

**REPORT**  
on the  
**INCOMING MEDICAL STUDENT  
SHADOWING PROJECT**  
**JULY & AUGUST 2007**

Prepared by the Alberta College of Family Physicians



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## **1.0 BACKGROUND**

In August 2005, the ACFP 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. This project provided seven medical students with an opportunity to shadow family physicians in their clinical settings for up to five days, immediately prior to starting medical school.

Based on the success of this pilot project, it was expanded in 2006 to provide a similar shadowing opportunity to 17 incoming medical students from the U of A and the U of C. As a result of the positive feedback from all participants (students and physicians) during the second year of the project, ACFP, SGP and ASRM Executive Committees agreed to offer this program again in 2007.

As in previous years, the Shadowing Project 2007 used the same process to invite, select and match students and recruit family physicians to participate in the program. The students completed pre and post shadowing surveys and the participating physicians completed a post shadowing survey.

## **2.0 REVIEW OF RECOMMENDATIONS FROM 2006 SHADOWING PROJECT**

- A. A review of the Shadowing Project 2006 identified several recommendations to be carried forward to the 2007 Shadowing Project. Based on this review, the Shadowing Project for incoming medical students at the U of A and the U of C was implemented in August/September 2007 using the following process:
- Invite students to participate (invitations included in the students' offer packages, distributed by the universities)
  - Select students who expressed interest to the respective university faculty contacts
  - Recruit family physicians by ACFP staff direct contact
  - Match students by their preference for urban or rural placement; and family physicians' availability
  - Determine length of placements (discretion of each matched student and physician)
  - ACFP evaluation of the project by surveying the participants
- B. The Participant Guidelines were expanded primarily in these areas: sample questions for students to ask family physicians during placements; expectations of the experience for students and family physicians; flexibility on time per day and length of experience.
- C. The U of A and the U of C were advised that some students expressed interest in participating in shadowing experiences during the school year with the same physicians they were placed with in the summer project.
- D. ACFP staff will survey the students who participated in the 2005 Pilot Project to see if the shadowing experience has influenced their current area of career interest.

### **3.0 IMPLEMENTATION OF 2007 SHADOWING PROJECT**

#### **3.1 Confirmation of University Support and Contacts**

Both the U of A and U of C were supportive of the Shadowing Project 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 and Nancy Wilson, Program Coordinator, Office of Admissions and Student Affairs Undergraduate Medical Education

#### **3.2 Invitation to Participate in the Project**

The invitation to medical students (see [Appendix 1](#)) was drafted by the ACFP with final approval from Drs. Rayner and Lemay. The invitation was included in the students' acceptance to medical school packages which were distributed by the respective university offices.

#### **3.3 Student Selection and Response**

U of A incoming students sent their expressions of interest to Dr. David Rayner, and U of C incoming medical students sent their expressions of interest to Nancy Wilson. A limit of up to ten (10) placements was offered at each university depending on the availability of family physicians to participate in the project. To ensure an open and fair selection process, each university was prepared to implement random selection if more than ten expressions of interest were received.

A total of 21 students replied expressing their desire for placement. Four students from the U of A had to cancel due to conflicting commitments. The revised Student and Physician Guidelines were distributed (see [Appendix 2](#)).

#### **3.4 Final Placement**

Seventeen students participated in the 2007 Shadowing Program. Ten students had rural placements and the remaining seven had urban placements.

Student	University	Request	Physician	Location
1	U of A	Either	Dr. Melanie Currie	Spruce Grove
2	U of C	Rural	Dr. Mark Stubbs	Claresholm
3	U of C	Rural	Dr. Len Wade	Vulcan
4	U of C	Rural	Dr. Robbie Drummond	High River
5	U of C	Rural	Dr. Maarten Coetzee	Brooks
6	U of C	Rural	Dr. Dorcas Kennedy	Lethbridge
7	U of C	Rural	Dr. Allan Garbutt	Crowsnest
8	U of A	Rural	Dr. Mark Chapelski	Lloydminster
9	U of A	Rural	Dr. Albert Harmse	St. Paul
10	U of A	Rural	Dr. Tuhin Bakshi	Wetaskiwin
11	U of C	Urban	Dr. Marc Klasa	Calgary
12	U of C	Urban	Dr. Janet Reynolds	Calgary
13	U of C	Urban	Dr. Scott Beach	Calgary
14	U of C	Urban	Dr. Jessica Muggli	Calgary
15	U of A	Urban	Dr. Dianne Brox	Edmonton
16	U of A	Urban	Dr. Gerhard Jacobs	St. Albert
17	U of A	Urban	Dr. John Chiu	Edmonton

Placements for the U of C incoming medical students occurred during the week of July 23-27, 2007. U of A students were placed during the week of August 20-24, 2007.

The average cost of placing the medical students in rural settings was \$415.00/student. This covered the students' expenses for accommodation, travel and food.

### 3.5 Physician Recruitment

The ACFP office invited family physicians to participate in this initiative by making personal phone calls to discuss the project and determine interest and availability. The list of rural physicians (provided by RPAP) who are involved in student placements was very helpful in identifying potential contacts. Each physician contacted was delighted to be asked and enthusiastic about demonstrating pride in their profession. Those who had other commitments asked the ACFP to contact them if similar opportunities came up in the future.

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. The fact that seven family physicians who participated in the project in 2006 agreed to host the program this year again, speaks for the success of the project.

### 3.6 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.

At the same time, there was ongoing communication with the CPSA and with administrative staff in the university offices of Undergraduate Medical Education to ensure that students were registered with the CPSA prior to starting their placements and to assist with contacting students as necessary.

## **4.0 EVALUATION**

### **4.1 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 Project and to make improvements if the project 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 project 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.

### **4.2 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, to further discuss their placements. ACFP had the opportunity to meet the majority of students in person, and all shared their enthusiasm and appreciation for the shadowing opportunity.

