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## MEDICAL SCHOOL INTERVIEWS - we will go through a few common topics

- A lot of questions are about being flexible and compromising.
- Always take into account what a good doctor would do.
- Think broadly. Always think of the impact on the Doctor, the Patient, and Society - you can answer this ethically from all points of view - doctor's, patient's, society's and it is important to demonstrate this wide viewpoint.
- Try not to make your answers sound too rehearsed or too structured, but always remember that the majority of interviewees have not been coached, so you have one up on them!
- Try to incorporate your own personal experience to illustrate points, eg responsible (prefect roles, organizational roles), caring (work experience), hard working (staying back for extra work, voluntary work), or even negative points like working too long, being obsessional - appreciating that if you train these traits, they can actually be good in medicine.
- For structure, you can answer the question incorporating - Your viewpoint, other viewpoints (patient, society, family) , and why can see why this is important to medicine. **Try incorporating the personal qualities highlighted in the box below in any of your answers.**

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## COMMUNICATION SKILLS FOR DOCTORS

This is by far one of the most important skills in medicine and will help you in every aspect of life in the future

Important aspects are

### 1. Verbal Communication Skills

- a. Asking open ended questions
- b. Using silence appropriately
- c. Repeating the patient's last words to encourage them to say more
- d. Acknowledging the patient's feelings - remarking on them - eg 'you seem more upset today, or ' you are coming across as very aggressive to me - why is this so?'
- e. Can use sounds, grunts, mmm, hmm, yes, i see..

### 2. Non-verbal Communication skills

- a. A good way to open, is to look someone in the eye and smile (learn to smile with your eyes), and make a picture in your mind of a happy, healthy person in front of you - This is a consultation technique to achieve instant rapport
- b. Eye contact - not too long
- c. Open posture (sitting without legs crossed, facing the person instead of away)
- d. Smiling as appropriate
- e. Nodding
- f. Touch (not at your interview!)

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## WHAT DO YOU THINK MAKES A GOOD DOCTOR

These are just points that I learnt for exams. Remembering a few is enough, as there are many. Remember, it's better to get a few good points in and expand on them such as to highlight these points and how show these characteristics. You should pick a few points from this list that you can demonstrate from your own experience.

### 1. Professional qualities

- a. As by the GMC Good Medical Practice (you do not need to mention this) - it basically says...

#### **b. A good doctor**

- makes the care of his patients his first concern and makes decisions in their best interests
- is Honest, Trustworthy, Ethical
- Maintains confidentiality and establishes a relationship of trust (with his patient)
- Recognises the limits of his competence and does not put patients at risk (is a SAFE doctor)
- Continues to improve and maintain his knowledge, skills, attitudes, and professional values (KEEPS UP TO DATE and ACTIVELY continues to LEARN FROM WORK - Is competent)

- i. THE NEXT FEW ARE NOT SO IMPORTANT TO REMEMBER AT THIS STAGE
- ii. Obtains appropriate consent
- iii. does not abuse his position
- iv. maintains financial and personal integrity
- v. does not engage in unethical research

### 2. Personal qualities (they are looking for these in you!) - MEMORISE!!

- a. Good communication skills
- b. Able to work in a Team, and has leadership abilities
- c. **Sensitive, empathetic** (empathy is different from sympathy as in sympathy one puts oneself in place of others and actually feels the same as them, but in empathy one understands the feeling but is still able to be objective in ones decision making), **understanding, patient-centred, and approachable**
- d. **Motivated, enthusiastic, committed to work, HONEST**
- e. Able to recognise limitations, and ask for help and understand ones own feelings and respond to these in a positive way (is self-aware)
- f. Able to balance **personal and professional life, prioritise, deal with stress**, and set boundaries
- g. Have a **sense of humour, be conscientious, tolerant and flexible**

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**PERSONAL SKILLS** generally looked for in Medicine - shortlisting criteria for medical jobs - what consultants and anyone in the medical profession will know about.

1. **Empathy and Sensitivity** - Capacity to take in others' perspectives, sees patients as people, able to develop rapport
2. **Communication Skills** - Capacity to adapt language as appropriate to the situation, open and non-defensive
3. **Managing Others and Team involvement** - Capacity to work cooperatively with others and show leadership/authority where appropriate
4. **Problem Solving and Decision Making** - Capacity to use logical/lateral thinking to solve problems and make decisions
5. **Coping with Pressure** - Capacity to operate under pressure. Demonstrates initiative and resilience to cope with setbacks and adapt to rapidly changing circumstances
6. **Organisation and Planning** - Capacity to manage time and information effectively. Capacity to **prioritise** clinical tasks

Also...

