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Medical students' career choices Part 1: Pressure on today's graduates

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Medical students have always been anxious about selecting their postgraduate training programs and future careers. In the past few years, the intensity of their apprehension seems to have reached new heights.

Some point to the elimination of rotating internships in the early 1990s as contributing to the concerns of today's graduates. Yet, even when rotating internships were available, many of those completing these programs remained uncertain about what they wanted to do in their future practices.

In reality, a combination of factors have combined to create the scenario confronting today's graduates: substantial cutbacks in the total number of postgraduate training positions, undergraduate curricula that do not ensure that students complete all their core clinical experiences within the first 2 to 3 years of medical school, ineffective student mentoring programs, inappropriate timing of the Canadian Resident Matching Service (CaRMS) program, lack of support from the medical schools and our professional Colleges to help residents switch from one residency training program to another, and insufficient opportunity for practising physicians to reenter the educational system for further training.

Without doubt one of the greatest limits to flexibility in our system today has come to be as a result of the decision made a decade ago to decrease the total number of postgraduate training positions available across Canada. This decision not only restricted opportunities for graduating medical students to enter the residency programs of their choice, but also reduced the likelihood that those who might change their minds during residency training would be able to transfer into a different program. In addition, university programs became less able to accommodate those who were already in practice but wanted to reenter the system for further training. Together, these factors have left today's students with the impression (and fear) that, once they indicate their choice of residency training program, their careers are carved in stone and there will be no turning back.

Fortunately, the past 2 years have seen the major organizations in

Canadian medicine, including our College and the associations representing students and residents, meeting together to try to find solutions to the dilemma facing our graduates. The Canadian Medical Association has hosted two national think-tanks focused on flexibility issues; CaRMS has addressed many of the challenges related to the timing of their resident matching service; the Royal College and CFPC have examined strategies to support and facilitate transfer of residents from one postgraduate program to another; medical schools are exploring curriculum changes and enhanced mentor systems for undergraduate medical students; and governments have funded more postgraduate training positions and have supported more opportunities for practising physicians to reenter the system for further training.

Students now deciding about their residency programs and future careers will, like all students before them, still be apprehensive about those decisions. This anxiety should be kept in perspective, however, as most signs indicate the system is becoming more sensitive and better prepared to recognize their concerns and to accommodate their needs.

Next month we will offer Part 2 of this series on students' career choices: Selecting a future in family medicine.