

Why Medicine Essay Example 1

Reframed Understanding

Illustrative example — prior belief overturned by a specific observed moment.

Postbaccalaureate · Biology · GPA 3.81 · MCAT 514 · Accepted: University of Michigan Medical School

Why medicine essay — full essay with paragraph-level annotations.

Essay

I used to think the job was fixing the problem. I changed my mind in a palliative care rotation during my gap year, when I watched a hospitalist spend forty-five minutes not fixing anything. Her patient had end-stage COPD and had declined further intervention. What the physician did for those forty-five minutes was ask questions and listen to the answers. She asked about the patient's apartment. She asked about his dog. When she left the room, the patient looked calmer than he had when she arrived, and nothing about his medical situation had changed.

I realized I had been thinking about medicine as problem resolution. What I had watched was something more precise than that. The physician was not managing a condition. She was accompanying a person through a transition that the condition had made inevitable. That distinction had not appeared in any of the science coursework I had taken, and it was not something I could have understood without seeing it.

I want to practice medicine because it is the discipline that requires both kinds of knowledge simultaneously: the technical knowledge of what is happening in the body and the relational

knowledge of what that means for the person inside it. I came into my gap year thinking I already understood why. I left it knowing I had understood only half.

Annotation

Prior belief structure

Opening on a belief the writer no longer holds is the most direct way to demonstrate that an experience actually changed something. It tells the reader what to look for in the paragraphs that follow.

The dog detail

The physician asking about the patient's dog is specific and memorable. It demonstrates that the physician was actually listening, not performing care. Strong essays show the physician doing something the writer wants to learn to do.

The distinction

Problem resolution versus accompaniment is a real clinical distinction that most applicants never name. Naming it shows the writer has thought carefully about what medicine actually is.

Final claim

The closing admits what the writer did not understand before the experience. Admissions committees value this kind of intellectual honesty because it signals the writer is trainable.

AAMC competencies demonstrated

Service orientation, self-awareness, commitment to learning, interpersonal skills, understanding others.