Welcome everyone to our 2007 Fall Newsletter! As the start of new academic year takes off, we, at IMPACT, have decided to make some new additions to our quarterly newsletter. In each of our issues, we will add new sections that feature a medical specialty and information on medical careers in applied healthcare. This issue highlights the field of geriatrics and a career as an Emergency Medical Technician. Enjoy!

We would also like to wish good luck to those who are taking the upcoming MCAT! And best wishes to those who are applying to medical school! It is a long and arduous journey, but we all have it in ourselves to succeed.

-Editorial Staff

Did you know?
(According to the AAMC website):
-As of 2006, 29 percent of the U.S population was Black/African American, Hispanic/Latino, or Native American, yet these groups only accounted for 15 percent of the 2006 U.S medical entering class
-Nationwide, only 6 percent of practicing physicians are Black/African American, Hispanic/Latino, or Native American
-In 2007, even though the number of first-year enrollees at U.S medical schools increased 2.3 percent over the 2006 entering class, the number of admitted Hispanic/Latino students dropped nearly 1 percent

Important Dates:
-Upcoming MCAT dates: Jan. 25 and 26
-Fee Waiver Application Registration opens on or about January 3rd

www.aamc.org

Web: http://www.medstudent.ucla.edu/prospective/ Telephone: (310) 825-3575
Lindsey Ross attended high school in the east coast, but soon returned to California as an undergraduate to attend Stanford University. Although she initially insisted on pursuing an academic career outside of the medical field, she found herself naturally drawn towards medicine after working as an undergraduate peer adviser for pre-medical students. Much to Ross’s surprise she found herself having a difficult time with her premedical science coursework at Stanford and as a result her academic grades suffered. Nevertheless, she was determined to continue with accomplishing her goal of becoming a doctor and applied to medical school. Unfortunately, she was unsuccessful in gaining acceptance into medical school.

After graduating from college and having been unsuccessful in gaining an acceptance to medical school Ross returned to Los Angeles and sought employment at UCLA as a research assistant. It was at UCLA that she first came into contact with the faculty from the Office of Academic Enrichment and Outreach. Here, she was introduced to the Re-applicant Program (RAP) and was encouraged to apply. Initially, Ross did not think that RAP would be such a life altering experience, but it definitely changed her perspectives. While in RAP, she first met Dr. Parham, she recalled thinking to herself, “Who is this guy…I don’t know what he is talking about.” But by the end of the pro-

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Lindsey Ross is a first-year medical school student at the David Geffen School of Medicine at UCLA. For Lindsey, a native of Los Angeles, UCLA has always had a special meaning for her.

As a child, she frequently made trips to the UCLA Biomedical Library with her parents. Both of Lindsay’s parents are practicing physicians and met while doing their residency at King-Drew Hospital in Watts, CA. As a result, Lindsey grew up surrounded by medicine and medical professionals, but Lindsey at first did not want a career in medicine.
gram, she had a completely different outlook. "RAP was heaven sent because it completely changed my study skills. I also met so many wonderful people, professors and mentors." RAP not only taught her how to become a better student, but while closely working with Dr. Parham, she learned indispensable life skills and discovered her passion of helping underserved communities. "RAP has offered me the opportunity to develop a more profound understanding of what it means to be underserved and the difficulties these communities must face every day. A lot of guest speakers came and talked to us about what they do and what we need to do as a society to care for these communities. This was a wonderful opportunity to experience. RAP allowed me to change my position on why I wanted to practice medicine." Ross learned that she can serve her community because “it is something that I feel...is not even an option for me, because that community needs me as a physician more than any other community, so definitely her and highlight her medical school learning. Lectures and textbooks aside, Ross still finds time to do other activities such as learning to play the piano, dancing and training for a marathon.

Ross is currently a first-year medical student at the David Geffen School of Medicine at UCLA. She is now several months into her medical education and is having a great time in school. Despite having a busy schedule, she says that the best thing about medical school is that she is finally learning about what she truly is passionate for. She explains, “The things that I learn everyday and the things that I do just blow my mind.” For example, she recently got to visit patients in the intensive care unit and had a chance to pray with the patients and their families. Ross explains, “This was really deep...I prayed with people who might not make it to tomorrow...” According to Ross, UCLA has programs that allow you to see different aspects of medicine, and it is those perspectives that constantly amaze.

