deal for me was that it was my first real clinical exposure, which is why I loved it so much, but since then, as mentioned before, I have sampled a greater variety of clinical medicine, and have found that my interests lie elsewhere.
4.	Neurology	I don't think so - I was fairly sure from the start that I wanted to do some sort of field related to neurosciences (mostly as an interest from my undergraduate degree). I didn't really expect to want to do Family medicine, but I did want a little bit of clinical exposure before starting medical school	Absolutely! I didn't really have any notion of constituted 'primary care', and I didn't really understand the vital role Family medicine plays in coordinating care among specialists, hospitals, etc. I gained a lot of appreciation for the importance of Family doctor's roles. I also realized that Family doctors care for patients with often very complicated medical issues - much more complicated than the simple problems I had to my Family Doctor as a patient. Overall it was a very useful experience.

In summary there is not enough evidence to support the premise that students participating in this program will choose family medicine as their long term career choice. However, one could infer that the underlying benefits of the program remain quite significant, including:

- The experience could strengthen consideration for choosing family medicine as a career goal.
- The experience may provide much needed insight into the practice of family medicine, and respect for family physicians, which will be valuable regardless of the student's selected residency.
- Physician mentors participating in this program often are rejuvenated and reminded about their passion for family practice.

4.0 RECOMMENDATIONS FOR 2009

Based on this review, it is recommended that the Shadowing Program for incoming medical students continue in 2009, contingent on cost-sharing with the SGP and ASRM. Assuming funding is in place, the ACFP will limit student enrolment to a maximum of 7 urban and 5 rural placements for each university.

May 2008

To: Incoming Medical Students at University of Calgary and University of Alberta

Re: Invitation to Participate in a Shadowing Program with Family Physicians

Background

- Last summer, the Alberta College of Family Physicians, in collaboration with the Alberta Medical Association Sections of General Practice and Rural Medicine, sponsored a project in which 17 incoming medical students (from both the University of Calgary and the University of Alberta) had the opportunity to shadow family physicians practising in urban and rural settings. The placements represented a broad spectrum of practice types and settings including, for example, the inner city, women's health, emergency, large and small practice offices, and some with hospital privileges.
- During the week before the start of classes, each medical student shadowed a family physician in a community setting for a 3-4 day period. While students were observers only, feedback from both students and physicians was very positive and, as a result, we are pleased to offer the Shadowing Program to you as incoming medical students at both Alberta universities.

2008 Shadowing Program with Family Physicians

- The purpose of this program is to have you experience, first hand, what it's like to work in a front-line practice in the community setting. It's not intended to give you an advantage in the medical school curriculum and can't be used for any academic credit such as an elective course.
- There is no competition. We can offer up to 10 placements at each university but it will depend on the availability of family physicians to participate in the program. If more than 10 expressions of interest are received at either university, a random selection process will be put in place.
- For **University of Calgary** incoming medical students, the placement will be offered for 3–4 days during the week of **July 21-25, 2008**.
For **University of Alberta** incoming medical students, the placement will be offered for 3–4 days during the week of **August 25-29, 2008**.
- While there is no financial compensation for this experience, the following personal expenses will be reimbursed:
 - Daily parking costs for all placements
 - Travel, accommodation and meals for students in rural placements

If Accepted

- You will be required to fill out a short pre and post survey via email.
- You may be asked to submit a short summary to be posted on the ACFP website.
- You may be asked to share your experience with other medical students in an informal setting.

Application Process

How to Apply

- If you are a medical student accepted at the **University of Calgary**, please email your expression of interest in participating in the Shadowing Program, and contact information, to: Jeanette Kunkel, Program Coordinator, Office of Admissions and Student Affairs, Undergraduate Medical Education, by email at jkunkel@ucalgary.ca

If you are a medical student accepted at the **University of Alberta**, please email your expression of interest in participating in the Shadowing Program, and contact information, to: Dr. David Rayner, Associate Dean for Undergraduate Medical Education, by email at david.rayner@ualberta.ca

- Please note if you have a preference for an urban or rural placement.
- The above offices will then forward the names to us at the Alberta College of Family Physicians. We will advise you as quickly as possible once we know how many students have applied and the number of family physicians available to participate in the program.

Application Deadline

University of Calgary – Monday, June 23, 2008 at 12 noon

University of Alberta – Monday, July 21, 2008 at 12 noon

For Further Information

- If you would like more information about the project, please contact Shelley Veats, Manager, Alberta College of Family Physicians, by email at shelley.veats@acfp.ca or by phone at 780-488-2395 or toll free at 1-800-361-0407.

We look forward to hearing from you.

Yours sincerely,

Peggy Maher
Executive Director
Alberta College of Family Physicians



2008 Shadowing Program for Incoming Medical Students Physician and Student Guidelines

These guidelines are intended to help participating physicians and students take part in a program that:

- (a) maximizes the opportunity for incoming medical students to experience, first hand, what it's like to work in a front-line family practice in the community setting; and
- (b) minimizes the physicians' time away from patients and other clinical and administrative responsibilities.

Feel free to modify these guidelines to best meet the uniqueness of each clinic setting.

- The student should contact the physician a day or two before the experience to arrange the time and location for meeting with the physician.
- At this first meeting:
 - Use the time to introduce yourselves, and very briefly, the physicians may wish to say a few words about their practice. Students may want to indicate why they chose to do this experience. Both students and physicians are encouraged to review the meaning of 'shadowing' and other "clinic office" expectations (see below), and to arrange a preliminary schedule.
 - Times and dates of the experience should be discussed at the initial meeting between the physician and student. Actual shadowing times and dates are flexible within the overall timeframe. Students and physicians are encouraged to work together on determining the most appropriate schedule, which can vary between days and within one particular day. As an example, a student may prefer to shadow in the mornings only, the afternoons only, or attend an evening on-call with the physician. These preferences are shared with the physician who may suggest a few changes depending on the type of patients presenting at a particular time, or for other reasons.
 - The physician and student should designate some times during the experience when the student can ask questions, seek clarification, etc. One option may be to set aside 15-20 minutes at the start of each day, and take advantage of other opportunities for dialogue as they occur.
- Once the initial meeting with the student and physician is completed, the physician will likely introduce the student to clinic staff. The student is encouraged to accompany a staff member who will, time permitting, walk the students through the physical layout of the clinic, introduce the student to other clinic staff, and provide an overview on how the clinic works from the perspective of the patients, clinic staff and the physician.
- Undoubtedly, questions will come up. The student is encouraged to jot down the questions in an appropriate environment and raise these during the times designated at their first meeting. The questions could also be addressed if a time interval opens up later that same day and it is convenient for the physician.
- Although there is no structured curriculum, the following areas related to family practice are provided below as suggested items to be addressed during the conversations between the physician and student:

- Life and lifestyle of a family physician: balancing the physician's own health with work, holidays, hours of work, community expectations, etc.
 - Pros and cons of family practice
 - The physician's decision in finally choosing family practice (benefits)
 - Diversity of practice options available, e.g. rural, urban, group, solo, hospitalists, PCNs
 - Patient-physician interactions and relationships
 - Relationships with medical community including specialists, Regional Health Authorities (RHA), Alberta College of Family Physicians (ACFP), Alberta Medical Association (AMA), College of Physicians and Surgeons of Alberta (CPSA)
 - Options on selecting a prime area of interest as a focus for care, for example, elderly, obstetrics, sports medicine, emergency, and hospitalist
 - Exploring other activities such as teaching, research, administration, CME, income ranges, liability issues, third-party contracts (WCB, insurance claims), and Primary Care Networks (PCNs)
 - Office management: overhead costs, staffing scenarios and costs
- Students are only permitted to shadow the physician and are encouraged to listen, watch, and learn from physician-patient interaction. Direct involvement or assistance with patient intervention is not allowed.
 - Students do not have to be pre-registered with the College of Physician and Surgeons of Alberta (CPSA) to participate in this Shadowing program
 - All physician participants are expected to adhere to the CPSA 'Medical Practice Observation/Experience Guidelines':

*The College (CPSA) encourages its physician members to support the interest of individuals, such as high school students, undergraduate university students, and International Medical Graduates not eligible for a licence, to be able to gain exposure to the nature of medical practice in Alberta. **Any individual looking to gain this exposure does not need to register with the College.***

However, any physicians who bring an observer into their practice are expected to adhere to the College's [Medical Practice Observation/Experience](#) guideline. This guideline defines the College's expectations of the supervising physician and the limitations upon the participant's activities.

http://www.cpsa.ab.ca/physicianregistration/registration_requirements.asp

- Patients must consent to having students participate as observers.
- Students are required to respect and set boundaries relating to confidentiality of all patient, physician, and clinic information.
- Students should not take notes if they are in the room with a patient.
- Students complete a short survey prior to the shadowing project, and will be asked to complete a second questionnaire to assess their experience in the project. Physicians will also be asked to evaluate the project by completing a short questionnaire. Questionnaires can be done by email.
- For further information, contact Shelley Veats, Manager, Alberta College of Family Physicians, by phone at 780.488.2395, fax at 780.488.2396 or email at shelley.veats@acfp.ca