7. **Professional integrity** - Capacity to **take responsibility for own actions** and demonstrate a non-judgemental approach towards others
8. **Learning and personal development** - **Realistic insight** into specialty. Demonstrates self awareness and commitment to personal and professional development
9. **Clinical Knowledge and Expertise** - Appropriate knowledge base and capacity to apply sound clinical judgement

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## Medical students: professional behaviour and fitness to practise

**[http://www.gmc-uk.org/education/undergraduate/undergraduate\\_policy/professional\\_behaviour.asp](http://www.gmc-uk.org/education/undergraduate/undergraduate_policy/professional_behaviour.asp)**

If I take away a lot of repetition from the above LONG list and what we can perhaps expect before you get into medical school, we are left with

1. Do not exceed your limitations and **ask for help** when necessary
2. **Respect the decisions and rights of patients** - discuss and consult with them and balance the best treatment based on their wishes and priorities, not yours. **Understand that a patient's illness affects their family, work, and all of them have different priorities in life.**
3. **Report any concerns you have about patient safety to the appropriate person** - don't stand back and let bad things happen
4. Be able to **reflect on feedback** about their performance and achievements and respond constructively - think carefully about what others say, and **change your practice accordingly to better yourself** if appropriate
5. **Be willing to contribute to the education** of other students - be ready to help others if they need it
6. Respect patients and treat them with dignity, be **open and honest** when dealing with patients, their carers, relatives, partners or anyone else close to
7. Be aware of **ethical issues** in your professional behaviour with patients - consent, confidentiality, and usual ethical principles of autonomy, beneficence, non-maleficence and justice.
8. **Dress** in an appropriate and professional way and be aware that patients will respond to their appearance, presentation and hygiene - Be tidy, and wear a suit to the interview!
9. Be able to demonstrate skills that allow you to deal **with uncertainty and change** in the workplace - Be able to cope with stress!
10. Be able to **work effectively in a team** and to take on different roles as appropriate, including taking responsibility for tasks, and so **develop and demonstrate teamwork and leadership skills**
11. Be aware of the roles and responsibilities of **other people involved in delivering healthcare** - nurses, health visitors, midwives, even receptionists, etc - **part of the healthcare team**
12. Be honest and trustworthy, **act with integrity** - don't cheat in exams, do the right thing.

Remember that any question they ask you will want you to answer the above

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There are so many example questions available online - we can direct you to those if you have trouble finding them.

## Tell me about yourself?

This is not a common question as they should have read your personal statement. Basically, it's a matter of going through it again. You should have a number of points already in the personal statement to let them know all about yourself, and your motivation, and why you want to do medicine

## Why do you want to do medicine?

1. You should be able to rehearse this by heart
2. The next step is - why be a doctor and not another healthcare professional , worse still if they mention 'why not a nurse?'

The main thing to remember is that the interviewers know that being a doctor is far better than being a nurse, and they just want to see you sweat.

Take a deep breath, and answer why you want to do medicine again

Being a doctor is unique in my opinion by:

1. Allowing you a varied choice of career options at the end of training ranging from working in Pharmacological research, to Ship's Doctor, to Neurosurgeon.
2. Being more academically challenging. Having a more comprehensive and general medical education of the basic clinical sciences on which we base our decisions upon - nurses and paramedics tend to have a more superficial knowledge, and if they specialise, detailed knowledge of one specific aspect of medicine
3. Having overall clinical responsibility
4. Being a member of a profession respected for their caring, knowledge, and hard work
5. One they can't get back at you for is - just saying that someone you really admire who is a doctor, and you think being a doctor helped him gain those traits that you admire. Some personal story would be good here...

But there are bad points too.... Read on

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## HOW DO YOU DEAL WITH STRESS?

A favourite question of mine for medical school interviews as it finds out whether you are aware of the stresses a doctor faces and your personality and extracurricular activities.

