

Our medical students, first through fourth years, respond to your questions

(pages 29-30 includes faculty responses)

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How does UFCOM make us competitive for residency?

- Availability of almost every specialty (and sub specialty) in house allows you to build rapport, get exposure, receive strong letters, etc without having to do additional away rotations to see that (big plus during COVID application year). There is a huge body of researchers, both clinical and bench, that are happy/willing to work with students and allow them to write manuscripts as 1st or 2nd author. UF is undoubtedly a strong medical school which whether you like it or not has weight on residency applications. Programs want applicants from schools with a history of excellence.
- So coming as a fourth year who applied to pediatric residency programs this year, I felt that the faculty I worked with here were AMAZING and instrumental in helping me achieve my goals. I had top notch access to research and electives that really strengthened my application. UFCOM makes it easy to find research, formal AND informal mentors, and a breadth of clinical experiences.
- UF COM is known worldwide. It's within the top 40 medical schools nationally and is typically ranked as the number 1 medical school in Florida. Residency programs know that it is difficult to get into UFCOM and that the education you receive here is prestigious. Many of our students end up matching into extremely competitive programs (Many UC's and Ivies). This year, every MS4 that applied to the most competitive residencies (ex: Derm, Plastics, Ortho) matched to one of their top choices for residencies.
- Many top residencies have had (and liked) UFCOM grads.
- They train us incredibly well in our pre-clinical years to function within a clinical setting. By the time I got to my first clerkship of third year I felt very comfortable functioning within a hospital and clinical setting. Many of my non-UFCOM residents have commented over my third year on how impressed they are with UFCOM students during third year because they have a hard time believing they are "only third years". We also have many specialty-specific electives fourth year that help prepare you for your residency programs with things like bootcamps or skills labs. We also finish fourth year with "Internship 101," which helps prepare us for residency. So many residents and physicians have told me that UFCOM students routinely perform incredibly well in residency, and I can see why because I do feel very prepared, even just at the end of my third year.
- Strong mentorship support and clinical training; research opportunities; connections to world-class faculty; leadership skills.
- The name, quality rotations that you actually learn from, training at multiple sites.
- UF as an institution has all the specialties represented, so you can at least see what each field is like as a student. Beyond that, it is up to you to make the connections and do the research and get the scores/grades to match. It is not easy to match to a competitive residency, even with the above.
- UFCOM provides a comprehensive medical school experience with exceptional patient exposure and responsibility.
- UFCOM is well known as one of the best southeast institutions so the name itself carries some weight. Also, the many faculty I've worked with as I applied to residency were able to reach out to other faculty members that they knew across the country. The network the faculty members at UF have is truly incredible. Finally, UF trains its medical students really well so when we start residency we are among some of the brightest in each program. Therefore, if there is another resident in the years above you who was trained at UF, it is very likely that the program will be eager to accept more UF trained residents into their new classes.

What does a typical day and week for a UF medical school look like during the preclinical years? As well as third and fourth year? (I would truly appreciate it if someone would provide a sample schedule!) Is there a dress code for classes? Is lecture attendance mandatory or will they continue to be recorded?

- MS1 Schedule (lots of variability):
8ish - wake up
9-10:30 - anki cards/review
10:30 - 6ish - watch lectures and make review materials/anki cards
6ish - 8ish - free time
8ish - 10ish - any studying or reviewing I didn't finish

Also a possibility:

- 7ish - wake up
- 8-10 - required lectures
- 10-12 - anki cards/review
- 12 - 2 - watch some lectures
- 2-5 - CLG meeting
- 5-7 - watch some lectures
- 7-9 - make anki/review materials

Dress code is anything appropriate. Sweats and tshirts ok. Exception is patient presentations where you dress as if you are in clinic.

Attendance is only required for some lectures. Maybe 2-6x/week. Only the required lectures are not recorded. It is very common for students to watch majority of lectures recorded and at a faster speed to save time.

- Preclinical: It really depends on the day of the week as to what is going on. Generally, we would have course-specific (i.e. genetics, foundations, systems-based like cardiology, GI, etc) lectures in the morning, a break for lunch where there are interest group meetings or you can do your own thing, and then either afternoon lectures for ICM (Intro to Clinical Medicine) or the afternoon off. Thursday mornings are anatomy mornings so that follows a different schedule. You can also watch lectures from home so your day can become even more your own. I would estimate that we had a few required lectures a week (this was also pre-Covid), and most course directors try to group them into blocks so you can come to campus on one day for it all rather than several times a week.

3rd/4th Year: Also depends on the clerkship you are on. Inpatient rotations, like surgery, internal medicine or inpatient peds, you are getting to the hospital between 5am - 6am and then leaving anywhere from 3pm - 7pm depending on the call schedule, case load, team you're on etc. On surgery and IM you work 6 days a week, but on the rest of the clerkships its M-F. For a clerkship like family medicine you are in an outpatient clinic from 8-5 M-Thurs and then Friday is clerkship lectures. Some clerkships you'll work a weekend day (IM, surgery) others you will not (psych, family, peds).

There is no dress code for most classes. If there is a patient presentation the dress is business casual.

Pre-Covid we had some required lectures but most were recorded!

- Third year of medical school varies a lot depending on the clinical rotation you are on. You will rotate through Internal Medicine, Pediatrics, Surgery, Obstetrics and Gynecology, Psychiatry, Family Medicine, and Geriatrics. Inpatient rotations have earlier hours (think arrival around 6:30 or 7am depending on the rotation) and will often require going in on one weekend day each week. Outpatient rotations have a more typically weekday 8 or 9am until 5pm schedule. Of course, this will vary based on each specific rotation and location! Each rotation also has lectures, simulations, and time for studying. Fourth year is even more variable as you curate your own schedule with electives specific to your future career.
- Not saying that this is the best or healthiest schedule/method out there, but I think it might be helpful to get a picture of the broad range of possibilities. My day to day schedule varies sooo so much. Some days I'm super disciplined and watch all my lectures, work out, and make dinner. Other days I grocery shop, clean my apartment, and maybe watch one of the five lectures, and then play catch up the rest of the week. And then other days I'm just feeling kind of bleh so I watch Netflix, take a nap, and get take out. It's all a balance and at the end of the day, I watch all my lectures, study the material I need to, and still feel prepared for the exam. Regimented schedules are great, but don't be super hard on yourself to be perfect!
- 1) Lectures have always been recorded and they will continue to be! The only new part is the option for Zoom (in-person lectures are still happening). I wouldn't be surprised if the Zoom option will continue to be offered after Covid-19 dies down because it's made watching lectures live so much more accessible.
2) Only a few lecture activities have required attendance — this is usually for labs and patient presentations, although sometimes there are required lectures (especially in the clinical medicine course). This only happens a few times per week, so most lectures do not have mandatory attendance.
3) Generally, no dress code for standard lectures! You should dress appropriately, but there are very few rules regarding what to wear to lecture. For patient presentations and LAC activities, you must dress in business casual.
4) For preclinical years, the schedule can change depending on what block you're on and if you prefer to watch live (in person vs at home) or stream later.
- Preclinical: Lectures 8-3/4p (online or in-person) with various in-person activities (anatomy, LAC, CLG); Clinical: depends on the rotation (harder ones 6a-6p; easier 8a-3/4p); mostly not sometimes business professional or casual for certain activities like standardized patient encounters
- Recorded! Dress code for class is anything but athletic shorts. I usually wore jeans and a casual shirt, maybe leggings but not usually. Business casual for LAC/patient presentations, which aren't super often.

Preclinical:

5:30 wake up and workout

7:30 head to school, either for 8 am class or for watching lectures/studying on my own in a study room

I took 10 min breaks every 50 min and usually went on a short walk

12: lunch break, sometimes I ate while watching lectures

12:30 back to work

4? 5? 6? Head home. Depends on the day, if it's close to an exam I would often stay much later, like 8 pm

Depends on the day but anatomy lab, lac, CLG, a few labs are mixed into the school time

6pm eat dinner

6-8 study more? Tbd

8-9 relax

9? 10? Bed

Clinical is SUPER variable based on rotation. For anything starting 7a or later I would get up at 5 and work out. For things starting at 6 I would work out after work. Usually 1-2 hours of studying a day, none on weekends for me, but could often get done with stuff during down time during the day

- Preclinical years: watch recorded lectures, make flashcards, study flashcards, take exams. Third and fourth year: 4-8 week rotations in different fields. Expected to show up and learn and try to help in small ways and study when not in the hospital. Standardized exam at the end of each rotation. Dress code for preclinical is casual. Third/fourth year is business casual or scrubs depending on rotation.
- Preclinical years: Combination of lectures, lab, small group, LAC from 8am-5pm on some days, less on others. Lectures are not mandatory. Dress code is casual, however please always remember to be professional and wear ID badge.

Clinical years: Students report to hospital service in either business casual or scrubs (depending on setting/team, etc). Hours vary based on service, team and attending. Intermittent didactics or simulations are scheduled throughout.

