

MEDICAL SCHOOL ESSAY BLUEPRINT



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Step-by-step guide for writing a
memorable personal statement

Including real essays that worked

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APPLICATION PIECES

The Essay is a PIECE of the Application Puzzle

Is the essay the most important part of your application?

Nope.

Your transcript is the most critical factor.

No matter how stellar your essay, it certainly will not make up for four years of slacking off. The academic profile of a student is critical; it is the first hurdle an applicant must overcome in the admissions process.

The academic profile is composed of:

- transcript
- class rank
- MCAT scores

All A's are great, but college admission officers look at the rigor of your courses too. They are impressed by students who challenge themselves with a strenuous course load filled with STEM courses



ESSAY PURPOSE

Ok, so now that we have covered how important your academic credentials are, next in line is the essay.

What can you offer the colleges—besides the numbers?

This is where your essay comes in. The essay makes you three-dimensional: it is more than a few sheets of paper—it showcases your personality. It is your chance to show the university how awesome you are, how you are one-of-a-kind, and how lucky they would be to have you at their college.

The essay must add something to your application

- Avoid reiterating things that can be easily found on your application.
- The essay must add something new.
- Don't try to summarize all your extracurricular activities and accomplishments. Remember, this can easily be seen on your application.



ESSAY TOPIC

Sometimes a “regular” event in your life can serve as a great essay topic. Often times, students try hard to think of monumental things that have happened to them and often get stuck on finding a worthwhile topic. The essay topic does not need to be monumental; it needs to be personal.

Read over some of the questions below to help get some ideas flowing.

Brainstorming Questions

- What makes your family different from other families?
- Why are you passionate about becoming a doctor?
- What significant life experiences have you had that changes your outlook on the world or have an impact on your activities?
- What single achievement are you most proud of?
- What is the nicest thing you’ve done for someone?
- Has helping someone changed your perspective?

- What are your most impactful medical experiences?
- What is the greatest challenge you overcame?
- Describe a time you felt empathy for someone else.
- Describe a time you were out of your comfort zone.
- Describe a time you received kindness even though you didn’t deserve it.
- Describe a time you showed kindness even though they didn’t deserve it.

The topic you select for your personal statement should feel easy to write about and expresses something truly special about who you are as a person.

The essay is not the time to be modest. Now, I am not saying be boastful or arrogant. Use your story to highlight your good qualities.



ESSAY LAYOUT

Think of the essay, or personal statement, as a narrative. The narrative is a gripping story about you.

A narrative essay can discuss:

- a personal journey
- an encounter that changed you in some way
- your quest for the truth
- a story of how you defeated a problem
- a personal story of something that has helped shaped you
- an experience that led you to your chosen major

A narrative essay can be broken down into three parts: Opening, Body, and Closing.



Your essay must be memorable

OPENING PARAGRAPH

The opening paragraph must grab the reader's attention. It must be riveting and leave them wanting to read more.

Keep in mind, each admission officer reads essays for eight to ten hours a day during application season. That's a lot of essays!

In order for your essay to jump off the page and into the admit pile, it must be memorable. It must make them feel something. It must be personal.

My favorite opening paragraphs involve a snippet of a larger story: an anecdote.

The anecdote should be a short story about a real experience in your life. Anecdotes are a personal way to open the essay. The anecdote can detail a conversation, encounter, or any moment in time that had an impact on you.

A good opening paragraph plunges the reader right in the middle of your story.

Below is **Isabella's opening**. This is an example of an anecdote. The reader is thrown in the middle of her story.



“jincha (really)?”

I probe as I serve as a sounding board to my three sixth graders. I began our after-school class by asking, “What is your favorite movie?” It took weeks of fist bumps, words of affirmation, and self-deprecating jokes at my Korean skills to finally hear my students’ walls of self-consciousness crumble as they filled the room with their voice. Hearing the phrases “I looked Moana” and “Yes, really! I watched him!” I decide that we’re going to work on the verbs “watch,” “see” and “look.” After practice, I have them teach me similar Korean phrases. My students giggle while I stumble through pronunciation. As they leave and say “Teacher, s..see you later,” I make a heart with my fingers.

**The full essay can be viewed in the appendix*



Hook your reader with a personal story. Make them want to keep reading to find out where this story is leading.

I know what you are thinking. My life is boring, I don't have an interesting story to tell.

Everyone has a personal struggle. Sharing the story of this struggle makes a dull topic more fascinating.

Describe a problem, situation, or encounter in your life. Make the reader feel like they are there with you.

Detail the five senses.

1. What do you see?
2. What do you smell?
3. Any sounds?
4. How does it feel? What is the texture?
5. What does it taste like?



The opening must be gripping and leaving them wanting to find out more.

End the opening paragraph with a hook. The last sentence must be thought-provoking and a bit

mysterious. The reader will have no choice but to keep going.

Below is **Lyle's opening**. It's personal and descriptive; I can visualize it.

While resting comfortably in my air-conditioned bedroom one hot summer night, I received a phone call from my mom. She asked me softly, "Lyle, can you come down and clean up the restaurant?"

Slightly annoyed, I put on my sandals and proceeded downstairs. Mixing the hot water with cleaning detergents, I was ready to clean up the restaurant floor. Usually the process was painstakingly slow: I had to first empty

a bucket full of dirty water, only to fill it up again with boiling water. But that night I made quick work and finished in five minutes. My mom, unsatisfied, snatched the mop from me and began to demonstrate the "proper way" to clean the floor. She demanded a redo. I complied, but she showed no signs of approval. As much as I wanted to erupt that night, I had good reasons to stay calm.

**The full essay can be viewed in the Appendix.*

Can you spot the hook?

Here it is:

**As much as I
wanted to erupt that
night, I had good
reasons to stay
calm.**

This hook makes me wonder: what is his reason to stay calm?

I need to keep reading to find out.

Sharing your personal story isn't always easy. You have to be brave enough to admit your own doubts. Opening yourself up and being vulnerable is a powerful way to bond with your reader.

Elements of a strong opening

- **THE WHY**

End the opening paragraph with the reader wanting more. They want to keep reading. They are asking why? Where is this story going?

- **THE SURPRISE**

It is good to startle the reader; make them sit up straight and pay attention.

Let's take a look at some examples of how to use the surprise element.

- My happiest moments are when I am high.
 - You are a pilot—flying planes is your passion.
- I grew up a killer.
 - Describe the story of becoming a vegetarian.
- I was a police officer for three months.
 - Describe your summer job as a camp counselor for young children. You were tasked with the job of keeping the children safe and things under control.
- I enjoy being a parent.
 - Describe your experience caring for newborn kittens at the volunteer animal hospital.



