FROM THE CREATORS OF THE MCAT® EXAM

The Official Guide to Medical School Admissions
How to Prepare for and Apply to Medical School

Includes 50+ AAMC tips and data you won’t find anywhere else!

2015 Edition
The Official Guide to Medical School Admissions

How to Prepare for and Apply to Medical School

2015 Edition
**Association of American Medical Colleges**

The Association of American Medical Colleges (AAMC) has as its purpose the advancement of medical education and the nation’s health. In pursuing this purpose, the AAMC works with many national and international organizations, institutions, and individuals interested in strengthening the quality of medical education at all levels, searching for biomedical knowledge, and applying these tools to providing effective health care.

As an educational association representing members with similar purposes, the primary role of the AAMC is to assist those members by providing services at the national level that will facilitate the accomplishment of their missions. Such activities include collecting data and conducting studies on issues of major concern, evaluating the quality of educational programs through the accreditation process, providing consultation and technical assistance to institutions as needs are identified, synthesizing the opinions of an informed membership for consideration at the national level, and improving communication among those concerned with medical education and the nation’s health. Other activities of the AAMC reflect the expressed concerns and priorities of the officers and governing bodies.

In addition to the activities listed above, the AAMC is responsible for the Medical College Admission Test® (MCAT®) and the American Medical College Application Service® (AMCAS®) and provides detailed admissions information to the medical schools and to undergraduate premedical advisors.

**Important Notice**

The information in this book is based on the most recent data provided by member medical schools prior to publication at the request of the Association of American Medical Colleges (AAMC).

This material has been edited and in some instances condensed to meet space limitations. In compiling this edition, the AAMC made every reasonable effort to ensure the accuracy and timeliness of the information, and, except where noted, the information was updated as of February 2014. All information contained herein, however, especially figures on tuition and expenses, is subject to change and is non-binding for medical schools listed and the AAMC. All medical schools listed in this edition, as with other educational institutions, are also subject to federal and state laws prohibiting discrimination on the basis of race, color, religion, sex, age, disability, or national origin. Such laws include Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act, and the Age Discrimination Act of 1975, as amended. For the most current and complete information regarding costs, official policies, procedures, and other matters, individual schools should be contacted.

In applying to U.S. or Canadian medical schools, applicants need not go through any commercial agencies. The AAMC does not endorse any organization or entity that purports to assist applicants to achieve admission to medical school other than undergraduate premedical advisors and medical school admissions officers.

**AAMC Commitment to Diversity and Inclusion**

AAMC’s mission is to serve and lead the academic medicine community to improve the health of all. As the U.S. population ages, grows more diverse, and disparities in health care persist, the benefits of diversity and inclusion become critical to addressing the health of the nation. The AAMC’s commitment to diversity and inclusion in medicine and biomedical research spans more than three decades demonstrated by ongoing leadership and engagement in activities starting as early as high school that promote diversity and inclusion through programs, advocacy and research. Information about AAMC initiatives is available at www.aamc.org/diversity.
Chapter 1:
So... You Want to Be a Doctor .............. 3

Tomorrow’s Doctors, Tomorrow’s Cures® .... 3
Dozens of Options from Which to Choose .... 4
How to Decide Which Path Is “Best” ...... 5
What About the Future? .................... 5
Workforce Issues ........................... 6
A More Collaborative Approach .............. 7
The Immediate Steps That Lie Ahead ...... 7

Chapter 2:
Building a Strong Foundation: Your Undergraduate Years ................. 9

Academic Preparation ....................... 9
Personal Attributes ......................... 11
Extracurricular Activities Related to Medicine .............................. 12
Pre-Health Advisors ......................... 13
Services Provided .......................... 13
Special Programs ............................ 14

Chapter 3:
Your Medical School Years: The Education Process ....................... 17

Undergraduate Medical Education: An Overview of the Medical School Years .... 17
A Word About Preclinical vs. Clinical Years ................................. 18
The Changing Face of Medical Education ... 20
Choosing a Specialty and Applying for Residency ......................... 21
Graduate Medical Education (GME): The Residency Program ............. 22
Licensure and Certification: Ready to Function Independently .......... 23
Continuing Medical Education (CME): Lifelong Learning .................. 24