- In both settings, 12-1PM is typically free to grab lunch.
- In first year, the weeks during preclinical are relatively uniform aside from occasional events or meetings that occur. Some days are busier than others. Mondays are usually less busy, normally just a few hours of lecture in the morning and in the afternoon (most of the time they are not required). Tuesday/Wednesday, lectures in the morning (anywhere from 8-12, 9-12, or 10-12) and then either CLG (small groups) from 2-5 or LAC sessions for max an hour (practicing clinical skills). In first semester, our Thursdays would be similar to Mondays, but now for second semester, some students use Thursday pm as time for their MSRP or for the Discovery Pathway. If you are not participating in either of those, then your afternoons are pretty free. Fridays: again lecture in the morning and then we may have anatomy lab for an hour in the afternoon. This may seem heavy on the lecture content, but course directors frontload their courses (provide most of the material during the first 1-2 weeks) so that it opens up a lot of time in the latter part of the course for us to focus on studying and mastering the material. As far as required and recorded lectures, course directors will delineate which lectures are mandatory and which are not. The mandatory lectures are usually labs where teamwork/participation is necessary, and patient presentations. Also, lectures will definitely be recorded unless it's a patient presentation! For dress code, just dress appropriately! You don't need to dress business casual/scrubs everyday unless you need to for a class.

How many days a week do students come to campus vs study and watch lectures at home? How often are there activities on campus in the evening where students are going home around or after dusk? (feel free to answer for yourself personally and hopefully we get a range of responses)

- Some students watch lecture at school every day (10% or so). About 15% watch live via Zoom. The rest either watches lectures later or watches them during lecture time on a higher speed (they are posted 10 minutes after lecture end for streaming). There are very few school activities that require you to stay on campus late. This may be due to COVID, but in general, I think there has only been about 3 required activities that ended after 5pm for the MS1s so far. There are occasional social events/meetings/group reviews in the evenings, but those are typically optional. I know a few people that stay on campus late to study, but I and many others try not to stay on campus past 5pm.
- Personally, I would say about a 55/45 home to campus ratio. I've started coming to campus more this semester, partly due to some more classes/anatomy lab being in person and partly because I enjoy the comradery of interacting with my lovely classmates.
- I go to campus 3ish times per week. It is required usually twice per week (1 day for CLG and 1 day for LAC activity). I go in especially when I need to be productive because it is easy to get distracted at home. The only school activity you get out after dusk is Anatomy Bootcamps. 1/3 of the class does the bootcamp at once so you would get out with dozens of other people who would probably be walking in the same direction.
- I watched at home (read at coffee shop) every day; not often in pre-clinical years do you go home late, but often in clinical depending on the rotation.
- Super variable for what is required, but I personally went to campus daily. Usually 2-3 days a week have some required things. Other than like the shortest days of the year you shouldn't be going home in the dark! Stuff almost always ends by 5pm. Also, I biked and walked and always felt safe! Gainesville is safe and biker friendly.
- Students come to campus most days for CLG or LAC or anatomy or a rare required lecture.
- Your campus attendance is up to you. However, certain activities such as small group, lab and LAC are required attendance. Some students may choose to spend most of their studying at home and only come to campus on the days that there are required activities. Rarely do students have activities that end after dusk. There are tutoring/group review sessions that may run in the evening, but those are optional. During the clinical years, certain rotations, such as surgery, OBGYN may require students to stay into the evening.
- Personally, I went to class essentially every day, every week of my preclinical years. I will say this isn't the norm though. In first year, we probably started with about 50 people coming consistently and by the end of second year we had about 20 people consistently at all lectures. Usually all campus activities finish by 5 pm, if not earlier, and not even all these are required per say, so there isn't anything required after dusk really.
- During my first 2 years, I attended most of the lectures in person. While this is not the norm (most students gradually stop attending lectures in person after Genetics), I enjoyed seeing friends each day in class and having a set schedule. I found that if I watched the lecture in person rather than on 1.5x at home, I understood the material better the first time through and had to review it fewer times prior to the test.

How would you describe your ability to balance school with personal well-being? What support does UF have relating to mental health, maintaining wellness and preventing/managing burnout for medical students? What is mandatory vs voluntary?

- I felt very comfortable with this balance. Dr. Dede (UFCOM counselor) is a great resource! "Mandatory" wellness happens weekly with check-ins during collaborative learning groups - I thought this was super beneficial for me!
- No mandatory wellness lectures, which is appreciated. PRIME track is helpful - learn about meditation, etc. (Promoting Resilience in Medicine – PRIME)
- I would say it's very possible to balance the two, but you do need to be conscious about taking time for yourself while still putting in the work. The pass/fail system makes it much easier to maintain this balance (though sometimes I still struggle with allowing myself to be okay with getting less than a traditional "A or B"). It's very easy to find someone to talk to, either through the college itself with Dr. Dede or through the Counseling and Wellness Center at the university as a whole.
- Overall, there are a lot of opportunities to focus on mental well-being. Med school is hard and the information feels continuous, but we do get breaks from school (spring break, holidays, golden weekends) to just do what we want. I will say that UF does a fairly good job, but sometimes their idea of wellness is a lecture in small groups about wellness, as opposed to extra time built into the schedule to take a study break. Unfortunately, this is the case at every med school but UF has an amazing student task force that is working hard to address things like this for us and it is paying off.
- Pretty well - plenty of time for goofing off, hobbies, exercise, and hanging with friends; Dr. Dede and other faculty are good people to turn to, very open about discussing mental health issues; most are voluntary and opt-in
- I felt I was able to balance very well but I think everyone feels differently about this. To me that meant working out daily and doing at least one fun thing every weekend. During the clinical years I felt it was much easier to balance and I had overall more free time!
- I think I've done a good job balancing school with my personal well-being. I chose to spend my days on campus devoted to school so that when I go home in the evenings, I am free to relax and do the things I enjoy. I have been able to continue to participate in intramurals and do fun activities on the weekends while still maintaining good grades. The atmosphere at UF fosters a collaborative environment that has allowed this to be possible.
- I've been able to balance my well-being very well in med school. Part of that is effort I put in, by scheduling my time well and including things I love, like training for a race or taking my dog to the dog park. UF promotes this by having study time often built in. If your small group meets on Tuesdays for instance, then on Wednesday you will have some extra built in study time (or vice versa). Partway into 1st year, they give you Thursday afternoons off for research time, discovery track time, or study time or a bit of each. Also, each course tends to be front loaded so you learn a lot up front, then it tapers as you get closer to the exam so you're not cramming all your studying in last minute. This helped me maintain my own wellness activities even on exam weeks (sometimes even better on exam weeks haha).
- Finding balance and maintaining my personal well-being is a top priority of mine, so I believe I am doing a good job at it, but of course there are always things I hope to improve. Wellness via structure and systems is extremely important to me, and I think UF does its best to exemplify this. For instance, lectures are recorded providing you with flexibility in learning the material. The preclinical curriculum strategically starts with Genetics to ease you into the course load. Your time is

protected when nearing an important exam (they try not to schedule too many things during the week of an exam). Faculty and staff are EXTREMELY receptive and supportive, and I think this is very important in terms of wellness because I feel like I can talk to anyone if I am having any wellness concerns. Overall, I think UF is very intentional from the beginning to stress the importance of wellness and does their best to support you in any way they can.

Can you tell us about life outside of med school at UF and living in a college town? Please comment also on weekends and breaks, and fun/non-academic things to do in Gainesville.

- Fun UF things to do: There is a Bat House on campus! We also have free access to the Florida Museum and Lake Wauburg. Gainesville has a growing restaurant and brewery scene. My favorites include First Magnitude, SwampHead, Cypress & Grove (all breweries) and Public & General, The Top, Boca Fiesta (all restaurants). Cry Baby's has great drinks downtown! Gainesville also is home to tons of trails. It can be a little hard to get a direct flight from Gainesville, but Orlando and Jacksonville are within 2 hours if you need to take a flight to somewhere fun!
- Honestly COVID makes it hard but there is a ton of nature - Orlando, Jacksonville, St. Augustine are all 1-2 hours away by car so getting to do things outside of Gainesville is easy. In town, there are malls, a bunch of restaurants, and random activities - like skating, bowling, go karts, etc. If you're from a bigger city/used to endless things to do, you might be a little underwhelmed honestly but I prefer it — less distractions
- Lots of nice parks, food truck rallies, bars, etc. Some undergrad bars that you would want to stay away from. Breaks are common time for short trips to northern Florida or Georgia.
- There is plenty to do outside of the college student life here! There are great restaurants and bars downtown that cater to non-undergrad students in town. Before Covid there were live events in the plaza downtown like music, free yoga, farmers markets, art festivals, etc. Depot Park has great walking and running trails, areas to lay in the grass, and good food (Humble Wood Pizza) and a cute bar made out of an old train. There are botanical gardens and a butterfly museum. There are a lot of great places to make weekend trips to like tubing down the Ichetucknee, kayaking on the Santa Fe River, St. Augustine Beach, Cedar Key for camping, Disney or Universal in Orlando, etc.
- It's pretty chill. We do normal stuff - going out to eat at new restaurants, exploring farmer's markets, hiking the random trails, visiting the springs. Weekends and breaks people go home to family both near and far or explore other cities in the southeast.
- Gville is small but has a ton of great bars and restaurants. Other things I do are day trips to the springs, beach, or weekend camping trips. Gville also has cool parks that I love hanging out in, running in, etc. plus a paved trail that's 36 miles round trip that I will bike or run frequently.
- Gainesville is a great place to live. Good weather and plenty of options for food/outdoor recreation.
- I have lived in Gainesville for going on 8 years. As you move away from the campus, you will see that Gainesville feels less "college like". There are plenty of professionals and families who live here. I enjoy Gator football during the Fall. I love being outdoors and running the many trails Gainesville has to offer. There are so many outstanding food places throughout the area. Ginnie springs is so much fun in the spring/summer on a hot day. Gainesville is also in close proximity to a lot of places. On breaks, I have enjoyed taking day trips to St. Augustine or Jacksonville, spending a weekend in Tampa, Clearwater or Orlando and have driven down to South Florida for an extended break. Flying out of Gainesville airport is also very easy and have taken pretty affordable flights to Charlotte, NC to visit family!