- **THE CONFESSION**

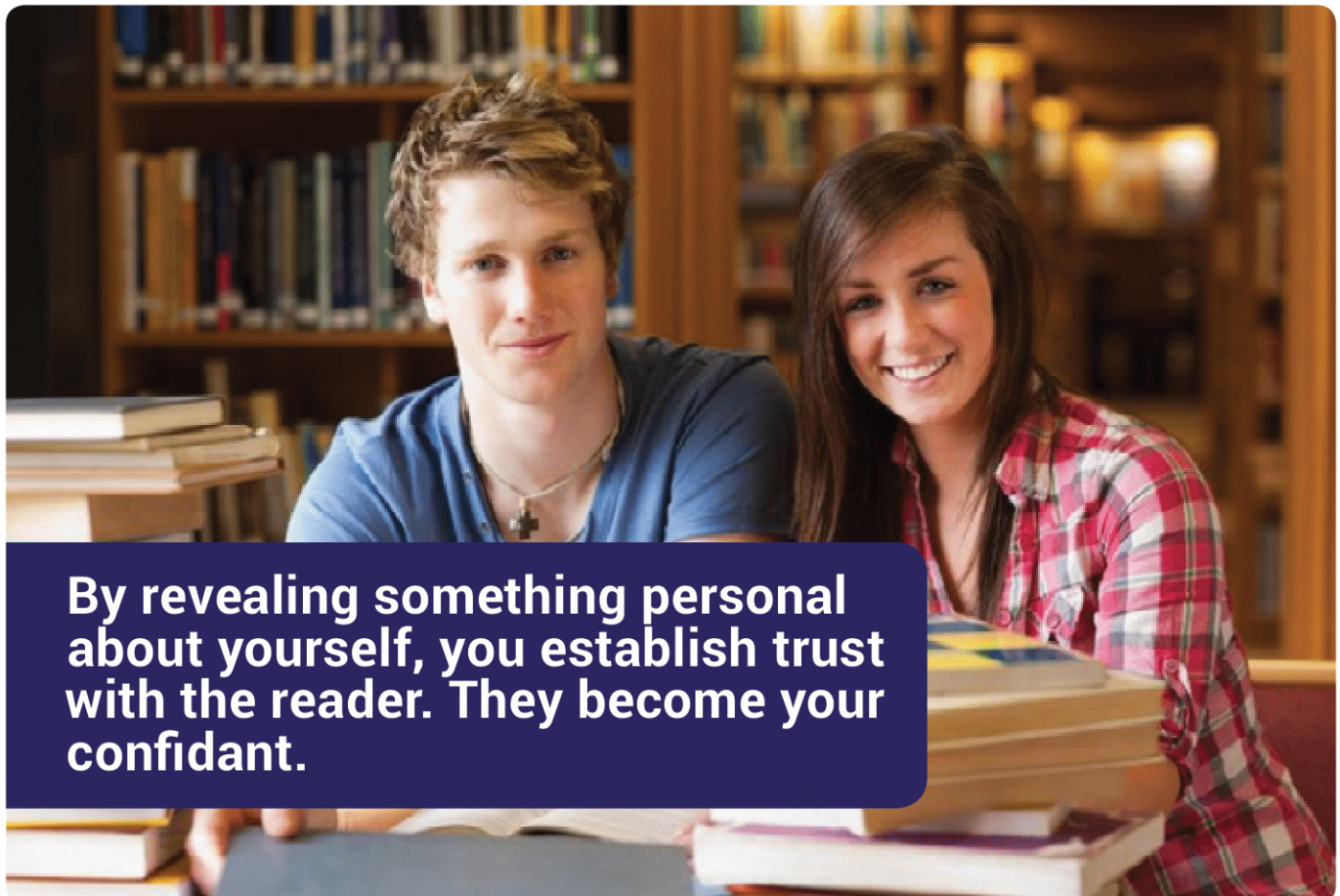
By revealing something personal about yourself, you establish trust with the reader. They become your confidant.

Let's take a look at some examples

- Daisy is a speech and debate national tournament winner
 - Confession: She has a fear of public speaking. Her essay will detail how she overcame/managed

this fear to go on and win competitions.

- Kevin is captain of the football team
 - Confession: He was a chubby kid and has had to work hard to manage his weight.
- Lesley is ranked #1 in her high school and is valedictorian
 - Confession: She is dyslexic and has had to work diligently to overcome this learning obstacle.



BODY OF THE ESSAY

The body is where we get into the details. Elaborate on the opening paragraph. At the same time, highlight your personal qualities. Show the admission staff what type of person you are. Show them through your story.



Show & Tell

The essay is a time to SHOW, not TELL. Many students spell things out in a blunt way in their essays. Instead, use your story to communicate the message you want the admissions staff to hear. Paint a picture with your words.

Examples of TELLING:

- I overcame a large obstacle
- I conquered a difficult experience
- I dedicate my time to helping others
- I embrace different cultures
- I am open to new experiences
- I enjoy diverse environments



Instead, **SHOW:**

- TELL: I overcame a large obstacle
- SHOW: Describe how you worked at a summer job that put you outside of your comfort zone
- TELL: I dedicate my time to helping others
- SHOW: Discuss your volunteer experiences
- TELL: I embrace different cultures
- SHOW: Describe the diverse organizations or events you participate in

Let your story speak for itself. The reader will certainly get the message. The goal is for the reader to feel like they are in the room with you. They see what you saw, smell what you smelled, and hear what you heard. Paint a vivid picture with your words.





CLOSING PARAGRAPH

The closing paragraph is the second most important piece of your essay, right behind the opening paragraph. It must tie everything together.

Avoid these words. They are boring and state the obvious.

- In conclusion
- In summary
- Finally

Make reference to opening paragraph and main idea of the essay. Wrap it all together. Below are a few ways to end your essay.

- A similar anecdote.
- A quotation.
- Lessons learned and a positive plan for the future.

Your story reaches its climax.

But, what's the climax?

It's the solution to your personal struggle. How did you cope? How did you move forward? How did you come out a stronger person as a result?

Make reference to the opening paragraph. Tie it all together.



Below is **Isabella's closing** paragraph. She brings the essay full-circle to remind the reader of what she spoke about earlier.