After the long and challenging road of applying to medical school, Ross says that having a strong support group and perseverance are the key to success. Ross believes that it is important to have a strong support group during medical school. She says, “Because there is so much going on, everything is so new, and it is easy to get lost; it is good at the end of the day to have that support system for you.” On a final note, Ross reminds all of us that whether we are applying to medical school for the first time or re-applying to medical school, “Don’t be afraid to fail because those types of experiences can only make you a stronger person.”
Specializing in Medicine: Consider the Growing Field of Geriatrics

By Hanh Huynh

According to the U.S. Census Bureau, the number of older Americans 65 and over living in the United States will double from the current population within the next few decades. In addition, it is projected that the 85 and older population will grow from 4.2 million in 2000 to nearly 21 million by 2050, making it the fastest-growing population in the country. Great improvements in medical technology, the baby boom generation and the large increase in life expectancy contribute to the major growth in the population older than 65. With this projected growth, there will inevitably be a growing need for services provided to the elderly not only in areas of social work, psychology and education, but in healthcare as well. Especially in medicine, training more physicians in geriatrics will help serve the diverse needs of the elderly and provide specialized care for this growing population.

Geriatrics is the discipline in medicine, which focuses on the promotion of health and the prevention and treatment of disease and disability in later life. Geriatrics was recently integrated as a specialty in general medicine in the 1970s. A doctor that specializes in caring for the elderly is called a geriatrician. Geriatricians are experts in dealing with multiple medical problems and chronic illnesses. They specialize in illnesses that usually occur with age such as Alzheimer’s disease, arthritis, chronic heart and lung disease, vision and hearing problems, incontinence, osteoporosis, Parkinson’s disease and stroke. These diseases not only affect the physical being, but contribute to social, psychological and emotional problems as well.

Geriatricians work with various healthcare professionals ranging from home healthcare agencies to pain clinics in order to provide services that would increase the quality of life of their patients. In this field, geriatricians often work closely with family members and often serve as primary care givers.

To become a specialist in geriatrics, physicians undergo a Geriatric Fellowship Program after completion of residency in Internal Medicine or Family Practice. Fellowship programs often include subspecialties, ranging from Geriatric Oncology to research, and usually last up to 3 years. Fellowship Trained Geriatricians go on to take the exam that also gives them a Certificate of Added Qualifications in Geriatric Medicine. Physicians generally work in offices, clinics, or hospitals. Many geriatricians work or visit patients in assisted living facilities and nursing homes. The employment outlook for geriatricians is excellent. When the baby boom generation enters its senior years, between 2010 and 2030, it is projected that one in five Americans will be over sixty-five. The aging population will generate a demand for geriatricians as well as professionals in other specialty areas.

For more information, visit:
www.americangeriatrics.org
www.aafp.org
Danesh began taking basic community college classes at Santa Monica College. Before his initial interest for medicine, Dr. Danesh considered other career plans. "I worked in construction and found that I enjoyed working with my hands. I considered becoming an electrician," Dr. Danesh recalls. Teaching also seized his interest as his mother had suggested, but not pressured, that he go into a career that he not only enjoyed but also one that was noble and would help people. However, his future career outlook changed after a short surf trip with buddies to Mexico. On their trip, they were involved in a bad car accident involving them and an 18-wheeler. After being exposed to emergency medicine at the scene of the accident and being flown back to the United States for medical treatment, Dr. Danesh realized he wanted to do medicine.

When his high school friends began applying to college, he had a strong desire to go, but his counselor strongly disagreed. His counselor related to him that earning ‘B’ and ‘C’ grades in high school would translate into ‘D’ and ‘F’ grades in college. Despite his counselor's negative prediction of how he would perform in college, Dr. Danesh began taking basic community college classes at Santa Monica College.

Once finishing basic courses at Santa Monica College, Dr. Danesh transferred to UCLA. He volunteered at the UCLA Hospital in various departments, earning an award for volunteering over 1,000 hours. Hospital volunteering exposed him to Emergency Medical Technicians (EMT) who were able to participate in patient care. After certifying as an EMT, Dr. Danesh began working for the UCLA Transport Ambulance, which gave him firsthand experience assessing and treating patients. When he began working in the emergency department as an Emergency Trauma Technician, he learned the inner workings of the emergency department and was involved in the care of patients coming in, not only for emergencies, but also for non-emergent primary care. Later, as an EMT instructor, his experiences as an EMT and Trauma Technician allowed him to utilize his desire to teach. He not only instructed aspiring EMTs on needed job skills, but also gave them insight from his experiences.

