

INCOMING MEDICAL STUDENT SHADOWING INITIATIVE (2005)

PILOT PROJECT REPORT

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Section of
Rural Medicine
Section of
General Practice

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1.0 INTRODUCTION

The Alberta College of Family Physicians (ACFP), in collaboration with the Alberta Section of Rural Medicine and the Section of General Practice, Alberta Medical Association (AMA), launched the pilot project on August 22-26, 2005. This project provided participating medical students with an opportunity to shadow family physicians in their clinical settings for a five-day period, prior to starting medical school.

Initial planning on this project began in the Spring 2005. In the summer, the Associate Deans for UGME in the University of Calgary and the University of Alberta faculties of Medicine were contacted, requesting their support in notifying incoming medical students of this shadowing project. Dr. Alan Jones, Associate Dean UGME at the U of C was hesitant to get involved in this initiative without input and support from the Chair, U of C Family Medicine Department; Dr. David Rayner, Associate Dean UGME at the U of A was very supportive of this initiative and agreed to send out an invitation to all incoming medical students on behalf of the ACFP and Sections of General Practice and rural Medicine.

Given the limited amount of time available to include the U of C medical students, as their classes started in early August, the ACFP and the Sections agreed to pilot this project with U of A incoming students only.

Dr. Pat Heard contacted the College of Physicians and Surgeons of Alberta to ensure that incoming medical students would be allowed to participate in this type of experience; CPSA supported this initiative provided that (a) students participated in an observership capacity only, and (b) the participating physicians obtained patient consent to have a medical student present.

2.0 PURPOSE

The purposes of this initiative were to:

- Expose incoming medical students to family practice at a career point not yet influenced by other physicians and colleagues
- Provide students with an interactive opportunity that is unique to their life experiences to date
- Allow students to consider some of the rewards and challenges of a career in Family Medicine.

3.0 METHODOLOGY

Invitation to Participate and Student Selection

Criteria for selection were not defined given the short time frame available; students were selected based on their interest, schedules, and the number of placements that could be arranged.

On behalf of the ACFP, SGP and ASRM, Dr. David Rayner sent the following invitation by email to all 2009 U of A medical students:

This email is to let you know of a new program sponsored by the family physicians of Alberta. (Specifically, the sponsors are the Alberta College of Family Physicians, and the AMA sections of General Practice and Rural Medicine.) The plan is that they will provide a couple of opportunities for students to 'shadow' family doctors in their practices for a week this month (i.e. before the start of classes). I'm sending this to ask if you're interested in applying for one of these. If you want to apply, please contact Ms Shelley Veats, Manager, Alberta College of Family Physicians at shelley.veats@acfp.ca before the 10th of August. The details are as follows. First off, there are only two positions this year, because they're running it as a pilot program. The two recipients will be selected randomly, and not by any real sort of competition. The intent is that next year there will be more positions. The shadowing experiences will take place in the week before orientation (the week of 22 August). One of them will be rural, and one in an urban practice setting. The purpose of this is to give incoming students a taste of what it's like to work in a front-line practice in a community setting. It's not intended to give you any advantage in the first year, and you won't be able to use this for any academic credit like an elective course. This is a great opportunity in any case, and if you're free for a week later in the month, I encourage you to apply. Any questions, please contact Ms Veats, or just email me back.

Invitation Response - Students

A total of 12 students replied expressing their desire for placement. While the pilot project was to be limited to two students, a decision was made to increase this number if physicians were willing and available to participate.

Physician Invitations

ACFP invited family physicians to participate in this initiative by making personal phone calls to discuss the project and determine interest and availability. Each physician contacted was delighted to be asked and enthusiastic about demonstrating pride in their profession.

Final Placement

Once physician and student availability was determined, a lot of time was spent coordinating student and family physician schedules to ensure that all participants had correct information on placement location, shift times, etc. Based on the response from both students and physicians, seven U of A medical students were matched - one in a rural setting and the remainder in Edmonton. 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.

4.0 EVALUATION

While there wasn't sufficient time to develop a formal evaluation framework, the ACFP office drafted short surveys with questions that were simple and quick in order to have some baseline data. Three surveys were done:

1. Pre-survey to medical students
2. Post-survey to medical students
3. Post-survey to participating physicians

The questions and responses are contained in the Appendix.