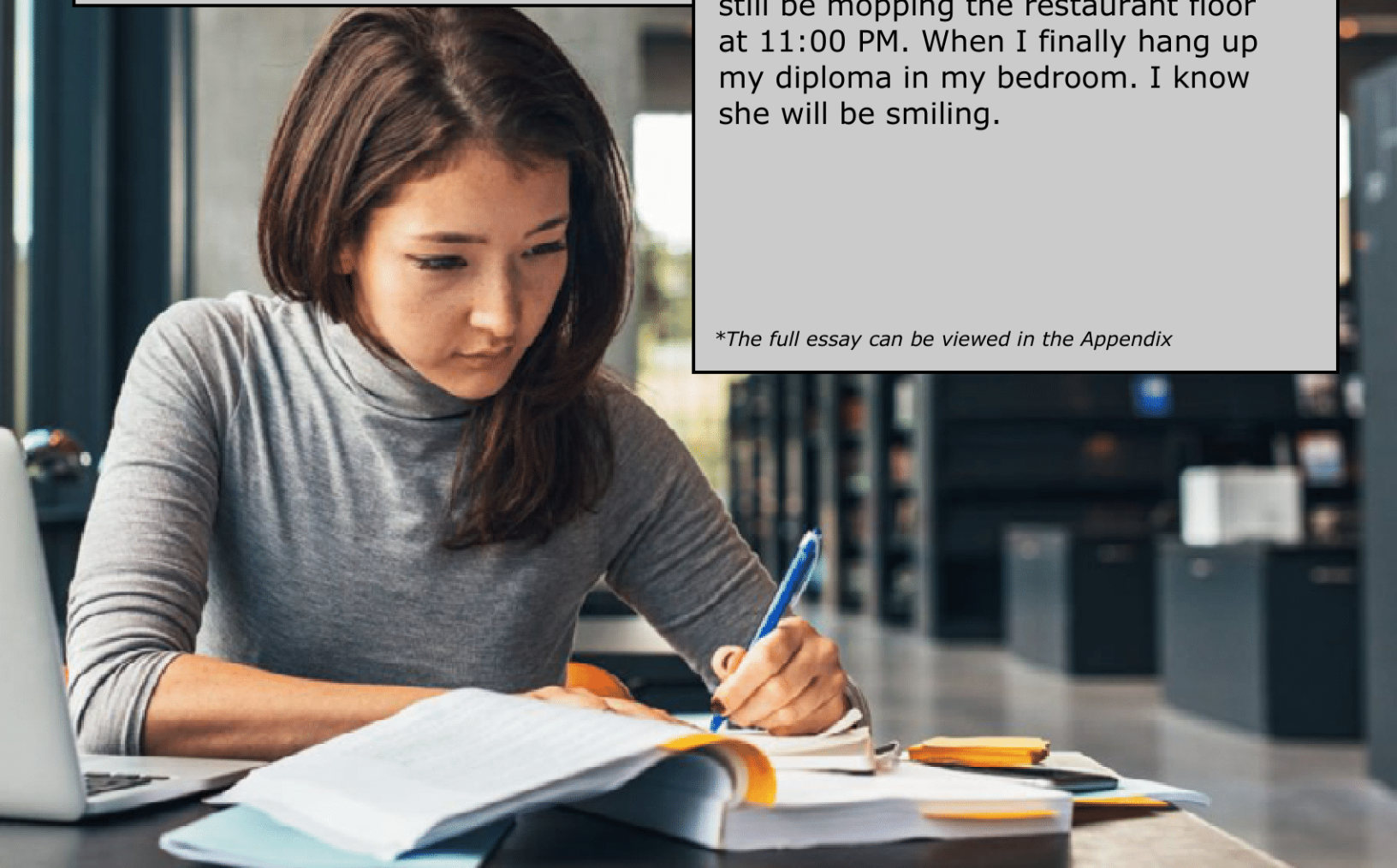
What started as a mink dissection that sparked a curiosity for the sciences has transformed into a confident decision to pursue a career as a physician. I am eager to serve as the nexus between medical science and communities. As a physician, I will love my patients, actively listen and respect differences to work towards healing, while also conducting research to drive advancements in patient-care.

**The full essay can be viewed in the Appendix*

Below is **Lyle's closing paragraph**. He concluded his essay with a strong closing. Like Isabella, he makes reference to his opening paragraph. He references mopping, which was first mentioned in the opening paragraph. He also references his mom; the main character of his narrative.

In hindsight, I'm astounded at the ease with which I can compose all my views of this amazing woman on a piece of paper, but lack the nerve to express my gratitude in conversations. Perhaps, actions will indeed speak louder than words. When I graduate on June 1st, I know she will buy a dress to honor the special occasion. When I toil through medical school, I know she will still be mopping the restaurant floor at 11:00 PM. When I finally hang up my diploma in my bedroom. I know she will be smiling.

**The full essay can be viewed in the Appendix*





Make your writing vibrant

METAPHORS & SIMILES

Metaphors

A metaphor is often referred to as the language of comparison. It is a figure of speech in which a word or phrase is applied to an object or action to which it is not literally applicable.

Rule of thumb: Do not use a metaphor you have heard before. Overused metaphors will make your writing stale. Create your own unique metaphor.

“

Never use a metaphor, simile, or other figure of speech which you are used to seeing in print.

”

—George Orwell



Cliché Metaphors (to avoid):

- broken heart
- cold feet
- couch potato
- early bird
- moral compass
- break the ice

Unique Metaphors:

- zebra hair
- lion temperament
- zigzag emotions
- cotton candy words
- The lawn was a plush green carpet
- The sun was an orange tangerine

Simile

- A simile uses the words 'like' or 'as' to describe something by comparing it to something else. The words 'like' or 'as' signal that a comparison is being made.



A metaphor is like a simile.



—Steven Wright

Cliché Simile (to avoid):

- white as snow
- as big as a mountain
- bright as the sun
- straight as an arrow





Metaphors and similes work best when they're simple, unexpected, and concrete.

Tips:

- Create a quick picture rather than a lengthy story. If it requires a lot of explaining you risk losing the reader's attention.
- Try making your metaphors sensory; let the reader experience your words. When readers can see, feel, smell, taste, or hear something, they're more likely to engage and remember. Bring the reader into the moment with you.

Some examples:

- The play was like a cold coffee. After one sip, I've had enough.
- She stands out like a single soprano amid a choir of baritones.





VERBS

Strong verbs engage your senses and allow the reader to visualize actions.

Strong verbs are precise and concrete.

Weak verbs are abstract and generic. They don't help you visualize a scene.

Examples of weak verbs are:

- to be
- to provide
- to add
- to utilize

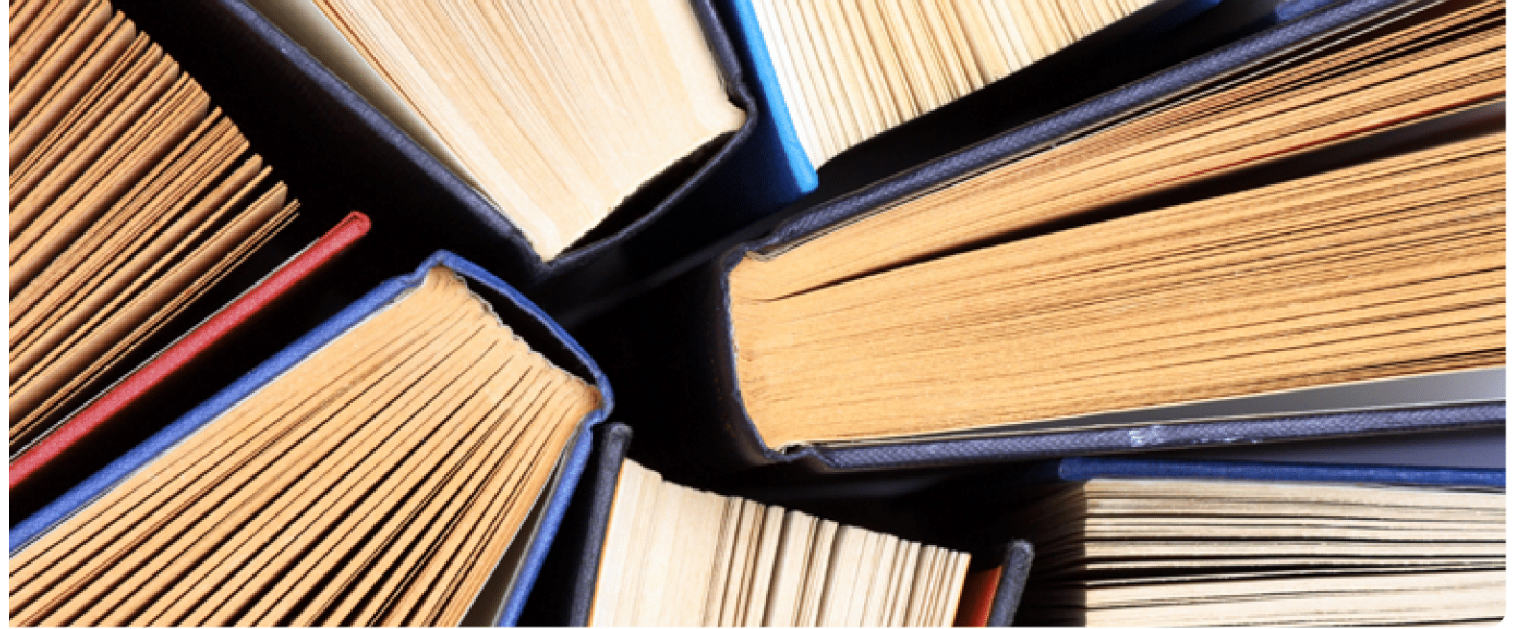
You can't picture these words. Can you picture "to utilize"?