Growing up in Los Angeles in a single parent household, Dr. Reza Danesh was afforded no luxuries. In contrast to his friend's expensive movie nights, he enjoyed playing sports and taking cheap bus rides to the beach to surf. Because his mother had attended school in Iran, Dr. Danesh was unaware of many of the requisites.

Dr. Reza Danesh is a 4th year resident at the UCLA and Olive View-UCLA Emergency Departments. In my interview with Dr. Danesh, he shared with me the obstacles he overcame on his path to medicine. His experiences with Chicanos/Latinos for Community Medicine at UCLA along with PREP aided him in becoming a doctor who actively helps medically underserved populations.

Profiles of Success: PREP Alumna Dr. Reza Danesh
By Tabitha Herzog

“His future career outlook changed after a short surf trip with buddies to Mexico.”

Continued on next page
During Dr. Danesh's time as an undergraduate at UCLA, he initially focused on biology but found its breadth unfulfilling. Because of his love for the ocean, stemming from his love of surfing, he chose to focus on marine biology. With his exposure as an EMT and his fluency in Spanish, he joined UCLA Chicanos/Latinos for Community Medicine (CCM) in taking blood pressures at community health fairs. His involvement with CCM grew throughout the rest of his undergraduate career. Dr. Danesh was involved with many health fairs, community clinics and provided medicine and care to underserved towns in Mexico. During his last year, he became more involved as an officer in CCM, the CCM/CMSA liaison.

In his first year at UC Davis, Dr. Danesh attempted to do many of the things he was involved in with CCM at UCLA. However, the fast pace of medical school was too rapid for him to participate in health fairs and clinical work. "I made a really difficult decision to take a year off," Dr. Danesh explains. The year off proved beneficial to him as he was able to travel and provide medical care in underserved communities in Tahiti and Hawaii. When he returned Dr. Danesh was a histology teaching assistant and facilitated a health fair with a 5K/10K run that raised a record $17,000 for the UC Davis School of Medicine student-run medical clinics.

Prior to his third year medical school rotations, Dr. Danesh was told to treat each rotation as it was his favorite. This was not a problem for him, as he was excited about each rotation. He delivered 33 babies, loved pediatrics and reveled in the intensity of surgery. However, when he started his Emergency Department Rotation, Dr. Danesh felt like it was home. The beds in the Emergency Room functioned similarly and the operations of the ER closely resembled his experiences at UCLA. "I was told to pick a specialty where I got along best with the current residents. In the ER, one of the residents sky-dived and some surfed. They were a lot like me. I got along really well with them," Dr. Danesh said.

After medical school and his internship, Dr. Danesh returned to UCLA for his residency in Emergency Medicine. Currently, Dr. Danesh is a fourth year resident and parallels his work in the ER to a "Fine art" — seeing patients quickly to allow him to treat the large amount of patients flooding the ER, but also making each patient comfortable at a not-so-comfortable time in their life. Dr. Danesh balances the fast thinking needed to treat patients in the ER with compassion and general care for each patient’s well-being. Through past experiences growing up, as well as his positive experiences with CCM and PREP, Dr. Danesh seeks not only to give back to the communities through his work in the ER, but he also mentors premedical students, some from PREP and RAP, as they shadow him at UCLA ER and Olive View UCLA Medical Center.

"My advice to premedical students is to never give up. Don’t believe everything you are told. Numbers are just averages, not absolutes. There are 50% above and 50% below each of those MCAT and GPA statistics. Try to apply once and be prepared by getting letters of recommendation now and applying early. If you don’t get in, apply until you do. Also, get involved and volunteer to help others. And pay it forward when you become a doctor to help students get to where you are.”
A Day in the Life of an Emergency Medical Technician

By Sherryann Taylor

“Hello base station, we are on scene of a multiple casualty incident with two patients headed your way. These patients have sustained multiple gun shots to the chest, arms and legs and both are in critical condition... Please have respiratory standing by as we prepare to intubate patients. We have a three minute estimated time arrival to your facility... How do you copy...”