2008 POST Shadowing Survey: PHYSICIAN RESPONSES

1. What were your general impressions of this experience?

- I am thankful for the opportunity to be involved in the shadowing program. It was an enjoyable experience.
- Overall I found it to be a fun experience, but it helped that the student shadowing me not only was interested in medical therapeutics (as one would expect most would be!) but also had an interesting background. The time spent discussing the cases did slightly slow me down compared to my usual office pace, but as this occurred during the summer months, our office volume was less than normal, and so I did not really find this to be a detriment.
- I think that this program is an excellent idea. The students enjoyed this program - they were very polite, and respectful with the patients. All the patients agreed to have them in the room for consults. Every day they saw different aspects of rural practice... office, long term care, home visits, ER, small surgery procedures, social problems.
- It was refreshing and enjoyable to interact with someone at the start of a career, open-minded to various possibilities. My difficulty was not having a really clear idea how "interactive" to be with the student in explaining the medical condition of the patient, reasons for what was done during the patient visit (actual teaching) vs. just plowing ahead with the busy appointment list leaving the student to just observe but possibly not understand much about the patient/visit.
- I enjoyed the opportunity to meet someone about to embark on the study of medicine.
- It was a great experience.
- Very good. It seems that the students coming are very interested in learning about the career in medicine. They are fresh and enthusiastic.
- It was a wonderful experience. My general impression of this experience was that I was able to promote Family Practice as a specialty in a very positive way. The students were able to see the four principles of Family Medicine and FP practised on the spot, which was very encouraging and motivating as the future FP.
- Had a great time, good length of stay, any longer would probably become boring for the student just observing.
- In general, I feel it was fairly beneficial for students to see the day-to-day operations of a community family physician - especially if they have an interest in that field.
- What a fine young gentleman JS is! He fitted in well, patients liked him, and overall, I think it is a good program.
- I was very happy with my student as he had 'medic' experience and good baseline knowledge to work with. I think I would be happier to have a student with experience i.e. one with at least one year if I was to be doing it for any longer than a week. Short term would be fine for the beginners.... I just find it is hard to have a student who can't go and see a patient and then discuss things.
- This was a short experience for a fresh student. Hopefully she got a taste of the variety of practice for family physicians
- General impression: Enjoyable experience

- Good idea - I wish i had done it before entering med school. It allowed the student to see the huge variation in practice, as I have a clinic and do hospital work (both acute care and semi-urgent care)
- It was a good experience, and the student seemed to enjoy having the early clinical exposure.
- We had a female medical student at our office for three days last week. She worked with two different doctors so that she could experience different styles and see different things. She also saw a few things that other doctors brought to her attention. Our student was very respectful of the patients' privacy, and very grateful for the time that we spent with her. Overall, it was an excellent experience!
- I enjoyed meeting the student and attempted to provide the experience for her that you requested. Spending time with her did make me somewhat less efficient with the more mundane aspects of my work, but I think that the experience was a positive one for all the members of the multidisciplinary team.
- I enjoyed the experience. It is my third year being part of it. I find it rewarding both to the student and to me. The student gets a taste of what is ahead of them with a good breath of experiences. For myself, it emphasis to me of the reasons I joined medicine and more specific family medicine as a career choice. The students are eager to learn both about specific medical knowledge and career options.

2. Will volunteering for this project deter you from being a preceptor for 3rd/4th year students?

- I think that will be nice to offer these program to the 3rd, 4th yr students before starting residency program. I am ready to accept new students or any student who wants to have an idea what is going on in rural practice. My colleague also embraces the same idea in regard to this project. I had a lot of fun with the students.
- After 30+ years I am thinking of making a change in my professional activities. The U of C medical school has posted requests for preceptors and a transition into that kind of activity sounds appealing. However, active clinical involvement is still very important to me and I would like to remain involved there for the foreseeable future. What form that will take does remain obscure to me at this time!
- As for being a preceptor for 3rd or 4th year students, this program not only wouldn't deter me, but may even encourage me, so long as the rotations could be scheduled for the months of July or August, again as the clinic volume is somewhat decreased at this time of year, which allows more time for educational discussion.
- It shouldn't, but I have not had involvement with that preceptor ship.
- No, not at all
- Would like to volunteer for 3rd or 4th year students as this will be the right time to make the impression of Family Medicine.
- Very interested in begin a preceptor
- We regularly have residents in family medicine and residents in Obs and Gyn who participate in the clinic. We also have many pharmacy students and nursing students, summer research students, who spend time in the clinic. Our only concern is that this

teaching role does take time, is in fair demand at the moment and that it could be difficult to convince the authorities who fund the program that this use of our time is appropriate.

3. Would you consider participating in shorter term shadowing placements (example, 1 shift only, 1 day only, 2 days only etc. for 1st/2nd year medical students during the academic year?)

- A short intense shadowing is better for me than longer and less focused
- The program could incorporate modules to cover with students of differing levels of experience. To do this there would have to be booking changes [lightly booked!!] to allow appropriate time to cover things like charting and the use of SOAP notes and maintaining a proper up to date medical history/problem list and referral letter writing.
- I would also be willing to participate in shorter length versions of the shadowing program during the academic year.
- Would be open to possibilities (but doubt that students would venture to Lethbridge for a short shift).
- YES, time permitting, absolutely interested; yes for hospital work
- I feel that shorter term shadowing works out better (2 or 3 half-days), just because the lack of clinical knowledge my affect the students' understandings of various clinical decisions. It would mainly be more to see the variety of cases and the breadth of medicine in a community clinic.
- I have been one of the preceptors for the 4th year medical students for about 2 years now. This is a very different program as I do not spend as much time teaching the details of medicine to the students. As long as I do not have 2 learners at a time I do not have any problem with having them with me.
- I could certainly ask the members of the multidisciplinary team whether it would be possible to see 1st and 2nd year students.
- I already participate in shadowing placements during 1st and 2nd years of the medical school.

4. Would you make any changes to this shadowing program?

- The incorporation of health maintenance/screening recommendations into a busy practice is difficult but important. Developing a module to do this with students while in our office setting would reinforce this important activity for the second and third year student. There are of course many other options that could make the office experience interesting and educational for all parties involved.
- I think the program works well, and I can't really offer any further suggestions on improving it any more. Thanks for your organizational skills in setting this up.
- Possibly it could help for "preceptors" to have some guidelines as to what subject areas in conversation with the students have proven helpful in the past (almost like a mini "curriculum" of areas to briefly discuss during the three days)
- Perhaps having shorter shadowing terms would also enable more students to take part, although this would depend on the initial intentions of the shadowing program. Obviously

since they are pre-medical (or pre-clinical) students, there would be less appreciation of the pathology, but more of an experience to see "real" patients.

- May be a bit too long, because I think we are so used to explain the Medical Condition, that one forgets the fact that they are not Medical Students yet.
- This shadowing program could be a day per physician following 3 physicians doing different types of family practice to get a better view of variations in style and practice type.
- Try to contact those family docs who do work other than pure clinic practice - this was the biggest positive according to the student (like OBs, cy, anaesthesia, geriatrics) get the students into the hospital
- I wouldn't make any changes to the shadowing program.

5. Other comments?

- I would volunteer again.
- Our clinic would be happy to participate yearly.
- I will be glad to participate next year as well.
- Email me when you need me. I enjoy the interaction and the teaching.
- A good program. We should produce the experience and outcome to all physicians.
- Enjoyable and fun experience but did put me a little behind on my paperwork.
- Thanks for allowing me to take part in this program. I would be interested in helping out with other endeavours in the future.
- I introduced the student to the lifestyle, and the wonderful people in our community, and overall I think it is a wonderful idea. Keep them coming!

2008 PRE Shadowing Survey: STUDENTS' RESPONSES

1. **Why did you decide to pursue a career in medicine? When did you make this decision?**
 - Career in medicine requires heavy responsibility. I tend to work best when I'm responsible for something. I have decided in 2nd year of my university.
 - I am fascinated with the anatomy, physiology and pathophysiology of the human body, I have a natural sense of leadership, and I am a very personable individual interested in contributing to my community. I have been interested in medicine as a career since I was 8 years old.
 - My passion for healthcare and medical science led me to undergraduate studies in Medical Laboratory Science, but I felt there were aspects of myself that were not being used to their full potential in the lab and wanted to interact with patients on a more direct level. I seriously began to consider medicine in the winter of 2002.
 - I believe medicine is the best combination of science and helping the community, two things I am passionate about. It provides constant challenges and opportunities to be an important, contributing member of a community and society. I made the decision to pursue medicine in my last year of high school.
 - I decided to pursue medicine about half-way through an undergraduate degree in genetics and biochemistry – I wanted to combine my love of science with an application in health care.
 - I decided to become a physician because I believe it gives me the most satisfaction – I enjoy medical sciences, challenges and problem solving skills that are involved in the field of medicine - but I also enjoy the human side and the arts of medicine – direct human interaction with patients, have the opportunity to help others in the time of need and commitment to a long-term professional relationship
 - I decided to pursue medicine during high school Why? I had excellent biology and chemistry teachers; I enjoyed the material, and realized I had a talent for science. I also wanted a challenging career that offered a high level of independence and autonomy
 - After taking High School Biology 30, I became fascinated with the human body and how it works. I also had the opportunity in grade 11 and grade 12 to work in the hospital in diagnostic imaging and rehabilitation medicine with Careers the Next Generation, and became interested in medicine. I am interested in working overseas short term on medical missions.
 - I decided to pursue medicine during my first visit to India, after witnessing first-hand the poor health that crippled the majority of the population. Subsequent volunteer experiences in clinical settings both here and abroad contributed to my desire to enter medicine.