For instance, "to walk" is stronger than "to go" because it gives you an indication of how someone moved. But stronger options would be: to stroll, to hike, to shuffle, to trudge, to stride, or to skip.

You can't picture "provide feedback," but you can visualize "shouting," "lecturing," and "scribbling notes."

When selecting verb choices, ask yourself if you can be more specific. Can your reader visualize the action?





ADJECTIVES

Don't load up on too many adjectives. Adjectives make your sentences longer, which requires more effort from the reader. They can weigh the sentence down.

Overindulgence in adjectives causes your writing to be verbose and cumbersome.

Choose your adjectives wisely. Beware of over-the-top or wishy-washy adjectives.

Examples:

- A wondrous evening (over-the-top)
- innovative person (overused)
- sophisticated taste (wishy-washy)

What do these adjective add? Not much.

Instead, make abstract concepts concrete by appealing to the senses.

Describe how the evening was wondrous, how you are an innovative person, and what makes your taste sophisticated. Try to use analogies and emotional words to describe your story to the reader.

How to cut fluffy adjectives from your essay:

- If the meaning of your sentence doesn't change when leaving out an adjective, skip it.



- Use a stronger noun if it means you can leave out an adjective.
 - Ex: A crisis is better than a severe problem.
 - Ex: A gala is better than an extravagant party.
- Avoid using very and really.
 - Ex: Delighted is better than very happy.
 - Ex: An action-packed movie is better than a really good movie.

Emotion & Sensory Adjectives

When selecting adjectives, try for ones that evoke emotion or appeal to the senses.

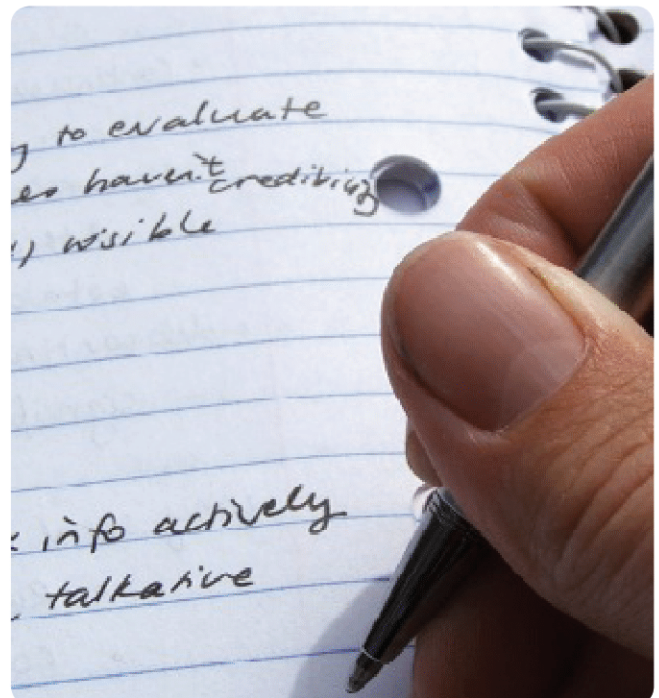


Emotion-Rich Adjectives

- Emotion-rich adjectives make your readers feel something, and they will remember how you made them feel.
- Emotion-rich adjectives can appeal to fear, anger, enjoyment, nostalgia, or empathy.

Examples:

- a jubilant child
- a spirited woman
- a serene afternoon



Sensory Adjectives

Sensory adjectives make abstract ideas more impactful and memorable.

Sensory adjectives can be:

- visual (bright or drab)
- tactile (sticky or polished)
- related to sound (fizzy or chirpy)
- taste (refreshing or boring)
- smell (stale or stuffy)

Examples:

- Stories can be exciting or bland
- The room can be drab or stuffy
- Your day can be rough or smooth



EXCLAMATION POINTS

Avoid excess use of exclamation marks!

Instead of the exclamation mark, try to find the right word.

Examples:

Go from this: It's big!

To this: It's gigantic.

Go from this: That was brave!

To this: That was heroic.

Go from this: She is beautiful!

To this: She is breathtakingly gorgeous.

**Power words are
more effective than
exclamation marks.**



CUT THE FAT

Put your essay on a diet.

Tighten your sentences. Cut out unnecessary words. When you have a limited word count, every word must count.

Don't pad your essay with empty filler words

Grammar expletives make your writing bloated and can be eliminated.

They begin with the words *it*, *here*, or *there* followed by a form of the verb *to be*.

Common constructions include *it is*, *it was*, *it won't*, *it takes*, *here is*, *there is*, *there will be*.



Let's look at some examples:

- Before: It's fun to write
- After: Writing is fun
- Before: It takes time to write
- After: Writing takes time
- Before: There are many people who write
- After: Many people write
- Before: There's nothing better than writing
- After: Nothing's better than writing

TIP: Use your word processor's find functionality and search for *there*, *here*, and *it* and determine if you've used an expletive.

Strengthen your verbs

Get rid of wordy verbs and use strong verbs instead.

Let's look at some examples:

- Before: He is writing
- After: He writes
- Before: Students are in love with him
- After: Students love him
- Before: Handout
- After: Distribute
- Before: Find out
- After: Discover
- Before: Make it clearer
- After: Clarify
- Before: I can't make it to the class
- After: I can't attend the class
- Before: He went to Europe
- After: He traveled to Europe

Strengthen your adjectives

Certain words, like really and very, usually signal a weak adjective.

Don't replace an exclamation mark by the words very or really.

Very/really is bland and almost meaningless.

Let's look at some examples:

- Before: Really bad
- After: Terrible
- Before: Really good
- After: Great
- Before: Very big
- After: Huge
- Before: Very beautiful
- After: Gorgeous



GRAMMAR REVIEW

Common grammar mistakes to avoid:

1. They're vs. Their vs. There

RULE: "They're" is the same as saying "they are"; this is a contraction.

EXAMPLE: *They're on the way to the arena right now.*

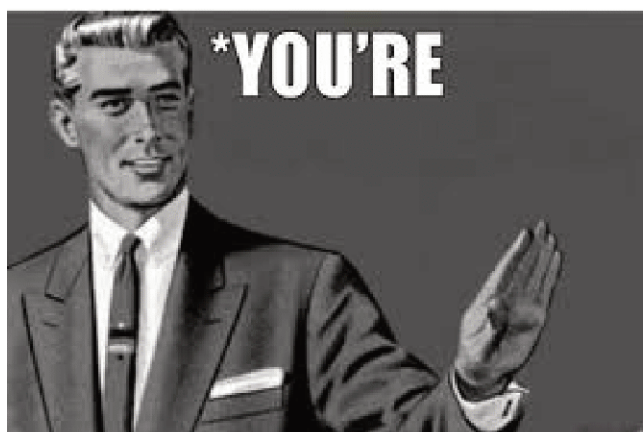
RULE: "Their" is possessive; denoting an object belonging to a person or group.

EXAMPLE: *The other couples are bringing their children with them.*

RULE: "There" is referring to a place.