- I've loved Gainesville for eight years now. Keep in mind I grew up in a rural area, but I think Gainesville has a lot to offer since it is a college town. There are performing arts events held often, and outdoor farmers markets weekly and little art/craft festivals often too. Things I've loved include biking/running the Hawthorne trail, walking the Paynes Prairie trails/boardwalks, trail running at San Felasco State Park, paddle boarding the springs/river all over North and Central Florida, taking my doggo to the bark park, going to weekend Farmer's markets. On weekends and breaks you can head to the beach (St. Augustine is the closest but also Big and Little Talbot Island, and Amelia Island, are really beautiful). Also, Tampa/St. Pete have great gulf side beaches too. There is more hiking if you go up to Georgia or South and North Carolina too.
- Pre-covid there are a lot of fun bars in downtown Gainesville (and midtown but that is definitely more of a young, college crowd). My favorite is Arcade Bar, which has 3 floors of various arcade games. For more covid-friendly options, Depot park is outdoors and has an outdoor bar area and a pizza truck, or there's First Magnitude Brewing and SwampHead Brewing - both have a lot of outdoor seating, good beer, and usually food trucks. There are also a lot of really good restaurants and coffee shops. On weekends, a day trip to any of the nearby springs or maybe the beach (St Augustine, Jax) is fun. There are also a lot of nature trails and outdoorsy things around Gainesville.

Can you describe the opportunities for community involvement offered by UF Medicine? Are there outreach or volunteering opportunities for helping with children in the hospital? How has COVID-19 impacted the Equal Access Clinic, if at all?

- There are SO many opportunities, I could never list them all. Volunteering in the hospital has become a challenge with Covid, but many Interest Groups have worked with departments to allow medical students special privileges. We also volunteer at Covid testing and vaccination sites around Gainesville. Equal Access Clinic has been very active this year (many locations were closed at the start of the pandemic, but with great PPE, we are allowed to return). As an MS1, our first semester only allowed us a few opportunities to volunteer at EAC, but now the allowed number is unlimited. Your class probably will not have a cap on the number of shifts because of vaccines/PPE.
- Sooooo many: Street Medicine, EAC, White Coat Company (at the children's hospital), Shadowing, Mobile Outreach Clinic, and all of the non-UFCOM-specific stuff
- The Equal Access Clinic is a great service opportunity for all UFCOM students. There are so many avenues to get involved in and so many opportunities for leadership and growth. Despite the COVID19 pandemic, EAC has remained functioning through it all (telemedicine for a little while, but now clinics are back open.) They constantly add new services for the underserved community.
- I can speak on Equal Access Clinic, although I definitely know students involved with other programs too. I worked in the EAC leadership throughout the pandemic and we initially had to move to telemedicine only per the COM's requirements. However, now we are back to nearly full functioning, though we do limit number of volunteers each night so that we are not in too tight a space. But if you want to volunteer there is nearly always a way to do so at least once a semester, if not more. You can also apply to get involved with leadership if you wish to volunteer even more.
- White coat company is an extracurricular interest group/club to perform plays for children in the hospital (the whole production from writing to acting to singing to costumes are all by med students)! Covid did limit the opportunity to go to EAC as often during 2020 but now it is back in capacity with face masks and social distancing.
- I volunteer frequently to conduct COVID-19 testing and administer COVID-19 vaccines.

What is the community like amongst students from minority backgrounds and what opportunities does UFCOM offer for helping them foster a sense of community?

- It's honestly great, and a top reason why I came here. UFCOM has SNMA, LMSA, HQA and other organizations to foster community among minority students.
- The Office of Diversity and Health Equity is like family from the second you walk through the UFCOM doors. The ladies are so welcoming and provide delicious meals at social events! Their office is always open just to talk and Dr. Parker, Dr. DePortu, Dr. Robinson are great mentors. They also have books and a study room for students open 24/7.
- As a student of color, my closest friends are nearly all also students of color; this is largely because of the lively community of minority students/students of color here at UFCOM. There is definitely a support network here of like-minded peers regardless of what background you come from!
- Such a homely and welcoming environment! There is even a diversity workshop during the first year orientation.

Given that some of our clerkship(s) are on the Jacksonville campus, will housing be provided and how does this work/what is it like? Are rotations split up or all at once at UFJax? What fun things are there to do in Jax? Are there opportunities to participate in rotations outside of Florida?

- Dorms are provided in Jax. You may do part or all of a rotation in Jax. For example, I did half of pediatrics and half of medicine in Jax. Jax is a huge metropolitan city so there's sports events (Jags), the beach, downtown areas for food/drinks, lots of festivals pre-COVID so I went to a taco festival downtown one weekend I was there. Rotations outside of Florida would mostly be specialty specific away rotations done during 4th year in preparation for residency applications.
- Yes, housing is provided when in Jacksonville (though not required if you have other options). The dorms are right behind the hospital, which gives you the best commute for rotations, and there is a gym, kitchen, lounge area, and study area within the dorm. You also get some money put on a meal card for the hospital cafeteria each week (not a ton, but definitely helps!) Rotations are usually split up, but you do get to put in requests. Most people spend 2-4 weeks at a time there.
- There is a dorm for UFCOM students in Jax. It's right next to the hospital so you can walk over in about five minutes. There are triple rooms (which have been double occupancy since Covid) and single rooms. I was able to request a single room every time I was there third year, but that's not always a guarantee. Two triple rooms share a bathroom and four single rooms share a bathroom. There is a gym in the dorm and two community rooms/kitchens (one with free laundry!). Everyone places requests for Jax time and generally it's split up over third year, with most people averaging about 11-12 weeks total over the year there. There are tons of fun things to do in Jax. The beach, awesome coffee shops, breweries, the Riverside and San Marco neighborhoods are close to the dorms. St. Augustine is even closer for a weekend getaway!
- There are dorms with double and single rooms, plus we get a meal card for the cafeteria that covers I would say 5-6 meals a week. I actually love going to Jax because the beach is close, riverside bars and restaurants are like 10 min from the dorms. I've also been on the Baldwin trail there, been to the river walk, this free outdoor gym called the Corkscrew. Lots of stuff! And you don't go all in a row. Just 2-4 weeks at a time.
- You live in the Jacksonville dorm which is comfortable but far from luxurious. Rotations are split up. I spent a little over 1/3 of my time in Jacksonville. You have limited control over when you will be in Jax and for what rotations.

- Jacksonville dorms are available free of charge. They are directly on the hospital campus for convenience. Many rotations, such as Family Medicine, Neurology, ObGyn, Medicine, etc have the opportunity to do some portion in Jacksonville. It provides a differing patient population than Gainesville and really gives you a well-rounded understanding of how to take care of patients from diverse backgrounds.
- Jacksonville provides a dorm for housing that is a <5 minute walk to the hospital. It is a dorm so it isn't classy or anything, but it's free. Also, they give \$30 week for the cafeteria too while you are there. There is a little gym in the dorm too. The rotations are kind of split up, so I did half my peds rotation there (4 weeks), half my ob/gyn there (3 weeks), and part of family medicine (4 weeks). Outside the dorms, there is actually a lot in Jax. I liked running the Riverwalk area in downtown. I've also been to weekend farmers markets. There are tons of restaurants to explore, and the beach is fairly close too. They even have one that allows dogs on the north side of Jax so I brought my dog over while my boyfriend was on his Jax rotation.

How do out-of-state students adapt/adjust? Tips for transitioning? Any challenges?

- The biggest challenge was homesickness but that subsides after school starts. Keeping busy and staying in contact with family/friends from home was the biggest help. Also, try to make friends early on, so you don't isolate yourself. Adapting is easy once you get into the swing of med school — it picks up so fast, you don't even have time to think about homesickness. You can also apply for in state tuition after 1 year, which is great!
- The weather is wonderful! I moved to Florida about a month before school started and I'm glad I did that - it allowed me to settle in and explore Gainesville before I had school responsibilities.

What is the level of collaboration vs. competition between students throughout the four years?