- It was a compilation of my personal experiences with illnesses of family and friends, my interest in human physiology and psychology, as well as the fascination of care- giving under the Canadian healthcare system that drove me to pursue medicine. I had intentions to pursue this since high school, several years after I arrived in Canada.
- I decided to pursue a career in medicine when I was in high school. Several personal experiences with illness, and a desire to help others, led me to this career choice.
- Time/Reason: 1) Elementary School/looked up to my father (emergency physician), 2) High School/Science is awesome. The human body is strange and wonderful, 3) University/In medicine I should be able to find a career where I can practice and study good science while experiencing honest, unique relationships with patients and colleagues.
- I made the decision to pursue medicine about 4 years ago after realizing that my profession at the time (in the arts – a dancer) was not fulfilling me. After a lot of thought I realized that a career in medicine is what I was looking for.
- My grandfather beat all the odds to escape the poverty of our remote village to study medicine on a foreign scholarship. After graduation, he felt he couldn't abandon his fellow villagers and went back to help them. Years later, he died of starvation along with many villagers while doing what he felt was his duty. This inspired my interest in rural medicine from a very young age. But since high school, I've lost several friends and family members to cancer, and that's inspired my interest in oncology.
- I just find the field of medicine so fascinating and feel that it is where I can best combine and skills and interests in a career. Made this decision in high school and validated it throughout University.
- There are several reasons why I decided to pursue a career in medicine.
 - a. I first started becoming interested in the field, actually because of the impression left on me by my pediatrician. He was a very dedicated doctor to say the least, and someone who we almost viewed as a member of our family. He helped me through some challenging childhood illnesses. He was someone who knew how to establish close, trusting relationships with his patients, which I think is very important for a doctor to be able to do.
 - b. I also have a long history of physicians in my family, and many of these family members were people I looked up to while growing up. In fact, one of my great uncles was a renowned surgeon in the former Czechoslovakia, who was once a candidate for the Nobel Prize in medicine. Growing up hearing stories about such relatives, and how much everyone respected the work that they do, really served to reinforce my own desire to become a doctor.
 - c. Finally, more recently, I was the victim of a vicious aggravated assault (2004) which left me legally blind in my right eye, among other things. The level of care and dedication which has been displayed by the countless physicians I have encountered since this time has really solidified my desire to become a physician. I have witnessed firsthand how a truly dedicated and talented doctor can impact someone's life, and I have a strong desire to have the same sort of impact on people in the future.
- I decided to pursue a medicine out of my desire to help others in a tangible way and from my interest in the health sciences. I am also interested in global health issues, and felt that

studying medicine would enable me to help improve the health of others in a very real way. I came to this decision half way through my undergraduate studies.

- Reasons:
 - a. From a very young age after dealing with personal medical problems including bad allergies and asthma.
 - b. To reinforce and be more certain of my decision, I did volunteer work in medical settings, summer research in health care, visited international health care facilities, and shadowed physicians.
- Reason: Provides opportunity to work with people on a daily basis while having the opportunity to help people in a direct and frontline context. I made this decision when I was a very young child, but the understanding and motivation towards this goal grew and matured as I became older.
- There are several countless reasons why I decided to pursue a career in medicine. Below are a few of them:
 - become an integral part of people's lives and the community
 - variety of human interactions
 - meaningful human interactions
 - meet new people every day
 - personal contact with individuals
 - make a difference in the quality of lives of others
 - make an impact on people's lives
 - provide an essential need
 - I admire lifelong learning and know the job requires it
 - opportunity to solve problems on a day to day basis
 - intellectually challenging
 - fascinated with the human body
 - motivated by the challenge
 - possibility to teach and pass on my knowledge to patients and medical students/trainees
- I have wanted to pursue a career in medicine for as long as I can remember. Below is an excerpt from one of my med school application essays that describes my realization of knowing that I wanted to become a physician:

In a panic, my mother bundled me up, propped me in my car seat and rushed me to the nearest hospital as blood poured from my scalp. Once again, my accident-prone nature had surfaced – this time when a quick bout of tag ended with my face connecting with the living room table. Upon arriving at Emergency, I vividly recall being given a white stuffed rabbit before being admitted to see the doctor. I must have been too preoccupied with my new friend to be fearful or even notice as the doctor proceeded to place nine stitches just above my eye. The small scar on my forehead still reminds me of that night, and thinking back, I believe that it was that doctor's gentle touch that sparked my interest in medicine. By age four, I had declared to my parents my ambition of becoming a physician, and playing "Rescue 911" with my best friend Jesse had become my favourite pastime. As a team, we worked to save lives: he was the paramedic who responded to 911 calls and I was the doctor who treated the patients. Although I lost touch with Jesse, I never lost sight of my dreams to practice medicine.

- I wanted to work in profession where I can have direct impact on person's life, valued interaction with patients; interested in the scientific part of medicine, job stability and security. I made the decision to pursue medicine during my undergraduate studies
- I feel that many communities we do not often hear about are under-serviced, for example the low-income, minority, and ethnic communities. I pursued medicine because I want to help meet the need for physicians who are committed to diversity and awareness of the health needs of these various communities. Providing primary care would be a great way to be a part of the community. I made the decision after working in health care research for a few years and having some great physicians as role models.
- I've always been interested in the medical field since a very young age, but it was not until my work experience doing clinical research that solidified my resolve. I used to work with children at vaccination centres. I also helped to collect data from a primary care clinic. I really enjoyed working with people and helping to heal them.
- Pursuing a career in medicine is ideal to me because it presents opportunities that are similar to previous experiences that I have had in my life that have brought me fulfillment and satisfaction. For example, I find the ability to assist individuals in need and continually educate myself very appealing. After one year of undergraduate studies, I began to flourish in chemistry and biology classes and found myself increasingly involved in extracurricular activities related to medicine. Thus, in my second year I set my mind on medicine because it incorporates my passion for science and interest in working with people.
- I was first attracted to medicine in high school, and decided to pursue the career after working and volunteering at a hospital. I love the idea of a constantly changing and challenging field where the opportunities to help and give back to the community are endless.
- A career in medicine seemed very suited to my interests: I enjoy working with, and helping people; I have always had a strong interest in science and medicine; I love being constantly challenged to learn and develop new skills. I realized that medicine was the ideal career for me in grade 12, especially after spending some time in the hospital with a broken foot.
- Medicine offers the chance to practice science but in a more dynamic and sociable way than research; I made the decision to pursue a career in medicine after 3 years of graduate school in Medical Microbiology and Immunology.
- Reasons:
 - a. For the challenging nature of the work
 - b. For the opportunity to interact with and help people of all ages
 - c. Because it is a good blend of lifelong learning and hands-on work
 I made this decision when I was in elementary school (around grade 3), and my desire to undertake this challenging career has persisted since then.
- I decided on a career in medicine because it is a profession that has a nice balance of science and learning coupled with helping people in a very meaningful way. I made this decision late in my undergraduate degree
- I have developed a strong interest in human health and scientific investigation over the past 5 or 6 years. This has led me to partake in two summer student positions and an honors

research experience. These experiences were very rewarding; however, I have also recognized that providing a service to people (ex. Volunteering, coaching etc.) is rewarding in a unique way that I could not achieve directly through an alternate career in research. Thus, a career in medicine became appealing on numerous fronts, and my decision to pursue this career was made approximately 3 years ago (in my 2nd year of university).

- Am a positive, highly motivated person who has worked as a personal trainer for several years and wanted to take health education to the next level. I pursued graduate research and decided that medicine is a better fit for me than research alone.
- It seems to me that I have always wanted to be a doctor. Medicine is the ideal expression of my passions in life; a profound interest in the human body, a love of teaching, and the desire to positively impact peoples' lives.
- The decision to pursue medicine was a slow gradual one. One that resulted from an accumulation of experiences and reflection. The active decision occurred between 2005-2006. (Graduate school). I decided to pursue medicine because I found that application of knowledge to people gave me a type of satisfaction that I was not deriving from academic research. Additionally, medicine possessed many of the things that initially attracted me to medicine. Logical, deduction, learning, problem solving.
- I have found through volunteering in clinical settings just how rewarding and fulfilling a care giver's job can be. Reasons:
 - a. Shortage of physicians
 - b. Work environment filled with constant interaction with people, team work, and thinking on my feet, etc.
 - c. Growing field of knowledge with new advancements coming out every day
 - d. Job security
- My Father passed away unexpectedly at age 40 from a heart attack. He didn't have a family doctor. I decided to pursue medicine in 2nd year of university

2. At this point in time, what disciplines in medicine most appeal to you?

- Family Medicine. But to be honest, that was the only type of doctor I've met and that is why I'm most interested in.
- I am very interested in Family Medicine, which has been the case ever since I expressed an interest in pursuing a medical career.
- Internal medicine, family medicine, paediatrics and diagnostic specialties such as pathology, radiology, nuclear medicine.
- Family Medicine, Surgery, Emergency, Paediatrics, Geriatrics, Internal.
- I've had some experience with Obs/Gyn and Surgery through volunteering and as a Unit Clerk in the U of A OR, respectively, and both are very appealing options. However, I have a growing interest in public health and epidemiology, on a national and international level, that make family practice with an emphasis on multi-disciplinary health-care provision of particular interest to me.

- I am starting medical school with open mind. I like to explore different fields and find my passion. But at this time the field of Interventional Cardiology really appeals to me.
- At present, there is no one field that has any more appeal to me than others. However, family medicine, ER, general surgery, and cardiology have all stood out in my mind for a time
- Family Medicine, OBGYN, Emergency
- At this time, I am open to all options. I plan to use the next four years to explore all possibilities and currently have no preferences.
- Currently, I am biased towards family medicine. However, since I have no experiences in any of these fields, I'm keeping my options open.
- Currently, I am interested in rural family medicine and geriatrics. I am looking forward to gaining more exposure to these and other disciplines in medical school.
- Orthopedic surgery, plastics, emergency, cardiology
- I have always thought that I wanted to do either Paeds or Family Medicine.
- Rural medicine. pediatric palliative care. pediatric oncology
- Family Medicine, Internal Medicine, Perhaps others but it's difficult to know as I have not had a great deal of exposure to different specialties.
- While I do not know too much about the various specializations, I am currently interested in infectious diseases, cardiology, or oncology.
- I was interested in pursuing some sort of surgery for most of my life, namely pediatric or cardiac surgery. However, since my eye injury, I feel that this will no longer be an option for me. Therefore, I am as yet undecided, although both cardiology and family medicine are areas which I have given some thought to.
- Currently, I am most interested in Paeds, however, that is also where I have done the vast majority of my volunteer work, research, and shadowing. I am very much open to other fields.
- General surgery or pediatrics, but with a very open mind considering my limited experience and knowledge regarding various disciplines
- Family Medicine (rural) and Paediatrics
- Internal medicine, Diagnostic (radiology, pathology)
- Family medicine, community health, psychiatry
- Pediatrics, Infectious disease, Rheumatology
- Paeds, Oncology and General surgery are two fields that appeal to me most.

