

## **Examples of strong sample student education statements within the personal statement of academic accomplishment and educational philosophy**

### **1.**

I am fully committed to the education and training of medical students, residents as well as my colleagues. As a member of the clinical competency committee for the (X) Orthopaedic Surgery Residency Program I am highly engaged in the daily education and training of not only residents but also rotating medical students. USUHS medical students comprise the majority of medical students that rotate through the (X) Orthopaedic Surgery Service. I routinely teach musculoskeletal courses to rotating USUHS students and interview each medical student who spends time on our service. I consider it of paramount importance to maintain an atmosphere of rigorous intellectual discourse during teaching conferences and also informally during clinic and while in the operating room. I pursue this philosophy by demanding all residents and medical students read and prepare for clinical evaluations and surgical procedures. It is my method to directly provide the residents and medical students specific journal articles and techniques in advance and encourage them to challenge me with their thoughts and questions.

I understand the tremendous responsibility associated with teaching our future physicians and appreciate the special honor I have in fulfilling the role of imparting knowledge and setting the conditions for effective learning.

### **2.**

I have used this expanding knowledge base in the subject area of robotics education, and performance assessment to standardize and implement formal educational and supervision guidelines at (X) for our rotating USUHS students and surgical residents. This curriculum is available for every student and resident in general surgery, urology, and ENT. USUHS students are provided with an online didactic either through the FRS project, or the [www.daVincisurgerycommunity.com](http://www.daVincisurgerycommunity.com) website, and this is followed by an onsite hands-on educational course to learn docking, basics for the console, and instrument exchanges. These students are then encouraged to do dry lab, to first assist, and to do virtual reality robotic simulation using the dvTrainer. There is homegrown educational curricula on the dvTrainer that contains benchmarks that I developed based on experienced surgeons performances. The students are encouraged to watch videos of robotic assisted cases as well, and to schedule dry-labs on the actual daVinci. Subsequently, if selected for a surgical residency, these USUHS students are in a position where they can leverage rapid skills acquisition on the robot, and be poised for great success. As an example, (X) from USUHS rotated on my service Fall 2011. He completed the online didactic, the onsite training course, he met dvTrainer benchmarks, completed multiple dry labs, and first assisted often. He was selected into our program, and the following July, he was rotating on our service. I stated to him that if he “repassed” the dVtrainer exercises to account for skills degradation, and he continued to first assist and watch videos, then he would be promoted to console surgeon during the first month of internship. He accomplished these educational goals, and completed portions of two robotics cases during the first month of his internship in a supervised setting. He is now starting his 4<sup>th</sup> year of 6 and can do these cases from start to finish. This educational philosophy has spread into the other surgical services in our institution and elsewhere. I am convinced that no matter how technical, and how complex a procedure, process, or technique may be, nothing is insurmountable with a well thought out, well-validated, and well implemented curriculum and testing process.