- Very collaborative in preclinical years (can't speak to clinical years yet as I'm an MS2)
- 1st and 2nd year is VERY collaborative given the pass/fail nature of the grading systems. Third year is graded (A, B+, B, etc) for clinical rotations. I would say that there is still a collaborative vibe amongst my class despite this! People are willing to share study resources, work together well on teams, and support each other. Third year grading is more subjective (exams are only a certain % of your grade), and it's important on our evaluations to demonstrate good team-work skills. I have always loved working with my peers and have always felt incredibly supported.
- During the preclinical years, it's all collaboration.
- In first year there is a sense of both. People are driven by high grades and want good scores, but they are also willing to post study guides, outlines, anki decks, etc. Many people group study. There is always a class slack (group chat app) going where questions are constantly asked and answered.
- Most students are incredibly collaborative, especially during the preclinical years when courses are pass/fail. We have a shared dropbox where people post flashcards, outlines, and other resources to help each other out.
- Highly collaborative; I have never had an issue asking any classmate/upperclassmen for advice, help, or simply talking openly about life. People want you to do well and to succeed. We are generally very proud of each other and each other's accomplishments.
- High level of collaboration from day one! The class dropbox is GOLD, with so many resources passed down from class to class and shared among individuals. Students genuinely want each other to succeed and that is evident throughout the preclinical years.

- UF is very collaborative. In first/second year everything is pass/fail and we all share study materials on a huge dropbox with so many resources. I also easily found others to study with as a study group. In third/fourth year it is also super collaborative because you're graded by residents/faculty on a 9-point scale and that is compared to the average scores in the class above yours, not your own cohort. So all the students I've worked with in the clinical years help each other out each day.

How accessible and open are faculty to shadowing opportunities in the clinic or hospital? Do students have access to shadowing different services outside of assigned preceptorships?

- SO accessible!!! Literally as easy as sending an email or going to an interest group meeting.
- Very open! I personally haven't shadowed anyone yet, but a few of my CLG group members have simply emailed physicians/professors and then were able to shadow them a few days later.
- Extremely open. You just send an email and you're in. You can literally shadow in any field at any time that works for you.
- Yes - shadowing is plentiful. COVID has made things hard but if you contact faculty directly, they are very responsive. I have gotten shadowing within 10 days of a cold email every time.
- Very open - you can literally start shadowing day one if you wish. I one time saw an accepted med student shadowing before he actually started - that is how into teaching and receptive the faculty are. Just contact anyone who is doing something that you think is cool. More often than not they're going to be pumped that you're interested.
- Faculty are very open to having students shadow. Just email and it will happen.
- Very accessible! You can email/contact any faculty and let them know you're interested and 9/10 are more than willing to have you stop by whenever you have time to shadow. This goes for ALL specialties - don't be afraid to reach out! People at UF love to teach medical students.
- Even prior to matriculation I was invited by the individual who interviewed me to shadow him. Further this openness did not decrease once I became a medical student. From the ED to the IM clinic to the OR many faculty are supportive of getting early and interested students into different clinical settings. Also, EAC is a great start to clinical opportunities.
- As a student interested in OB-GYN, I shadow in L&D at least once a month. The attendings and residents always welcome me with open arms and even let me scrub in.

What sorts of resources does UF have available for Step Exam preparation and support? How long is designated Step study?

- Mr. Gorske is a good resource for learning about study methods, designing a personalized plan, etc. We get plenty of time for Step 1 study (6 weeks for me). I felt like I was able to balance in house exams with supplemental tools well. Our curriculum isn't designed to make Step 1 robots, which I appreciated, and there is always a ton of work put into each block to make it the best it can be.
- I believe Dedicated is up to 2 months (the exact amount of time you have to study depends on when you schedule your exam). There are third and fourth year tutors available upon request.
- Mr. Gorske is amazing. He does learning style assessments and study plans. Also, the drop box that is shared by all UFCOM students has TONS of step study stuff. You could probably successfully study by spending less than \$100-200.

- Each class will organize discounts on Step study materials. We had discounted Sketchy Medical and UWorld packages. Dedicated study was about 7 weeks, but many of us took Step around the 6-week mark (really that's a lot of study time!) so we had time off before third year started.
- Step is entirely up to the individual student to learn through outside resources. UF alone will not adequately prepare you
- Mr. Gorske provides assistance with Step schedule planning. You get around 6 weeks of study time that overlaps spring break. Some students choose to study throughout while others choose to plan a vacation at the beginning or end of the time period.
- Resources include a dedicated learning specialist, Mr. Gorske, who is amazing. He also organizes content review sessions for the pre-clinical content. There are also tons of Step 1 study material on the shared dropbox that is passed along from class to class (honestly too much to do it all so I suggest picking 1 or 2 of these resources to stick with). Dedicated time is 6-8 weeks normally (you get to choose your actual date and can either use the whole time or choose to give yourself a 1-2 weeks off afterwards which I fully recommend if you feel comfortable with the Step material).

I would like to hear about what Gainesville is like for LGBTQ+ people. I am from out of state and don't know much about living in "the south" as a gay person. It would be great to learn more about that.

- Gainesville is super forward with LGBTQ. It is the "south" but it isn't. The city is dominated by the university and hospital and is full of diversity and well-educated forward thinkers. There is tons of pride and community for LGBTQ.
- LOVE THIS QUESTIONNNN. I am a gay man, and I have been in Gainesville for 8 years since I did undergrad here at UF as well! Gainesville is a VERY accepting and inclusive city. It absolutely is situated in "The South," but Gainesville is a nice little bubble. Aside from Gainesville, there is a large LGBTQ+ group here at UF COM called HealthQueer Alliance. We actually put together this book about LGBTQ+ life in Gainesville: <https://admissions.med.ufl.edu/wordpress/files/2020/12/UFCOM-Rainbow-Book.pdf> I encourage you to check it out!
- I grew up in the Midwest and Gainesville feels less "stereotypically southern" to me than the Midwest does. I feel like Gainesville is a very open and accepting community, and a lot of UFCOM/UF/Gainesville events are centered around diversity, inclusion, and LGBTQIA+ education/issues/advocacy. I have not had any negative experiences in Gainesville, but unfortunately there will always be close-minded and mean people anywhere you go. That being said, I feel like the overwhelming majority of the community and culture is very positive and supportive and if you were to experience something negative, you would have a lot of support in dealing with and resolving that issue.
- Gainesville is a very liberal place compared to the surrounding area. People at the university especially are generally very accepting and kind to LGBTQ+ people.

How do you get involved in organizations? What are some of the most active student organizations at UF COM and how much time do students have to be involved? Are there opportunities to start your own organization?

- Some you just join (like interest groups) others you can apply to like the Admissions Welcoming Committee or Exec Board. Time requirements greatly vary from optional 1-hour lunch meetings a

month to weekly meetings for several hours if you are in a discovery track. Students frequently start their own organizations and post on the Facebook to gauge interest.

- Literally just go to a meeting for interest groups. White Coat Company is always a popular group - it's a theatre troupe that puts on a performance for pediatric patients at the children's hospital. It's very easy to start your own organization.
- You have as much time as you would like to get involved. Admissions Welcoming Committee is one of the first activities you can get involved in and is very rewarding. EAC is a great service opportunity. There is the executive board for the class that provides good leadership opportunities. White Coat company is available for students who are theatrically or creatively inclined. There are numerous interest groups (for every specialty, interest, etc) to be a part of and even lead.
- It is very easy to get involved, whether you want to be in a specific specialty interest group like pediatrics or surgery interest groups, there is one for almost all specialties. Then there are other like Equal Access Clinic too, and most students volunteer here for at least a few shifts while others do more or go through an application process to be involved with leadership. This is probably one of the biggest student orgs. There is also a wellness org, intramural/recreational sports groups, etc. You can start your own if you get a faculty sponsor and some interest from others. For each of these, you can really choose your involvement and therefore your number of hours spent.
- Leaders of each organization arrange lunch meetings or evening meetings with topics and speakers related to that field and a weekly email is sent out to the student body with the information about the meetings (day, time, location, description, etc). Some active organizations include white coat company and pediatrics interest group. Students can dedicate as much or as little time as you'd like for various organizations. There are no requirements. There are definitely ways to start your own!
- There are plenty of ways to get involved at UF. So many that it's more of a question of what you're truly passionate about and what you choose to prioritize. Some student organizations take up more time than others which limits what you can be involved with. For example, Equal Access Clinic is our free student run clinic and everyone eventually volunteers with EAC. Becoming an officer is an opportunity that you can apply for your first year of medical school. I've had the pleasure of being one of the officers for Eastside Clinic/LGBTQ Night my first two years and now serve as one of the LGBTQ Clinic Coordinators. EAC can be a large time commitment sometimes but it's one of the most rewarding aspects of my time at UF and so I made sure to prioritize it over getting involved with other organizations so as to not spread myself thin. That being said, you can definitely be involved in multiple organizations (ex. class social chair, co-president of Anesthesiology Interest Group) while also holding a position within EAC.

Research: How common/sustainable is it for a medical student to engage in basic/translational research during the school year? Is there time in 4th year? Has anyone done both clinical and basic research (not necessarily at the same time)? Can anyone comment on the 10-week MSRP experience and when one should apply to it? Does everyone receive the summer stipend? How do you find research opportunities/projects?

