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Medical School Admissions Matching

The experience of applying to medical school is an unhappy one. Quite aside from the fierce competition which prevents admission of many qualified applicants, the student is confronted by the bewildering array of examinations, interviews, and tedious application forms utilized by admissions committees in their evaluations. Applicants currently perceive it to be advantageous to apply to as many schools as finances permit. Consequently, the pool of applications has so dramatically increased that admissions committees have become inundated by a volume of paperwork they cannot realistically be expected to handle. Attempts to centralize the application system have resulted only in more paperwork, lack of cooperation among institutions, and increases in the amount of money applicants must pay. From these applications, applicants experience a variable response. About two-thirds receive no offers. Other applicants are so fortunate as to be accepted by four or five schools. When they procrastinate about making a choice and then about informing the various institutions involved, they slow the process for others. It is small wonder that the admissions process, bordering on unworkability, has been extended to the very time of preparation for some individuals.

The present system for evaluation might be changed to parallel more closely the internship matching program. In such a system, notification of acceptance could be made on early, uniform dates by an independent agency. This agency would be advised confidentially by the applicants, in advance, of their order of preference for the schools to which they applied. The medical schools, in turn, would select classes by their own procedures, and inform the agency of their decisions. Students would be informed only of their most highly preferred school to which they had been accepted. Although several "rounds" would be needed to fill all medical school classes, the entire process could probably be completed by February.

This accomplishment would diminish the need for waiting lists and would not permit applicants to hold acceptances in several schools at once. As all students would be apprised of their futures well in advance, much would be done to eliminate the frustrating wait and attendant fears of failure so common to many aspects of premedical education. It is possible that such a system, by virtue of its rationale and unity of response, would serve to minimize the number of applications generated per student. Faculty members would accordingly spend less time on admissions committees and be freed for more desirable and rewarding activities.

The success of this system would rely heavily on improving the quality of premedical advising and on the degree of cooperation extended by medical schools. If the unworkability of the present system continues to grow, along with the number of applications, it should not be necessary to coerce people into change. The medical schools must now themselves be aware of this, for there has been instituted a procedure to aid in making difficult decisions and expediting the task of the committees. Lists are made available to medical schools detailing where each applicant has been accepted. They evidently find it advantageous to know what is going on in their neighbor's yards. Whether this is ethical or fair to any student is unclear. What is clear is that we must start planting seeds if the grass is ever to be any greener.—NORMAN A. MARCUS and CHARLES E. RIGGS, JR.

Norman A. Marcus received his B.A. degree from The Johns Hopkins University in May 1974 and will matriculate in the Stanford University School of Medicine in the fall. Charles E. Riggs, Jr., is a fourth-year student at The Johns Hopkins School of Medicine.