June 1, 2007

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

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

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### **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 whereby 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 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.

### **2007 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 23-27, 2007**.

For **University of Alberta** incoming medical students, the placement will be offered for 3–4 days during the week of **August 20-24, 2007**.

- 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: Nancy Wilson, Program Coordinator, Office of Admissions and Student Affairs Undergraduate Medical Education [wilsonn@ucalgary.ca](mailto:wilsonn@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 [david.rayner@ualberta.ca](mailto: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 25, 2007 at 12 noon**

**University of Alberta – Monday, July 23, 2007 at 12 noon**

### **Registering with the College of Physicians and Surgeons of Alberta (CPSA)**

- **As a prerequisite to participate in the Shadowing Program, you must be registered (student status) with the College of Physicians and Surgeons of Alberta (CPSA).**
- The form for CPSA registration is included in the offer package which you have received from your respective university.
- It's very important that you complete this registration form and submit to the CPSA at the same time that you send your expression of interest in participating in the Shadowing Program as noted above.
- If you have any questions about registering with the College of Physicians and Surgeons of Alberta (CPSA), please call the Registrant Assistant line at (780) 969-4924.

### **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](mailto: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, ACFP



## Shadowing Program for Incoming Medical Students Physician and Student Guidelines

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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.

**Please 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, 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 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 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 related activities such as teaching, research and administration
  - Office management: overhead costs, staffing costs, PCN's, income ranges, CME, family practice research, liability issues, third-party contracts (WCB, insurance claims)
- 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.
- 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 must be registered with College of Physicians and Surgeons of Alberta (CPSA) prior to the first day of this shadowing experience.
- Students completed 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 by email at [shelley.veats@acfp.ca](mailto:shelley.veats@acfp.ca)

**2007 POST SHADOWING SURVEY: PHYSICIAN RESPONSES**

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

- Very positive.
- This was very interesting because I could get an idea what the "raw product" is before the formal education starts. Our institution had been receiving students for many years. Several years ago we had the 4th years and then it changed to the current rotation of 3rd years. It was always interesting to see how the students develop as the year goes on. The later in the year the more confident the students were. When we still had the 4th years it was impressive how they would perform by the end of the last year. The exposure with the incoming students now gives a better perspective about how they develop as physicians. We are now going to be part of the new "Integrated Clerkship" and these perspectives will be very important.
- Great.
- I did this last year as well – I think it is good to expose them to what family medicine is really like – they will either then choose to do it or not right? I always worry when they only follow me in the office that they don't truly understand how much you can do with family medicine - (my last year's students followed me in ER as well) as well as deliveries, hospital work (i.e. inpatients) and administrative stuff in the future.
- I think the program is well designed and might change a few students perception of family practice.
- I had a wonderful week with Student X. He showed up every morning on time and displayed a lot of interest.
- 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, re: sports participation and having completed two masters in rather diverse fields (criminology and statistics!). Of course, 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.

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

- No.
- Not at all, instead made me more eager to be a preceptor.
- No, this will not deter me from volunteering for 3rd/4th year students.
- 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.

- I am not currently a preceptor for 3rd/4th year students so it will not change that for me.

**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?)**

- I do not think it will fit our rural situation. Several days are needed to get a real feel for the type of work that we do.
- I don't mind having a shadow but would only want to do it for a few days at most. These guys are pretty keen (as they haven't even started medicine yet!) but I think that is good – everything is new for them.
- One week – 5 working days is perfect.
- I would consider a shorter term placement
- No.
- I would also be willing to participate in shorter length versions of the shadowing program during the academic year.

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

- I will expand it to further shadowing sessions during the first 2 years. It will level the playing fields as far as the promotion of especially Rural Medicine against the specialties. Students can then see for themselves that it can be just as challenging and rewarding.
- No.
- I think the way you run the project is fine – you seem to match me up with students that I quite like.
- No changes at this time.
- I think this is OK. Keep it short simple and easy for us.
- No changes at this time.
- I think the program works well, and I can't really offer any further suggestions on improving it any more.

**5. Other comments.**

- It's a great way to influence the 'would-be' medical student toward family medicine!
- Please continue to create more opportunities for students to be exposed and trained in the Rural Primary Care setting.
- Thanks [Shelley] for your organizational skills in setting this up.
- Thank you for involving me in this program.

**2007 PRE-SHADOWING SURVEY: STUDENTS' RESPONSES**

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

- I chose a career in medicine because I wanted to interact with people and be continuously challenged by new cases and material. I have always wanted to be a physician. After my second year of university is when I really set as a goal.
- I made the decision to study and practice medicine during the final year of my undergraduate degree in engineering. I made this decision essentially because of 2 fundamental components of my personality. I am fascinated by knowing how things, particularly complex biological systems, work, and the human body is no exception; ii) I am a caregiver by nature, and find myself always trying to help others and make their life better in some way.
- This was a decision that accumulated over a long period of time. It required breaking a class stereotype I held about myself, discovering what truly motivates me, and having a successful career as a software engineer for me to understand what direction I ultimately wanted to take in my life.
- I made the decision to pursue medicine after exploring several different professions in the health care field (medicine, paramedicine, nursing, physiotherapy) through volunteer work. Two years ago I decided to pursue becoming a physician and I have since put my energy into achieving that goal.
- I wanted to help people in the most direct way possible using my interest in biology and physical sciences.
- I decided to pursue a career in medicine in my second year of university because I wanted a career that was challenging and where I was dealing with people directly. Since I was part way through a science degree medicine seemed like a good choice.
- I became interested in medicine in high school. I was always very interested in my science classes and had always wanted a job helping others, so medicine seemed to fit with both of these interests. Once I finished my science degree I took my Master's degree in Speech-Language Pathology and got the opportunity to work in hospitals with doctors. This confirmed my desire to continue my studies so after working as a speech-language pathologist for a few years I decided to try to apply to medical school.
- I have always had an interest in science and how the body works, as well as in working with people and solving problems. Eventually I realized that medicine would allow me to combine all of these interests and so I decided to pursue a career in medicine. I made this decision in high school and it was reaffirmed when studying Physiology at university.
- Doing medicine is the only career and 'life' that I have imagined for myself since I was a very small child. I am enthralled by the subject matter. I really enjoy the flexibility and different aspects that you can become involved in – be it very patient-centered or research or both. Also, I would like to help people – truly. Hence, this is a rare profession which centers on this. Lastly, I want to do great things in my life, as in working for a major organization such as the U.N. Studying medicine is certainly a valid