5.0 COMMENTS

- Given the feedback from all participants, this initiative proved to be a positive and worthwhile experience.
- Planning and coordination for this project was very time consuming from an administrative perspective. This was in part due to a few factors: (a) it's a new initiative; (b) required approval from the CPSA and support of the Associate Deans UGME, and (c) availability during the summer months of all parties involved.
- Just prior to starting classes appears to be an excellent entry point for exposure of medical students to family medicine.
- While at the U of C Orientation session on August 5, 2005, several students approached the ACFP booth asking specifically about shadowing opportunities with family physicians during the academic year. A request also came from a student interested in a shadowing placement as part of this pilot project.
- Several medical students during the U of A Orientation session on August 29, 2005 also asked if the ACFP would facilitate mini-shadowing opportunities during the academic school year. They indicated it would be most beneficial if these placements were for short time periods e.g. one weekend day, one evening clinic, etc., with the idea of exposing the maximum number of students to family medicine.

6.0 RECOMMENDATIONS FOR CONSIDERATION

1. Repeat the project in August/September 2006 for incoming medical students at both the U of A and the U of C.
2. Develop guidelines for both the participating medical students and physicians. Include a section on evaluation containing pre- and post-experience survey questions.
3. Plan and coordinate the project before the summer of 2006. This is particularly important for recruiting family physicians.
4. Consider the development of selection criteria for students and physicians.
5. Consider various scenarios in placement length (minimum of 2 days to maximum of 5 days.)
6. Explore the feasibility of offering *mini-shadowing* opportunities for interested medical students during the academic year.
7. Explore external funding sources

SURVEY RESULTS

I. STUDENT SURVEY PRIOR TO PLACEMENT

Students were asked to complete a 5-question survey, approximately one week before placements were to occur. All students (7/7) responded; their remarks follow:

1. Why did you decide to pursue a career in medicine? When did you make this decision?

- I decided to pursue medicine to work within communities to improve and contribute to the sustainability of public health. I am also interested in working with underprivileged communities. The decision to study medicine took root when I was studying science at the U of A.
- I decided to go into medicine to bridge the gap between the scientific and the humanistic aspects found in my life experience. Medicine allows for analytical and rational thought, combined with a compassionate and empathic perspective. I decided to go into medicine when I was young (grade 1), and I am extremely excited to take up the challenge.
- Want to help people/ go home at the end of the day knowing I made a difference in someone's life/ the potential to help anyone in an emergency situation at any time; Love of the human body (physiology); Love science (especially biomedical science); Love working with people; medicine has more flexibility as to career options than other health care professions (e.g., physiotherapy, nursing, etc); I made this decision 4 years ago (when applying to university)
- I decided to pursue medicine about two years ago (after second year of undergraduate studies), although I had been interested in biological sciences in general for much longer. Medicine appealed to me because it integrates many disciplines, and applies them to solving real and immediate problems. I also felt that working to help patients would be personally rewarding.
- I think its the best way I can contribute most to the world and humanity
- Medicine in its most symbolic form is an iridescent profession requiring attributes that extend into all disciplines. For me medicine is appealing, as it requires the physician to be structurally sound in the sciences while simultaneously being capable of applying scientific concepts into improving human life. It is being able to be both human and humble in demeanor while intellectually paramount that attracted me to the field. The decision to pursue medicine occurred in my early teens after considering many professions at that time and since then has not wavered.
- I had always toyed with the idea of medicine, but I never really owned that dream until the last year or so. I was looking for a career with the right blend of science, problem solving, hands-on work and interacting with/caring for people. After working in the government for 3 years, I was able to see what was missing, for me, in my current job, and I feel that medicine would provide the right challenge and fit that I need.

