

Virtual Mentoring in Emergency Medicine (EM): Can EM Residents Influence Medical Students?

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“Example is not the main thing in influencing others, it is the only thing.” – Albert Schweitzer

Emergency medicine is a rapidly growing field and serves different roles in various locations across the globe. It is just starting to emerge in some countries and the fundamental safety net in providing health care in others. As the specialty continues to grow and evolve across the world, how do we supply enough mentors and how do we educate medical students about their options for training in EM?

Medical students have many questions about selecting a specialty that is a good fit, learning more about the field of EM and pursuing residency training. In addition to their attendings and advisors, students often seek out residents who they can relate to and have recent experience with the application process. Residents are in a unique position to answer questions about daily life, benefits and challenges of an EM training program, and factors to consider when choosing a specialty. Other specialties have demonstrated how effective residents can influence a medical student's decision to choose a given field and serve as a mentor [1,2]. Within surgery programs in particular, residents are identified as exhibiting qualities that are essential to being an excellent mentor and may play a role in influencing students' career choice [2]. Can EM residents have the same influence on medical students using a virtual mentorship program?

The Society for Academic Emergency Medicine (SAEM) created the Virtual Advisor program in 2001, which has been utilized by many medical students in the United States (US) without access to a mentor [3]. The Virtual Advisor Program enables US medical students to have access to experienced EM faculty career mentors, but did not anticipate the popularity of the program amongst international medical students [3]. Nine percent of faculty mentors had negative reports of this program, most of which were based on feeling ill equipped to answer questions of international students [3]. A resident virtual mentorship may complement this program by providing support and answering questions from a resident's perspective: lifestyle issues, balancing residency and family, student leadership opportunities, reasons for choosing EM as a specialty, advice on planning student electives, the application process for residency, and preparation for internship. A resident mentorship can also potentially assist specific types of students including foreign medical graduates, osteopathic students, and military students who face unique challenges and applications outside of the regular US match.

The Emergency Medicine Residents Association (EMRA) began a resident-student mentorship in August 2006. All United States (US)

and international students interested in emergency medicine were allowed to enroll on a first come first serve basis. Students were asked to contact their mentors by phone or email. A qualitative survey was distributed by EMRA six months after the initiation of the mentorship program.

Two hundred and twenty students signed up by November 1, but the program was limited to 139 students (60 US medical schools and 4 international schools) due to availability of 108 resident mentors. Seventy three students (53%) answered the follow-up questionnaire. Approximately 20.5% of the responders were enrolled at osteopathic medical schools and 79.5% were enrolled in allopathic medical schools. Seven students (9.6%) were military students, 9 (12.3%) were international students, 9 (12.3%) had an additional graduate degree, and 29 (39.7%) had taken at least two years off between college and medical school. 54.8% of responders had a EM residency program affiliated with their medical school.

Most students found the program helpful (72.3%, 95%CI 61.4-83.2%) including students who already had an EM residency affiliated with their school. Over 60% of students not graduating that year would consider participating again. There was no statistical difference in overall satisfaction between osteopathic and allopathic students, military students, foreign medical students, or level of training in medical school. Students who felt they were matched well to their mentor and those who met their mentor in person were significantly more likely to have found the program helpful and valuable. This was particularly true for students who had questions regarding the military match, the osteopathic match, and applying from a foreign medical school. They had specific mentoring needs and questions that were not met or answered unless their mentor had a similar background. Students felt they could use their mentor's experience to help navigate the application process, select an appropriate career choice, and find a compatible training program.

Students may identify more with residents because of smaller age gap and increased likelihood to be at similar levels with regard to family and personal issues [2]. Another study found that the most desirable attributes of a mentor were clinical skills, compassion, and excellent teaching, while the role model's academic title and research accomplishments were less important [4]. Residents may then serve as a useful adjunct to students with faculty advisors and mentors. Recruitment of residents who are in the military or graduated from an

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osteopathic or foreign medical school may be better positioned to assist a certain subset of students with specific mentoring needs.

However, some may feel that residents are poor choices for mentors as they lack some clinical and life experience. Residents are often less aware of how the application process works from the training program's perspective, maybe less familiar with other programs, and maybe more biased towards their own home institution. Virtual advisor and mentor programs may not offer the benefit of frequent personal meetings or lifelong relationships between mentor and mentee.

Yet as the specialty continues to grow and the need for emergency medicine training worldwide expands, we will need more mentors to pioneer new programs and recruit future generations of EM physicians. As technology continues to evolve, personal communication can be coordinated through email, Skype, webinars, wireless devices, and

social networking. Virtual advisor and mentorship programs offer students access to emergency medicine and to those who can influence by their example.

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