**Difficulties in medicine** - Lawsuits, wrong diagnoses, death, complaints, targets, political interference, keeping up to date, revalidation, exams, these days - job security, lack of training posts, **UNCERTAINTY** - key word

This is an example of how doctors are expected to answer this question - you only need to remember the initial part on how to overcome stress. This is as follows:

1. Maintain a good 'Work (or study) / Home Balance'
2. Have a varied work environment (do lots of different things - teaching, research, clinical and lab work - whatever you enjoy)
3. Good work relationships, talking things over with colleagues
4. Appropriate Delegation (Other people can do some of your work, eg group members, nurses, receptionist)
5. Prioritisation (More important things first, postpone less important jobs)
6. Support networks - family, friends, colleagues, mentors, study group and in some universities - academic tutor as well
7. Also, Regular Holidays
8. Sport and Hobbies
9. Understand there are organizations that help - Sick Doctors Society, BMA counseling, educational supervisors, own GP, Occupational Health
10. A belief that things will get better eventually
11. A belief in the meaning of things, for doctors, that we are serving a greater good (but really also religion which has some proof behind it)
12. Feeling in control of a situation - so, a good clinical background to minimize uncertainty, and good relationships, and to know you have back up

The next bit are bonus points to collect:

Mention it is important to recognise that one is stressed so this can be addressed so as to avoid the following - as it may well lead to what we call 'burnout' - which leads to absences and depression - which means a long time off work.

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A person who is stressed can start to:

1. Show disproportionate anger, irritation, or apathy to small comments and questions
2. Appear tired, cynical and have low self esteem
3. Have decreased productivity
4. Arrive late for ward rounds/ meetings / clinics,
5. Make more mistakes
6. Get more complaints
7. Have repeated absences
8. Misuse alcohol or drugs (you may be drinking more, or someone else could be smelling of alcohol).

After this, even more points for someone who can say that he / she is able to

REFLECT on what made you stressed and prevent it from happening in the future, by avoiding the problem or developing an effective coping strategy. They may ask you to illustrate this from a personal experience - so, think of a scenario.

**Refer to the PATIENT UK website - Burnout in the Medical Profession**

<http://www.patient.co.uk/showdoc/40002118/>



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## BEING A LEADER / LEADERSHIP SKILLS or ABILITY

This is usually asked in a way to link your personal experience to showing that you have leadership abilities. Usually, a team sport is good to illustrate this.

As always, you have to understand and will help if you mention how doctors are expected to be leaders for example, especially GPs - who run practices, consultants who lead departments, or research.

Leaders have the ability to influence. As a leader, you can

1. Direct and Co-ordinate the work of others
2. Build, support and work with teams
3. Work effectively as part of a team
4. Negotiate and consult effectively

A leader is:

1. Charismatic - inspirational and empowers others
2. Enthusiastic
3. Democratic
4. Organised
5. Innovative

In a team, a leader is able to:

1. Listen and Respect the Views of all the members of the team
2. Provide a Clear and Detailed Vision of the desired goal
3. Communicate and negotiate effectively to encourage team members to work towards this goal
4. Motivate quieter members, and moderate the louder ones
5. Make decisions and be flexible to adapt to changes that occur in order to achieve the desired goal.
6. Take overall responsibility and be accountable for the team's performance
7. Understand how team members work and their strengths and weaknesses

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## WORKING IN A TEAM

This is usually asked in a way so that you can demonstrate how your previous experience helps you work in a team.

You should be able to understand that working in a team is important as a doctor, for example in Cardiac Arrest Situations, working on the ward with nurses, working as a GP with nurses, health visitors, social workers, midwives, and administration staff.

The following characteristics can be outlined, using your personal experience to highlight each point.

As good team member, you should be able to:

1. Understand your role in the team (and how it contributes to the goal)
2. Communicate well - be able to listen, contribute, and take criticism effectively - ie give and take effective feedback
3. Be supportive, have initiative, and willing to help other members.
4. Be responsible and reliable for your role in the team
5. Treat other members with respect and in a professional manner.
6. Be flexible and able to cope with changes to any goals
7. Be committed and competent
8. Understand that some members may be weaker in certain aspects and stronger in others and to take advantage of these strengths and compensate for these weaknesses.

## Making a difficult decision

A good method of doing this is to look at where you want to be, why you want to get there, how you are going to get there, the challenges ahead stopping you from getting there. Also, you can use the BRAND approach (Benefits, Risks, Alternatives, do Nothing, and Decision).