Chapter 4:
All About the MCAT® Exam .................. 25

The Role of the MCAT Exam .................. 25
How the Exam Is Structured .................. 26
What the Exam Measures ................... 26
MCAT Scores ............................... 27
Preparing for the Exam ..................... 28
Test Dates, Registration, and Fees .......... 28
Testing with Accommodations .............. 29
Retaking the Exam .......................... 29
Score Reporting ............................. 29

Chapter 5:
Choosing the Schools That Are Right for You ............................... 31

The Overall Mission of the School .......... 31
Kicking Off Your Research .................. 32
The Educational Program ................... 33
How Do GPA and MCAT Scores Factor In? .................................. 33
Attending Medical School in Your “Home” State .............................. 34
Public or Private? ............................ 34
Additional Factors to Consider ................. 34
Special Regional Opportunities ................ 35

Chapter 6:
Applying to Medical School .................. 37

Responsibilities of the Medical School Applicant ............................ 37
American Medical College Application Service® (AMCAS®) .................. 38
AMCAS Application Sections .................. 38
The Application and Admissions Cycle .......... 40
Secondary Applications ..................... 41
Application Fees ............................. 41
Criminal Background Check .................. 42
Fee Assistance Program ..................... 42
Special Note About Deferred Entry .......... 43
Application and Acceptance Protocols—Applicants ..................... 43

Chapter 7:
The Admissions Decision ....................... 45

The Holistic Review of Medical School Applicants .......................... 45
Experiences ................................... 46
Concept of “Distance Traveled” .................. 47
Attributes ..................................... 47
Academic Metrics ............................. 47
MCAT Scores ................................ 48
Making the Evaluation ....................... 48
The Interview Is Key ......................... 49
A Few Last Reminders for When Your Interview Day Arrives .......... 50

Chapter 8:
Building Toward Greater Diversity .............. 53

Defining Diversity ............................. 53
AAMC Programs and Resources .................. 54
School Programs and Resources ................ 57
<table>
<thead>
<tr>
<th>Chapter 9:</th>
<th>Be in the Know: Application and Acceptance Protocols— Admissions Officers</th>
<th>61</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chapter 10:</td>
<td>Applicant and Acceptee Data</td>
<td>63</td>
</tr>
<tr>
<td></td>
<td>Performance on the MCAT exam</td>
<td>64</td>
</tr>
<tr>
<td></td>
<td>Undergraduate Grade Point Average (GPA)</td>
<td>66</td>
</tr>
<tr>
<td></td>
<td>MCAT and Undergraduate GPA</td>
<td>68</td>
</tr>
<tr>
<td></td>
<td>Gender</td>
<td>70</td>
</tr>
<tr>
<td></td>
<td>Applicant and Accepted Applicant Experiences</td>
<td>71</td>
</tr>
<tr>
<td>Chapter 11:</td>
<td>You Can Afford Medical School</td>
<td>73</td>
</tr>
<tr>
<td></td>
<td>Building a Strong Financial Plan</td>
<td>74</td>
</tr>
<tr>
<td></td>
<td>Overview: The Financial “Basics”</td>
<td>75</td>
</tr>
<tr>
<td></td>
<td>Types of Financial Aid</td>
<td>77</td>
</tr>
<tr>
<td></td>
<td>The Financial Aid Application Process</td>
<td>77</td>
</tr>
<tr>
<td></td>
<td>How Medical Schools Determine Eligibility for Financial Aid</td>
<td>78</td>
</tr>
<tr>
<td></td>
<td>Forgiveness and Repayment Assistance Programs</td>
<td>79</td>
</tr>
<tr>
<td></td>
<td>Federal Loans and Repayment</td>
<td>79</td>
</tr>
<tr>
<td></td>
<td>A Final Word About Financing</td>
<td>80</td>
</tr>
<tr>
<td>Chapter 12:</td>
<td>Information on Combined Undergraduate/M.D. Programs</td>
<td>81</td>
</tr>
<tr>
<td></td>
<td>List of Medical Schools Offering Combined Undergraduate/M.D. Programs by State, 2015–2016</td>
<td>83</td>
</tr>
<tr>
<td></td>
<td>List of Medical Schools Offering Combined Undergraduate/M.D. Programs by Number of Years, 2015–2016</td>
<td>85</td>
</tr>
<tr>
<td>Chapter 13:</td>
<td>M.D.-Ph.D. Dual Degree Programs</td>
<td>87</td>
</tr>
<tr>
<td></td>
<td>The Education of a Physician Scientist</td>
<td>87</td>
</tr>
<tr>
<td></td>
<td>The Typical Program</td>
<td>88</td>
</tr>
<tr>
<td></td>
<td>Application and Admission</td>
<td>89</td>
</tr>
<tr>
<td></td>
<td>Financing M.D.-Ph.D. Programs</td>
<td>90</td>
</tr>
<tr>
<td>Chapter 14:</td>
<td>Information About U.S. Medical Schools</td>
<td>91</td>
</tr>
<tr>
<td></td>
<td>U.S. Medical Schools</td>
<td>91</td>
</tr>
<tr>
<td>Chapter 15:</td>
<td>Information About Canadian Medical Schools</td>
<td>95</td>
</tr>
<tr>
<td></td>
<td>Selection Criteria</td>
<td>95</td>
</tr>
<tr>
<td></td>
<td>Canadian Medical Schools</td>
<td>97</td>
</tr>
<tr>
<td>Acronyms</td>
<td></td>
<td>99</td>
</tr>
</tbody>
</table>
# Tables & Charts