and respected stepping stone in that direction. I have never had a 'Plan B' profession in mind – nursing, law, etc. does not get me nearly as interested or excited.

- Challenge
- Desire to provide a vital service to the community
- Originally considered while in my first degree (1996 – 2000), but circumstances prevented me from following through, and then reconsidered about two years ago.
- I decided to pursue medicine near the end of my high school years. I felt that I wanted to be involved with something that I could get up for work most days and know that what I was going to do on the day would be important and that I would be able to touch the lives of others in a way that could improve their life if not change it in a major way. I am very interested in medicine and I feel a career in medicine will allow me to work closely with others in a way that will be challenging yet rewarding.
- I decided to pursue a career in medicine because I am interested in a career that is diverse, challenging, and rewarding. Further, I value an opportunity to serve my community, and I have a strong affinity for the health sciences.
- I made this decision in my second year of undergraduate studies. At this time, I was volunteering in the emergency room at an Edmonton hospital. This experience allowed me to observe, participate in, and understand many aspects of healthcare delivery. Given that I found this experience to be overwhelmingly positive, I decided to pursue a career in medicine.
- I decided to pursue this career path because I think it's the best way to do what I love, that is to work with my hands and mind and heart all at once and to be challenged, and to be able to do all this while giving back and providing a valuable service to the people around me.
- I made the decision to pursue medicine when I was 22, working in Administration in Oil and Gas company. I decided to return to school and go to University because I'd discovered from volunteer work etc. that I'd rather work with people and in sciences than at a desk in an office in a big company.
- I decided to pursue a career in medicine because I wanted to assist patients (and their families) living with chronic conditions improve their quality of life. I made this decision in grade 8 (age 12), after my grandfather's death. He struggled with depression for most of his life.
- Good balance between academic interests and interpersonal interactions
- I made a loose decision to pursue a career in medicine when I was graduating from high school, which was slowly cemented into a certainty as I went through my undergraduate degree. My decision was based on several factors: I find the subject matter itself fascinating, I wanted a profession where I would be working with people and I wanted a profession that would continually challenge me. Medicine was a perfect fit.
- The variety, the chance to apply research knowledge to help patients, working in a team, contributing to the well-being of others, serving a strong role in the community. Made final decision to pursue medicine while completing Master's thesis work in Neuroscience.
- I have always had a keen interest in biology, and I studied Immunology as an undergrad and this intrigued me greatly. I made my decision when my father had major surgery on

his intestines for Crohn's disease, seeing his life improve post-operation, showed me the positive impact medicine can have on people's lives.

- I chose to pursue a career in medicine, as I am incredibly interested in human physiology, immunology, health, and disease. I also wanted a career where I would have the opportunity to interact with people and help them on an individual basis. I made this decision after my second year of undergraduate studies. I had experienced laboratory research by then, and found that although I was interested in what I was studying or experimenting on I wanted to do something with a more personal aspect.

**2. At this point in time, what disciplines in medicine most appeal to you? For example – Family Medicine, General surgery, Radiology, Urology, G.I, Paeds, etc.**

- Family medicine and obstetrics appeal to me. I want to live in rural Alberta and believe these disciplines are needed.
- I am currently most interested in endocrinology and neurology.
- I am not entirely sure. The country (rural setting) is home, and I feel a strong pull to return to my roots. As such, I will ultimately pursue a discipline that is practiced in a rural setting. This may be a Family / Emerg combination, or perhaps something in Oncology, or something else. Since I have little to no exposure to most disciplines, I am conscious not to bias myself at this point so as to help ensure I fully experience each discipline encountered during my medical training.
- Not very sure- general surgery, radiation oncology or interventional cardiology. Disciplines that provide hands-on procedures for patients.
- Either Family Medicine or Anesthesiology.
- I am interested in family medicine, child development specialist (in the area of children with special needs), and plastic surgery (in the area of repaired cleft lips and palates. Mandible reconstruction, etc).
- At this point in time I am still exploring many disciplines in order to discover which disciplines most appeal to me. One of the disciplines I am interested in is Family Medicine. I am also interested in Neonatology, Paediatrics, Internal Medicine and Genetics.
- At this point in time I am especially interested in Paeds, and its associated specializations, as well as dermatology, anesthesiology and perhaps internal medicine. Having said this, I am very much interested in family and population health and would like to explore this. Nonetheless, I have not shadowed physicians in a very large range of specialties, and so I am going about this in the coming year in order to narrow down my interests.
- I consider Pediatrics, Obstetrics, Rural Medicine and Anesthesia to be disciplines that I am currently interested in.
- In consequence to a number of volunteer and educational experiences, I have some interest in Emergency Medicine, Surgery, Neurology, and Cardiology. However, I am excited to explore a variety of disciplines throughout my upcoming medical education. I expect that such experiences will help me clarify my interests.

