MPR News | Minnesota Now Minnesota program aims to strengthen the pipeline from military medic to medical doctor 01M75Z711WKA3DRZH4VRC9D0MH

NINA MOINI: Today is Veterans Day, and we're looking at a pathway some service members take to a second career in medicine. Growing up in New Prague, Lauren Kitner was interested in science. After high school, she joined the Minnesota National Guard as a medic, and she's now in her first year of medical school.

LAUREN KITNER: I kind of wanted more of a nontraditional health experience, and it seemed really interesting to be able to learn how to take care of patients in more resource limited environments. Obviously, as medics, we get to work closely with the providers in our units who are medical doctorates, as well as physician assistants, and alongside of them was able to really solidify my decision that I wanted to pursue medicine as an MD.

NINA MOINI: So Lauren, you heard from there, is a part of this program at the University of Minnesota designed for military medics. And the U says it's the first of its kind in the nation. Chris vanBrenk is the program's director of education and training, and he joins us now to tell us more about it. Thanks for being with us, Chris.

CHRIS VANBRENK: Thank you.

NINA MOINI: So we heard there from Lauren, who was kind of describing that transition and what she was looking for in her career. What were you seeing? What other types of needs were you seeing that made you think that a program like this was needed?

CHRIS VANBRENK: Well, I think the unique experience that the military offers its members is really valuable in medicine. as a veteran myself, I think the intangible skills of leadership, critical thinking, problem solving, and especially on the medical side, when you apply that to a real-world environment. Like being back in my day of Iraq and Afghanistan, you saw these skills play out in real time. And there are people who've really expanded on them throughout the course of their careers.

And so bringing that to the civilian community, where really the only thing lacking is just the science of medicine, I think can provide for a much more resilient provider, someone who will stay in the profession longer because they've been tested. They've been tested over the course of their careers. And so while there's certainly value in the academic preparation for medical school, and that's very well established, I think tapping into different communities of individuals that have these skills can bring a whole new level of resilience to the practice. So that's why we set out to build this program.

NINA MOINI: Yeah. Is it common for medics to want to become doctors or healthcare providers?

CHRIS VANBRENK: I think for some it is. It certainly gives them a taste of what's possible. I was actually not a medic in the military. I was an officer in the military. I found my way into medicine after the fact.

But in talking to a lot of people, I know especially in the special forces community, there's so much that goes into their training. It's almost like why would they not? For a special forces medic to go through several years of training and experience, they're basically walking out as almost a physician assistant by the time they're done. They just need to make that transition.

So I think depending on what level of experience they have and what kind of experience they have, whether they deploy overseas or they're serving their communities locally, I think that plays a lot into it as well. And so, yeah, I'd say it's kind of a mixed bag. I think some people have very positive experiences with the medical career field, and others just don't.

NINA MOINI: What is the path like, then? As you mentioned, there's already so much real-life experience. There is that resilience. But many of us know medical school takes forever, and it costs a ton. So how is this, I guess-- how does it change, or how is it altered for this type of experience?

CHRIS VANBRENK: When we started building this program, the first thing that we looked at was the barriers to entry. The military isn't always set up in a way that really gives service members an accurate look at how they rank next to their civilian counterparts. And so I think what we wanted to do is we wanted to lower some of the more traditional barriers to entry by providing a structured transition experience.

So there's a lot of resources, for example, that gets put into taking a civilian and turning them into a soldier. But looking at the back end of that, there's not nearly as many resources taking that soldier and turning them back into a civilian. And so we do a lot of individual counseling and coaching to make sure that medical school is the right decision. Is your life in a place to be able to take on the debt of medical school?

Knowing that you already walk in with a life experience, that part I'm not worried about. What we do focus on is we do focus on making sure they're academically ready, because that is the one piece that is kind of unknown. When we thought we were building one pathway program for five individuals, we actually are building five different pathway programs for five individuals because everyone comes at this with a little bit of a different need.

NINA MOINI: Sure.

LAUREN KITNER: The thing that makes this program unique is there are similar programs in the sense that they might guarantee you an interview. The University of Minnesota went one step further to say, we are going to assure you a slot in medical school. If you meet our prerequisites and you get into this program, you don't have to worry about, did I get in or did I not? Because I think that initial barrier to entry, this almost psyching yourself out, if you will, really limits people.

And if you already don't have or you have a flawed view of how good you are relative to some other applicants because you look different-- you didn't come from a traditional academic background. You might have started and stopped college several times because you've deployed or trained. You're not going to look the same. And I think for some admissions committees, they're inundated with applications. You get so many applicants to medical school every year.

And the things that don't make sense-- because military members, when we talk, we talk in acronyms and jargon, and we think it makes sense to everybody. But it really doesn't. That application can get glanced over very easily. And there's so many details that get lost in the veteran experience because I joke sometimes that asking if someone's a veteran or not is like asking if someone went to school. We want so many academic details of your schooling experience. But just to say the word veteran, there's so many details that goes into the military experience that you can capitalize on if you had people who understood and could speak that language.

NINA MOINI: I love what you're saying about just individualizing any kind of care for anybody or any kind of resources. I think that's what so many people are craving because no two people have the exact same life experience. What about cost? Are people able to get support in this way once they are given this pathway?

CHRIS VANBRENK: Yeah, absolutely. So we, through the pathway program, we do have some limited scholarship money that's available through philanthropy. And we do try to offset that because, again, it is a significant investment to go to medical school. And because most often, they're a little more ahead in life-- they're not that traditional applicant-- they come with families and mortgages and things that we all have to account for as adults.

And so we do try to offer some financial assistance, whether that's moving assistance. It's really whatever we can provide. And we're three cohorts into this experience. If the military teaches you anything, it teaches you how to make stuff work, and they've done it. And we're just kind of there to help in whatever way we can along the way.

NINA MOINI: So you mentioned the three cohorts. Just lastly, where are your students currently? Has anybody you graduated yet or gone on to actually practice medicine? Or what are you excited about for the future of the program?

CHRIS VANBRENK: So our very first cohort, they are in their second year of medical school right now. And we've got one cohort that's behind them. And then we have one cohort that's in the pipeline currently. And I am most excited to see them graduate.

And what I tell every group that comes in, solving the problem of getting you into medical school, that was really our job. We had to figure out on the administrative side how to create the buy in, how to get the support for the program, and how to sustain the program. That was our problem to solve.

But your problem to solve is really once you finish medical school and you are successful and you ultimately stay. That's bet that we're all kind of making is that we never have a shortage of medical school students, but we always seemingly have a shortage of doctors. And so somewhere along the way, there's a fallout. And we want to prove that this group of candidates, they're going to stick with it.

If you're making the decision to come into medicine at this stage in life, you're only going to make so many more career changes. And we're betting that with this kind of significant investment, that they're going to stay. And I think a lot of them, they really have-- that sense of service doesn't go away when you take the uniform off. And I think the people who are drawn to this program have a strong desire to continue to serve in a meaningful capacity, and I think that's what we'll see.

NINA MOINI: Amazing stuff. Chris, thank you so much for coming by the program and telling us all about it. We appreciate your time.

CHRIS VANBRENK: Yeah, absolutely. Thank you so much for having me.

NINA MOINI: Chris vanBrenk is the education and training director of the Military Medic to Medical School Program at the University of Minnesota.