- Although I have not yet been exposed to all of the disciplines in medicine, the areas that most appeal to me at this time are family medicine, emergency medicine and Paediatrics.
- I am interested in both family medicine, and orthopedic surgery.
- I am interested primarily in Family Medicine, although Obstetrics, Infectious Diseases, and G.I also hold a lot of appeal!
- Family Medicine and Pediatrics
- From my experience so far, I think that Pediatrics or Obstetrics and Gynecology appeal to me the most. This may be because I have only had experience on these two areas
- The most appealing field of interest is currently Neurosurgery and Neurology; this is because I have had a long standing interest in neuroscience. I also have secondary interests in Cardiac Surgery, General Surgery, and Family Medicine.
- Family, Obstetrics
- Right now, I am interested in a family practice with an area of specialization like dermatology, geriatrics or obstetrics.
- Emergency Medicine, Radiation Oncology
- Family Medicine, Emergency Medicine
- Family Medicine, Internal Medicine, Cardiology, Oncology, Surgery.

3. Based on your own understanding of what family physicians do, would you consider family medicine as your long-term career goal?

- (These are just my thoughts) Family physicians take care of patients for many years and even for whole life. However, surgeons only perform surgery to a patient for hours, days at most. I would like to take care of someone for many years and gain trust from them. No - Family physician lacks challenges.
- Absolutely! I am attracted to the prospect of being able to establish a practice in which I can provide continuity in therapeutic relationships with patients. I think family physicians are uniquely positioned to work with people from all walks of life, and to promote health as well as well as treat illness in an interdisciplinary manner. That's my cup of tea!
- Yes, if I am able to broaden the scope of my practice to include any special interests that I may have. (i.e. R3 fellowships / extra training which, based on my current understanding, is more applicable in a rural setting).
- Yes, the ability of family physicians to build life-long relationships with patients and be a member of the community in which they live really appeals to me.

- I am considering family medicine because of the appeal of the varied nature of its practice. However, I would consider alternatives to individual practice due to present problems with too-heavy case loads, extremely frequent call (especially those physicians who choose to do significant maternity care) and the scarcity of locums for holiday relief.
- No. I like to focus in one system of the body and be able to have expert knowledge about that system. I also like to do some procedures. I also like to choose a career that is more challenging even if it requires more responsibility and even if it has a less lucrative life style.
- I currently have no definite long-term career goals. That being said, right now I see little disadvantage in doing so. Family medicine is appealing to me for many reasons – The building of long-term relationships with a patient base, the broad range of scenarios that would be experienced on a daily basis, and the opportunities to offer preventative care are all appealing.
- At this point yes, I know that I am interested in primary care and working face to face with patients. The preventative medicine and educational side of family medicine also appeals to me, as well as the ability to provide ongoing continuous care, to see a variety of patients and encounter a variety of medical conditions. The two year residency is a positive factor, as well as the option of later pursuing a third fellowship year to focus on a particular specialization such as Sports Medicine, Obstetrics or Emergency Medicine. Seems to allow flexibility and the ability to create a balance between medicine and family.
- I would consider family medicine as a career goal, because it is my understanding that family physicians have the opportunity to form close, long-term relationships with their patients.
- Yes I would. I've worked with family physicians, and I really think it suits me and would satisfy my interests in every subdivision of medicine.
- I think family medicine would be rewarding in that it is a discipline in which physicians can build long-standing relationships with their patients. Also, I think it would be interesting due to the diversity of the patients and medical conditions that family physicians see. However, until I have some experience in this field, and others, I am hesitant to say that my long-term goal is a career in family medicine.
- I have no experience with family physicians as a student or as a patient. Depending on whom I ask the description can range from boring and frustrating to fascinating and rewarding. The "boring and frustrating" comments concern me, so I'll have to say no until can experience it for myself.
- I would definitely consider family practice as my long-term career choice because you get to see a variety of patients and the scheduling seems to be a bit more flexible to allow for balance between family and work.
- Yes, if I decide on rural medicine as my career choice. Living in a rural area has so many advantages, but easy access to healthcare typically isn't associated with rural living. That shouldn't be the case. I would be excited to work in a rural area to serve the people there, to provide the healthcare that they need, and become an integral part of the community.

- I would consider it as an option, primarily because of the ability to balance a career and personal life and the ability to build a long-term relationship with a group of patients. My reservations about the field are concerns that it would get boring after a period of time.
- At this point, I am not sure if family medicine would be a long-term career goal of mine. On one hand, I realize how important the need for family practitioners is in this province and this country; on the other hand, since I am also interested in global health specializations such as infectious diseases are also very appealing to me.
- I have worked in a family medicine clinic for approximately six months, although I didn't have the chance to actually "job shadow" the physicians working there. From what I gathered there, family medicine is something I would be interested in. Specifically, I believe that a primary care physician has the opportunity to make a significant impact on the health of his/her patients because their care of these patients is "ongoing". With patient education, proper diagnosis, etc., a family physician's long-term impact on a patient can be life-changing.
- At the moment, I have had little exposure to family medicine from the perspective of a family physician. I have read about their careers in the press – with an overall picture that there is a shortage and that they are underpaid and underappreciated. I am, however, hoping that this program, among other things, will provide me with improved insight into their lifestyles and careers.
- Currently, no – primarily because of my uncertainty as to the actual responsibilities and duties of a family physician on a day-to-day basis
- Yes, I am considering family medicine as my long-term goal for many reasons, but mainly because I value the opportunity to become an integral part of a community and to establish lifelong and meaningful relationships with my patients.
- Possibly but would need more exposure to family medicine before making a decision
- Yes. I like the flexibility of family medicine. I would enjoy having the ability to tailor my practice to specific interests e.g. women's health, inner city health, as well as the ability to work anywhere and with very diverse populations. However, I am concerned and want to know more about the fee schedule, rising overhead and the new practice models.
- I truly respect the work of family physicians, but, due to the current shortage of family physicians, family physicians are not able to spend a lot of time with an individual patient. From what I have heard, family physicians only spend an average of 10 minutes with an individual patient due to the high volume and to make enough money to meet costs. I would like to spend more time an individual patient, so I would like to see what other possibilities are available.
- No, based on my personality I believe I would be happier in a field requiring a narrow expertise as opposed to an option such as family medicine that requires an overall general scope of health.
- Yes. The scope of practice, lifestyle, and development of therapeutic patient relationships all attract me to family medicine.

- I hope the shadowing project will give me a clearer idea of what practicing family medicine is like in Canada, in a rural setting in particular, and therefore provide direction for my own choice of discipline. I believe it will raise a number of questions in my mind about medicine itself that I can explore in further depth once my own studies commence.
- Yes, Family Med is my long-term career goal because I believe it offers a constantly changing array of problems/ challenges, the opportunity to interact on a long-term basis with my patients and develop relationships with them, and the general lifestyle of Family Med (it is more amenable to a family than many other specialties).
- Yes, because I understand family medicine is a profession in which you are exposed to a wide variety of people and symptoms/illnesses. Also, the fixed hours of clinic work is appealing.
- From my understanding of Family Practice, I do not think that this area of medicine will be my long-term goal. I think that I would like to be in an area that requires more specialization
- Based on my current understanding of family medicine, I can foresee several benefits to this career choice; thus, I would consider it for a potential career goal.
- Absolutely. A GP can build and develop a lasting relationship with their patient and form a partnership that can be very powerful. Also, a family physician must be knowledgeable in every aspect of medicine and I think I would find it the most interesting
- Yes. I like variety and the idea of being active within my community. I would like to care for individuals of all ages, and to grow with my community.
- Yes, I am open to becoming a GP. I have been told that being a GP is like being a jack-of-all-trades. My previous educational experience (Bsc, Msc) required me to continually focus and narrow my knowledge and field of interest. I enjoyed the feeling I got from being the master of a specific topic and I'm wondering if I will get the same feeling from being a jack-of-all-trades.
- Yes, The broad scope of practice as well as the life style of a family physician appeals to me
- Yes because they are able to have long-term patients with whom they can set up strong relationships over time rather than seeing them just for a few weeks.

4. Why do you want to participate in the Shadowing Project?

- I would like to know what family physician is really like, as I'm really interested in choosing my career as FP
- I would like to gain as much exposure as possible to clinical settings. The more physicians with whom I can interact, and the more clinical styles and skills I can observe, the better prepared I will be involved with patients and healthcare professionals, both as a student and as a physician. This opportunity is ideal, as my current interest lies in Family Medicine.