- Right now both Family Medicine and General Surgery appeal equally to me.
- There are several fields that I am interested in exploring further: family medicine, emergency medicine, pediatrics, obstetrics/gynecology and anesthesiology.
- GI, Cardiology, Radiology, Anesthesiology
- At this point, I am determined to keep an open mind regarding disciplines as I do not believe I have been adequately exposed to different disciplines to really know what I would like to pursue. That said, however; I currently find general surgery and internal medicine to be the most appealing.
- Still quite undecided and open to disciplines. I have interests in psychiatry and neurology as related to previous research work and educational experience.
- At this point my three interests in Medicine are Family Medicine, G.I., and Surgery.
- At this point in time, Rural Family Medicine is of most interest to me.

**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 I would consider family med with special training in obstetrics because I like the idea of continuity of care.
- At this time, I am not considering family medicine as a long-term goal. Instead, my experience in graduate studies has made me most interested in clinical research in endocrinology, which to my knowledge, is difficult to undertake as a family physician.
- Yes, it is among the specialties I have an interest in. It allows the development of meaningful physician / patient relationship, requires a wide array of knowledge and skills, and allows for a healthy lifestyle.
- Not very strongly at the moment. The job seems less hands-on than other medical specialties.
- Yes. The flexibility in career paths and the variety of problems encountered on a daily basis in family medicine appeal to me.
- Family medicine is currently the most likely area which I will apply to in medicine. I am hoping to work with children with special needs. I like the idea of using medicine in a variety of contexts instead of specializing in just one area.
- Based on my current understanding of what family physicians do, I am considering family medicine as a possible long-term career goal. I am attracted by the idea of having ongoing contact with my patients and following their medical history over an extended period of time. I am also attracted by the idea of dealing with a variety of different conditions and circumstances each day.
- Yes, I would like to consider family medicine as my long-term career goal. This is because it offers a certain amount of autonomy and flexibility (if one practices in one's office), constantly keeps changing, and allows one to be at the front lines to help – this is very visible and rewarding. Also, this is a career which is transferable no matter where

one chooses to live, and eventually may coexist with other interests – ex. Governmental work.

- I would consider family medicine to be a possible long-term goal. I feel that the possibility of building long-term patient-physician relationships, and variety of “problems” that one could see, would be exciting and satisfying for me.
- I have worked in clinics with family physicians and I would consider that one of my long-term goals, but I am not sure if I might currently be more interested in more hands on medical work that might enable me to work in the hospital instead of more of the straight problem solving that occurs in a family physician’s office.
- I am interested in considering a career in family medicine. I have conversed with a number of family physicians and gained some understanding of what they do and why they continue to do it. Given that their comments have been mostly positive, I am interested in exploring family medicine. However, I look forward to enhancing my understanding of family medicine before earnestly considering it as a long-term career goal.
- It is definitely one of my long term goals, and certainly a potential career.
- Yes, because I like the idea of being able to see patients daily and work with them one on one, and have the flexibility to determine my own hours and schedule. I think Family Medicine would also provide a lifestyle most conducive to one day having a family of my own.
- Perhaps no, because I think surgery would be especially interesting and challenging and would give me more of a chance to use my hands, and an absolute beginning and end to treatment appeals to me.
- Yes. Family medicine offers the opportunity to get to know my patients and their families. In family medicine, the physician has the opportunity to watch a child grow from birth to adulthood.
- It is not the top of my list, but I’d like to learn more about it by doing things like shadowing to see if it might be for me.
- I would not consider family medicine as my current long-term career goal, but as I said above, I am keeping an open mind.
- Yes, I think that family physicians can have more flexibility in lifestyle than some other disciplines, and they serve an important role in their communities and in the health of a variety of patients presenting with a variety of health issues.
- Yes I would, I like the idea of treating a wide variety of patients, and helping them through different medical concerns that arise throughout the course of their lives.
- Yes, definitely I would. I am thrilled at the idea of living and working in a small, close-knit community with a variety of different patients and having the ability to assist those patients for much of their lives. As well, I prefer the breadth of knowledge family medicine offers as opposed to being an expert in one very specific area.

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

- To build contacts in a rural community for future electives and employment.

- I honestly don't know a lot about what a family physician faces in a typical day, even though they make up a strong component of "front line" health providers. I feel it's important, especially as a future physician, to know what types of challenges and situations these individuals face daily.
- During my interview for admissions, one of the interviewing doctors talked about how a rural physician is somewhat of a 'jack-of-all-trades' and touches upon numerous disciplines in their work. I found this extremely attractive. I wish to explore whether this is indeed the case and, if it is, I will definitely pursue this direction in my training.
- I want to gain knowledge of the practice of medicine in its entirety and better understand of the day to day responsibilities of family physicians.
- I have never had such an opportunity and would like to gain a better understanding of what a family doctor's working life is like.
- I am hoping to get a broad range of experience and get an even better idea of what family doctors do, what possibilities are available in the field and opportunities are available when you work in this field.
- I want to participate in the Shadowing project to increase my knowledge and understanding of Family Medicine, to explore what would be involved in pursuing a career in Family Medicine and to determine if I am interested in making Family Medicine my career.
- I want to participate in the Shadowing Project because it provides exactly what I desire – a chance to experience life as a physician in a certain specialty does. Through this, I can better make my choice with regards to where I will go after medical school. Clearly, I cannot do a lot of shadowing during the school year, especially given the University of Calgary's compressed schedule. Given that this program occurs in the summer when physicians and students have a little more time, and that financial matters are not a major issue in participating, it's the perfect opportunity to start sorting out my future career.
- To gain a better understanding of family practice
- Be exposed to an "average" day over a number of days
- Because I am considering it as a possible career choice
- I am interested in so many different areas of medicine and I feel that the more exposure I get to different areas the more able I may feel to narrow my focus in medical school. I also hope to learn many things from those we will be shadowing because there are many things that you cannot learn in a textbook but must do so through experience and I hope to gain some knowledge from those that have gained a lot of experience in the field.
- I wish to gain a deeper of understanding of what family medicine entails. In a broader sense, I also look forward to gaining greater insight into medicine as a career, and into the realities of healthcare delivery.
- I feel that gaining experience and seeing how Family Physicians and their practices work would be beneficial to me by allowing me to make more informed decisions about what area of Medicine to specialize in.