**Chapter 1:**
*So...You Want to Be a Doctor* .................. 3

- **Chart 1-A**
  Projected Supply and Demand, Physicians, 2008–2020 .......................... 6

**Chapter 8:**
*Building Toward Greater Diversity* ....... 53

- **Table 8-A:**
  Matriculants by Medical School and Race and Ethnicity, 2014..................... 58

**Chapter 10:**
*Applicant and Acceptee Data* .......... 63

- **Chart 10-A**
  MCAT® Verbal Reasoning Score Distribution, Year 2014 Applicants .......... 64
- **Chart 10-B**
  MCAT® Physical Sciences Score Distribution, Year 2014 Applicants........ 64
- **Chart 10-C**
  MCAT® Biological Sciences Score Distribution, Year 2014 Applicants ...... 65
- **Chart 10-D**
  MCAT® Total Numeric Score Distribution, Year 2014 Applicants .......... 65
- **Chart 10-E**
  GPA Science Distribution, Year 2014 Applicants.............................. 66
- **Chart 10-F**
  GPA Nonscience Distribution, Year 2014 Applicants.......................... 66
- **Chart 10-G**
  GPA Total Distribution, Year 2014 Applicants................................. 67
- **Chart 10-H**
  MCAT® and GPA Grid, Applicants and Acceptees, 2012–2014 (aggregated) ...... 68

**Chart 10-I**
Undergraduate Major Distribution, All Applicants, 2010–2014.................. 69

**Chart 10-J**
Undergraduate Major Distribution, Accepted Applicants, 2010–2014 .......... 69

**Chart 10-K**
Applicants by Gender and Acceptance Status, 1992–2014 .................... 70

**Chart 10-L**
Age Distribution, Year 2014 Applicants........................................ 71

**Chart 10-M**
Percent of AMCAS® Applicants and Accepted Applicants Reporting Selected Experiences........................................ 71

**Chart 10-N**
Distribution of Self Identity: All Applicants, 2014 .................................. 72

**Chapter 15**
*Information About Canadian Medical Schools* ................. 95

- **Table 15-A**
  Subjects Required by Two or More Canadian Medical Schools, 2014–2015 Entering Class........................................... 96

- **Table 15-B**
  Tuition and Student Fees for 2014–2015 First-Year Students at Canadian Medical Schools (in Canadian Dollars).................................................. 96
Chapter 1:

So...You Want to Be a Doctor

Whether you witnessed a lifesaving moment, won the science fair, or volunteered in an under-resourced clinic, chances are something powerful influenced your decision to pursue the field of medicine.

Not everyone’s journey to becoming a doctor is the same. Some students finish college and continue straight to medical school, others may work in another career first, some may choose to strengthen their skills and test their passion for medicine during a gap year. But if you have a passion for medicine, there is a path for you to get there.

In this chapter, you will read a synopsis of the steps involved and choices you will make as you pursue a medical career. Along the way, you will complete your undergraduate degree, take the Medical College Admission Test® (MCAT®), decide where to apply, navigate the application process, develop a financial strategy, and prepare for admission interviews. Big challenges lie ahead.

But so, too, does the ultimate reward: a career in medicine.