EXAMPLE: *We can find our seats when we get there.*

2. Your vs. You're



RULE: "Your" is possessive; denoting an object belonging to the person you are speaking to.

EXAMPLE: *Do you need to take your dog to the veterinarian?*

RULE: "You're" is a contraction, the same as saying "you are".

EXAMPLE: *You're a cat person.*



3. Its vs. It's

RULE: "Its" indicates a characteristic of something.

Example: This tire has lost its tread.

RULE: "It's" is another contraction; the same as saying, "it is".

EXAMPLE: *It's time to replace all four tires.*



4. Passive Voice

RULE: Passive voice is when something is **happening to** the object of a sentence, rather than that object **doing** an action.

EXAMPLE: *The coffee steamed (active) as it was poured (passive) into the cup.*



5. Affect vs. Effect

RULE: "Affect" is a verb; to affect some person or thing.

EXAMPLE: *She affected his emotions.*

RULE: "Effect" is a noun; to have an effect on a person or thing.

EXAMPLE: *His smile had an overwhelming effect on her.*





6. Me vs. I

RULE: When it is something you could do alone, you will use “I”, instead of “me”.

EXAMPLE: *I am going to the store; or (My friends and I) are going to the store. Would you like to come with me (us)?*

7. To vs. Too

RULE: “To” is used when going or sending someone or something.

EXAMPLE: *Please take this package to the post office and mail it to my sister.*

RULE: “Too” is another way of saying “also”.

EXAMPLE: *While you are out running errands, go grocery shopping too.*

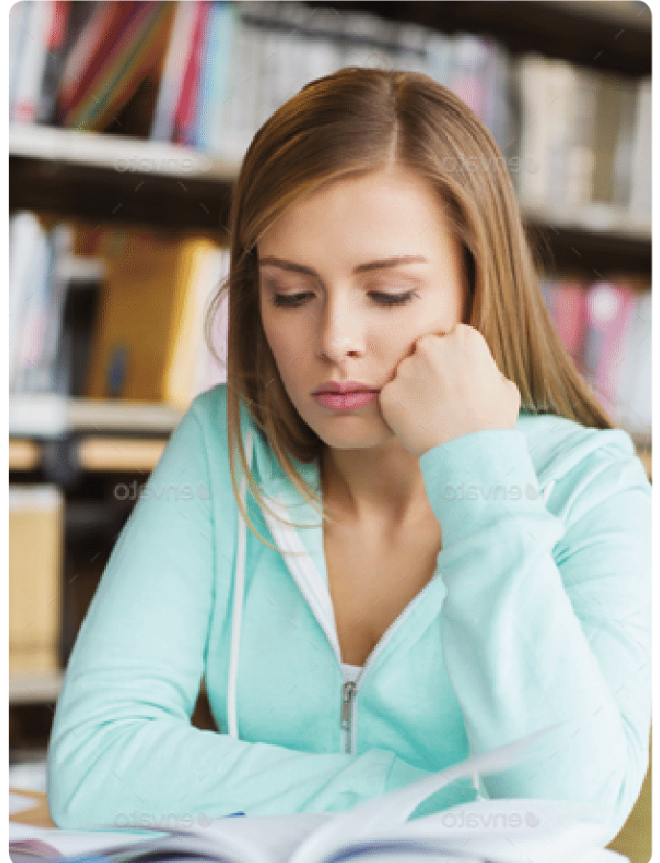
8. Who vs. Whom vs. Whose vs. Who's

RULE: When referring to a he/she, use “who”. When referring to him/her, use “whom”.

EXAMPLE: *Who reserved this table? (Did he reserve it, or did she?) To whom do I need to speak to resolve this? (Do I need to speak to him, or her?)*

RULE: “Whose” is possessive, but “who’s” is another contraction, meaning “who is”.

EXAMPLE: *Whose wallet is this? Who's in charge of Lost and Found?*



9. “Alot” vs. A lot vs. Allot

RULE: “Alot” is not a word; it’s a misspelling of “a lot” which means “many” or “several”, etc.

EXAMPLE: *There are a lot of weeds growing in the backyard.*

RULE: To “allot” is to designate something, like time, for a specific purpose.

EXAMPLE: *Teachers recommend allotting at least two hours per evening for homework.*



RULE: “Than” is used when comparing two things.

EXAMPLE: *I prefer sushi rather than pasta.*



10. Then vs. Than

RULE: “Then” is used in reference to time.

EXAMPLE: *We’ll meet you in the parking lot after the game; we can decide what to have for dinner then.*

11. Use of Commas

RULE: Commas are used to indicate a pause in a sentence, when ideas are related.

EXAMPLE: *We were planning to go to the beach today, but it’s too cold, and it looks like it may rain.*

12. Semicolons

RULE: Semicolons are used to indicate a pause in a sentence between two different but connected ideas.

EXAMPLE: *I haven’t had a chance to call her back; do you think she will want tickets, too?*





13. Farther vs. Further

RULE: “Farther” is used in terms of distance.

EXAMPLE: *The lake is a few miles farther beyond the campsite.*

RULE: “Further” is used in terms of progress.

EXAMPLE: *No spoilers; he’s read further in the book than I have.*



14. Between vs. Among

RULE: “Between” is usually used when referring to two objects, and “among” for three or more objects, often in a group. However, “between” can also be used when naming distinct objects; two, three, or more.

EXAMPLE: *Your choices are between fruit or cake. Or: You can choose fruit or cake, among several dessert options. Or: You can choose between fruit, cake, pie, ice cream, or pudding.*



FREE GRAMMAR CHECKER

Even the best writers can use some help sometimes. Grammarly is a free grammar checker; it is also one of my favorite writing tools. The 'free' part is a wonderful feature.

It is an app that once downloaded can be used to check for spelling and grammar in your email, Word docs, and more.

<https://app.grammarly.com>

In addition to Grammarly, don't forget about good old-fashioned spell check. Every time you save a new version of your essay, run it through spell check first.



APPENDIX—REAL

ESSAYS

Isabella's essay:

“jinch (really)?” I probe as I serve as a sounding board to my three sixth graders. I began our after-school class by asking, “What is your favorite movie?” It took weeks of fist bumps, words of affirmation, and self-deprecating jokes at my Korean skills to finally hear my students’ walls of self-consciousness crumble as they filled the room with their voice. Hearing the phrases “I looked Moana” and “Yes, really! I watched him!” I decide that we’re going to work on the verbs “watch,” “see” and “look.” After practice, I have them teach me similar Korean phrases. My students giggle while I stumble through pronunciation. As they leave and say “Teacher, s..see you later,” I make a heart with my fingers. After a day of coordinating my PowerPoints with the textbook and filling out evaluations, I reflect on the path that has brought me to this rural school in South Korea as a Fulbright English Teaching Assistant.

I stared at the nausea-inducing formaldehyde-soaked mink in front of me. My lab partner had the flu, and I was alone with a scalpel in my hand and an AP Biology dissection packet. On Monday, I was intimidated by the directions ahead of me. By Friday, I accurately labelled every organ in the packet, and the nausea had turned into hunger to learn more about biological research. When the application for “Building Diversity in Biomedical Sciences” was emailed out, I jumped at the opportunity. Eager to step into research, my eyebrows furrowed as I received a syllabus filled with works from *The Immortal Life of Henrietta Lacks* to “League of Denial: The NFL’s Concussion Crisis.” However, close readings and discussions showcased the dance science does with race, economics, politics, and human emotions. Fascinated by the connectedness of research with other fields, I enrolled in Macroeconomics and



started attending intersectionality discussions. I simultaneously journeyed through science courses and joined the research team for a longitudinal study of post-concussion symptoms.