- I'm from an urban community and so I've had some limited experience in what doctors do in this setting, and I think it would be really valuable to observe how they practice in a rural setting, because if I do become a family doctor, I see myself working in more of a rural setting.
- Excellent opportunity to learn more about family practice
- Chance to learn more about the community since I am new to both Calgary and Alberta
- Opportunity to start networking
- See first hand what family medicine is like on a day to day basis.
- I would like to be exposed to as many different sides of medicine as I can.
- To gain more experience and a greater understanding of family medicine. To experience family medicine in a rural setting.
- I have worked and volunteered in the E.R. of hospitals before, but I would like to see what the day-to-day aspects of a family practice are like, and the interaction between patient and physician.
- I want to participate in the Shadowing project as, because I decided quite late that I wanted to pursue a career in medicine, I have not had a lot of opportunity to see and experience what being a physician actually entails. As well, I feel like I am very interested in family medicine, but I would love the opportunity to see first-hand the experiences of a family physician to determine if it is, in fact, what I would like to do.

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

- I expect to see the full scope of rural family practice like clinic hours, emergency on-call, house calls and paperwork involved.
- I hope to gain some insight the many aspects of family practice, potentially including everything from patient care to administrative and managerial roles. I hope that the experience I have with this placement will help me identify skills useful for all physicians, so that I may learn them myself, and also help me to make more informed decisions regarding my future career choices.
- I wish to gain a better understanding of the roles and responsibilities of physicians in the rural setting. I would like to see the type of relationship established between the physician and patient and how hands-on the level of care is.
- I expect to observe what a family doctor does in his/her day to day practice and have an opportunity to ask a few questions about lifestyle etc.
- I am expecting to be able to ask the doctor a lot of questions about her job and what the options are for working in family medicine. I am hoping to get the idea of what a typical day looks like for her.
- I expect to increase my understanding of what a family physician's day actually looks like, how their time at work is spent and how they interact with patients. I also expect to learn about some medical conditions and their diagnosis and treatment.

- I expect to come out with a clear picture of what exactly a Family Physician does, and since I am interested in the rural aspect of this field, what life would be like for me if I chose to pursue it. I expect to learn some hands-on knowledge of medicine during the program. I also expect to be treated respectfully and with understanding as I am just beginning to learn medicine in-depth.
- I hope to be able to be closely view the physician over the course of the few days, and be able to objectively see the interview process, to observe various aspects of office/practice management, and to be exposed to the various types of cases that a family physician would see.
- I expect to gain a better understanding of what a day is in the life of a doctor who works in the area I will be shadowing. I would also like to understand how this individual may handle difficult situation they could be faced with and to hear from them what they like and dislike about in their area of work.
- I expect that I will have an opportunity to explore the practice of family medicine in an open, involved manner. Specifically, I expect to gain insight into personal and professional issues related to such practice. Likewise, I expect to observe or interact with a number of patients, visitors, and staff members.
- I hope and expect to be able to observe what typical days in a Family Practice are like, and to be able to ask the Physician questions about their practice and profession, and lifestyle as well, and to come out of the experience more informed and having a better, clearer picture of what Family Doctors do and how I might one day also fit into that role.
- To gain insight into the challenges facing family physicians
- Provide a starting point for further exploration family practice
- None really, I'm open to and excited for pretty well anything.
- I expect to see a day (or days) in the life of a general practitioner, be it rural or urban.
- Expect to get a better sense of the day-to-day of being a family physician, the work load, the patient load, the kinds of health problems they see most frequently, the interaction between doctor and patient. An idea of how rural family medicine is the same, or differs from, family medicine practice in cities.
- To get a first hand experience observing physician and patient interactions, hopefully learning skills that can aid my abilities to interact with patients, and to see what the typical day of family physician is like and what challenges he encounters on a day-to-day basis.
- I hope that this project will give me the opportunity to observe the daily duties of a rural family physician, and to better understand the workings of a hospital/clinic, as well as the dynamics of a health care team.

## **6. Other Comments?**

- I feel this is an excellent and well timed opportunity for new medical students before their classroom work begins. My previous career and education has taught me that having practical experience is invaluable when learning the associated theory. I applaud all those who have helped make this opportunity a reality.

- I am happy to have been offered this opportunity for shadowing. With the U of C's MD program structured the way it is, opportunities like this are vital for my career planning. I like the chance to be able to do this before classes start; it allows me to be completely unbiased without any kind of expectations about what it means to be a family physician
- None at this time.
- I think this is an amazing program and an amazing opportunity. Thank you very much for allowing me to participate in it, I am greatly looking forward to it and appreciate it so much. I think it will be very educational and very helpful.
- Thanks for the opportunity!
- I am simply looking forward to the experience and am open to what is presented to me. Most of my expectations are about what I can learn from the experience, and I know that it will be a great learning opportunity.