- You'll have a presentation on MSRP during first year. They will outline the deadlines and requirements. They will also provide a list of already designed projects that are looking for a student to hop on and what your job would be in that project. From what I know, everyone gets the stipend and some (I did) receive an extra stipend from the NIH if you do research in a particular area. You can choose a project from the list provided or seek out your own mentor based on your interests.

- There is time during medical school and especially in 4th year! The MSRP is a great way to start a project and get connected with a faculty member. To get quality results, it will likely require several months of continued involvement even after those 10 weeks. You apply at end of 1st year and everyone who fills out the paperwork gets a stipend.
- I would say basic research is not common during the school year. Your schedule doesn't really lend itself to checking in with a lab or running experiments while also having required classes/labs and studying. You can take research electives during 4th year or go into a lab during your time off, but I'd recommend just enjoying your time off (which will only decrease in residency and career). I did basic research for my MSRP and I felt like it wasn't a long enough time to get anything publishable and comprehensive done. Subsequently, I frequently advise younger mentees to do something clinical or towards the end of its course so you can have something to present or publish on your resume.
- Basic science will be hard however clinical is doable. There is the MSRP program and the ability to take time off to further follow research opportunities in the preclinical years. In clinical years there are electives in research for different department. Research is extravagant at UFCOM and projects can be found just by emailing residents and attendings alike.

What is your favorite part about being a member of the UF COM community? Why did you choose UF over other programs and is there anything you wish could be improved? What is one thing that UFCOM can offer that most other schools can't?

- I thought UF "walked the walk" when it came to putting patients first. On my interview day, they had a patient talk to us about their experience at UF which was very inspiring. I wish you could have had that experience! I 100% felt like UF was determined to nurture kind, caring, and compassionate physicians. That is exactly what I wanted out of my training. The faculty here really care. In my opinion, out of all the programs I applied to UF provided its students ALL of the opportunities I could ever want, and at the same time deeply cared for its students.
- I ultimately chose UF because of how welcoming and encouraging everyone was when I was interviewing. (Side note this continues throughout orientation and during your four years here too). A lot of the other schools I was thinking about seemed like they were trying too hard to impress me, or that I had to work really hard to impress them. UF acknowledges how hard you work and just genuinely want you to find your best fit for school.
- I obviously have not attended another med school so comparison is hard. But the people that get accepted to and come to UFCOM are super cool. There is a mix of social and quiet. There is a great sense of humor in our class (we have a group chat specifically dedicated to memes about our classes). There are people who are sporty, artsy, social, etc, etc. I love how genuine and nice everyone is - and that includes faculty. Our professors tend to respect us and are honest with us about anything and everything we want to know about medicine and their careers.
- I chose UF because everyone on my interview day from fellow interviewees to current students to faculty were so friendly and helpful. I knew those were the people I wanted to be surrounded by for my medical education.
- The family and the fact that the Gator Nations is truly everywhere! Countless opportunities exist once people know you are a Gator! I know this supportive environment helped me thrive and I hope it can help you too.

- I chose UF for the early patient experiences like patient presentations, patient simulations, and patient encounters, and the preceptorships in first and second year. I love the focus on learning the clinical skills early.

Is there a formal mentorship/advisory system in place? Are medical students assigned a mentor/advisor? If not, are faculty receptive to advisory requests?

- My collaborative learning group leader has been a great formal mentor for me over the last four years. As a pediatrics residency applicant, I also had formal pediatric faculty mentors through the Department of Pediatrics. The MSRP project also allowed for me to find a formal research mentor easily. Faculty are extremely receptive!!
- There is a big/little system for MS1s and MS2s. You and your CLG group (8 students) get an attending that stays with you for all 4 years. You talk about everything in that group so that attending becomes a mentor. Your PI for MSRP research can become a mentor if you are interested in their specialty. You get an advisor/mentor specifically to help you with applying to residency.
- Big/Little program where MS1s get matched with an MS2 during orientation based on a survey/interests and was very helpful for me. My Big was crucial to my transitions. As far as faculty, no specific mentorship system, but would be great to get started. The ODHE does encourage mentorship meetings with their deans to establish a relationship early on for minority students.
- Nothing formal until you apply for residency, then you have an advisor for that process. But most are super open before that, especially in a specialty you're interested in or a research area you are interested in.
- You can always reach out to any upper-classmen or faculty. They are very approachable, responsive and willing to support you.

What is the best way to connect with faculty and physicians with the goal of a mentorship relationship that ties research and medicine together?

- Literally just send an email :) Faculty are always willing to support the students. If a specific faculty member can't, they will put you in contact with someone that they think you would work well with! I reached out to a faculty member to do research with her, and it turns out she was retiring, so she asked the department head who would be a good fit, and now I'm working with one of the most impressive physicians I've ever met! Shadowing and personal connections is also a great way to network with faculty and find an advisor!
- Find people you connect well with who are doing things that interest you, be engaged in your rotations, and reach out with specific goals in mind.
- Show interest and shadow and ask to get involved in a project. Choose your faculty member wisely - if they are hands off, your project may not go anywhere.
- MSRP is a great way to start a research relationship with faculty and have it progress over the years.
- Supportively, all professors and faculty are amazing. They're readily and easily available to contact if you ever have questions or trouble with something.

What academic and career counseling resources are available to students?

- Dr. Dede is such a supportive person and helps with a lot of navigating through medical school. Dr. Collins will be a great resource for career decisions and residency applications. Also, many of the program directors and faculty for whatever specialty you might be interested in are great resources for figuring out what is the right career for you.
- Mr. Gorske is a Learning Specialist available to help you figure out what study methods, resources, schedule, etc all work for you individually. Dr. Dede is available for counseling. There are many meetings, panels, discussions given by upper-classmen or professors/physicians about study methods, applying to residency, figuring out your specialty, etc.
- Academic counseling is available through our learning specialist Mr. Gorske. He is an expert in study skills and tactics, he will work with you to recognize your study habits and tailor a study mode of attack designed for your skill set. Career counseling is something that is somewhat up to the individual! The nice part about UF is we have all residency programs accounted for and all you have to do is take the initiative to seek out physicians in fields you are interested in! Majority of UF providers are more than happy to have medical students join them for a day in clinic or a coffee to discuss their career!
- The Office of Student Affairs and your CLG (small group) leaders are your primary resources for academic and career counseling but any of the program directors or faculty within your field of interest are typically used to working with medical students and are actually your assigned advisors come third year, thus would be a solid resource as well.
- The Office of Student Affairs has hosted a couple of information sessions for the M1s so far, detailing the various medical specialties and the residency application process and what to expect later in medical school. I believe they also meet with every M3 prior to residency applications to discuss career goals and planning. Otherwise, research and interest groups are a great way to meet faculty in the specialty you are interested in and they can likely also help with career counseling.
- The long list of reputable residency programs at UFCOM allows for many different program directors to be at your fingertips for counseling. All extremely approachable in addition to other faculty this is an invaluable resource. Additionally, Dr. Dede is a great nonpartisan counselor to help you get through the decision making of specialty and academics.

What did UF students like the most and like the least about their clerkship years? How are evaluations structured?

- Most: getting to do medicine! with real patients! But really - the opportunity to have amazing experiences in a variety of settings. I am so appreciative that I got to work with leading physicians in so many fields (transplant surgery, breast surgery, oncology, endocrinology - this list goes on!) just by doing required rotations. I think it's common to be a little frustrated by subjective grading, which is a feature of most clinical rotations throughout the country. The evaluations slightly differ depending on the rotation, but there are written evaluations from your preceptors and residents that are scaled 1-9 with an area for free-response as well. Typically, that is combined with assignments and a standardized "shelf" exam at the end of the rotation. Course directors work to standardize the subjective evaluations as best as they can.

- Most - good broad exposure. Least - subjective evaluations carry tremendous weight in certain rotations.
- Loved the diversity of cases, patient acuity and areas of medicine you are able to see over the course of one year! Schedule and organization of clerkships can be a bit frustrating to plan for, but overall very manageable.
- Evaluations largely based on patient interactions and clinical activity. NBME scores count for a portion, but how you are as a "student doctor" is the most important. Asking for feedback regularly will help you grow and show eagerness to improve.
- I loved nearly all the rotations haha. I think my favorites were the ones that allowed me to get a wide variety of experiences within the specialty. It was so great to see what different aspects there are even within one specialty. Also loved finally working with patients of course! In terms of what I liked least, you don't always get your first choice if there are options within the clerkship (such as in surgery you can put preferences for what teams you want to work with) just because there are many students, but it all ended up being great experiences anyway.
- My favorite part of my 3rd year is being able to take control of the care for a patient. This includes proposing my plan to attendings, placing orders, and connecting with the patient and their family. While clerkship years are exciting and enjoyable overall, they are also quite stressful as this is the first time you are being graded at UFCOM. The grading can definitely be frustrating at times as it does have a large component of subjectivity based on resident and attending evaluations.

What have been some COVID friendly ways that current students have engaged in to get to know Gainesville, especially members in the Class of 2024?