## Setting Goals

We are taught to make goals that are **SMART** (Specific - exact, Measurable - so that we know when we have achieved it, Achievable, Realistic - so that it can be achieved, Timely - within a measurable timeframe). This is in a lot of management books as well.

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## Appreciation of the effects of illness on patients

This is quite a good question to see if you have any idea how illness affects people. This will likely follow a question about illness or a scenario with an ill patient.

To do this well, you have to appreciate that everyone experiences illness differently, and that everyone will have different priorities in life. You must appreciate that illness will affect

- The patient
- The family - putting strain or even strengthening relationships
- Their work/school, and so perhaps income - causing more strain

## ETHICS - the four principles

1. **Autonomy** - A patient's decision, also your decision
2. **Beneficence** - Doing good
3. **Non-maleficence** - Doing no harm
4. **Justice** - for society as a whole. Not just the patient. For example, offering the most expensive treatment for a person instead of a cheaper as effective one for many people

In medicine, you must also remember two core concepts which encompass all these principles = **patient confidentiality** (self explanatory) and **Informed Consent** (permission with as much information as possible)

If in doubt, remember we always act in the best interest of the patient. You can justify any action using these ethical principles.

Don't worry if you don't quite understand - just remember ,  
**DO GOOD, NOT HARM**  
And you'll be fine.

Eg. Do you think Euthanasia should be allowed in the UK?

Facts - currently, Euthanasia is **ILLEGAL**. Being a doctor - you are not allowed to participate in anything illegal, so don't overstep and say YES, without a doubt.

You could answer it this way...

I think that a lot of people feel that patient autonomy is the most important thing as perhaps they feel to the patient, good is being done, and that makes the current society happy as they feel patient choice is being met with euthanasia.

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From a doctor's point of view, the doctor should have their own autonomy to choose whether they wish to harm a patient by ending their life, and be allowed to balance the good he/she is doing. Also, what if the patient was not capable of giving consent, and what if the family was coercing the patient or making the patient's choice for them for some other gain? What if the patient is in pain, and the pain could easily be controlled by effective painkillers, or is depressed and suicidal? Can they actually weigh the benefits, harms, or alternatives effectively (and so have 'capacity' to consent)? If a doctor is allowed to end one person's life, where will the line be drawn?

Themes: autonomy, beneficence, non-maleficence, consent, coercion... doctor's and patient's view, involvement of family.

## **EUTHANASIA - some more objective notes**

Addresses the doctor's professional values while at same time being sensitive to patients' and society's changing values.

They'll probably ask you what you think of it. Remember to tell them what YOU think of it first before expanding. They probably want you to be able to

### Important points

1. Doctors in the UK are legally bound NOT to assist with suicide
2. There is often a reason why the patient or his family are asking for this
  - It is important to elicit what this is
  - They (patient and/or family) may be clinically depressed - may need psychiatric attention
  - They may be in pain - which can be better controlled, maybe a referral to palliative care services
  - They may be afraid - more counselling and support - eg Macmillan nurses, social services for financial help

So I hope this sort of gives you some insight about how to answer your questions.

Good luck !!

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Optional Additional reading...

## **HOW WE ARE TAUGHT HOW TO ANSWER QUESTIONS - some techniques you may find useful**

Different methods but not necessarily easily used. However, you may find them useful...

More than one can be applied to any type of question

You are not expected to know this, but it is interesting to start to expose you to how doctors think.

1. 5 Ws and 1 H
  - a. Why, who, what, when, where and how
2. Ethically
  - a. Using the principles of Autonomy (both the doctor's and patient's), Beneficence (Doing good/ benefits) , Non-Maleficence (Doing no harm), Justice (being fair to society)
  - b. Medical ethics also includes Consent and Confidentiality - which are a combination of the above basic principles
3. Driscolls 'what?' model
  - a. What? - a description of what happened
  - b. So what? - an analysis of events and what resulted?
  - c. Now what? - Proposed actions after the event - what can you do now and what could you do differently?
  - d.
4. SMART criteria (for designing goal orientated tasks, also audits)
  - a. Specific, Measurable, Achievable, Realistic, Timely (USED WHEN PLANNING GOALS, or MAKING PLANS for the future)
5. SWOT analysis
  - a. Strengths and Weaknesses, and the Opportunities available, Threats faced
  - b. Used for future planning

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