Why some medical students are cutting class to get ahead

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With more resources and information available to students than ever before, the lure of the lecture hall appears to be diminishing. A survey conducted by the Association of American Medical Colleges (AAMC) found that about one-quarter of second-year medical students reported “almost never” attending in-person courses or lectures.

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What are medical students doing in lieu of attending lectures? Here is what a few of them had to say.

Watching lectures

The AAMC’s “Medical School Year Two Questionnaire: 2017 All Schools Summary Report,” published in March 2018, indicated that while second-year medical students are less likely to attend in-person lectures, a significant number of them are taking class through digital media. Nearly 60 percent of students said they attended virtual courses “most of the time” or “often.”

Watching recorded lectures can be seen as offering more convenience. The option to pause is another potential benefit.

“Most of the students on our campus will watch lecture from home via live stream or watch the recorded one later in the day,” said Stephanie Strohbeen, a second-year medical student at the Medical College of Wisconsin’s Wausau campus. “It just allows for a more customizable study schedule. People study better at different times of the day.

“I typically only attend required sessions,” Strohbeen said. “I think that for me personally, I learn better if I’m able to actually listen at double speed, pausing and playing back as needed to learn the
 Skipping lecture entirely

While the data does seem to indicate that most students are taking lecture in some form, there is clearly a group of students that is forgoing lecture all together. In addition to the 23.5 percent of students who almost never attend lectures, about 17 percent of AAMC survey respondents said they almost never view video lectures.

The impetus for those students deciding that lecture isn’t worthwhile is the USMLE Step 1 exam, which medical students take at the conclusion of their second year. The exam factors significantly in residency application.

“I personally thought that resources that are made for one reason and marketed for one reason, getting you the [USMLE Step 1] score you want, were more appealing [than] lecture,” said Hari Iyer, now a third-year medical student at Northeast Ohio Medical University.

“Toward the end of second year I didn’t go to any lectures. My thought was that there was a greater value proposition for these resources. They are there for the one particular purpose that I wanted, which was maximizing my board scores.”

As for video lectures, Iyer didn’t find them to be as effective as USMLE-specific materials.

“With studying you can choose a finite amount of resources with the time that you have,” he said. “And if you try to use too many resources, your mastery of those resources will go down pretty quickly.”

 Missing out on the art of medicine

Iyer acknowledges that the nuances that go with the art of medicine are less likely to be gleaned from a review book. AMA policy backs that stance up. The Association adopted policy in 2018 stating that USMLE scores should not to be the sole criteria for selecting residents and interns.

Still, skipping lecture yielded Iyer’s desired results on the board exam and didn’t adversely impact his medical school performance in specific classes.
In the end, Iyer doesn’t feel that his choice to skip lectures is indicative of the quality of education medical students receive. In that regard, he aligns with most medical students. Eight in 10 surveyed by the AAMC reported satisfaction with their medical education.

“A lot of time lectures will give a different view of things from a clinical perspective and it’s good from a networking perspective,” he said. “There’s just a different value proposition involved with lecture. But second year is just so focused on—let’s just get this one number down, and that’s your board score.”