## 2007 Post-Shadowing Survey: Students' Responses

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

- Yes but I found 3 days a long time to just watch someone doing their job. One day would have been enough or else there should have been more hands-on opportunity.
- Yes, exceeded expectations. Very open and excited practice: they were happy for me to come for 4 days. Also a wide variety of experience: shadowed in the clinic, in the hospital obstetrics clinic and ward, and hospital emergency.
- My shadowing experience exceeded my expectations. I had expected to spend most of the experience passively observing Dr. X while he was with patients. In reality, Dr. X. generously provided an experience that was stimulating, engaging, and involved.
- While seeing patients, Dr. X frequently paused to explain, or invited patients to explain, medical and non-medical issues pertaining to his examination. Further, Dr. X often invited me, with explicit patient consent, to take part in physical examinations and in-office procedures. Under Dr. X's supervision, I listened to patients' hearts and lungs, looked in ear canals and throats, read blood pressures, and conducted physical examinations of the abdomen. Likewise, Dr. X and his patients frequently pointed out and explained interesting pathologies, discussed their experiences with various treatments, and shared and explained lab results.
- Similarly, I particularly appreciated Dr. X's enthusiasm and commitment to maintaining an open, comfortable, welcoming dialogue with me. Over the course of our four days together, I feel that we covered many issues related to family practice. In addition to discussing cases and issues as they arose, we discussed most of the topics suggested in the 'guidelines' document. As such, both the interpersonal and career-educational components of my experience were greatly enhanced. Overall, my experience was excellent- it was enjoyable and highly-informative.
- I would say that the shadowing met my expectations. I expected to follow Dr. X around for the day and that's what happened.
- Yes; I was able to follow the doctor throughout her day in the clinic, seeing patients, ordering tests and referrals, updating charts and prescriptions. By both shadowing the doctor and being able to talk with her, I got a good sense of what her "typical week" entails.
- Yes, most definitely. I got to experience the work environment and lifestyle of a rural family physician and even got to see some things I didn't expect to see at all, like a hernia operation in the OR!
- Yes, the shadowing expectations were definitely met, it was great to get first hand experience seeing Dr. X diagnose people and observing some key skills needed to be a physician in action.
- Yes, my physician was very frank about not only the many advantages of family medicine, but its downsides. He also showed me what his life outside of medicine is like,

which was good because it seems rare to find other disciplines in medicine so permitting for family time/ one's own interests.

- My shadowing placement exceeded my expectations in terms of how much I learned during the week, and how involved I was with the patients. Mostly I learned about the art of practicing medicine (how to deal with different patients, how to explain treatment plans, how to examine patients of different ages), since I'll learn the science at school.
- Yes, this experience did meet my expectations. Dr. X was amazing. She gave me a good idea of what a day would be like working as a family physician in a smaller centre. I was able to see how she spent her time in the clinic as well as visiting some of her patients in the hospital and in palliative care facilities.
- The experience met and exceeded my expectations. Dr. X said that it was an unusual week, but I was able to see a little bit of "everything".
- The experience far surpassed my expectations. I felt acknowledged and better yet, as not someone who 'was in the way' but rather someone welcomed and seen as worthy of explaining everything to. The doctor, other health care staff, and patients all helped me to learn and went out of their way to explain things as well as to let me witness all aspects of their daily lives.
- Yes, absolutely! I was able to see so many interesting things - very interesting people and procedures, and Dr. X was excellent at explaining things and was a very good teacher. All of the questions I had were addressed and we were able to discuss things in a friendly, relaxed manner. The patients themselves were very agreeable to letting me sit in with them.
- Yes. I was also excited to learn that further specialization as a family physician was also possible. For instance, Dr. X specializes in diabetes management and chronic pain management.
- My experience surpassed my expectations. Dr. X let me observe all the patients she saw and I saw a wide range of patients. She answered all my questions and provided lots of additional information. I felt I learned a lot about the field of family medicine as well as the practice of it.
- Yes, lots of patient interaction, and the experience didn't seem to be altered in any way from a normal experience on the job. This is important to me. I think shadowing experiences should be representative of actual day to day goings on if career choices are to be based on them!

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

- Yes. I thought Dr. X had a great lifestyle and a rewarding career.
- Yes, rural family medicine enables the physician to have both variety (in involvement within hospital departments as well as own clinic) and also personal connection with patients. Allows great follow-through because your clinic patients will also be treated by you in hospital.
- In light of this experience I will now consider family as a possible long-term goal. Notwithstanding that I intend to explore a variety of career options, I found family medicine attractive. Certainly, it seemed to involve the intellectual, personal, and

professional challenges and rewards that I am interested in. Likewise, it was engaging, meaningful, and interesting. However, two features of family medicine most impressed me. First, the practice of family medicine appears to be quite flexible. Between areas of special interest, different locations, additional training, related activities, and the general tailoring of one's practice, there appear to be countless ways to create or reinvent one's career as they wish (relative to community expectation, balancing life and work, etc). In short, there are many diverse options within family medicine. Second, I came to appreciate that practicing family medicine involves much more than physiology (which was the focus of my undergraduate degree). Between psychiatry, pharmacology, microbiology, philosophy, biochemistry, counseling, therapy, office management, business savvy, and so forth, the family physician is involved with his or her patients and practice on a number of levels. Given that I find this to be highly engaging, challenging, and rewarding, it contributes to my interest in family medicine.

- I don't think family med will be my long-term goal. I found it interesting and I enjoyed the experience but I didn't quite find it *fascinating*. While I haven't crossed it off my list entirely, I find it unlikely that that will be my final choice.
- At this point, I am still more interested in areas like endocrinology and neurology, but this shadowing experience has certainly created a more favourable impression of family medicine for me, and I would not completely rule it out.
- I was considering it before, and this experience has only made me want to be a family physician more! The breadths of knowledge and patient-physician relationships are incredibly appealing to me.
- Family Medicine was always an option that I considered and this experience definitely gave me better insight into the life of family physician.
- I would. Dr X practicing not only as a GP but with a special interest in obstetrics showed me that it is possible to engage in a variety of other specific interests in medicine while still treating a pool of families.
- I am now considering family medicine as a possible long-term career goal. I was especially attracted by the relationships I saw between Dr. X and his patients, as well as the variety of conditions that family physicians are presented with.
- I would have to say that family medicine is definitely a future career choice but not necessarily a long-term goal as I would like to explore a variety of areas in medicine.
- I am considering family medicine as a possible long term goal. The part that appeals to me is the ability to really tailor one's practice to one's need to balance family and career. Also, I never realized how many different specializations were available for a family doctor to do (e.g. ER, anesthesia, GI, etc.). This would offer variety to the practice as well.
- I will definitely consider family medicine as my long-term career goal, something that I definitely did not think of too seriously before. I learned that it is very, very diverse in the sense that a multitude of varying conditions and patients are seen regularly, as well as emergency cases and long-term care. I really enjoyed getting to know patients and to follow their histories, both health and social. I also liked how family physicians can choose to work where they want, depending on the lifestyle that they most enjoy.
- Yes, I would even consider Family Medicine more of a long term goal now than I would have at the start of my placement. This is because I got to see what interacting with

patients was like, and I really enjoyed it. I would really value the one on one time with people, and would miss it if I were in a specialty that didn't offer as much of it.