AAMC Official Information

Look for these icons throughout the Official Guide to get inside tips and information from the AAMC that you won’t find anywhere else. This information comes from surveys of applicants, matriculants, medical students, graduates, and medical schools.

Tomorrow’s Doctors, Tomorrow’s Cures®

The dream of becoming a doctor is something that many of you knew from an early age. In fact, a recent AAMC survey shows that almost half of all entering medical students had decided upon a medical career before they set foot in undergraduate school—and one in five had made the decision before they even started high school.

Whether you have always known that you wanted to be a doctor, or are just starting to consider the idea, being a physician is an extremely rewarding profession. Nowhere else can you find a career that offers as many opportunities to make a real difference in the lives of countless people.

You will have job security knowing that your services will always be in demand. You will earn an excellent living. You will seldom experience the tedium of a nine-to-five desk job.

There is much more than that, though. As a doctor, you are likely to see new life come into the world or provide comfort to those about to leave it. Or you may choose to help build the future of medicine by educating the next generation of physicians. Perhaps you will dedicate yourself to discovering new cures for devastating diseases.

Whichever direction you follow, you will—either directly or indirectly—reduce or eliminate people’s pain and suffering, improve their quality of life, and provide invaluable service to your local community or the country as a whole.

How many careers can even come close?
Dozens of Options from Which to Choose

The fact that you have many options to choose from is another benefit of a career in medicine. From clinical practice to biomedical research, from public health to medical education—the choices are plentiful. If your interests change with time and experience, medicine—because of its emphasis on lifelong learning—will provide you with opportunities to refine your skills and reorient your practice. A number of possible career options are listed below:

- The satisfaction of long-term patient relationships is one attraction of family medicine or internal medicine, where the bulk of time is spent in direct contact with patients. Physicians who work under the umbrella of “primary care” often care for entire families and enjoy the challenges that come from treating a diverse population with varied backgrounds and conditions.
- Other physicians may prefer to pursue detailed knowledge about the intricacies of a single organ or system, such as that required of cardiologists, ophthalmologists, dermatologists, and endocrinologists.
- Interested in scientific exploration and the desire to break new ground in medical knowledge? Physicians with these interests are found in the nation’s private and public laboratories and research institutions.
- Those with a commitment to social justice and an interest in fulfilling the health care needs of the underserved and disadvantaged can meet those challenges in urban and rural clinics, public health, or as medical missionaries.
- Careers in general surgery often suit those with a desire to see immediate results of their interventions. Plastic and reconstructive surgery draws others with artistic skills and aesthetic interests.
- Those interested in mind-body interactions and the emotional lives of their patients might find a home in neurology or psychiatry.
- The fast pace of medicine draws some to work as emergency physicians or trauma surgeons.
- Others motivated by the interest of national defense may use their skills as flight surgeons or in military medicine.
- The economic and public policy aspects of health care guide some physicians to think tanks and health-related organizations as well as serve in the legislative and executive branches of government.
- For those fascinated by the issues facing groups of patients with age-defined illnesses and problems—from the risks in infancy and early childhood to the challenges of older life—fulfillment can come in careers such as pediatricians and geriatricians.
- Assisting patients in overcoming complex fertility and gestational problems is the hallmark of the specialists in reproductive endocrinology and obstetrics and gynecology.
- Those dedicated to reducing the incidence of birth defects and inherited diseases might find their calling in medical genetics.
- The detection, prevention, and eradication of injury and disease draw people to the fields of preventive medicine and epidemiology.

Clearly, there are many possibilities in medicine. No matter what your personal interests, skills, or needs may be, medicine encourages you to find your niche.
How to Decide Which Path Is “Best”

Which path is right for you? With the ever-changing world of medicine and a myriad of options and practice settings, figuring out where you belong as a physician can be one of the hardest decisions of your career.

Fortunately, you won’t have to make this decision alone.

Medical schools realize how daunting this decision can be. They have a program in place to help you assess your personal values and interests, identify specialty options, determine personal “fit,” and make a well-informed choice about your career path. The program, known as Careers in Medicine® (CiM), was developed by the AAMC in collaboration with its 141 member medical schools to guide you through the decision-making process.

The CiM program is completely free of charge for students attending AAMC-member medical schools. For more information, go to www.aamc.org/cim.

What About the Future?

As long as we are looking ahead, let’s look way ahead. In five, 10, 15 years, what will medicine look like?