- I believe that although classroom learning is essential in building a solid foundation on which my future practice will be founded, it is essential that I seek every opportunity to expose myself to practice in action. To see what it is really like and see if it would be something I will enjoy.
- I learn best through application of knowledge, and feel that shadowing offers the opportunity to see where our classroom studies will eventually take us. I'm sure that experiences shadowing will be of great help for our future practical studies / clerkships, etc., and will be invaluable in learning more about patient interaction and communications.
- I still consider family medicine an integral and critical profession within medicine. I understand that family physicians are the patients' first point of interaction with health care professionals in most cases and I would like to get to know this specialty. I believe there is a lot that I can learn from this experience that will prove conducive in my medical career.
- I wish to participate in order to get the most out of my medical education. Also, I wish to know if a career in family medicine is right for me. I hope I can come away from the shadowing project with a better sense of what a Family Physician's day is like, in addition to gaining some insight into the work-life balance available amongst those who practice family medicine.
- To gain experience and see what aspects of family medicine are the same/different than I expect. Specifically to gain experience in the Peace Country where I plan to work after I graduate and get a feel for how things in this area are different than Edmonton.
- I wish to learn more about the lifestyle and work involved in family medicine. I would also like to learn more about what it is like to practice medicine in Alberta.
- First, the experience would be so valuable. To be able to observe a physician prescribing care to patients, it is a learning experience. It would inform me and prepare me for future practice if I choose family medicine down the road, and it builds confidence in me to know that if I take part in this field, I can be adequate and successful.
- I am excited to participate in this program because I would like to learn more about family medicine, and gain a greater understanding of what life as a family physician is like.
- To experience family medicine. Ask as many questions as I can. To med start school with an idea of what I could be doing when I graduate
- Because I am considering family practice as a career choice I am interested in gaining experience in the area to help me make an informed decision about my choice of specialty. I have also always been interested in pursuing an inner city practice and would like to get experience in an urban placement.
- To gain insight into family medicine that I may not currently have, to help me decide if family medicine is the right route for me, to gain experience in medicine, to gain more experience in rural areas
- To get a feel for what a family doctor's life is like – both at work and outside of work. How is the day at a clinic or practice spent, what are the pros and cons, and so forth

- I think that family practitioners play an essential role in the healthcare system, serving as the first and major contact point most patients have with doctors. Given this, I would like to learn more about what family practitioners do in their day-to-day work. I also would like to learn more about how physicians interact with their patients in a clinical setting, since I think that beyond the book-learning that will undoubtedly happen in medical school, acquiring a strong clinical background and bedside manner is very important to a doctor.
- I would very much like to take this opportunity to gain insight into the day-to-day activities of a family physician. I am still very much undecided as to which field of medicine I would most like to pursue, and therefore any chance I can get to see firsthand what a day in the life of a family physician is really like will help me to make the most informed decision about my future career path as possible.
- As mentioned above, I am hoping that the project will provide a window into the careers and lifestyles of family physicians.
- I was not raised in a family with health care providers so I am not sure what really goes on in a family practice. Looking to become more aware and educated regarding what is involved in being a family practitioner
- Currently, I am very interested in becoming a GP in a rural setting. Throughout my lifetime, rural communities have always intrigued me and for several years, I have considered pursuing my career in a small town setting, as I believe the potential for developing strong relationships with patients would be much greater than in a large metropolitan center such as Edmonton. The encounters that I have had with small towns have always left me feeling welcome due to the strong sense of community that is generally prevalent in such towns and I feel that having the opportunity to participate in the Shadowing Program in a rural setting could serve as an enlightening experience in which I could become further accustomed to a rural lifestyle.
- Want to learn more about family medicine, rural family medicine as a career, want to learn more about the daily work of a physician in general
- -Family medicine is currently at the top of my career list. I want to see what everyday practice is really like for a family physician (number of patients, length of patient visits, and amount of paperwork). This should allow me to get a realistic idea of what the career is like and whether I should take a harder look at other areas of medicine.
- I would like to learn more about what a physician does and what "I'm getting into," so to speak
- I decided to participate in the shadowing project to begin my medical education with a positive experience.
- I would like to gain a better understanding of what family physicians do. I would also like to gain some insight into the lifestyle of a family physician and have the opportunity to ask questions.
- Family medicine appeals to me because I believe it gives the most opportunity to develop long-term relationships with patients while looking after their health. Also, there is the opportunity to work in a great variety of settings, as opposed to being tied to a hospital, as with most specializations.

- The Shadowing project offers the opportunity to get a taste of Family Med and see if the preconceptions I have about it are based on reality! I want to see if Family Med is something that I would enjoy and the Shadowing project allows me to 'sample' it.
- To understand the true nature of practicing family medicine in a rural community. In other words, to observe the lifestyle and work-related experiences of a rural family physician.
- I do not know enough about Family Practice, thus I want to get as much exposure in the area so that I can gauge if this career path will suit me the most
- Through participating in the shadowing program, I hope to gain valuable experience of 'what it is like to be' a family physician. I also hope to gain a better understanding of the role and responsibilities of a physician within a clinic setting, along with the responsibilities and processes behind the scenes (administration, setting up and running a clinic etc).
- U of C is only three years and I think shadowing as early as possible will help me to decide later on if Family medicine is the right choice for me.
- I want to see first-hand the family physician lifestyle. I want to speak candidly with a family physician to learn the real issues facing the profession, and whether this field is compatible with my own lifestyle goals.
- To challenge my own preconception and biases. To develop an accurate picture of family medicine so that I may decide to enter FM for the right reasons.
- I want to gain more experience in a rural medicine environment
- I have never been able to shadow a physician before and would therefore like to understand the practice.

5. What are your expectations of your placement in this Shadowing Project?

- To get to learn, but also to experience real-world FP's work.
- I hope to gain a basic understanding of the daily activities and responsibilities of a family physician. I also hope to learn how family practice affects a physician's lifestyle outside of the clinic.
- 1) Better understand the roles family physicians may have in primary health care, 2) Gain insight into how the scope of practice can vary between family physicians, 3) Gain rural medicine experiences to compare with the family medicine I will see in the _____ city during medical school, 4) Gain some early clinical experience.
- That I will have time to observe the clinic setting, doctor patient interactions and perhaps some on-call situations. Basically, to be a fly on the wall! Also, to have some time to ask questions of the doctor and staff regarding the practice and lifestyle Family Medicine provides.

- I was excited to learn about being placed with Dr. Shandro in the Menopause clinic, specifically because it seems to offer a multi-disciplinary approach to patient care. I'm hoping to have a positive exposure to a busy practice involving the chance to listen and learn, and to ask questions regarding family practice in Alberta.
- I would like to get a broad overview of the work that family physicians do especially in a rural setting. I am really excited to explore the rural medicine aspect of family medicine since I have never had any experience in this aspect of the field. I believe family medicine is a great field to explore and learn the art of medicine – communication skills with patients, satisfactory patient-physician relationship... Considering my science background, my previous shadowing experiences and my self-studies I would like to practice my critical thinking skills to be able to gain some medical knowledge if I can while shadowing and following Dr. Slanina.
- I hope after this experience to know some of the benefits that family medicine has to offer, as well as the lifestyle a family physician leads. I'm also very interested in learning about the management of a clinic, regarding staffing scenarios and overhead costs. Lastly, I hope to observe some doctor-patient consultations, and wish to know what a day in the shoes of a family doctor is like.
- I really don't know what to expect entering into this placement, but I expect that it will be a positive experience, and that I will learn a lot.
- I expect to come away from this experience with a better understanding of the role that family physicians play in their patients' lives and in the community as a whole.
- I expect to have the opportunity to see, first-hand, what family medicine entails on a day-to-day basis, and to ask questions about this field of medicine.
- I expect 3 days of intense learning. I hope to be exhausted by the end.
- My main expectation is to get a general sense of what family physicians face in their day-to-day work in terms of workloads and types of patients. I also think that it will be a great opportunity to observe and learn about communication between patient and doctor and to learn about the general flow and operation of a family practice.
- I expect to be able to observe what typical work days are like for family doctors and maybe learn a few things that might help me as a future doctor.
- To be able to spend a few days at a practice, be able to ask open questions and receive honest answers from physicians (for instance, I don't want my physician to just try and sell the profession to be, but also be honest about challenges and things they don't like about the field).
- I hope to be able to follow a physician and observe his or her day-to-day activities, see the interactions with the patients, and be able to ask questions about things that I am unsure of. At the end of the day, I would like to know a little bit more about what family practitioners do and better understand how doctors interact with their patients.

- I am not entering into this project with any “expectations”. Certainly the concept of the project is what caught my attention, and was definitely something I was interested in doing. This is especially true because family medicine is an area of medicine which I could see myself pursuing. Therefore, any firsthand knowledge at all which I might be able to obtain, to help me better make my decision, will be very beneficial.
- I expect to have an improved understanding of the career of a family physician in a rural and/or urban setting. I expect to see an example of one construction of a family practice – staff, location, hours, patients, evening call etc.
- To ‘work’ with the physician and the clinical staff in order to gain a better understanding of what is involved in a clinic
- I would like to have the opportunity to see first hand what the duties of a family physician in a rural setting entail and have the opportunity to discuss the benefits of small town living. Also, I would like to acquire some experience in a clinical setting before entering medical school in September.
- 1) To find out more about how a family physician functions day-to-day. 2) to find out more about choosing family medicine as a career (pros and cons), 3) get a preliminary exposure to medicine before school starts
- That the physician takes time to answer questions at a designated time so that I can get a real picture of life as a family doctor. Talking to someone who works in the field is the best way to get accurate information. I would like to learn a lot about this career choice.
- I expect to get a little taste of what a physician does.
- To gain a positive experience related to medicine.
- I am expecting to directly observe a physician while having very little outside knowledge in the field. I expect to gain a better understanding of family medicine and have some insight into this discipline that I currently do not have.
- I hope to discuss a number of areas with the physician I’m shadowing, about his experiences in Northern Alberta, family life as a rural physician, and balance between work and personal life. I also hope to gain insight on patient-physician interactions and professional relationships, by observing one doctor over the course of several days
- I expect to see how a Family Med practice works, and hope that the doctor I am shadowing will share his insights and honest advice.
- I hope to be able to evaluate the costs and benefits of practicing family medicine in a small town. I also hope to confirm that family medicine is the direction I wish to take.
- I would like to learn a little more about Family medicine from this placement and I would like to learn more about what goes on behind the scenes in a Family clinic
- I would hope to gain personal experience with patient physician interactions, career demands with respect to lifestyle, and flexibility of practice within a GP’s career.