On a typical day as an emergency medical technician (EMT), calls like this become the norm. As I listen to the calls, I begin to prepare for the patients’ arrival. Each time, I go back to the training I received as an EMT and determine which skills will be necessary to care for each patient. I anticipate the need for airway maintenance equipment, the need for cardiac monitoring, bleeding control and set up for possible surgical procedures that may be required to save patients’ lives. At the moment, this may seem routine, but each occurrence is unique. An EMT is trained to assess each situation individually. We are also taught standard protocols. For example, a patient complaining of chest pain requires cardiac monitoring, immediate electrocardiogram, oxygen via mask and rapid transport to the nearest facility. But these are simply protocols. There are many aspects of patients’ conditions that must be taken into consideration prior to treatment. EMTs are trained to provide emergency care quickly and competently, whether in the field or working in an emergency room.

There are three types of EMTs: basic, intermediate and paramedic. EMT basic is required for the latter two. In order to become basic there are four requirements you must fulfill. First, you must be CPR certified. Second, you must enroll in and pass a lecture course on pre-hospital care that will cover general anatomy and physiology, some pharmacology, many medical conditions and their signs, symptoms, treatments and much more. Third, upon completion of this portion, you must also enroll in a course that tests your skills in patient assessment, medical treatments, CPR, bleeding control and many more. Fourth, you must become nationally registered as an EMT. The National Registry for Emergency Medical Technicians administers an exam that tests on basic pre-hospital care. The test is formatted mostly in case study format. You must score at least 70% correct to pass this exam.

A career as an EMT is a great opportunity for anyone interested in getting the inside scope of a career as a health professional. A career as an EMT is a great opportunity for anyone interested in the inside scope of a career as a health professional, especially those interested in going to medical school.

For more information about becoming an EMT, visit www.firemanEMTparamedic.com or check with your local community college or university for course offerings. For more information about EMT national certification visit www.NREMT.org
IMPACT Book Club
By Gonzalo Saavedra and David Tran

Every issue, recommendations that PREP/RAP students make about a great book they have read makes it into IMPACT’s Book Club. Enjoy!

Just Here Trying to Save a Few Lives: Tales of Life and Death from the ER
By: Pamela Grim, M.D.

If you are a pre-medical student, medical student or someone interested in learning about what actually happens within the Emergency Department of a hospital, this is the book for you. Just Here Trying to Save a Few Lives: Tales of Life and Death from the ER, is a collection of short stories about the experiences of Emergency Medicine physician Dr. Pamela Grim. Dr. Grim lays out a detailed picture of the unseen tragedies to everyday society that occur on a daily basis.

Blink: The Power of Thinking Without Thinking
By: Malcolm Gladwell

Malcolm Gladwell explores the experience of making quick and impulsive decisions. There are those who are brilliant decisions makers who often make their judgment in the blink of an eye, and those who constantly fail at the same task. He explains this phenomenon as "thin slicing," which is the ability of our unconscious mind to find patterns in situations and with this we can make quick decisions. Gladwell applies this to several situations in life from medicine to sales.
IMPACT is a newsletter by students, for students.

We also highly encourage for everyone to become involved and contribute to IMPACT. IMPACT is a newsletter that relies heavily on the contributions and participation of former PREP/RAP students. If we, at IMPACT, wish to continue our mission to encourage, educate, and empower pre-medical students and the community we strongly need your support.

The Editorial Board meets once every month. Upcoming meetings will be announced. All are welcome to attend. To contribute to IMPACT or to join the Editorial Board, please contact Gonzalo at chalo_427@hotmail.com or David at ctdave@ucla.edu

Resources

The Resources column is a forum intended for the sharing of research and information relevant to pre-medical students gathered by PREP & RAP Alumni. If you have any interesting websites you would like to share, please let us know:

MCAT Information
Sign up for this year’s MCAT or get answers to FAQs, at aamc.org/students/mcat/start.htm

The Next Generation: An Introduction to Medicine www.nextgenmd.org

National Association of Advisors for the Health Professions www.naahp.org

AAMC’s Aspiring Doctors Website www.aspiringdocs.com

Association of American Medical Colleges
Essential basic information about applying to medical school www.aamc.org

American Association of Colleges of Osteopathic Medicine
www.aacom.org

Premedical Discussion Forums
www.studentdoctor.net

MCAT Mnemonics
http://www.geocities.com/CollegePark/Union/5092/mnemMCAT.html

MDapplicants.com
A collaborative site created by the online community to serve as a guide to premedical students.