- Outside socials at parks and outdoor restaurants! There is a ton of nature, so water sports and hiking/animal watching is always something to do.
- Going to the park! Great outdoor activity, socially distanced during this time of year (great weather) is a lot of fun.
- Depot Park is a popular place to see friends. People will go on walks outside, meet up to play frisbee or something along those lines. A group of students go bike riding and hiking together.
- I can say that it has been quite challenging starting medical school at the height of the pandemic. Luckily, Gainesville has plenty of outdoor activities to offer. The pandemic allowed a lot of my classmates to explore Paynes Prairie State Park. I specifically remember a group of my classmates going to out there to see a shooting star or something really cool. Many people go kayaking on Lake Wauburg, which is free! And we've had plenty of COVID-safe get togethers at Depot Park, where we played board games and spikeball!
- Outdoor restaurants and breweries are a great option - First Magnitude has a ton of outdoor seating that is very well spaced out and is a great place to hang out and grab a drink safely with a few of your classmates. I've also tried out some of the walking trails in Gainesville like Devil's Millhopper and Paynes Prairie.
- Most (if not all?) restaurants also have outdoor seating options, pick-up options, or delivery which makes it really easy to try out restaurants while still feeling safe and being COVID-compliant. There are also a lot of community events like bi-weekly outdoor farmers markets and the vintage market which are a lot of fun to walk around!

- Depot Park, the springs, restaurants are all great places to visit during COVID, the first 2 are outside and the last all follow COVID guidelines, allowing us to explore the city.

How should I approach entering a Discovery Track? When is the best time to apply?

- You will have a presentation from all of the tracks at some point during your fall semester. Most people join late fall/early spring of their first year to get the most out of the tracks.
- The people in charge of it will tell you when to apply! They will hold informational sessions in the late fall, and you will apply to a track in January-ish. Pick a track that interests you and that you will get the most out of. Carefully consider the decision because some tracks are more work than others. Think about what you want to accomplish and how you want to grow while you're here.
- You can always switch if you want so its low stakes. Pick the one that is the most interesting - bonus if you plan on using those skills in your career. But it doesn't have to be something you plan on doing for the rest of your life.
- Partway through 1st year there is an intro to all the discovery tracks, so that is a good time to decide which one interests you. Many join their track after this and then some may do a research project related to the track in the summer between 1st and 2nd year.

What UF resources do students have access to (ie: gym)? What is the closest gym to HMEB? Any idea of when club sports will resume? (specifically soccer)

- You have free access to all UF rec facilities (including gym, fitness classes, rental equipment, intramural sports). I'm not sure what the CLOSEST gym is but the main gym on campus is SW Rec which is located by the new baseball fields.
- I think UF has 2 gyms. One is near the student union, which makes parking a little difficult unless you go in the early morning. Southwest Rec is on the other side of campus (5-10 min drive) and has a ton of fitness classes in non-COVID times.
- I think most resources that are available for undergrads? Could be wrong, but gym is definitely open to us. I would say closest to HMEB is Southwest Rec. Some intramurals are already going on now in a modified way, so I assume that club sports should be back by next year/next spring.
- You have access to the gym across campus which has tons of equipment, intramurals, and fitness classes. Many chain gyms are around town (eg: Crunch) and many student apartments have gyms.
- As a UF student you will have access to two gyms on campus! There is also a gym right next to the south and east towers that is not affiliated with UF but is \$20/month.
- Great sidewalks for running throughout! Group of us used to run at least a couple times a month from the front of HMEB! Gym is right down the road on Hull - huge, with all the equipment you could ever need. Intramural Sports are restarted! Many require masks and have certain restrictions.
- Southwest gym is free but very busy. Crunch fitness is rather close and usually a pretty good spot to find some time to work out.

What are the highlights of the UF Curriculum and what makes it unique for students? What is the format of exams/assessments and how frequent do they occur? Are NBME shelf exams used? How does grading work for M1 and M2? Is project-based learning prevalent in pre-clinical years?

- Blocks are amazing. Learn a topic in depth for 1-5 weeks. There is 1 exam at the end of a block with quizzes each weekend. Each class and exam is pass/fail with the cutoff at 75%. They are all multiple

choice except for anatomy (anatomy is part of Intro to Clinical Med which is longitudinal throughout pre-clinical years so there is an exam every 1-1.5 months). Exams can be 25-80 questions. There are open book, open note quizzes every non-exam weekend for courses to help gauge where you are in your studies. Grading for M1 and M2 is completely pass/fail! The cutoff for passing is 75%.

- Biggest highlight is patient presentation: the opportunity to see the disease process you're learning about in a living person - fosters empathy and understanding (there is a patient behind EVERY diagnosis!).
- Exams are multiple choice, LAC has in-person assessments. Grades are pass/fail for M1&2. NBMEs are used for clerkships. Grades are based on clinical evaluations
- Academically, the curriculum is set up very well to make sure we get enough repetition of content to really understand it all well like learning foundational concepts first then applying them to systems. Anatomy is a two-year curriculum that you are learning alongside each system so you can better connect the knowledge.
- Each course/block is about a month. Weekly quizzes help us keep up with the material. We have two exams for every "block" on the same day as there are two courses running together. One is mostly all the science including physiology and pathology. The other is more clinical like imaging, physical examination, anatomy, ethics. Everything is pass/fail! A great thing is that if one does fail an exam, they have the chance to "remediate" the exam to learn/perform better.
- NBME shelf exams are used for all rotations in M3 and many rotations in M4 year, and are usually worth 15-20% of your grade for that rotation. In M1 and M2 year, the majority of your grade is derived from your final exam score, made of questions written by the course directors. We meet up in groups for Problem Based Learning (PBL) at least once per course in M1 and M2 year. The one exception to this is during your neuroscience block (2nd year) where you will take the Neuroscience NBME. During 3rd/4th year, you will take a NBME shelf exam for each clerkship (peds, internal medicine, etc.). Grading for the first 2 (pre-clinical) years is pass/fail. Grading for the last 2 (clinical) years is letter graded (A, B+, etc.) based on evaluations, shelf exams, and more.
- Highlights: early patient experiences! Like patient simulations and preceptorships. Exams are done at the end of each block for sure (sometimes there is an exam at the halfway point too if it is a longer block) and then there is an NBME shelf exam at the end of each clerkship in the clinical years. Project based learning isn't too common, just occasionally.
- Lots of anatomy in the first two years of medical school, more than many other medical schools! There are 1-2 final exams in each "block" during the first two years of medical school, which typically occur about 1-2 months apart. This is great, because it means you're not feverishly studying at all moments of the day. If you have a 4 or 5-week block, that means you probably have some built in downtime toward the beginning of the block where you can be more leisurely with your study routine and decompress with your friends/family/support network before your next exam feels like it's around the corner. During the first two years of school, the NBME subjects exam was only used during our Neuroscience systems course, although this might have changed? (I'm a rising MS4 in the Class of 2022). During third year, each clinical rotation (OBGYN, surgery, peds, etc) ends with a shelf exam on the last Friday of the rotation.
- Grading for M1 and M2 is a true pass/fail grading system, meaning there is really no metric that will be on your transcript from the first two years of medical school if you pass every course. And even if you don't pass, you can always remediate the course, which then absolves the "not pass" from your record and no one will ever know that you had to remediate in the first place! In a nutshell, this

makes for a much less stressful first two years of medical school than schools that grade and rank their students from the jump.

- Some project based learning is incorporated into the pre-clinical years, but most of the curriculum is individual-focused, although many learning activities take place in a group setting/with your Collaborative Learning Group (CLG).
- Pass/Fail (75% being a passing score) curriculum is a highlight that especially allows for collaboration between students because of the lack of competition to be the “highest ranked.” Practicals for anatomy are in person though and are short answer. The NBME is used at the end of 1st year and is not for a grade but allows us to see our learning progress so far.
- P/F pre-clinical years is huge. Especially with Step 1 P/F I think will allow for a smooth transition to medical school and make life a lot easier. Step 2 will become more important later on but that is okay. NBME shelves are used during third year which is the norm around the country. The pre-clinical exams are in house exams.
- Preclinical years are P/F: 75% on the exams and overall cumulative 75% score with your weekly quiz grades included, so you may score below 75% on a weekly quiz so long as your overall grade is above a 75%. Most courses have 1 exam at the end of the block (usually 4 weeks) except for longer courses like Foundations of Medicine (4 exams) and the longitudinal Introduction to Clinical Medicine which also has 4 exams.
- One of the really strong parts of UF's curriculum in my opinion is our longitudinal anatomy. Your first semester gives you a great overview of anatomy via prosections, and then in the following semesters, you will dive deeper into each organ system through dissections during systems curriculum. This approach really helps with long term retention of anatomy and gives us a really strong foundation going into 3rd year clerkships. As far as exams go, you generally have 1 final per block in your core course plus an anatomy practical and a written exam in Introduction to Clinical Medicine (ICM). For example, we are in Cardio right now, so we have 4 weeks of class ending with a final cardio exam, an anatomy practical, and an ICM written exam. During systems, ICM also focuses on the same system, so in cardio, our ICM exam will focus on things like cardiac imaging, cardiac physical exam, etc. So generally 2-3 exams per month but they will be grouped together within a 1-2 day period. Anatomy practicals are free response and all of our other exams are multiple choice. Grading in M1-M2 is true pass/fail. This means you need to get at least a 75% in the class overall as well as at least a 75% on each exam. (ICM exam goes by combined score so if you have an anatomy practical and a written exam, anatomy is usually 40% of the grade and ICM written is 60% and you only need to get a 75% average between the two).

