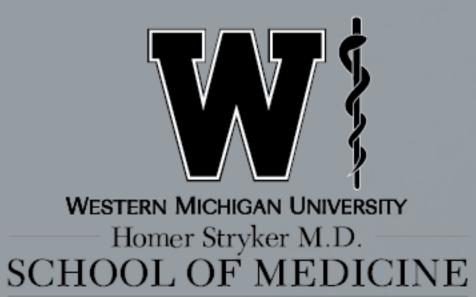
## "Give it to me straight, Doc!"

A Podcast Format to Make Preclinical Education More Human

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## INTRODUCTION

Preclinical medical education has become increasingly distanced from the heart and soul of medicine. Students apply to medical school to help people. Yet, the majority of their formative years are spent memorizing, synthesizing, and test-taking. Medical schools aim to rectify this gap through curricula tackling the non-scientific aspects of medicine. However, the formal nature of this instruction still leaves students hungering for organic interaction with physician mentors.

To address this need, we began a podcast which invites physicians to share the intimate details of their practice through storytelling. We've tackled a litany of topics, including medical mistakes, physician well-being, and interprofessional relations. This format creates a neutral space for clinicians to share deeply personal tales illustrating both the frightening and fulfilling aspects of doctoring. In turn, students react to this vulnerability by engaging with their own hopes and fears for their future careers.



Medicine is a generational endeavor; we are constantly building on the foundations that our predecessors have laid for us. We believe that this format is uniquely positioned to add to this legacy.

## OBJECTIVES

- 1. Identify the strengths and weaknesses of the current paradigm for non-scientific professional education in the preclinical years.
- 2. Analyze the utility of personal storytelling in medical education.
- 3. Describe the usage of a podcast format to address gaps in current non-scientific curricula.



## STUDY DESIGN

Participants will be M2 students who are starting clinical rotations within 4 weeks of the study. Participants will listen to an audio recording of the first episode of the podcast. Participants will be surveyed before and after listening in order to gather data for multiple fields of analysis, which include (1) their sentiment towards the profession of medicine, (2) the value of this format compared to their in-house lectures, and (3) their sentiment towards having this format supplant/supplement their current curriculum.

After their first clinical rotation, students will be surveyed to analyze how the content in the podcast affected their attitudes and actions during their rotation.



In this episode, we talk to Dr. Rajiv Rangrass, a family medicine and OB GYN physician working in Michigan. He talks about his experiences practicing in India, England, and the U.S. We discuss the historical and present day challenges in women's health with its tricky ethical scenarios, in addition to physician well-being.

