The Experience of Non-Traditional Medical Students in the Clinical Setting

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Abstract

Purpose: To understand the experience of mature-aged medical students on clinical rotations.

Background/Theoretical Framework: Although the mean age of first year medical students is 24, an increasing number of “mature-aged” students, defined as over age 30, are entering medical school. Most studies of mature-aged medical students have examined academic performance using quantitative research design [1, 2]. Few studies have employed qualitative methodology to determine the experience of mature-aged medical students, especially in the clinical setting.

Methods: A recruitment e-mail was sent to all medical students enrolled in clinical rotations; first responders were interviewed until sufficient emerging themes was achieved. Interviews were conducted and recorded in a private office setting, then transcribed into a Word document. Five mature-aged students and four traditional students were interviewed. Using methodology for qualitative research described by Mustakas (1994), the investigators individually coded the transcripts to identify emerging themes [3]. Coded themes underwent peer review, with triangulation of data collection, to determine main themes.

Results: Three main themes emerged from our study. First, abundant life experience influences students’ perception of their role on clinical rotations. A mature student explained, “…having kids… being married and divorced… helps in connecting with patients.” Previous work experience shapes expectations as a physician-in-training. While traditional medical students express concern over quick decision-making in the clinical environment, mature-aged students are entering medical school. Most studies of mature-aged medical students have examined academic performance using quantitative research design [1, 2]. Few studies have employed qualitative methodology to determine the experience of mature-aged medical students, especially in the clinical setting.

Conclusion: Mature-aged students draw upon previous life experience, which shapes role expectations, as well as medical team dynamics. These differences may have implications in training the growing number of mature-aged medical students. A larger scale qualitative study including multiple medical school sites is being developed.

REFERENCES

Data Analysis

Recruitment of Participants

Interviews

Results

Figure 3: Multiple strategies were utilized to ensure trustworthiness of findings:
• Epochs took form of personal reflection prior to interviewing the participants
• The interviews were used by these researchers and coded individually following methodology described by Mustakas (1994)
• First level thematic analysis was performed on each interview transcript (one researcher generated the descriptors into 9 main categories)
• Structural descriptions of “how” and “what” were then compared for each transcript
• The three researchers then met to discuss the categories/descriptions
• The categories were then analyzed and clustered into three main emergent themes
• For confirmation of our analysis, the entire data set was imported into the qualitative analysis software package, “Nivo”

Figure 4: Schematics showing the hypothesis we derived from our study: age, work and life experience all shape the expectations and role of mature-aged medical students.

Theme 1: Abundant life experience influences the student’s perspective of their role as a medical student on clinical rotations.

Theme 2: Previous work experience shapes expectations of the role as a physician in training on clinical rotations.

Theme 3: Age plays a role in the students’ ability to relate to senior members of the medical team, as well as medical student colleagues.

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