2. **At this point in time, what disciplines in medicine most appeal to you? For example - General surgery, Radiology, Urology, G.I. etc.**
- At this point, there are a few disciplines that I may be interested in. When choosing the discipline I will pursue, its applicability to my goal of working with underprivileged communities will be considered. Such disciplines may be: urban/rural family medicine, general surgery, international health...
 - I am interested in Pediatrics, but I am keeping an open mind.
 - Family medicine/general practice, pediatrics, pediatric oncology, oncology, cardiology/cardiovascular surgery, neurosurgery
 - I am most interested in psychiatry and neurology, as they are probably most related to my undergraduate studies (i.e. pharmacology and neuropharmacology) However, I am far from being decided in my choices. Many other disciplines appeal to me as well, including gastroenterology, anaesthesiology, and physical medicine.
 - Cardiac surgery, head and neck surgery (ENT), general surgery
 - With my ignorance in the various disciplines of medicine, it would be foolish to commit to a particular specialty at this time. However, areas that have appealed to me at the surface include pediatrics, cardiology/cardiac surgery or emergency medicine.
 - With the caveat of not having a lot of knowledge of each discipline: Family Medicine, cardiology, neurology, emergency medicine, psychiatry.
3. **Based on your own understanding of what family physicians do, would you consider family medicine as your long-term career goal? If yes, why? If no, why not?**
- Yes. It appears that family physicians must be directly involved with the health of individuals, and have a unique vantage point from which to influence community well being.
 - I would consider going into family medicine, because it requires the physician to be extremely flexible and widespread. Although being specialized would be interesting, being able to diagnose different symptoms constantly is an appealing challenge found in family medicine.
 - Yes, I would consider it a long-term goal. I enjoy the fact that you get to know your patients on a more personal level (e.g. my family doctor called my mom himself to remind her of her yearly checkup). It also leaves more time and flexibility to deal with my personal family life.
 - I have not yet considered family medicine as a long-term career goal, as I do not feel that I know enough about it to make a firm decision
 - I don't think that's where I will end up but it is definitely ignorant to close open doors so I think I would consider everything including family medicine. I think the major pro of family medicine is the increased social interaction with patients (well at least that's the way it seems – I guess I will find out if its true in a week)
 - From what I have seen about family physicians through a very superficial telescope, I would not consider family medicine as a long-term goal. To me, family practice seems repetitive and at times monotonous. Nevertheless, it also allows a robust patient-doctor relationship and the capability of seeing changes over the longer-term. Nonetheless, family medicine has not appealed to me greatly but may change in the future.

- It is definitely one of my options for a long-term career goal. The relationships you can build with your patients would mean a lot to me. The variety of ways a patient can present would likely keep you on your toes and keep your job interesting. The ability to use my skills in underprivileged areas of the world is also a plus (though I suppose this could be said for most disciplines).

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

- I wish to gain as much practical experience as possible before I enter the clinical years of the MD Program. This should help me to make a more informed decision when I choose a specialty.
- I am interested in being part of the shadowing project to taste the environment of family physician. Since I do not know exactly what focus I want to pursue, I think that it is important for me to understand what family medicine entails.
- I think it would be a great experience. It would provide more insight as to what family medicine is all about, and thus help narrow my future career path.
- I hope that participating in the project will teach me about the daily experiences of a family physician, and give me the information that I need to decide whether I wish to pursue a career in family medicine.
- I thought it would be a valuable experience, especially since its for a whole week so i can get a good idea of what the atmosphere is like; most importantly i think it will make me comfortable (I hope) with the new environment that i am coming into
- I feel as though the shadowing project will be a nice introduction into the field of medicine and general practice. As well, in an extension to question 3.) This opportunity may provide a better insight into family practice that I may not have yet considered or to which I possess a false sense of judgment towards.
- To expand my understanding of Family Medicine, as it would relate to my own career unfolding. To gain a doctor's perspective on things. I've never participated in a weeklong job shadow before, and I expect the depth will be very beneficial to me.

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

- I hope that the experience introduces me to good patient-physician interaction, and that I gain some confidence in meeting and speaking with new members of the community.
- To be able to appreciate medicine from a practical perspective.
- I expect to be able to follow a family physician around during the course of a typical week to observe what actually goes on, and to be able to openly engage in conversation and ask questions of my physician. I also expect to be able to help out wherever possible, and to be given feedback and suggestions as to my performance. Finally, I expect to be given truthful information as to the pros and cons of choosing family medicine as a career.
- Mostly, I expect to be able to observe. I would like to see how the family physician interacts with patients. In particular I am curious to see the range of procedures and treatments that can be applied to patients at a family medical practice, and which of these cases require referral to a specialist.

- To be able to experience and become familiar of what a doctor's position and responsibilities are like; I'm sure that this internship is mostly to "see" whats going on but I hope there are also opportunities for me to actually "do" things as well
- My expectations for this placement is get to a general overview of medicine and the basic framework with which it operates. I hope to also acquire a few basic skills, which will be able to help me during the school year.
- To see and experience first-hand a variety of benefits and trials of urban family medicine from the doctor's perspective. Basically, to "get a feel for it all."