Recent Advances and Future Trends

One thing is certain—the face of medicine changes continually.* Take a look back just a single generation, and you will discover an abundance of fields that didn’t exist.

- An obvious example dates back to the early 1980s. Back then, a new—and fatal—illness was taking hold that nobody could identify. We now know its name well—AIDS. Infectious disease is currently a large medical subspecialty and, as a result, significant advances have been made in extending the lives of those infected with HIV.
- Other advances are more recent. Minimally invasive surgery, in which surgeons carry out precise procedures with the assistance of a robot, is becoming increasingly popular. It is currently used for a variety of surgeries, including the lungs, esophagus, prostate, uterus, and kidneys. Through robotic-assisted surgery, patients are likely to benefit from smaller incisions, lower risk of complications, shorter hospital stays, less pain, and a speedier recovery.
- What about the advances in personalized medicine? A non-existent career path for the previous generation, the technology in this field allows physicians to identify mutated genes and alert patients of their predisposition to a specific disease. (The next step—actually treating disease with genes—is on the horizon.)
- Then there are more established fields that have evolved to take on new parameters. Take radiology, for example, which is no longer about just reading an X-ray. The radiologist can now perform the actual surgery as part of interventional radiology.

Even more exciting is what lies ahead: genetics therapy, portable medical records, distance surgery, and focused medication. The possibilities for advancement in medical research are limitless.

- Right now, physicians can diagnose predisposition to certain illnesses by identifying mutated genes. Currently in the research and development stage is the next step—gene therapy—in which physicians actually will replace defective genes by giving patients copies of the correct gene (which, in turn, “overtakes” the mutant gene).

* In the 1976–77 academic year, women comprised just 24.7 percent of all medical school matriculants. Compare that to 2014–2015, in which they made up almost half—or 47.8 percent—of the entering class. Source: AAMC Data Book.
Early tests have been especially favorable for cystic fibrosis, in which the correct CFTR gene is transported via a harmless virus or liposome.

- Similarly, research is underway in the field of pharmacogenetics—in which a patient’s treatment is tailored according to the specific genetic code in question. For example, if a patient’s genes fit a certain type of cancer code, the physician will prescribe the “matching” pharmaceutical that has been developed to destroy them—and will know, rather than hope, that the treatment is likely to work. Most forms of focused medication care involve oncology, but studies are progressing in areas of cardiology, diabetes, psychiatric disorders, and more.

- Also in development is focused preventive care, which, using genetic diagnosis, identifies to a very specific degree how likely a patient is to develop a certain disease or condition—and then prevents that development before it has a chance to begin.

- Other advances will be administrative in nature; the days of hunting down medical records may come to an end. One possibility being explored is a portable medical records system, or a national online database of individual health records. Everyone will carry a smart card (or have a microchip inserted under his or her skin!), allowing physicians to access medical records. The benefit? Errors are reduced, files can no longer be lost, delays are minimized, and the experience of having repeated—that is, unnecessary—tests is eliminated.

- And what about the robotics-assisted surgery we mentioned earlier? It provides the foundation for the next step forward—that of distance surgery. One day, surgeons will operate via a computerized system that will be located hundreds, even thousands of miles away from patients. This, of course, opens up a world of possibilities and opportunities in which specialists in one country can perform surgery on patients located in another.

### Workforce Issues

Above all, know this: Whatever specialty you choose, your services as a physician will be needed.

According to the AAMC Center for Workforce Studies, there will be a shortage of 45,000 primary care physicians—and a shortage of 46,000 surgeons and medical specialists—in the next decade. The passage of health care reform, while setting in motion long-overdue efforts to insure an additional 32 million Americans, will increase the need for doctors and exacerbate a physician shortage driven by the rapid expansion of the number of Americans over age 65. Our doctors are getting older, too. Nearly one-third of all physicians will retire in the next decade just as more Americans need care. Continued demand for physicians and other medical professionals is obvious.

Chart 1-A illustrates the growing physician shortages between now and 2020. Still, the shortage will be experienced unevenly, and some areas will feel the effect more strongly than others. With that in mind, you may wish to consider the trends as you think about the direction you’d like your career to take.