[In what ways does UFCOM support first generation and low-income students?](#)

- Financially: scholarships and financial aid - I received an out-of-state tuition waiver and a couple random scholarships. There is also a ton of support and channels to find students with similar backgrounds to speak with.
- Financially, physically, emotionally...there is a great support system for first gen and low-income students and opportunities to mentor others who are similar as we navigate this uncharted territory!
- In short, there are many offices centered around supporting students especially first gen, low income, underrepresented, etc. (Office of Diversity and Inclusion, Admissions, Financial Aid, etc.), as well as certain aspects of the curriculum that are designed specifically to support us as students

through medical school (CLG groups, pass/fail curriculum, student-led review sessions, etc.). However, the most important thing for me is that literally everyone who is involved in UFCOM as an administrator, faculty, and staff is constantly looking for ways to improve on what they are doing and looking for ways to better support us as students. They are not only receptive to student feedback, but actively seek it out and implement changes as quickly as possible. There have been times that we have asked for specific lectures/topics in courses and they have been able to add them into the curriculum for us. I think this mindset of "what can we do better" even when they are already going great things is what will allow us to continue to move forward rather than becoming stagnant, which is so important.

What does interdisciplinary and/or interprofessional experience look like at UF (such as working with students and/or faculty from different colleges or areas on campus)?

- There are two wonderful projects during preclinical years. In first year, there is Putting Families First where you are assigned a group that could include students from UF's nursing, dentistry, PA, pharmacy, veterinary, public health, etc. You're assigned a family for the year that you help support and come up with a useful resource/project for their health. In second year, there is Interprofessional Learning in Healthcare where you are again assigned a group and work on approaching and analyzing patient cases together.
- We also have opportunities to learn from the other health professions when we shadow/on preceptorship.
- Equal Access Clinic has students from PA and Pharm as well as specialty nights with PT/OT.
- Many opportunities to work with students from different colleges, especially at EAC and during clinical years. You really get a multidisciplinary training and approach to patient care.
- The Interprofessional Learning in Healthcare (IPLH) course is great for cross-college work and communication
- In your MS1 and MS2 years you will work with other professional students as part of a group that does several sessions together. It's nice because then when you are in the hospital you know some of the other disciplines already. Also, Equal Access Clinic includes other professional schools including PT, OT, dental, and pharmacy.

What opportunities are there to explore different specialties and have clinical exposure before third year? What global health opportunities or externships are (normally) available?

- Preceptorships are the main way this is accomplished prior to 3rd year. You'll have 3 separate preceptorships in which you'll spend 1-2 weeks on service with a physician. The first is primary care based (IM, FamilyMed, or Peds) and the second two are open to any and all specialties.
- Shadowing and preceptorship gives us a lot of opportunities to see every specialty - even those we may not have rotations in later on. There is a global health equities discovery track and interest group for global health. Before Covid, there were trips during spring break and summer to travel to Haiti, the Dominican Republic, and a few countries in South America where we would treat patients. Hopefully this will come back soon!
- Lots of space to explore, 3 Preceptorships for 1 week each, any shadowing you want, lectures with physicians from tons of specialties who love to answer questions, guest CLG lectures from residents.

- Preceptorships and just reaching out to physicians for shadowing will allow you to see whatever you choose! The medical mission trips also occur almost every spring (pre-covid) and are great opportunities to get involved in global health.
- There are usually medical mission trips to Dominican Republic, Mexico, Guatemala, Ecuador.

What resources are provided to students (ie: computer/tech, study materials, printing)? What should we purchase before school to be best prepared (clothing, tech, supplies, etc)?

- I have been quite a fan of the iPad I purchased before school started (although I still have my 4+ old laptop from undergrad. I know some people decided to buy a new laptop that doubles as a tablet instead). If you're out of state I highly recommend a cheap rain jacket and boots. Controversial, but I also HIGHLY recommend a pair of crocs for everyone. Super comfy, lots of color options, and once you try them you can never go back.
- You should have a laptop/computer and maybe a smart phone. Some people will buy an iPad. These items are not provided by the school, but financial aid can be adjusted to cover these items. Printing is free (100 pages per semester). Study tools are free on Dropbox, and you typically do not need many outside resources. If you would like subscriptions to other resources (question banks, or textbooks), you will need to pay for those but discounts are often offered at certain times through UFCOM. I recommend making sure you have a fair amount of nice, business casual clothes for LAC, patient encounters, events.
- 100 pgs printing free (you won't use it), dropbox access with SO MUCH stuff (videos, textbook pdfs, previous students outlines, anki decks, etc).
- DO NOT buy textbooks before class starts. You probably won't use it. Many are available in the quiet lounge from previous students. You should have a good laptop. A lot of people like having a tablet for taking notes. Pro tip: get an ergonomic laptop stand so you don't look down while working (neck pain happens fast). You should have some clinic-appropriate clothes (with shoes that are comfortable). Get a badge reel and you should buy a penlight.
- Buy a laptop. That's all you need for tech.
- Free printing and endless study resources on the drop box. Classes many times organize group codes to get discounted things. As far as prep, a reliable laptop is really the only necessity.

Is a car necessary for Phase 1 of the curriculum? At what point do you absolutely need a car? Is public transportation reliable and/or are most things walking distance if you live close to campus? Is it convenient to park on campus?

- In my opinion, you absolutely need a car for 3rd year. I know people who have been able to work around this, but I think it would add a lot of stress to an already busy schedule. It's easy with inpatient rotations if you live close to the hospital, but many outpatient facilities are a 5-10 minute drive away at least depending on where you are assigned. There is usually a way to minimize this if you are in a situation without a car, but definitely not ideal.
- I live a 10-15 minute walk from campus and do not park on campus. Instead I bike or walk. The bus system is also useful if the weather isn't great! I rarely needed to use my car on inpatient rotations. Like I said above, however, there will be times that you need your car for outpatient facilities.
- You can technically get away without having a car, a few of my classmates don't and seem to do just fine. However, a car is very helpful to get groceries, allow you to live further from campus/have more housing options, and helps the commute for preceptorships.

- Parking on campus is not the most convenient option. The walk from the commuter lot is about the same as the walk from some of the nearby apartments. Public transport is very reliable and free if you are a UF student— most buses stop right in front of the hospital and the med school. A car is not necessary, especially because the buses go everywhere you would need to go. The only time this might be a concern is for preceptorship (not all of them are in Gainesville and while you do get to choose, you have to choose based on your randomly assigned number. The people in charge are pretty good about helping carless students navigate this though!)
- I walk to school (I live at Wildflower). There are a couple of apartments that are walkable. Many are bikeable. Gainesville has a great bus system that you get free access to as a student. You don't need a card for pre-clinical years EXCEPT for preceptorships (which a good fraction are not at Shands) and grocery shopping.
- Parking on campus isn't great. The parking lot you get a pass to is about a 15 min walk away from HMEB. If you are thinking about possibly not getting a car, a scooter could be a better option. They are under \$1000 and the scooter parking is half the distance from HMEB.
- At no point do you need a car. Most people get one by third year but you could uber or get rides from classmates to most things. There are buses but they're not super used around town, more so just from campus to home. Many people bike or walk! (*Staff note - the Dean of Student Affairs says access to vehicle transportation by 3rd year is a must to get to outpatient practices and Jacksonville*)
- Car is not necessarily needed during preclinical years. If you live in close proximity to UF (Wildflower, Williamsburg to name a few), you can easily walk to campus daily or take a bus. As a UF undergrad alumni, RTS is a very reliable bus system. I took it throughout my undergrad years. A car is probably needed during the clinical years (although there have been several classmates who have made it without). You can park and walk from several parking garages with a purchased decal.

What is one thing at UF that has really helped you and you are grateful to be a part of? Is there anything you wish you utilized more, were more involved with, or wish you knew before arriving? Tips to succeed academically and professionally as a first year? How long does it take to adjust to the speed and rigor of material?

- CLG!!! I love my group and my attending. They are the support system I didn't know I would need.
- Don't freak out. It is totally okay to be 1-3 lectures behind as long as you are staying on top of understanding the material of each lecture as you go. I use anki to make sure I am not forgetting info from previous lectures. Your study strategies will change as you go and that is normal. You have to start being okay feeling like you're drowning. You get used to it. Then you get more efficient. By 3 or 4 months in I was able to have time at the gym and meal prep and do weekends at home and maintain my close relationships and sleep 9 hrs/night. It is possible. You just learn how to juggle. You will feel like the world is on fire every once in a while, but that's okay - you learn.
- I LOVE my planner. It helps me see what my day will look like and which lectures I've watched/reviewed.
- Do NOT dump every piece of info after an exam. You can relax and stop reviewing details but the general concepts and common diseases keep coming back. Understanding = better than memorizing
- You should identify a student in the classes above you and meet with them to answer such questions. These students are your best resource.
- Adjusting is very person dependent. Recognize that balance is important and the pass/fail structure allows you to not over-stress. Remember that medical school is a privilege and enjoy the ride from

beginning to end. You will have great experiences and not so great experiences throughout life, remember to focus on good and learn from the bad. Your patients will be so appreciative of the knowledge you have gained one day! (That day is probably sooner than you think :))

- I wish I started Physeo and other outside resources earlier.