- To observe and try not to get in the way ☺
- I hope to be paired with a doctor who is willing to talk openly and honestly with me about many aspects of his/her life as a family doctor. I hope that I will gain the inspiration and information necessary to inform my future career choice.
- No expectations
- To observe and learn as much as possible, and to help formulate a decision about my goal in medicine (i.e. should I continue to pursue a career in family medicine?)
- I expect to get an overview of how a clinic is run, how a physician interacts with a patient and meets their needs. I also hope to understand the constraints and pressures physicians are under while at work.
- I expect it to be very hands on. I also expect the physician to be willing to explain and teach me the necessary skills to provide basic care.

6. Other Comments?

- Thank you for putting this program on, I am excited to be a participant!
- None, other than to thank you once again for this excellent opportunity. I'm looking very forward to it.
- Thank you for the opportunity to participate in this program.
- Interested in urban family practice and particularly would like to shadow with an academic family physician if available.
- I'm very pleased that a program like this is available. Keep it up!
- Thank you for this opportunity. I think it is a great way to start my medical education.
- This program is a great way to get a small taste of rural family practice in particular. I believe this is especially useful for Calgary students, as we only have one opportunity for doing electives.
- I can't wait! ☺
- I am glad that this program was made available to us even before classes start.

2008 POST-Shadowing Survey: STUDENTS' RESPONSES

1. Did your shadowing experience meet your expectations? If yes, why? If no, why not?

- My experience definitely went beyond my expectations. I observed more in two days in terms of patient diversity and procedures than I thought I would. Additionally, Dr. Yablonsky spent a great amount of time with me and was exceptionally patient, kind and informative.
- Yes, there was a lot of opportunity to talk and ask questions. As well I was exposed to the diversity of Family Practice, which I was very pleased about.
- The shadowing experience did meet my expectations. I was able to sit in on all consultations except for two (out of approximately 120 patient visits in a span of four days). I gathered very valuable information on the job of a family doctor, and developed clear insights into what the job is really like.
- Yes. Dr. Klasa and his partners kept me very well informed about his cases, and also gave me a great deal of information regarding family practice.
- Yes it did because I got to see the daily practice of a family physician, both in-office and hospital. I got an idea of how busy a typical day is, the amount of paperwork and administrative responsibilities.
- My shadowing experience definitely met my expectations. I gained a much better understanding of what family practice and life as a family physician involves.
- Absolutely. I had plenty of opportunity to ask physicians questions, I was permitted to observe several physician-patient interactions each day, the physicians treated me with respect, and I really feel I gained valuable insight into the lifestyle of a family physician. Dr. Craig and Dr. Bernier-Lycka were wonderful, as were all of their support staff!
- Yes. I followed Dr. Odugbemi for 3 days and watched him closely what his work involves. He was very kind in explaining me what he was doing every time he was doing something so I could follow what he was doing.
- Yes – Dr. Ellis was extremely friendly and enthusiastic about my participation in the program, and gave me thorough opportunities to explore the daily routine and responsibilities that she has.
- Yes, it gave me insight into the life of a rural physician and the role she plays in her community.
- In a way yes - I was able to see a doctor in action at a clinic. However, the doctor I shadowed was a walk-in doctor so I felt in a way that it was a different experience because these patients were not regular clients that she had developed a long term relationship with. I would have like more of an opportunity to see aspect of family medicine as well, and also

have a debrief or opportunity to talk to her after the shadowing was over - over coffee or something so I could ask more personal, lifestyle type of questions.

- The experience did meet my expectations. I was able to gain insight into several aspects of family practice, including the clinical side of things, managing the practice, and personal life.
- Mostly. It exceeded my expectations for how much I would learn, however, it was not as busy as I was expecting. My preceptor was very good at sticking to topics I will not be covering in my classes; there was little basic science. Most teaching focused on the 'art' of medicine that had been acquired through years of experience. I appreciated this.
- Absolutely. I learned so much in the clinical setting, how patient-doctor relationships are established, and what it is like to practice family medicine.
- Yes, I learnt about what day-to-day medicine is like, learnt more about family medicine in a rural setting (both sides: reasons that draw physicians to rural areas, and problems that rural physicians may face). It was generally a very enjoyable experience!
- I didn't really have many expectations going into this, but overall it was definitely a positive experience. If anything it would have been great to do more in-hospital shadowing and shadow a family physician in the ER, and because of the way it worked out I wasn't able to do that this time around. I have received an open invitation to come back and shadow Dr. Afridi in the ER anytime when I am up in Grande Prairie.
- My shadowing experience most definitely more than met my expectations. The first day involved a fairly routine day in the clinic, but on the second day, Dr. Gokul was scheduled to be the hospital's anesthesiologist for the day. I had the opportunity to not only see the procedure and surgery, but in the off time while the surgery was occurring, I was also given the opportunity to shadow Dr. Oishi in Emergency. This overall was a very enlightening experience, and I realized that rural medicine is far less routine than I had expected.
- Yes, my expectations were more than met by the experience. I was able to do rounds in the hospital, participate in all goings on in clinic, visit a hospice, attend a PCN meeting, observe a C-section, interact with other medical students, physicians, surgeons, nurses, and medical staff, and spend one-on-one time with Dr. Eleason (including a dinner one evening) in which I was able to discern much about her life but in and outside of medicine.
- I really enjoyed this shadowing experience and it fulfilled all my expectations. I was able to witness the daily practices involved in family medicine. Additionally, I was also able to observe how family physicians are able to combine their sound scientific knowledge with their genuine desire to help others when providing care to their patients in a clinical setting.
- My shadowing experience exceeded my expectations. I saw a large variety of different patients.
- Yes, I wanted to experience the daily life of a family physician and that is exactly what I got to do. I also was able to ask many questions about being a family physician which further increased my knowledge of the profession.
- Yes because Dr. Slanina allowed me to follow him during all his duties at the clinic and elsewhere except when patients expressed a problem with my presence. He was very

enthusiastic about sharing his experiences as a family practitioner in a rural setting with me and often spoke to me individually about cases that had interesting backgrounds. I was also allowed to shadow his colleague Dr. Mohammed in the Lamont Clinic for an afternoon to understand the differences between practitioners.

- It was not what I expected --I watched someone receive Botox and another person have a consultation for laser hair removal. In the three days that I was there, I saw only two patients that I would have expected to see --a family medicine-type consultation. I had been hoping to see more actual patients. However, despite this I felt that I learned a lot in terms of professional expectations. In addition, I was pleasantly surprised to learn of all of the options that a family practitioner has for their activities --for example, they can practice in a hospital or in emergency.
- Yes. It provided me the opportunity to see first-hand the many responsibilities of a family doctor. Dr. Pasternak was involved in a clinic as well as at the local hospital doing surgical assist.
- My shadowing experience was fantastic. Not only did the shadowing itself meet my expectations, but Dr. Yablonsky was a great physician to shadow. He allowed me to ask questions at any time, and he also set aside time after every patient to explain the cases, diagnosis, and treatment. I gained valuable knowledge about family medicine that I was unaware of, and also gained a better understanding of the lifestyle of a family physician. Dr. Yablonsky exceeded my expectations.
- Yes, I learnt a lot and was offered opportunity to see the many different types of patients that urban GP usually face.
- Yes. Dr. Ross was wonderful and really involved me in her routine. She is a natural teacher and was always explained her actions to me.
- Yes, I had ample opportunity to discuss the specialty of family medicine and many other topics pertaining to medicine. Dr. Klasa was very knowledgeable and helpful in providing answers to all of my questions! I was also able to see many patients.
- I really enjoyed this shadowing experience and it fulfilled all my expectations. I was able to witness the daily practices involved in family medicine. Additionally, I was also able to observe how family physicians are able to combine their sound scientific knowledge with their genuine desire to help others when providing care to their patients in a clinical setting.
- It most definitely did. I thoroughly enjoyed my time at the clinic and feel like I had exposure to "a day in the life" of a family physician and even a family med resident.
- The program really was a great experience, and I would recommend it to anyone considering rural family medicine. Dr. Dehaeck was completely accommodating, and let me follow him everywhere. We spent one morning in the Peace River Prison, time in the ER in the Grimshaw hospital, time in his clinical practice, and I also came with him into the OR in Peace River Hospital where he does anesthesia on Wednesday mornings. We also had dinner one night with one of the town counsellors. One afternoon I went to a meeting of local officials from Grimshaw and the nearby town of Berwyn where they were discussing how to recruit physicians, specifically to Grimshaw. It was this great diversity of experience that has really piqued my interest in family medicine, particularly in a rural area.

2. Would you now consider family medicine as your long- term career goal? If yes, why? If no, why not?

- At this point I consider family medicine to be a long-term career goal for me. Of course, I cannot say with certainty until I get a bit further into to med school! Family medicine appeals to me because of the wide range of patients and illnesses that you deal with daily and also because of the work hours/lifestyle associated with the field.
- Yes, there is a lot of diversity and flexibility available to Family Physicians.
- At this stage, I am unable to say. I would not discount family medicine as a career choice, but do not have enough experience to decide fully either way.
- Nothing has changed in this respect. I still see family medicine as a career goal. It seems to be a career that provides choice and flexibility. For example, some family physicians do not take obstetrics call, some came into the office later in the day etc.
- I still would not consider family medicine as my long-term career goal, simply because I would like to have more exposure to other medical disciplines before I set my sights on one particular discipline.
- Although I know more about family medicine, I am no more or less sure about a career in this specialty than when I started. I feel I need to learn more about other specialties before I can make a decision.
- Yes, I have always wanted to pursue a career in family medicine, and this experience reinforced that. I love that family physicians can really get to know their patients, and develop long term professional relationships with individuals and families. The variety of cases was great, from pediatric to geriatric, and from physical exams to rare medical conditions.
- Yes. I considered family doctor as one of my future goals and it positively affected my decision even further.
- Possibly – I think I need some more exposure (rotations) to rural medicine to make a better informed decision. However, I still do not think I will pursue family medicine in an urban setting
- The placement has not changed my mind. I'm still undecided as to if I feel family medicine is right for me. I still need more experiences in different locations with different doctors in order to get a better feel for what I'd be getting myself into.
- I would as I enjoy the deeper relationship that physicians have with patients as primary care givers and also learned that family doctors can specialize in different areas as well, which is interesting. I am still not 100% sure if its my choice however, as I would still like to be exposed to different fields.
- I'm not sure if I would consider family medicine to be my one long-term career goal, but I am certainly more interested in it after shadowing than before. I found myself drawn both to

the work Dr. Nguyen did as well as the relationships she had with her patients. I was also surprised by the lifestyle flexibility that she enjoyed.