While recruiting patients at local clinics, I found my notes on asymmetrical information relevant as I explained our study to parents and children.

Acknowledging that families may not have the education to comprehend medical jargon, I discussed the purpose of the study, risks, and their involvement multiple times until families felt comfortable making a decision. My public health coursework came alive as I saw Dr. Guevara, the PI, advise policy for youth football based on our research. I also realized that my personal fulfillment didn't solely come from learning about concussions and applying my academic courses to research and policy. Rather, my excitement to go to work was also centered around building rapport with new patients, explaining our research, and following up with recruited participants throughout the study.

Luckily, I had the opportunity to explore this newfound fulfillment by shadowing Dr. Guevara. I was inspired as I saw her provide personalized care by asking athletes about their training, the story of their injury, and their goals. As she explained the injury, I was captivated by the human body's adaptability and

limits.

She offered tissues with honest words of hope to her patients who were overcome with emotion, and she advocated for her patients when she collaborated with her team of physical therapists. Observing, I learned that compassionate medicine requires combining science with an understanding of social pressures and the patient's priorities. Hours spent at the clinic between classes crystallized that the role of a physician combined the mental stimulation of science with the dance I learned about in "Building Diversity in Biomedical Sciences" and the fulfillment I derive from connecting with people, listening to their experiences, and helping them understand medicine and its role in their story. To solidify my decision to commit to a career as a physician, I sought to work in environments that required many of the same skills. Seeing doctors juggle clinic with meetings and research, I dove into administration at Baylor College of Medicine. Watching clinicians develop relationships and teach their patients, I set out to learn how to transcend cultural and language barriers to build mutual understanding by accepting a Fulbright grant.

I stepped off the flight not knowing anyone in South Korea nor understanding the language. However, those challenges morphed into



opportunities to learn. I've grown to be sensitive to my tone after seeing my students shut down because they thought I was angry, when I was just surprised.

After experiencing invalidation as a doctor quickly sent me home with antibiotics and a foreign explanation, I've committed to making sure others feel heard. This year has ignited feelings of gratitude for my position as an English speaker in America, and I am motivated to serve populations who do not hold that privilege. What started as a mink dissection that sparked a curiosity for the sciences has

transformed into a confident decision to pursue a career as a physician. I am eager to serve as the nexus between medical science and communities. As a physician, I will love my patients, actively listen and respect differences to work towards healing, while also conducting research to drive advancements in patient-care.





Lyle's essay:

While resting comfortably in my air-conditioned bedroom one hot summer night, I received a phone call from my mom. She asked me softly, “Lyle, can you come down and clean up the restaurant?” Slightly annoyed, I put on my sandals and proceeded downstairs. Mixing the hot water with cleaning detergents, I was ready to clean up the restaurant floor. Usually the process was painstakingly slow: I had to first empty a bucket full of dirty water, only to fill it up again with boiling water. But that night I made quick work and finished in five minutes. My mom, unsatisfied, snatched the mop from me and began to

demonstrate the “proper way” to clean the floor. She demanded a redo. I complied, but she showed no signs of approval. As much as I wanted to erupt that night, I had good reasons to stay calm.

Growing up in rural China, my mom concerned herself not with what she would wear to school every day, but rather how she could provide for her family. While many of her classmates immediately joined the work force upon completing high school, my mom had other aspirations. She wanted to be a doctor. But when her college rejections arrived, my mother, despite being one of



the strongest individuals I know, broke down. My grandparents urged her to pursue another year of education. She refused. Instead, she took up a modestly paying job as a teacher in order to lessen the financial burden on the family. Today, more than twenty years have passed, yet the walls of my parents' bedroom still do not bear a framed college degree with the name "Tang Xiao Geng" on it.

In contrast, when I visit my friends, I see the names of elite institutions adorning the living room walls. I am conscious that these framed diplomas are testaments to the hard work and accomplishments of my friends' parents and siblings. Nevertheless, the sight of them was an irritating reminder of the disparity between our households. I was not the upper middle class kid on Park Avenue. Truth be told, I am just some kid from Brooklyn.

Instead of diplomas and accolades, my parents' room emits a smell from the restaurant uniforms they wear seven days a week, all year round. It's funny how I never see my mom in makeup, expensive jeans, lavish dresses, or even just casual, everyday clothing that I often see other moms wearing. Yet, one must possess something extraordinary to be able to stand in front of a cash register for 19 years and do so with pride and determination.

On certain nights, I would come home sweaty, dressed in a gold button blazer and colored pants, unmistakable evidence of socializing. In contrast, my mom appears physically and emotionally worn-out from work. But, she still asks me about my day. Consumed by guilt, I find it hard to answer her.

Moments such as those challenge my criteria of what constitutes true success. My mother, despite never going to college, still managed to make a difference in my life. Tomorrow, she will put on her uniform with just as much dignity as a businesswoman would her power suit. What is her secret? She wholeheartedly believes that her son's future is worth the investment. The outcome of my education will be vindication of that belief.

In hindsight, I'm astounded at the ease with which I can compose all my views of this amazing woman on a piece of paper, but lack the nerve to express my gratitude in conversations. Perhaps, actions will indeed speak louder than words. When I graduate on June 1st, I know she will buy a dress to honor the special occasion. When I toil through my college thesis, I know she will still be mopping the restaurant floor at 11:00 PM. When I finally hang up my diploma in my bedroom, I know she will be smiling.



Morgan's essay:

I started writing in 8th grade when a friend showed me her poetry about self-discovery and finding a voice. I was captivated by the way she used language to bring her experiences to life. We began writing together in our free time, trying to better understand ourselves by putting a pen to paper and attempting to paint a picture with words. I felt my style shift over time as I grappled with challenges that seemed to defy language. My poems became unstructured narratives, where I would use stories of events happening around me to convey my thoughts and emotions. In one of my earliest pieces, I wrote about a local boy's suicide to try to better understand my visceral response. I discussed my frustration with the teenage social hierarchy, reflecting upon my social interactions while exploring the harms of peer pressure.

In college, as I continued to experiment with this narrative form, I discovered medical narratives. I have read everything from Manheimer's Bellevue to Gawande's Checklist and from Nuland's observations about the way we die, to Kalanithi's struggle with his own decline. I even experimented with this

approach recently, writing a piece about my grandfather's emphysema. Writing allowed me to move beyond the content of our relationship and attempt to investigate the ways time and youth distort our memories of the ones we love. I have augmented these narrative excursions with a clinical bioethics internship. In working with an interdisciplinary team of ethics consultants, I have learned by doing by participating in care team meetings, synthesizing discussions and paths forward in patient charts, and contributing to an ongoing legislative debate addressing the challenges of end of life care. I have also seen the ways ineffective intra-team communication and inter-personal conflicts of beliefs can compromise patient care.