**Primary Care:** Although the nation is facing an overall shortage of physicians, many are particularly concerned about the growing deficit of primary care doctors. To encourage more U.S. medical school graduates to pursue a career in primary care, the government is exploring ways to more fairly value primary care efforts and lessen administrative burdens associated with general medicine. You may want to explore the rewards this specialty offers, including the satisfaction that comes from delivering comprehensive care and the continuity of patient relationships.
Underserved Areas: In addition, the impact of this shortage is expected to be greatest in underserved areas—the urban and rural areas where health care already is scarce. If you choose to serve in a community designated as a Health Professional Shortage Area, you may be able to take advantage of a federal program—the National Health Service Corps—which offers scholarships and loan repayment. (Learn more about this program in Chapter 11: “You Can Afford Medical School.”)

A More Collaborative Approach

As Congress explores various scenarios as it moves toward instituting health care reform, one thing is all but certain: Given the projected shortage of physicians, we will need to develop new models of health care delivery that make better, more efficient use of all health care professionals—not just doctors. That means you can expect to work within a more collaborative, “shared” environment, in which a team of health care providers—including physician’s assistants and nurse practitioners, for example—work more in tandem. Exactly how that will play out is still in the development stages, but the goal is to create a more efficient system, increase patient satisfaction, and, ultimately, improve health outcomes.

The Immediate Steps That Lie Ahead

That’s the long-range future, or at least what we anticipate it is likely to entail. Right now, though, you’re undoubtedly more focused on the short term—getting into medical school.

So what is the process like? What lies ahead?

Let’s be candid. Getting into medical school isn’t easy. (But it’s definitely doable, a fact to which the more than 76,000 students currently there can testify!) You will need to prepare for and take the MCAT® exam, select appropriate schools to apply to, complete the application process, write a personal statement, gather letters of evaluation, and interview. And then you will wait for notices of acceptance and make your final decision. However, if you are not accepted, you will need to evaluate options and determine a course of action. This will be covered in the following chapters.

But first, there are many steps you can take while still in college to make yourself a more attractive candidate to admissions committees. From taking the necessary courses, to working effectively with your pre-health advisor, to participating in extracurricular and volunteer activities that demonstrate your true interest in medicine, there’s much you can do.

In the next chapter, we focus on your undergraduate preparation.
Chapter 10:

Applicant and Acceptee Data

When applying to medical school, it’s difficult not to transform yourself into a number—well, two numbers: your MCAT score and GPA. While these figures will determine part of your success in applying to medical school, they are only two facets of a far more complex tapestry you eventually will weave.

I often found myself riddled with self-doubt during that difficult “glide year” between applying [to school] and matriculation. Was my MCAT score high enough? Should I have retaken it? Would admissions committees overlook that low grade in a science class or that summer I should have spent doing research? It would always take a conversation with a family member, close friend, or mentor to remind me that I was more than just a mathematical index on a percentile chart. I was an enthusiastic applicant and a lover of people, and I had plenty of clinical experiences and medical exposure to prove it.

Applying to medical school is a constant assault on your self-esteem as you strive to meet the high standards that many people—but particularly you—set for yourself. Be realistic, but don’t be ruthless. Know your weaknesses, but celebrate your strengths. The skills you develop before medical school will inform you for the rest of your life. Those numbers that got you there? They never matter again.

A Quick Look at the 2014 Entering Class

- In 2013–14, 49,480 people applied to the 2014 entering class at all M.D.-granting medical schools in the United States.
- By the fall of 2014, 21,355 applicants had been offered an acceptance to at least one medical school, and 20,343 accepted applicants had matriculated.

These accepted applicants possessed a broad range of MCAT scores and undergraduate GPAs, and a wide variety of personal characteristics and life experiences. Both male and female applicants were distributed across numerous racial and ethnic groups. A small number applied through the Early Decision Program, but the majority used the regular application process. A small number of accepted applicants chose not to matriculate in 2014.

This chapter contains graphic representations of relevant data for the entire applicant pool, as well as for accepted and non-accepted applicants for the 2014 entering class. All data presented in this chapter are accurate as of October 29, 2014*. In the following charts:

- “All applicants” refers to all applicants to the 2014 entering class
- “Accepted applicants” refers to those applicants accepted to at least one medical school
- “Non-accepted applicants” refers to those applicants not accepted to any medical school

In the following pages, we provide data related to performance on the MCAT® exam, undergraduate grade point average (GPA), MCAT scores and undergraduate GPA combined, undergraduate major, gender, age, type of application, and race and ethnicity.