- Yes. I liked the variety in the patient population. I also liked the variety of patient concerns that were discussed with Dr. X.
- Yes, Dr. X showed me that there is a wide range of options available in the field of family medicine for working with a wide variety of patients and environments.
- It's not on the top of my list, but it's definitely up there with a few others. The shadowing opened my eyes to the breadth of options and flexibility of family practice in certain situations (surg, ER, etc.)

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

- That family physicians see a much wider variety of problems than you might think and also that there are lots of opportunities for family physicians to get involved in different ways outside of their family practice. For example participating in research or working in the hospital.
- Rural family medicine provides a great variety of experience as a shadowing opportunity, and a fantastic place to learn many skills and have hands-on experiences. These features will translate into a varied and fulfilling career beyond medical school. Rural family medicine also offers a good lifestyle.
- If a classmate were interested in learning about family medicine, I would emphasize my experience and elaborate on some of the challenges and comment on my perception of the family physician's life and lifestyle. However, given the depth and educational value of my own shadowing experience, I would primarily encourage them to spend three or four days in a similar pursuit.
- Family medicine appears to be what you make of it. You can do clinic, emergency, obstetrics if you are rural you might do even more. It seems to be a very flexible specialty that would support a variety of lifestyles.
- It is possible to shape your practice in a way that appeals to you most (in terms of medicals, obstetrics, etc), and that you see a far wider range of cases than you would expect. The long-term relationships, which the doctor can develop with their patients, are really incredible.
- I would tell them that it offers reasonable hours, a wide knowledge base, and allows you to foster trusting and long-lasting relationships with your patients (for example, you could see a patient from birth all the way to their eighties).
- Yes, I would talk to them about it and my experiences associated with it.
- It is a very diverse, challenging and rewarding career and is too often dismissed in lieu of more technical specialties. GPs are just as knowledgeable and challenged in their day to day routines!
- I would tell them that I think it is a good specialty for anyone who likes to work with people and deal with many different conditions.
- I would report to my classmates that family medicine appears to be the type of career where you are able to follow the progress of your patients as well as maintain long and

lasting relationships with them. It is an interesting field because you day can be filled with so many different things and you do not just constantly certain types of problems as one may find if they choose to specialize. It also appears to be a challenging position because you are expected to know a little information about everything and often you cannot leave a patient with a specific diagnosis.

- I would tell them that family medicine offers one the ability to be involved with all levels of patient care. Ideally, family practitioners are the first point of entry in the medical system. Their judgment needs to be sound, and their knowledge needs to be broad. The possibility of a third year specialization greatly enhances the profile of family medicine because it offers the ability to tailor your practice over time.
- It's certainly an acceptable, not 'boring' choice! You decide how busy you want to be, and how you want to manage your practice. You can spend more or less time with patients, and also get to know them on a more personal level, if one so chooses. If one word sums up the workload, it's 'variety'. One can see patients with health problems ranging from depression to cerebral hemorrhage within an hour (as the doctor I was shadowing did). The bonus of choosing to work in this field is the fact that you are pretty much required everywhere, and with a U of C medical degree, you only need 2 years of residency before you are practicing.
- I would say that a career in family medicine, especially in a rural setting, would be a really interesting career and that they get to see such a variety of people, illnesses and clinical presentations, and that the hours and lifestyle are good and very reasonable, and that a lot of skill is needed to practice family medicine. I would also say that it looks like a really rewarding career.
- Family medicine offers variety, a chance to work with entire families, and flexibility with respect to hours.
- It is very interesting and provides a lot of options for diversity in practice as opposed to specializing in just one field.
- Yep, already have.

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

- Definitely.
- Absolutely, it was fantastic to get some experience and some grounding advice the week before starting medical school. This experience will be one that I reference from time to time while studying to reinforce why I chose a career in medicine.
- Yes, absolutely. In addition to learning all about family medicine, the past week has helped me to focus on the journey ahead. I am even more excited to embark on medical school and the career that will follow, and I feel that this experience has prepared my mindset accordingly.
- I would recommend this program to incoming students, particularly if they have not done much shadowing. It's a good introduction, so to speak, to medical school and it may surprise students to learn how family practice differs from their preconceptions. I know it surprised me!

- Definitely. Even if they have no interest in family medicine, it's really important to understand how this front-line of medicine actually works and it can be a really inspiring illustration of doctor-patient relationships.
- Yes, I think it is a wonderful experience that gives students a chance to see a little more about what being a doctor is like and allows them to learn a few things even before starting classes.
- I think this experience was a great primer for Medical school, and I think it would be helpful for incoming students to go through this experience before they start Medical school.
- Yes.
- I would absolutely recommend this project to incoming students next year!
- Yes I would. I did find I felt very unsure of myself given I had not started up medical school yet and felt as though I didn't really know that much, so it was intimidating, but I am sure that trying things for the first time in medicine will mostly be intimidating. However, Dr. X. was amazing to shadow.
- I most definitely would.
- I would most certainly recommend this project for incoming students for all of the above-mentioned reasons. The fact that the College graciously accepts financial responsibility is all the more reason. There is nothing to lose, but a whole lot to gain. The sooner one narrows down their 'specialties', the easier medical school itself will be!
- Yes, absolutely. It was such a positive and helpful experience; I can't imagine anyone not wanting to take advantage of this project in the future.
- Yes! Definitely. It was a great "warm-up" to the start of the academic year. Plus, it provides a great networking opportunity.
- Absolutely.
- Yep, I've already preached RPAP shadowing to everyone I spoke to the first week of school.

