Choosing a Specialty: How Faculty and Residents May Influence Medical Students Career Choices

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Methods

329 COMPLETED SURVEYS
Taken by M4s at University of Michigan, The Ohio State University, and Stanford University before Match Day

17-22
Number of survey questions based on responses

3
Multiple choice, Likert-scale, and open-ended free response questions

Descriptive statistics was used to conduct all quantitative analysis

Thematic analysis of specialties

Results

Feedback was categorized into 4 groups:
- Same specialty as attending
- Different specialty than attending
- Same specialty as resident
- Different specialty than resident

Survey captured 3 types of feedback medical students received from faculty and/or residents:
- When intended specialty is disclosed
- Differences in feedback based on specialty of those providing feedback
- Same specialty as resident

Positive Feedback

- Same specialty: Most students receive positive feedback if selecting same specialty as faculty
- Surgical specialty: Students who selected a surgical specialty received the most positive feedback regardless of faculty or resident specialty
- Specialty support: Most positive feedback was followed up with positive reinforcement and support within selected specialty

Negative Feedback

- Family Medicine: Specialty reported to receive the most negative feedback
- Impact of negative feedback on medical students: 26.8% of students changed their specialty based on the feedback received
- Comfort with sharing specialty selection: 41% of students felt uncomfortable sharing their selected specialty

Discussion

- Fear of judgement, lower grades, and retaliation were reasons medical students felt uncomfortable sharing specialty selection
- Perceived that teaching was affected after specialty selection was revealed
- Reported experiencing bias based on specialty selection
- Provide training to faculty and residents on effectively delivering constructive feedback to specialty selection