*Source: AAMC DataWarehouse; Applicant Matriculant File
Performance on the MCAT exam

Charts 10-A – 10-D present information about the performance of applicants on the MCAT exam:

• **Chart 10-A** shows that applicants achieved Verbal Reasoning (VR) scores at each score from 1 to 15; the largest number achieved a VR score of 10. Accepted applicants’ scores ranged from 2 to 15, although very few had VR scores below 5 (just over 50). At a VR score of 11, the number of accepted applicants exceeded the number not accepted.

• **Chart 10-B** shows that applicants achieved Physical Sciences (PS) scores at each score from 1 to 15; the largest number achieved a PS score of 10. Accepted applicants’ scores ranged from 1 to 15; about 25 accepted applicants achieved a score of 5 or below. Accepted applicants exceeded non-accepted applicants at a PS score of 11.
Chapter 14:
Information About U.S. Medical Schools
Accredited by the Liaison Committee on Medical Education (LCME)

Medical School Admission Requirements Website—Complete U.S. Medical School Profiles

For complete, detailed information on each U.S. medical school, including MCAT® and GPA data, school-specific admission requirements and policies, applicant and acceptee statistics, and side-by-side medical school comparisons, purchase a subscription to the Medical School Admission Requirements. For more information about the Medical School Admission Requirements website, a preview of the site, and a complete list of site features, data, and information, visit www.aamc.org/msar.

U.S. Medical Schools

Alabama
University of Alabama School of Medicine
University of South Alabama College of Medicine

Arizona
University of Arizona College of Medicine - Phoenix
University of Arizona College of Medicine - Tucson

Arkansas
University of Arkansas College of Medicine

California
Keck School of Medicine of the University of Southern California
Loma Linda University School of Medicine
Stanford University School of Medicine
University of California, Davis, School of Medicine
University of California, Irvine, School of Medicine
University of California, Los Angeles, David Geffen School of Medicine at UCLA
University of California, Riverside, School of Medicine
University of California, San Diego, School of Medicine
University of California, San Francisco, School of Medicine

Colorado
University of Colorado School of Medicine

Connecticut
Frank H. Netter MD School of Medicine at Quinnipiac University
University of Connecticut School of Medicine
Yale School of Medicine

District of Columbia
The George Washington University School of Medicine and Health Sciences
Georgetown University School of Medicine
Howard University College of Medicine

Florida
Florida Atlantic University Charles E. Schmidt College of Medicine
Florida International University Herbert Wertheim College of Medicine
Florida State University College of Medicine
University of Central Florida College of Medicine
University of Florida College of Medicine
University of Miami Miller School of Medicine
University of South Florida Morsani College of Medicine
Georgia
Emory University School of Medicine
Medical College of Georgia at Georgia Regents University
Mercer University School of Medicine
Morehouse School of Medicine

Hawaii
University of Hawaii John A. Burns School of Medicine

Illinois
Loyola University Chicago Stritch School of Medicine
Northwestern University The Feinberg School of Medicine
Rosalind Franklin University of Medicine and Science Chicago Medical School
Rush Medical College of Rush University
Southern Illinois University School of Medicine
University of Chicago Division of the Biological Sciences, The Pritzker School of Medicine
University of Illinois at Chicago College of Medicine

Indiana
Indiana University School of Medicine

Iowa
University of Iowa Roy J. and Lucille A. Carver College of Medicine

Kansas
University of Kansas School of Medicine

Kentucky
University of Kentucky College of Medicine
University of Louisville School of Medicine

Louisiana
Louisiana State University School of Medicine in New Orleans
Louisiana State University Health Sciences Center School of Medicine in Shreveport
Tulane University School of Medicine

Maryland
Johns Hopkins University School of Medicine
Uniformed Services University of the Health Sciences F. Edward Hébert School of Medicine
University of Maryland School of Medicine

Massachusetts
Boston University School of Medicine
Harvard Medical School
Tufts University School of Medicine
University of Massachusetts Medical School

Michigan
Central Michigan University College of Medicine
Michigan State University College of Human Medicine
Oakland University William Beaumont School of Medicine
University of Michigan Medical School
Wayne State University School of Medicine
Western Michigan University School of Medicine