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

- I would make it shorter or else shadow different doctors each day.
- None at all. The physician I shadowed provided an excellent experience because that is his personality and that of his office. He didn't need any suggestions or directions beyond what you provided to make it a great week.
- With the acknowledgement that individual physicians may demonstrate some flexibility, I am satisfied with the current guidelines. Although Dr. X generously provided me with a relatively "hands-on" experience, there was some concern about whether or not such involvement was acceptable under the current guidelines. However, given that Dr. X's discussion with Shelley Veats led to an expressed approval of my involvement, I would not make any major changes.
- I can't think of anything I would change, I thought it was very well organized.

- No.
- No, I had no complaints.
- Not really.
- Perhaps a match between the students participating and the physicians to ensure that their personalities/ interests in medicine match. I was lucky that Dr. X and I both liked similar things but can imagine it not working out that way with other of my classmates and being an awkward situation.
- I don't think there is anything I would change about the Shadowing Project.
- I can't say that I would really change anything. I enjoyed this project and do not really feel that it needed any changes.
- I would consider seeing if longer term placements that encompass a weekend were possible. I think that prospective students would benefit from seeing what happens on a weekend. This is especially useful for those looking at a rural experience since weekends don't always mean a "day-off". Also, when it is down time, it would be useful to give the student an opportunity to explore the area outside of the practice.
- I would not make any changes to the shadowing project.
- No, I thought it was very well organized, the support was very informative, the physicians were excellent and the re-imburement for expenses is very helpful.
- I don't have any suggestions for changes at this time. I thought the project was well-organized and fun.
- None that I can think of.

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

- Yes. I would love that.
- I think so; if it is integrated into the program to there is time. The experience of shadowing really grounds the information from studying into something tangible. Shadowing is quite an uplifting experience, a chance to connect the learning with what a career in medicine is all about.
- Yes, absolutely. I would be especially interested in observing a diversity of styles and practices between different physicians in different settings
- I would consider further shadowing opportunities during the school year, however, I know my time will be very limited and I would like to be exposed to other specialties as well. At the moment, family med shadowing opportunities have a lower priority for me since that is all I have experienced thus far.
- Certainly.
- Most definitely. I hope to take part in as many shadowing experiences as I can.

- Yes, I and Dr. X spoke about this, and I would also be interested in shadowing other physicians. I think shadowing physicians of many different specialties is a great way to get insight into what the varying specialties are like.
- Are you sure I'd have time for that!?
- Yes, I would consider shorter term shadowing placements throughout the year.
- I am not sure if I would want shorter term placements, I think that spending more than a day or so shadowing a family physician would be better than only spending a short period of time with them. Having said that I would love to shadow more family physicians perhaps for longer periods of time to get an overall feel of what a typical week may be like for these physicians.
- Yes.
- I would most certainly participate in a shorter term shadowing placement throughout the academic year. This would be a most welcome addition!
- Yes, absolutely, and I would really hope that such opportunities exist. I would definitely want to take part more shadowing experiences throughout the year. I feel that it's the best way to learn and is really fun also at the same time.
- YES!!! Just let me know where and when to sign up!
- Yes I would, especially if there was opportunity for shadowing in a variety of settings.
- If time would allow, then yes.

## **7. Other comments?**

- Thank-you very much for providing this excellent experience.
- Thanks for all your work in setting up this opportunity. You have been a big help all along in organizing details and providing information and I really appreciate it.
- Thank you for including me in your program.
- I feel very fortunate to have been placed with Dr. X. The way in which she conducted herself with her patients, and the absolute trust and respect you could see that they held for her was inspiring. While observing her, I learned a lot about bedside manner, professionalism, decision-making, and dealing with "difficult" patients. Moreover, her energy seemed endless. She is truly a credit to the profession, and while observing her, I realized that family medicine can be a lot more rewarding than the critical stereotypes make it out to be.
- Thank you very much for this opportunity!
- Thank you very much, Shelly, for this opportunity, I am very happy that I participated in this program.
- I really enjoyed my shadowing placement, thank you for arranging the program!
- I believe that this experience is a great idea, especially for students attending the University of Calgary. Because of the compressed program, one has to be able to make decisions earlier, and having these sorts of experiences allows that. Also, I think that it is

important that Family Medicine really be pushed as a career choice, because the need in this area is great. The truth is, even if I were not considering family medicine at this point, I think that being able to facet of the various specialties also allows me to better make my decision in the future.

- I also just want to say that Dr. X was a wonderful host, along with his colleagues and the staff at both the clinic and the hospital. I never had a boring moment (although that may have been because I never had to sit and watch Dr. X go through his paper work at the end of the day).
- Thank you for an excellent, well-organized experience!
- Thank you so much for such a wonderful experience. I can't say enough positive things about it. I really appreciated it, and feel that the opportunity was very helpful educationally. I felt it was sort of like learning to put a name to a face - it was very helpful to my learning to be able to match an actual clinical presentation to the name of a disease I'd heard or learned about only in passing previously. It was also very helpful in helping me clarify what/where/how I want to eventually practice. It's so nice starting school like this, with a better idea of what I want. I think it will help me be even more focused than I might have been otherwise.
- Thank you for the great introduction to medicine.
- I was very lucky to shadow with Dr. X.