- Yes, I realized it is a lot more open-ended than I had previously thought. I was most impressed by the amount of time we spent with each patient. I found the long, detailed histories to be very interesting.
- Yes. I like the continuity of care and the variety of medical experiences it provides.
- I am still thinking about what my long-term career goal might be, but this shadowing experience definitely brought out some of the pros for family medicine, for example the variety of patients and cases that one sees in family medicine.
- Yes, especially after shadowing in Grande Prairie, I really see that there is an enormous amount of flexibility and they really see a wide range of patients including Obstetrics & Gynecology, Paeds, and ER.
- Yes, I would now strongly consider (rural) family medicine as my long term career goal. Not only did Dr. Gokul show me the role the physician plays in patient care, but also described the benefits of rural family medicine and how it is possible to raise a healthy family while practicing in this setting. I also found that the broad range of skills used on a day to day basis as a rural family physician would allow me to utilize my skill set to a greater extent than typical family medicine, and I find this very stimulating.
- I cannot say that I would now consider family medicine as my long -term career goal because I feel that, as yet, I have been insufficiently exposed to other domains within medicine. However, I would consider family medicine a possibility and will continue to look for exposure to the field.
- Family medicine is an appealing long-term career goal. As a family physician, you are often the first point of contact for patients entering the medical system. As such, it is imperative to have a sound background in general medicine as the complaints and presentations that patients display are diverse. Additionally, the opportunity to develop meaningful relationships with patients over the course of time is also something that makes family medicine even more appealing for me.
- I would not consider working as a family physician at a walk-in clinic because it is difficult to establish proper rapport with patients, but I still have not ruled out traditional family practice.
- Yes, I would consider family medicine as I see as being highly rewarding to develop rapport with patients over the long term and develop the patient-doctor relationship over a series of visits.
- Yes, because I understood the lifestyle of a rural family physician from this experiences and the diversity of cases they are expected to handle. It was also nice to see the close and friendly relationship the physician is able to maintain on a day to day basis with his patients because they are such a small body in a rural town.
- Yes, I believe that it offers me the chance to practice a broad array of medicine and have a lifestyle that is amenable to having a family.

- Yes. I am still interested in being able to practice a broad spectrum of medicine. However I don't think I would solely want to be in a clinic. I would also want to expand my skills by working in the hospital.
- Yes, family medicine is definitely a possibility as a career goal. I like the lifestyle of a family physician, but the biggest positive is the therapeutic relationships that develop with the patients. I like how family physicians form a partnership with the patient and get to know them on a more personal level. The only drawback I see in family medicine is that although family physicians have a broad knowledge base, they are not experts in a single field.
- Definitely, although I would want a similar set-up to the Fanning Centre. Dr. Ross works with a team which allows her to spend a great deal of time with her patients. I would not be interested in a 10-minute per patient set-up, where I wouldn't feel as though I was being thorough enough.
- Family medicine is one of the specialties that I am now considering. I will be able to make a more certain commitment once I experience other specialties. The shadowing program definitely allowed me to develop and refine my idea of what family practice is.
- Yes, I am still considering family medicine as a long-term goal. I'm impressed with the diversity of experience one can have as a family practitioner, especially with the "2+1" residency.
- I would consider family medicine as a potential career choice, primarily due to the lifestyle flexibility and diversity of patient cases.
- Family medicine is an appealing long-term career goal. As a family physician, you are often the first point of contact for patients entering the medical system. As such, it is imperative to have a sound background in general medicine as the complaints and presentations that patients display are diverse. Additionally, the opportunity to develop meaningful relationships with patients over the course of time is also something that makes family medicine even more appealing for me.
- Before shadowing, I considered family medicine my long term career goal and I feel like this experience in some ways has reinforced that and in others has changed that. I like the idea that a family physician is a problem solver and has continuity of care with his/her patients. I think it would be highly rewarding. It also became evident to me that a family physician can focus his practice on the areas that interest him/her the most and take it in a more specific direction such as geriatrics, sports medicine, or even nutrition/diet/health. However, after enjoying my shadowing experience as much as I did, I am now keen on shadowing several other specialties to see if they interest me as much.

3 What would you tell your classmates about a career in family medicine?

- After my experience with Dr. Yablonsky I would tell my classmates that family medicine can be an exciting career choice - that there is plenty to see and do, and that you are by no means limited in the scope of your practice. I learned from Dr. Yablonsky about the different areas of focus that one can take in family medicine and the different opportunities available. For example, Dr. Yablonsky works one afternoon in the ER at nearby hospital. I think the main message would be about the diversity and opportunities that exist in family practice.

- I would explain that it is a very broad field. Family doctors must demonstrate a very broad knowledge of all sub-fields of medicine. Interestingly, psychiatric medicine is a large part of family practice. I would also discuss the frustrations experienced by family doctors, including the smaller financial compensation compared to other fields, in addition to sometimes frustrating relationships with specialists operating out of hospitals.
- Family doctors see a wide variety of patients and are responsible for many aspects of their patients well being, including psychiatric concerns. They also have a very busy schedule and usually have a very packed day.
- That it provides a lot of flexibility in terms of lifestyle and allows you to build lasting relationships with individuals and families. Also there is a lot of variety in terms of the kind of procedures performed.
- I would tell my classmates that a career in family medicine would be extremely interesting, due to the diversity of patients that family physicians see.
- ...that family medicine is personal, varied, challenging and rewarding. It requires compassion, patience, a broad knowledge base, and commitment to health promotion.
- I would say it is extremely busy and involves a lot of patient-doctor relationships.
- Exceptional opportunities for patient interaction, and not to be considered as a 'fall back specialty' as many entering medical students are inclined to believe. Involves a great deal of frontline interaction with patients
- Rural medicine is tough and doctors there can be quite overworked. They do more procedures for their patients than family doctors would do in the city since there is much more support in the city. However, it is very rewarding, and the communities appreciate the doctors' work very much.
- It's rewarding and necessary.
- I would tell them that there it is much more interesting than they might think vis-a-vis specializations and that there appears to be a great deal of flexibility in the types of practices possible.
- ...That it is very flexible and should be able to suit almost anyone's needs as a physician. There are balanced, health, family physicians, as well as unhealthy, overworked ones. In my experience family medicine excels in providing a unique physician-patient relationship, the opportunity to treat truly sick people and to follow them along their treatment, and the opportunity to work with very dynamic, intelligent co-workers. It is lacking in interesting procedures and adrenaline-pumping emergencies.
- Great choice. It offers lifestyle choices, and you get to monitor your patient's progress long-term!
- Pros: has diversity of cases, sees and interacts with people from different backgrounds, enjoys balance between academic and procedural medicine, physician has the ability to control hours of work especially when in a group practice But also that some challenges

facing family docs would be difficult patients (those asking for drugs they don't need, delivering bad news), and giving up academic medicine to an extent

- From my perspective I would say that it depends heavily on what type of center you live in, and that in a smaller center such as GP, or in rural communities, you get to experience a lot as a family physician. I haven't yet seen what family medicine looks like in a bigger center such as Edmonton, and my understanding is that they don't necessarily do things like obstetrics unless they have special training for that.
- Although the hours may be long and the job has the potential to be very demanding, having the opportunity to develop long-term relationships with the patients appears to be very rewarding.
- From past experience, I feel that family medicine is too easily discounted. I would likely share my experience in Red Deer with classmates and mention the excellent people that I met and the variety of cases within the day.
- Family medicine is a rewarding career. As patients present with diverse medical conditions, one's practice will be diverse. Additionally, family medicine offers one the opportunity to specialize in certain areas such as chronic pain or diabetes management to further cater to one's interests. But more importantly, developing long-lasting relationships with one's patients and having the opportunity to provide continuous care to patients is what makes family medicine even more rewarding.
- It is a varied job where you do a little of everything.
- Family medicine is highly demanding in terms of time-allocation. Certain family doctors must be on call, work in the local hospital, and complete daily paperwork, in addition to care for patients in a clinic setting.
- I would share my experiences with them.
- I would suggest that they shadow a family doc to see if it would suit them.
- Family doctors are the gatekeeper to medicine. They have a broad scope of practice and there would be many challenges to a family practice. You experience the joy of helping others and making a difference in their lives as you follow through on their patient care throughout the years.
- Yes – I would outline the benefits that I saw during my short shadowing experience.
- I would say, go for it, providing you can find a health care team that is highly functional and puts patients, rather than time schedules and money, first.
- A career in family medicine involves a diversity of patient presentations and a flexible lifestyle. A broad knowledge-base is required, but the acquisition of knowledge is an ongoing task (through treating experience, ongoing reading, and workshops). In family medicine you will likely develop a long lasting and trusting relationship with your patients.
- Family medicine is a rewarding career. As patients present with diverse medical conditions, one's practice will be diverse. Additionally, family medicine offers one the opportunity to

specialize in certain areas such as chronic pain or diabetes management to further cater to one's interests. But more importantly, developing long-lasting relationships with one's patients and having the opportunity to provide continuous care to patients is what makes family medicine even more rewarding.