Minnesota
Mayo Medical School
University of Minnesota Medical School

Mississippi
University of Mississippi School of Medicine

Missouri
Saint Louis University School of Medicine
University of Missouri Columbia School of Medicine
University of Missouri — Kansas City School of Medicine
Washington University School of Medicine

Nebraska
Creighton University School of Medicine
University of Nebraska College of Medicine

Nevada
University of Nevada School of Medicine

New Hampshire
Geisel School of Medicine at Dartmouth
New Jersey
Cooper Medical School of Rowan University
Rutgers New Jersey Medical School
Rutgers, Robert Wood Johnson Medical School

New Mexico
University of New Mexico School of Medicine

New York
Albany Medical College
Albert Einstein College of Medicine of Yeshiva University
Columbia University College of Physicians and Surgeons
Hofstra North Shore — LIJ School of Medicine at Hofstra University
Icahn School of Medicine at Mount Sinai
New York Medical College
New York University School of Medicine
State University of New York Downstate Medical Center College of Medicine
State University of New York Upstate Medical Center College of Medicine
Stony Brook University School of Medicine
University at Buffalo School of Medicine and Biomedical Sciences
University of Rochester School of Medicine and Dentistry
Weill Cornell Medical College

North Carolina
The Brody School of Medicine at East Carolina University
Duke University School of Medicine
University of North Carolina at Chapel Hill School of Medicine
Wake Forest University School of Medicine of Wake Forest Baptist Medical Center

North Dakota
University of North Dakota School of Medicine and Health Sciences

Ohio
Case Western Reserve University School of Medicine
Northeastern Ohio Medical University
The Ohio State University College of Medicine
University of Cincinnati College of Medicine
The University of Toledo College of Medicine
Wright State University Boonshoft School of Medicine

Oklahoma
University of Oklahoma College of Medicine

Oregon
Oregon Health & Science University School of Medicine

Pennsylvania
The Commonwealth Medical College
Drexel University College of Medicine
Jefferson Medical College of Thomas Jefferson University
Pennsylvania State University College of Medicine
Raymond and Ruth Perelman School of Medicine at the University of Pennsylvania
Temple University School of Medicine
University of Pittsburgh School of Medicine

Puerto Rico
Ponce School of Medicine
San Juan Bautista School of Medicine
Universidad Central del Caribe School of Medicine
University of Puerto Rico School of Medicine

Rhode Island
The Warren Alpert Medical School of Brown University

South Carolina
Medical University of South Carolina College of Medicine
University of South Carolina School of Medicine
University of South Carolina School of Medicine—Greenville
South Dakota
University of South Dakota Sanford School of Medicine

Tennessee
East Tennessee State University
James H. Quillen College of Medicine
Meharry Medical College
School of Medicine
University of Tennessee Health Science Center College of Medicine
Vanderbilt University School of Medicine

Texas
Baylor College of Medicine
Texas Tech University Health Sciences Center at El Paso — Paul L. Foster School of Medicine
Texas A&M University System Health Science Center College of Medicine
Texas Tech University Health Sciences Center School of Medicine
University of Texas Medical Branch at Galveston
University of Texas Medical School at Houston
University of Texas Southwestern Medical Center at Dallas Southwestern Medical School

Utah
University of Utah School of Medicine

Vermont
University of Vermont College of Medicine

Virginia
Eastern Virginia Medical School
University of Virginia School of Medicine
Virginia Commonwealth University School of Medicine
Virginia Tech Carilion School of Medicine

Washington
University of Washington School of Medicine

West Virginia
Marshall University Joan C. Edwards School of Medicine
West Virginia University School of Medicine

Wisconsin
Medical College of Wisconsin
University of Wisconsin School of Medicine and Public Health
AAMC’s Aspiring Docs program has tips, videos, blogs, and more to help you on your journey to medical school.

Aspiring Docs Diaries – Blog
Want to know what it’s like to be a medical student? The Aspiring Docs Diaries posts are written by current medical students, residents and physicians who share their personal experiences, thoughts, and feelings.

Ask a Med Student – Video Series
Watch this popular video series in which medical students answer questions from applicants about their path to med school. New videos are continually being added.

“How Do I...” and “What’s It Like...” Fact Sheets
These fact sheets answer many common questions about choosing a career a medicine, preparing for medical school, applying for medical school, interviewing, patient interactions, financing your education and more.

aamc.org/aspiringdocs