6. Other Comments?

- Thank you very much for the opportunity.
- Thank you for this wonderful opportunity! I really appreciate it.
- The timing of the placement is useful for incoming medical students. It gives us a chance to try a job shadowing placement before the term starts, after which there may not be time to pursue these activities. It was very helpful to be approached with the opportunity to take part in a shadowing placement. I am not certain that all incoming medical students are aware that such opportunities exist.
- I want to thank you Shelley and everyone else who organized this i think it was definitely worth your time and i hope you can accommodate even more people next year so they can have the same opportunity
- Thank you once again for the opportunity to shadow a physician. I truly believe that this will be insightful, rewarding and good program to add for incoming medical students.

II. STUDENT SURVEY AFTER PLACEMENT

Students were sent some questions one week following their individual placements. Five/seven students responded; their remarks follow:

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

- Yes. I got a good feel for how they did family medicine at this clinic. As well, I gained greater understanding of the inner city life, which I felt was an excellent experience. Dr. X was diligent in providing a "pre and post mortem" on each session/patient, bringing me up to speed on history/condition/implications so I could glean more from each session. She also opened the week with an informative overview of the inner city and its implications on lifestyle, health care etc.
- Yes, it did. I had the opportunity to speak with several family physicians and learn the pros and cons of family medicine, as well as reasons for entering the field. I also had the chance to interact with patients and observe the daily routine of a family physician. The experience gave a very real portrayal of the life of a family doctor. I was able to sit in with all the patients, and even take a patient history.
- The shadowing experience was above and beyond what I was expecting. I was impressed with Dr. X's ability to diversify herself and always make her practice interesting. I got to observe the delivery of two babies, which was utterly amazing.

- Yes. The introduction to patient-physician interaction was valuable.
 - My Shadowing experience did not only meet my expectations but surpassed it. I did not expect to see so many different cases and as well do rounds/call in the hospital/ER.
- 2. Would you now consider family medicine as your long- term career goal? If yes, why? If no, why not?**
- I am still retaining family medicine as an option for my long-term goal.
 - Yes, I would. This experience reinforced my reasons for entering medicine. Family medicine allows more patient contact, as well as a more intimate doctor patient relationship. Moreover, it allows more flexibility in terms of personal/family life. I also learned that family medicine is very portable, and there is great opportunity for travel and locums. However, the number one complaint from all family physicians I spoke with was that family physicians are not adequately remunerated for their efforts.
 - Yes, I would consider taking family medicine as a long-term career goal. It seems that family medicine is a wonderful way to serve the community and can build long-term relationships with the community in general.
 - As before, I would certainly consider family medicine as my specialty.
- 3. What would you tell your classmates about a career in family medicine?**
- That it covers a large variety of conditions and people, and that you tend to develop relationships with patients over a long term, and that it can depend greatly upon the demographics of the regions as well.
 - If they are looking for more patient contact, then this is definitely the career to choose. There is also a great variety in the types of ailments you see daily, and if you want, there is also the opportunity to work at hospitals and help out in the ER or in surgeries, Hence, it is very flexible.
 - I would tell them that family medicine is an extremely flexible career. One can cater their career as a family physician to fit their preferences and family needs.
 - That it appears to offer a unique position in which you may influence the health of patients. Family physicians see patients with a broad range of concerns, which may be in contrast with other medical specialties.
 - I would tell them that it is not as repetitive as I once thought it to be and at least in rural family medicine you have to be more versatile and your job portfolio does not only involve your own clinic but doing rounds at the hospital and being versed in other specialties as well.
- 4. Would you recommend this project to incoming students next year?**
- Absolutely. I feel the more experience (and sooner) the better
 - Yes
 - Absolutely
 - Absolutely! I learned so much and appreciated the experience before entering medical school.
 - I would recommend this project to incoming students since it's a good way of getting introduced into medicine and furthermore desensitizing oneself to the notion of entering medicine. This opportunity gives a nice basic framework of how medicine functions (at least in a family setting).

