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Medical school admissions consulting: more harm than good? Consultation pour les admissions dans les facultés de médecine : plus de mal que de bien ?

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The journey to medical school is fraught with barriers and obstacles.^{1,2} To gain admission, applicants undergo a years-long complicated process involving many steps, including coursework, volunteering, extracurriculars, and high-stakes examinations. Financially advantaged applicants can access resources and opportunities that strengthen their application to medical school, one of which is medical school admissions consulting services.

Medical school admissions consulting services are found all over the world and tend to follow a similar format: medical students or physicians are hired as “consultants” and for a fee, aspiring medical students can access services ranging from mock interview practice to MCAT preparation, to application strategizing. While a simple Google search easily finds scores of these companies, there is little to no acknowledgement of these companies within the academic literature or by the medical schools themselves.

So, if these services help people get into medical school... what’s the big deal?

The blatant issue is that not all applicants (likely a minority) are able to afford these services. Medical students already tend to hail from higher economic strata than the general population.³ Expenses relating to coursework, standardized examinations, application fees, not to mention the cost of tuition itself, make medical school a financially demanding undertaking. Such consulting services can fuel the financial burden. While financially privileged applicants may benefit from consulting services, it is inequitable to applicants who do not have access to these resources.

Beyond the implications on admissions equity, applicants who choose to engage in these services are investing their finite financial resources on a service that may provide limited value. The value accorded to various parts of the medical school application process can be elusive. Unless the consultant is directly part of a medical school admission committee, in which case there is a significant conflict of interest, they are not privy to more information about the selection process beyond what is publicly made available online by the medical school. Even if the consultant has personal experience applying to medical school, they may not be in the optimal position to speak about what an applicant should do to make themselves successful in their application. Ultimately, what truly qualifies one candidate over another for admission is often multifactorial and inscrutable. There are concerns that consulting services oversimplify or feign insight into the selection process and are thereby taking advantage of aspiring medical students for profit.

Moreover, many of these services advise aspiring medical students on how to present themselves for interviews or how to optimize their extra-curricular activities for their application. The behaviors of aspiring medical students are shaped by their perception of what is valued in the admission process.^{4,5} Fundamentally, these services bear influence on the ways in which aspiring medical students invest their finite resources and time, and in turn, the formation of their professional identities in ways that may be disingenuous to their true interests.

In a profession which prides itself on equity and justice, medical school consulting services bear important implications on both these values. More research and investigation into the services delivered by for-profit medical school consulting services, its prevalence, and its impact on admissions is needed. As we find ourselves in the middle of another application cycle to medical school, it is my hope that all applicants can find guidance through mentorship. The road to medicine is arguably impossible without help. I hope that the medical community extends mentorship and guidance to applicants not for profit-seeking reasons, but to grow and give back to the community that has given us so much.

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References

1. De Freitas C, Buckley R, Klimo R, Daniel JM, Mountjoy M, Vanstone M. Admissions experiences of aspiring physicians from low-income backgrounds. *Med Ed*. 2021;55(7):840–9. <https://doi.org/10.1111/medu.14462>
2. Michalec B, Hafferty FW. Examining the U.S. premed path as an example of discriminatory design & exploring the role(s) of capital. *Soc Theory Health*. 2022 Feb 2;1–28. <https://doi.org/10.1057/s41285-022-00175-7>
3. Pitre T, Thomas A, Evans K, Jones A, Mountjoy M, Costa AP. The influence of income on medical school admissions in Canada: a retrospective cohort study. *BMC Med Educ*. 2020 Dec;20(1):1–10. <https://doi.org/10.1186/s12909-020-02126-0>
4. Lin KY, Anspach RR, Crawford B, Parnami S, Fuhrel-Forbis A, De Vries RG. What must I do to succeed?: Narratives from the US premedical experience. *Soc Sci Med*. 2014 Oct 1;119:98–105. <https://doi.org/10.1016/j.socscimed.2014.08.017>
5. Chang I, Yang L, Elma A, Ritz SA, Grierson L. A brief report of aspiring medical student perceptions and behaviours concerning research experiences for selection into Canadian medical schools. *CMEJ*. 2023;14(5):77–81. <https://doi.org/10.36834/cmei.76255>