By assessing these difficult situations from all relevant perspectives and working to integrate the knowledge I've gained from exploring narratives, I have begun to reflect upon the impact the humanities can have on medical care. In a world that has become increasingly data driven, where patients can so easily devolve into lists of numbers and be forced into algorithmic boxes in search





of an exact diagnosis, my synergistic narrative and bioethical backgrounds have taught me the importance of considering the many dimensions of the human condition. I am driven to become a physician who deeply considers a patient's goal of care and goals of life. I want to learn to build and lead patient care teams that are oriented toward fulfilling these goals,

creating an environment where family and clinician conflict can be addressed efficiently and respectfully. Above all, I look forward to using these approaches to keep the person beneath my patients in focus at each stage of my medical training, as I begin the task of translating complex basic science into excellent clinical care.



Kate's essay:

"To know even one life has breathed easier because you have lived. This is to have succeeded." – Ralph Waldo Emerson.

The tribulations I've overcome in my life have manifested in the compassion, curiosity, and courage that is embedded in my personality. Even a horrific mishap in my life has not changed my core beliefs and has only added fuel to my intense desire to become a doctor. My extensive service at an animal hospital, a harrowing personal experience, and volunteering as an EMT have increased my appreciation and admiration for the medical field.

At thirteen, I accompanied my father to the Park Home Animal Hospital with our eleven-year-old dog, Brendan. He was experiencing severe pain due to an osteosarcoma, which ultimately led to the difficult decision to put him to sleep. That experience brought to light many questions regarding the idea of what constitutes a "quality of life" for an animal and what importance "dignity" plays to an animal and how that differs from owner to owner and pet to pet. Noting my curiosity and my relative maturity in the matter, the owner of the animal hospital invited me to shadow the professional staff. Ten years later, I am still part of the team, having made



the transition from volunteer to veterinarian technician. Saving a life, relieving pain, sharing in the euphoria of animal and owner reuniting after a procedure, to understanding the emotions of losing a loved one – my life was forever altered from the moment I stepped into that animal hospital.

As my appreciation for medical professionals continued to grow, a horrible accident created an indelible moment in my life. It was a warm summer day as I jumped onto a small boat captained by my grandfather. He was on his way to refill the boat's gas tank at the local marina, and as he pulled into the dock, I proceeded to make a dire mistake. As the line was thrown from the dock, I attempted to cleat the bowline prematurely, and some of the most intense pain I've ever felt in my life ensued.

"Call 911!" I screamed, half-dazed as I witnessed blood gushing out of my open wounds, splashing onto the white fiberglass deck of the boat, forming a small puddle beneath my feet. I was instructed to raise my hand to reduce the bleeding, while someone wrapped an icy towel around the wound. The EMTs arrived shortly after and quickly drove me to an open field a short distance away, where a helicopter

seemed to instantaneously appear.

The medevac landed on the roof of Stony Brook Hospital before I was expeditiously wheeled into the operating room for a seven-hour surgery to reattach my severed fingers. The distal phalanges of my 3rd and 4th fingers on my left hand had been torn off by the rope tightening on the cleat. I distinctly remember the chill from the cold metal table, the bright lights of the OR, and multiple doctors and nurses scurrying around. The skill and knowledge required to execute multiple skin graft surgeries were impressive and eye-opening. My shortened fingers often raise questions by others; however, they do not impair my self-confidence or physical abilities. The positive outcome of this trial was the realization of my intense desire to become a medical professional.

Despite being the patient, I was extremely impressed with the dedication, competence, and cohesiveness of the medical team. I felt proud to be a critical member of such a skilled group. To this day, I still cannot explain the dichotomy of experiencing being the patient, and concurrently one on the professional team, committed to saving the patient. Certainly, this experience was a defining part of my life



and one of the key contributors to why I became an EMT and a volunteer member of the Sample Volunteer Ambulance Corps.

The startling ring of the pager, whether it is to respond to an inebriated alcoholic who is emotionally distraught or to help bring breath to a pulseless person who has been pulled from the family swimming pool, I am committed to EMS. All of these events engender the same call to action and must be reacted to with the same seriousness, intensity, and magnanimity. It may be some routine matter or a dire emergency; this is a role filled with uncertainty and

ambiguity, but that is how I choose to spend my days. My motives to become a physician are deeply seeded. They permeate my personality and emanate from my desire to respond to the needs of others. Through a traumatic personal event and my experiences as both a professional and volunteer, I have witnessed firsthand the power to heal the wounded and offer hope. Each person defines success in different ways. To know even one life has been improved by my actions affords me immense gratification and meaning. That is success to me and why I want to be a doctor.



Jude's essay:

My motivation to study Medicine stems from wishing to be a cog in the remarkable machine that is universal healthcare: a system which I saw first-hand when observing surgery in both the UK and Sri Lanka. Despite the differences in sanitation and technology, the universality of compassion became evident.

When volunteering at OSCE training days, I spoke to many medical students, who emphasised the importance of a genuine interest in the sciences when studying Medicine. As such, I have kept myself informed of promising developments, such as the use of monoclonal antibodies in cancer therapy. After learning about the role of HeLa cells in the development of the polio vaccine in Biology, I read 'The Immortal Life of Henrietta Lacks' to find out more. Furthermore, I read that surface protein CD4 can be added to HeLa cells, allowing them to be infected with HIV, opening the possibility of these cells being used in HIV research to produce more life-changing drugs, such as pre-exposure prophylaxis (PreP). Following my BioGrad laboratory experience in HIV testing, and time collating data for research into inflammatory markers in lung cancer, I am also interested in pursuing a career in medical research.

However, during a consultation between an ENT surgeon and a thyroid cancer patient, I learnt that practising medicine needs more than a scientific aptitude. As the surgeon explained that the cancer had metastasised to her liver, I watched him empathetically tailor his language for the patient - he avoided medical jargon and instead gave her time to come to terms with this. I have been developing my communication skills by volunteering weekly at care homes for 3 years, which has improved my ability to read body language and structure conversations to engage with the residents, most of whom have dementia.

The rapport I have developed with these residents has made me want to find out more about dementia. As a member of the International Youth Neuroscience Association, I work with a team to form a syllabus on neurodegenerative disorders and have learnt more about treatments for Alzheimer's disease, such as anticholinesterases. I was able to relate this to my enzyme studies in Biology and see the importance of medical research in clinical medicine. I have also improved my teamwork skills from this, which I can apply to a medical profession. During my placement in thoracic surgery, I learnt that a patient's care lies in the hands of the whole team, who must cooperate well to provide





optimum care for the patient. I have further developed these skills in a student-led vocal quintet, which requires compromise when choosing repertoire, good time management in rehearsals, and confidence when performing. I believe I will be able to apply these skills to be an effective member of a medical team. I also noticed the significance of leadership skills in Medicine during a ward round in intensive care, as I saw the consultant manage a team, distributing tasks to treat the patients effectively. Navigating in heavy rain during my Gold Duke of Edinburgh expedition, and co-organising a medical ethics symposium

for many schools have taught me how to lead. Subsequently, as 'Co-Chief Medical Officer' of my school's Science Society, I have initiated regular discussion groups, which focus on medical ethics. The ability of universal healthcare to transcend societal inequalities was clear when seeing patients from different backgrounds receiving equal treatment in both the UK and Sri Lanka. Despite growing pressures, I believe it would be both rewarding and exhilarating to work as a doctor in the NHS, to empower patients through strong communication and world-class care.