5. **Would you make any changes to this Shadowing Project?**
- Perhaps one week at a particular location is overkill. Two locations within a week would offer greater scope (i.e. one at a hospital, one at a clinic) of people and styles of family medicine.
 - No
 - Yes, it was a bit long considering that school began the next week. If it was around 3 days, that would have been ideal.
 - No. The duration of the placement and the level of student involvement in the clinic was well suited to an entering student's training (or lack thereof).
 - Perhaps proposing some pre-reading material regarding medical legality and even some factoids about a few common diseases would help with this project just so that it provides as a support base instead of seeing everything new. As well, maybe before the shadowing experience starts up, setting up a meeting with the supervisor to discuss expectations and just have a short meeting laying down how family medicine works etc would really help.
6. **Would you consider participating in shorter term shadowing placements with family physicians throughout your academic year?**
- Yes
 - Yes. In fact, I have already talked to Dr. X, and she would be more than happy to have me shadow her throughout the year.
 - Yes
 - Yes, I would love to participate in other shadowing projects. I've decided to shadow as much as I possibly can, since I am still searching for what I want to do.
 - I would be very much thrilled to participate in shadowing placements throughout the year. In fact I heard that U of A makes it mandatory for you to do this during your first two years although I am not sure about this. Family physician shadowing is a very common/compulsory aspect to medical teaching in many of the schools in eastern Canada. I am not sure if U of A has this in their program but I believe it would be of great benefit.
7. **Other comments?**
- I'm very appreciative to have been able to participate, and look forward to experience more job shadows in this area and others as a result
 - I had a fantastic time, and am glad that I had this opportunity. Several family physicians told me to keep this in mind throughout the next four years, when things get a little more difficult and frustrating. It definitely reinforced my reasons for choosing medicine as a career. I had a fantastic time with my shadowing experience last week. Thank you very much for giving me this opportunity. Thanks once again.
 - Thanks for such a wonderful opportunity. I was really fortunate to be a part of it!
 - Thank you so much for the opportunity. It was well worth it and very educational / rewarding. If there are any such opportunities in the future, please let me know about them!!

III. PHYSICIAN SURVEY AFTER PLACEMENT

Physicians were sent a short survey one week after the placement. Five/seven physicians responded; their remarks follow:

1. **What were your general impressions of this experience?**

- Student was very appreciative of the experience and was keen. I think it's great to show them the diversity and positive aspects of family medicine before they have experiences & other viewpoints.
- I very much enjoyed the experience. It gave me the opportunity to show the incoming student a taste for what the end goal will be in the end of their medical school and show them the "life" of a family physician. It was also enjoyable as the student had to volunteer for the project and showed keen interest in learning with no need to worry about formal evaluation at the end.
- Excellent! I think it gives us the perspective of what kind of individuals are coming to medicine. They are brilliant, mature, realistic and motivated!!
- Good, its nice to see someone still so excited about medicine and not jaded from bad experiences

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

- No
- This project will not deter me from being a preceptor for 3rd/4th students.
- No not at all.
- No, but I only have limited teaching time, I would have to be selective

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

- Absolutely
- I will not mind participating in other shadowing experiences. I already signed up for the Community Based Experience Program run by the U of A Medical Program for the 1st year students.
- No I think one week is just about right. Any shorter would be inadequate to show them well, any longer would be boring!
- Yes, I already do

4. **Would you make any changes to this past shadowing project?**

- I think shorter would be better - a week is a long time. It may be better have them experience a day at a wide variety of clinics vs. One week at the same practice.
- I will keep the ACFP shadowing project the same.
- -If possible designate a particular (fixed week in August for this. That way we all will be able to plan our lives.
- No

5. **Other comments?**

- The preceptors are going to make or break this experience. It is crucial to get formal feedback from the students so you know what was a positive experience and why.
- I will keep the ACFP shadowing project the same.

- I am sure they were sent to different physician at a variety of practices. If not we should try to do that.
- It was a pleasure to have Student X in the clinic. Dr. X asked me to arrange his schedule so he would rotate amongst our physicians to give him a good variety as each physician has somewhat different patients and practice interests. We had Student X attend 1 or 2 clinics with each physician and their resident(s), as well as a Mom Care clinic, a Nurse-run Diabetic clinic, and had him go with Dr. X to the Grey Nuns Hospital while he was working on the ward. I think Student X spent time with all of our clinic physicians and the first year residents doing their family medicine rotation as noted below. He spent time with five staff family physician, four family medicine residents and one RN.