

From Student to Doctor: Evaluating my Veterinary Education

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Education is a topic that invites non-stop conflicting viewpoints. *Is problem-based learning superior to direct instruction? What is the proper amount of time to lecture? Let's ditch didactic instruction for hands-on learning!* Education is a contentious subject because every school wants to provide students with the *best* instruction that prepares them for their *best*, future lives. In my case, my school is responsible and renowned for producing veterinarians comfortable with the skin, eye, heart, brain, gastrointestinal, kidney, musculoskeletal, and behavioral diseases for dozens of species in four years in a population of students with wide ranging interests in the veterinary field – from public health to equine sports medicine. One could argue that educating this many diverse students at an elite level is a herculean or, at the very least, improbable, outcome.

I recognize the difficulty in developing a veterinary curriculum effective in preparing students for a veterinary career, efficient in providing that knowledge and clinical expertise in four years, and relevant to the many interests of its students. I also recognize that I am a third-year student whose education has not yet been tested by clinics or the real world. Since my first year, though, I have developed a clear and simple vision of my career goal: I want to be a trusted and confident small animal/exotics veterinarian, a good veterinarian who makes my clients feel safe and heard. Three years in, I feel capable of parsing out the elements of my veterinary education that have led me closer to this goal, and those elements that could be improved.

To understand the effectiveness of my education, I've investigated the attributes expected of graduating veterinary medical students by their schools, clients, and employers – those attributes that define a 'good veterinarian.' I've also studied the *evaluation* of those characteristics in UC Davis graduates by their employers. This list of important attributes can be classified into four major categories: communication abilities, surgical and procedural skills, veterinary practice experience, and adaptability. Within those categories, the most cited deficiencies of UC Davis graduates include: the ability to perform routine surgical and technical procedures (clinical skills), understand the realities of a veterinary practice (business management), and to communicate effectively. Reading this list of deficiencies, I can't help but see some of my own.

In school, I feel that I've gained *exposure* to the important clinical skills mentioned in the research, like venipuncture, IV catheterization, and physical exams, but have so infrequently *practiced* them. Other skills mentioned, like rectal palpation, placing a naso/oral gastric tube, and inserting a urinary catheter I've never attempted. I still struggle with blood draws on very furry patients. I can't discern a heart murmur from normal heart sounds, even when severe. And intubating cats for surgery is my Achilles' heel. Nevertheless, my clinical skills have greatly improved since I began, but that's partly because I've relied heavily on extracurricular activities and volunteer work on weekends or breaks.

Fortunately, I believe there are changes that can be made to school programming for improvement. Studies have shown that introducing students to clinical skills early in their education maximizes their competence and confidence with clinical skills and enhances their interest in and understanding of their didactic instruction.^{3,4} At my school, we are introduced to the aforementioned skills at the end of year two; it may be more beneficial to have clinical skills labs in our first year. This way, even if we don't have scheduled time to develop these skills in school, we have the foundation necessary to build on these skills on our own time. Further, we can integrate clinical skills learning into gross anatomy dissection labs-like performing intubation, cystocentesis, and a spay/neuter when dissecting the respiratory, renal, and reproductive systems, respectively. Implementing these changes would maximize the efficiency and effectiveness of these labs without requiring additional instructional time.

Another deficiency noted among Davis graduates is veterinary practice experience, defined as the ability of graduates to understand working environments typical to veterinary practice and the basics of small business management. In this realm, my school has somewhat improved. Fourth year students take a week of business courses to learn the basics of operating a clinic. Our Veterinary Business Management Association offers lunch talks on ownership, finances, and leadership and there are business-oriented

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externships and summer opportunities available. However, I wouldn't consider our world-class training hospital to be the 'typical' business environment. The hospital is beneficial for medical instruction, but less helpful for understanding the realities of a general practice. While we do have mini-rotations twice a semester in our first two years to give us exposure to the training hospital, only a couple of these rotations take place in community practices. Sending students out to local community practices weekly would improve student understanding of practice management and aid in clinical skill development.

The last category listed is communication/interpersonal skills. Both clients and veterinarians rate these skills highly in their definition of a 'good' veterinarian.² My school prioritizes this element and produces promising results. Beginning in our first year, we have lectures on communication that teach us how to deal with myriad situations we'll undoubtedly experience in practice such as angry, sad, or skeptical clients. We learn how to take thorough histories and build rapport with clients and how to navigate more challenging communication scenarios like discussing euthanasia and pet obesity. We then use the techniques we've learned in lectures in client simulations. Though it can be awkward having colleagues watch you as you tell your client 'dad' jokes in an attempt to build rapport, these simulation labs are invaluable in building confidence and comfort with clients, in becoming the trusted veterinarian I strive to be.

Educating veterinary students to be good veterinarians is hard. But, with greater emphasis on instructing clinical skills and business management, I am confident that future graduates will not only receive a diploma and their coveted "Doctor" title but will also receive the validation that they are prepared to take on the challenges of veterinary medicine.

References (by order of appearance):

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