- I would tell them that a family physician has the opportunity to develop lasting relationships with their patients and can make a serious impact on their patient's lives. No two days would be the same as a family doc and while some doctors tend to work very hard, I found that as a specialty, family medicine can offer a good balance between clinical practice, research, teaching, and home life. I always imagined that it might be frustrating knowing so little about everything, but I found that as a family physician the knowledge that you do have is the most valuable to your patient.
- There are a lot of possibilities for diversity, and the opportunity for long-term relationships with patients.
- I would tell them that it seems to be a very rewarding career that I am considering. The biggest thing is the relationships that form with the patients.

4. Would you recommend this project to incoming students next year?

- Absolutely!! Not only does it immediately help to put "textbook learning" into context, but it was also very exciting to do RIGHT before the first days of med school. It was a great way to get invigorated and enthusiastic about the upcoming journey!
- Yes. Shadowing a doctor helped me learn more about good patient/physician interactions.
- Absolutely. It was an excellent all-around experience.
- Yes, it was great to get some clinical experience before school even started. Considering that we do the same thing as part of patient centered care, it makes sense to get some experience beforehand.
- I would strongly recommend this project to incoming students, as it was an excellent learning experience. I found that it made me even more excited to begin my medical education!
- Yes, I would definitely would. Even though it was short time period I learned more than I expected.
- Definitely. Absolutely. Yes.
- I would most definitely recommend this project to incoming students. Not only did I get to see first hand the role the physician plays in patient care, but Dr. Gokul also provided me with a lot of info on the lifestyle of a family physician, the paperwork/computer work associated with the job, the benefits of rural family medicine and so much more. I feel extremely enlightened and more excited about what lies ahead of me.
- Absolutely. I had a terrific time and it was an excellent way to get excited about medicine just as the first semester was starting.

- I would definitely recommend this project to incoming students, especially if they are considering a career in family medicine or want to see what it would be like to practice general medicine.
- Definitely, it opens students eyes to an area that is in dire need of new doctors.
- Absolutely! It was a wonderful eye-opener me who was brought up in a city and never shadowed before.
- Yes, why not make it mandatory? It's a great learning experience.
- Absolutely. Even if family medicine doesn't interest someone, I would suggest this program as a way of narrowing down one's decision. It was great way to see first hand how a family practise works.
- Definitely! I think that all students should shadow before they even consider medical school! I also feel that being with a caring doctor from day one could encourage students to pursue family med.
- Yes, absolutely. It orients your mind in partial alignment with that of a physician, and thus you can see what the end product of the next 3 plus years of schooling will produce. Additionally, this opportunity allows you to gain experience about how the specialty of family medicine works, and as it is the most common specialty, it is a great benchmark to compare other specialties to in the future.
- I would definitely recommend this project to incoming students, especially if they are considering a career in family medicine or want to see what it would be like to practice general medicine.
- I definitely would recommend shadowing to incoming students, however, with a caveat. I had extensive experience at several family medical clinics in Calgary as I worked as a medical receptionist for my summers during my undergrad. I think someone who has had no exposure to family medicine might learn a lot more about family medicine as well as gain greater insight into possibly pursuing family medicine as a career. With that said, I thoroughly enjoyed my experience and was happy I was involved regardless.

5. Would you make any changes to this Shadowing Project?

- No - I thought everything was very well run. In one sense it would be nice to do a few more days, yet there is so much to take care of in the days leading to the start of school, that it may have been too much if the shadowing project had been much longer.
- Maybe a little more structure given to the preceptor. I think my doctor was worried that I didn't show me/teach me enough, but I thought she did a fantastic job. It's a little more difficult to know what to do with a student who hasn't started yet!
- No, I was satisfied with all aspects.
- None.

- It would have been nice to have some informal time with the physician during a lunch hour or at the end of the day for a general question and answer period.
- K I would consider conducting this project a week earlier (two weeks before school starts), as the week immediately before school starts can be very busy.
- I don't see nothing much to change, except it would be better if it can happen closer to September (considering out-of-province students)
- No, it was wonderful.
- Perhaps allow more time for the student to coordinate with the doctor before hand to discuss hours, expectations and also have a more informal mentoring sort of opportunity.
- It would have been nice to be able to do some of the procedures – my doctor said she would have liked me to try out some of what she was doing, but that she was not allowed to. I'm not sure if this is something that could be changed, but it would add more to the clinical side of the shadowing experience.
- A formal meeting with the other participants afterwards would have been nice. We could have shared our experiences
- I thought the shadowing project worked out very well! 3 days is a good amount of time for shadowing.
- No, everything was great. Shelley was very organized and provided me with all the necessary info I needed prior to the placement.
-
- Physicians like Dr. Gokul and Dr. Oishi were awesome and didn't hesitate to put in the extra effort to make me feel comfortable and allow me to take as much away as possible from this opportunity.
- If more doctors would participate in this program, a greater variety of placements would become available to students wishing to explore more rural areas. Although I enjoyed my placement, I would have liked to experience a more rural placement and to work with a doctor in a single-doctor clinic)
- Send more then one student to each city/town, so that we can get together and discuss what we observe. A group of 3 or 4 would be nice. After each observing session, we should meet and discuss all the interesting things we've seen. This may need to be an optional thing, but I think it should be encouraged.
- No, it was excellent.
- wouldn't make any changes to the program. It was great because I was able to choose the hours that worked for me, as well as the location.
- The time that I shadowed was also perfect - not so long that I got bored, but also not so short that I didn't see anything. It was also convenient that the placement was set up for me.

- I grew up in a metropolitan centre, and hence had a rough idea of what urban family practice is. Retrospectively, I would of appreciated seeing family practice in a rural centre. (Urban students should be encouraged to go to rural centres)
- Possibly introducing a rotation of perhaps 3 more 'general' specialties that could be shadowed over the course of one week, ex. 2 days family, 2 days internal, 2 days general surgery.
- Students who are “naïve” to family medicine might be pre-selected to take part in the program. I like the idea that it started before school began, but I feel like there should be follow-up shadowing with the same clinic once school has started so students can begin to apply what they've learned and also build connections with physicians in the community. The physician should also provide feedback about the experience. Three days is the right amount of time, it definitely shouldn't be longer. Overall, it was fantastic 😊

6. Would you consider participating in shorter term shadowing placements with family physicians throughout your academic year?

- Absolutely. I've done so much research trying to learn about different specialties, but being able to shadow a family physician was by far the best way to learn of what the field is really like and about.
- Yes. Definitely. Absolutely. I would love to.
- Yes, definitely. I think it makes sense to see patients while we are learning so we can put what we learn in the classroom into practice or at least get real examples.
- I would like very much to participate in shorter-term shadowing placements, especially in different rural areas of the province.
- Definitely. I intend to do so.
- If I get a chance, I would want to participate again after I learned some basic materials in med school so that I will understand the practice a bit more.
- Yes, I'd love to see what different settings in different populations are like and how they change the face of family medicine.
- Yes, I certainly would. I would like to see how rural family practices are run in other small towns.
- I enjoy shadowing as you get to see first-hand what it is like to practice medicine. So I would definitely be interested in shorter shadowing opportunities!
- Yes, I felt that one or two days were enough to get a feel for the line of work. Also, there is such a wide variety of options within family medicine (specializing in sports medicine/emergency medicine, rural, urban, single-doctor practice, and multi-doctor practice, etc.), so I would like to experience a variety of these options to get a feel for what would best work for me.

- Yes. I have already seen what it's like to work in a middle size city, but I would like to see what it is like to be completely rural in a very isolated community. I would also like to compare that experience to an urban experience.
- Lisa - I would love to have the opportunity to shadow other family physicians in the academic year.
- Potentially. However, I would like to use my time to gain additional experience in other specialties that I have not been exposed to before I proceed to shadow family medicine again.
- I enjoy shadowing as you get to see first-hand what it is like to practice medicine. So I would definitely be interested in shorter shadowing opportunities!
- Absolutely! I would recommend the Sunridge Clinic for any of my classmates who are interested and am excited to go back there myself.
- Yes. I plan on shadowing a variety of physicians, and family medicine will be one of them.

7. Other comments?

- I just want to thank you again for the great opportunity. The Shadowing Project was excellent and such a wonderful way to kick off my launch into med school!
- Thank you again for this opportunity!
- Thank you very much for setting this up for me! It was an invaluable experience!
- I had a very enjoyable time in Wetaskiwin! I saw different styles of practice especially since Dr. Bakshi alternates between working in his clinic and working in the hospital. I was very impressed by the way he communicates/deals with patients, which was compassionate but also confident and efficient. The B&B I stayed at was also really nice!
- Overall a positive experience!
- Thank you so much for giving me the opportunity to participate in this opportunity. I learned so much and am so enlightened and excited for what lies ahead!
- I have been considering it for a very long time, and I think this opportunity confirmed that this is where I want to ultimately be. Any info would be greatly appreciated! Dr. Gokul and Dr. Oishi were great doctors to shadow. I would strongly consider doing another related placement in Edson in the future.
- Thanks, I really enjoyed it!
- It was a valuable experience. Thank you.
- Thanks for arranging this. It was nice to meet you today.
- Thank you so much for this opportunity, Shelley!

- Dr Bolduc and Dr Cody were awesome.
- This was a great program. I'm thankful for being selected to do it and I greatly appreciate how the College of Family Physicians will reimburse me for my travel, accommodation, and expenses.
- Thank you so much for this experience and a big thank you to Shelley for setting everything up for me!
- Thank for the opportunity and flexibility. Keep it up.
- Great program!! Thanks for the opportunity.