Taylor's essay:

Following the physician's unexpected request, we waited outside, anxiously waiting to hear the latest update on my father's condition. It was early on in my father's cancer progression – a change that had shaken our entire way of life overnight. During those 18 months, while my mother spent countless nights at the hospital, I took on the responsibility of caring for my brother. My social life became of minimal concern, and the majority of my studying for upcoming 12th- grade exams was done at the hospital. We were allowed back into the room as the physician walked out, and my parents updated us on the situation. Though we were a tight-knit family and my father wanted us to be present throughout his treatment, what this physician did was give my father a choice. Without making assumptions about who my father wanted in the room, he empowered him to make that choice independently in private. It was this respect directed towards my father, the subsequent efforts at caring for him, and the personal relationship of understanding they formed, that made the largest impact on him. Though my decision to pursue medicine came more than a year later, I deeply valued what these physicians were doing for my father, and I aspired to make a similar impact on people in the future.

It was during this period that I became curious about the human body, as we began to learn physiology in more depth at school. In previous years, the problem-based approach I could take while learning math and chemistry were primarily what sparked my interest. However, I became intrigued by how molecular interactions translated into large-scale organ function, and how these organ systems integrated together to generate the extraordinary physiological functions we tend to under-appreciate. I began my undergraduate studies with the goal of pursuing these interests, whilst leaning towards a career in medicine. While I was surprised to find that there were upwards of 40 programs within the life sciences that I could pursue, it broadened my perspective and challenged me to explore my options within science and healthcare. I chose to study pathobiology and explore my interests through hospital volunteering and research at the end of my first year.

While conducting research at St. Michael's Hospital, I began to understand methods of data collection and analysis, and the thought process of scientific inquiry. I became acquainted with the scientific literature, and the experience transformed how I thought about the concepts I was learning in lecture. However, what stood out to me



that summer was the time spent shadowing my supervisor in the neurosurgery clinic. It was where I began to fully understand what life would be like as a physician, and where the career began to truly appeal to me. What appealed to me most was the patient-oriented collaboration and discussions between my supervisor and his fellow; the physician-patient relationship that went far beyond diagnoses and treatments; and the problem solving that I experienced first-hand while being questioned on disease cases.

The day spent shadowing in the clinic was also the first time I developed a relationship with a patient. We were instructed to administer the Montreal cognitive assessment (MoCA) test to patients as they awaited the neurosurgeon. My task was to convey the instructions as clearly as possible and score each section. I did this as best I could, adapting my explanation to each patient, and paying close attention to their responses to ensure I was understood. The last patient was a challenging case, given a language barrier combined with his severe hydrocephalus. It was an emotional time for his family, seeing their father/husband struggle to complete simple tasks and subsequently give up. I encouraged him to continue trying. But I also knew my words would not remedy the condition underlying his struggles.

All I could do was make attempts at lightening the atmosphere as I got to know him and his family better. Hours later, as I saw his remarkable improvement following a lumbar puncture, and the joy on his and his family's faces at his renewed ability to walk independently, I got a glimpse of how rewarding it would be to have the ability and privilege to care for such patients. By this point, I knew I wanted to commit to a life in medicine. Two years of weekly hospital volunteering have allowed me to make a small difference in patients' lives by keeping them company through difficult times, and listening to their concerns while striving to help in the limited way that I could. I want to have the ability to provide care and treatment on a daily basis as a physician. Moreover, my hope is that the breadth of medicine will provide me with the opportunity to make an impact on a larger scale. Whilst attending conferences on neuroscience and surgical technology, I became aware of the potential to make a difference through healthcare, and I look forward to developing the skills necessary to do so through a Master's in Global Health. Whether through research, health innovation, or public health, I hope not only to care for patients with the same compassion with which physicians cared for my father, but to add to the daily impact I can have by tackling large-scale issues in health.



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Jordan's essay:

Running has always been one of my greatest passions whether it be with friends or alone with my thoughts. My dad has always been my biggest role model and was the first to introduce me to the world of running. We entered races around the country, and one day he invited me on a run that changed my life forever. The St. Jude Run is an annual event that raises millions of dollars for St. Jude Children's Research Hospital. My dad has led our local team for as long as I can remember, and I had the privilege to join when I was 16. From the first step I knew this was the environment for me – people from all walks of life united with one goal of

ending childhood cancer. I had an interest in medicine before the run, and with these experiences I began to consider oncology as a career. When this came up in conversations, I would invariably be faced with the question "Do you really think you could get used to working with dying kids?" My 16-year-old self responded with something noble but naïve like "It's important work, so I'll have to handle it". I was 16 years young with my plan to become an oncologist at St. Jude.

As I transitioned into college my plans for oncology were alive and well. I began working in a biochemistry lab



researching new anti-cancer drugs. It was a small start, but I was overjoyed to be a part of the process. I applied to work at a number of places for the summer, but the Pediatric Oncology Education program (POE) at St. Jude was my goal. One afternoon, I had just returned from class and there it was: an email listed as 'POE Offer'. I was ecstatic and accepted the offer immediately. Finally, I could get a glimpse at what my future holds. My future PI, Dr. Q, specialized in solid tumor translational research and I couldn't wait to get started.

Summer finally came, I moved to Memphis, and I was welcomed by the X lab. I loved translational research because the results are just around the corner from helping patients. We began a pre-clinical trial of a new chemotherapy regimen and the results were looking terrific. I was also able to accompany Dr. Q whenever she saw patients in the solid tumor division. Things started simple with rounds each morning before focusing on the higher risk cases. I was fortunate enough to get to know some of the patients quite well, and I could sometimes help them pass the time with a game or two on a slow afternoon between treatments. These experiences shined a very human light on a field I had previously seen only through a microscope in a lab. I arrived one morning as usual, but Dr. Q pulled me aside before rounds. She said one of the patients we had been seeing

passed away in the night. I held my composure in the moment, but I felt as though an anvil was crushing down on me. It was tragic but I knew loss was part of the job, so I told myself to push forward. A few days later, I had mostly come to terms with what happened, but then the anvil came crashing back down with the passing of another patient. I could scarcely hold back the tears this time. That moment, it didn't matter how many miraculous successes were happening a few doors down. Nothing overshadowed the loss, and there was no way I could 'get used to it' as my younger self had hoped.

I was still carrying the weight of what had happened and it was showing, so I asked Dr. Q for help. How do you keep smiling each day? How do you get used to it? The questions in my head went on. What I heard next changed my perspective forever. She said you keep smiling because no matter what happened, you're still hope for the next patient. It's not about getting used to it. You never get used to it and you shouldn't. Beating cancer takes lifetimes, and you can't look passed a life's worth of hardships. I realized that moving passed the loss of patients would never suffice, but I need to move forward with them. Through the successes and shortcomings, we constantly make progress. I like to imagine that in all our future endeavors, it is the hands of those who have gone before us that guide the way. That is



why I want to attend medical school and become a physician. We may never end the sting of loss, but physicians are the bridge between the past and the future. No where else is there the chance to learn from tragedy and use that to shape a better future. If I can learn something from one loss, keep moving forward, and use that knowledge to help even a single person – save one life, bring a moment of joy, avoid a moment of pain—then that is how I want to spend my life.

The change wasn't overnight. The next loss still brought pain, but I took solace in moving forward so that we might

learn something to give hope to a future patient. I returned to campus in a new lab doing cancer research, and my passion for medicine continues to flourish. I still think about all the people I encountered at St. Jude, especially those we lost. It might be a stretch, but during the long hours at the lab bench I still picture their hands moving through mine each step of the way. I could never have foreseen where the first steps of the St. Jude Run would bring me. I'm not sure where the road to becoming a physician may lead, but with helping hands guiding the way, I won't be running it alone.