What developments in the program do you expect in the next few years and which one are you most excited about? How do you see Dean Koch's exciting new changes impacting us?

- The inclusion of telehealth/medicine in the learning curriculum. With COVID-19 pandemic, I don't see this aspect of healthcare going anywhere and I think UF is doing a good job trying to ensure they have culturally competent, patient centered physicians even over video!
- I'm most excited to see how the new classes can use the VR experiences in anatomy to expand their learning.

What is cost of living like in Gainesville and what are some good ways to cut back on costs in medical school? On average, how much do students spend? How do most students pay for school?

- Great cost of living. Depending on housing priorities, you can save a lot. Housing can be expensive closer to campus (such as Wildflower or the Bartram) or less expensive depending on what you think is important for you to have.
- I would say comparable to any college town. The best way to cut down on costs is to start the apartment/home search as early as possible! There are definitely more affordable options that are near campus but I would recommend giving yourself enough time to look, find a roommate if you so wish, and to sign a lease.
- I would say practically all of my expenses are paid with student loans. It's a sucky but necessary evil but I would say 90% of us will have at least some loan debt so you won't be alone.
- Shop around for apartments based on budget and priorities. Do you want to live closer and pay more, live further away and pay less, or in the middle with a really nice apartment and pay the most. It all depends on many factors so if you want to save money, I recommend living a little further away if you can and having a roommate. I personally pay 600/month on rent/utilities (split with one other person), but I live further away from HMEB (in walking distance of shopping/stores though). For comparison, I have friends that live in walking distance of school but pay 700-800/month on just rent (split with roommates). Unless the student comes from a very very wealthy family, they pay for school with loans and scholarships. UF gives scholarships to those in need/those that demonstrate great merit, but you more than likely will need to take out student loans through UF, especially since it is not recommended to work while attending medical school. Gainesville is generally pretty affordable overall!
- Loans are the reality of paying for school. You can decrease the cost of living with where you live, but be careful not to sacrifice your quality of life. Gainesville is relatively cheap. Most people have roommates that are other med students. Monthly rent ranges from \$600-1200 per month depending on number of roommates you have, how close you are, and how nice the apartment is.
- I paid \$895 for a 1/1 that was bike-able from campus and \$750/\$1000 to share a walkable 2/2 from campus. Good ways to cut back on costs depend on what you value and decide is okay for you to cut back on - do you want to save on groceries, going out to eat, drinks, living? There's a lot of resources in the dropbox so I never really payed for books throughout medical school unless it was something I

genuinely wanted. I don't have as strict of a budget as I should and spend probably \$800/mo on life/groceries/etc. and \$895/mo on rent. Most students pay through loans.

- Most people have loans as their main or only source of income. Gville is cheap! My rent was never over \$800/month including utilities, and this year I'm only paying \$600 total. That's the biggest way to cut down IMO! I also found meal prepping to be helpful because I cooked on Sunday for the week and only bought food for those meals + some snacks so never wasted anything. Also, an "expensive" bar in Gville has like \$8 cocktails, so going out is way less expensive than other cities. My monthly expenses including rent were maybe \$1500 max. Usually less, and I don't think I really lived that cheaply at all! I just did what I wanted to, Gville is just cheap! Also, there are some really great thrift and consignment stores that I primarily shopped at which saved money (Sandy's, Flashbacks, etc).
- Cost of living is very reasonable. Cut back on costs by preparing meals at home and avoiding Starbucks! Spending varies, especially during residency application season and paying for board exams (costly, but unavoidable). Applying for scholarships and hometown grants can go a long way!
- Cost of living is very reasonable. I have one roommate and we each pay \$550/month for housing, plus some for utilities. We live very close to the school in Williamsburg Village. There are options that are both cheaper and more expensive in comparison though, it also depends on if you are alone or with roommates. Cutting back on costs is much easier with at least one roommate, and then living close to school meant I could walk and I spend very little on gas.

What is the culture both amongst peers and between faculty and students?

- Faculty are very good with students. Many of them introduce themselves with their first name. They know we will be rotating, maybe doing residency, and maybe working with them in the future. They are welcoming to students.
- Very welcoming environment and encouraging culture is evident throughout all four years.
- I think I would describe it as familial and respectful. I feel part of a brilliant group of upcoming physicians and I would support any of my classmates in their endeavors. Faculty are also generally open to any question, willing to teach, ready to help you learn the most you can from each rotation.
- The culture at UF COM is relaxed and informal, which was important to me in choosing a medical school. I'm glad we aren't required to wear business casual most days. I genuinely like forming professional friendships with faculty and am happy to run into professors from prior courses and catch up, much different from undergrad when your professors would not recognize you. The relaxed, fun, welcoming culture was my primary reason I came to UF COM.
- So much collaboration and support and willingness to reach out and help in anyway needed. Very friendly environment
- Really personable, you can talk to or reach out to anyone and they will help you along the way and also have genuine interest in you and your well-being. Peers are all very friendly and the P/F during the first 2 years is important in permitting that.
- Depends on department. Some specialties are known to be more casual and some more formal.
- I personally think that faculty here at UF are supportive, open and willing to help us if we ever need anything. I think they do a great job of making us feel comfortable to voice our opinions and reach out for help when we need it.
- For peers - I'd say that the defining characteristic is that we truly are a family. Especially during the preclinical years (years 1 and 2), we share resources, work together in all kinds of groups, and find our

support groups outside of the academic setting. After being here for 4 years for undergrad, I thought it would be impossible to start over with a new group of people, but I truly have found my family.

- Super friendly, which I really enjoy. The faculty really makes an effort to get to know each of us and help us out wherever they can. The peer interactions are also always really friendly which I think is in part due to the pass/fail curriculum because people don't feel like they are competing against each other all the time.
- Prior to covid, the culture amongst peers was collaborative and friendly. I'm sure it's still the same, it just feels a little more isolating due to the pandemic. I've never felt any sort of malevolent competition with my classmates. The majority of the faculty I've encountered have been very kind.
- Culture of inclusivity and academic excellence. Looking to make everyone succeed in what their career goals are.
- The culture at UF is very supportive both amongst peers and faculty. Your CLG (small group), which includes an attending physician and several other classmates, will be a source of support during your first few weeks at UFCOM and will continue throughout your 4 years.
- The culture is very friendly. No one will knowingly exclude you or not help when it comes to schoolwork. We have a culture of collaboration and are willing to help each other out all the time. Faculty are always available to answer questions and respond well to feedback.
- UF is one big family. Faculty and students all exist on one team striving to ensure that every student graduates.

Our faculty have responded to the following questions:

What are the plans for in-person classes and clinical opportunities in lieu of COVID-19 next year? When should we expect to know the format of classes? What will precautions look like next year if vaccination targets are met, and if they are not?

- Based on the Provosts March 2021 email, for the Fall 2021 semester, the UF COM intends to return classes back to their pre-COVID format. The same holds true for clinical education. That being said, an unexpected turn in the pandemic can alter these plans.

What resources and assistance are available to help UF COM students best ensure they do in fact match, especially for competitive specialties? Are any changes to services/resources anticipated in light of changes to Step 1 and 2? What resources does UF have for students who do not happen to match? Could the "prestige" of UF COM put students at a disadvantage in relation to some other schools when applying to residencies since Step 1 is moving Pass/Fail and school prestige might carry more weight?

- With STEP1 being P/F, I see this as an opportunity for students to demonstrate excellence in other areas that are of interest to them. This may include research, service, medical humanities, etc. At the end of the day, Residency Program Directors are looking for students that are active rather than passive.

How does UF work to prevent/stop mistreatment, if any, of students during rotations?

- We take this very seriously. Mistreatment is simply not tolerated at any level, and swift action is taken to protect the student and ensure that offending parties are disciplined as needed - including

not having them have the privilege of teaching medical students until resolution has occurred. There are multiple different reporting structures in place with anonymity as well. All students are informed about the different mechanisms to report issues and encouraged to contact the clerkship directors as well. There are redundant pathways to do so to ensure maximal ability to get the information.

What will orientation and the first week of class schedule look like? Can we have a breakdown of the first and second year schedule?

- This can be found online at <https://education.med.ufl.edu/medical-students/curriculum/>

What is UFCOM doing specifically to continue to increase diversity and inclusion in students, faculty, staff, etc? How are diversity, inclusion and health equity actively implemented in the curriculum?

- Diversity and inclusion is something that is very important to us at UF. While this has always been the case, the social justice movement of the past year has given us an opportunity to pause and reflect. We have been undergoing a deep dive of our curriculum with a specific focus on diversity for issues related to racial and ethnic minorities, sexual and gender minorities, minority status based on socioeconomic and rural status. We are looking at ourselves and evaluating our faculty for similar criteria and providing the support to hire, retain and promote minority faculty. We have pipeline programs to foster interest in medicine and attract high quality minority students starting in high school and continuing in the college years. We strive to teach cultural humility leading to competent and caring physicians. We recently had a new dean for the College of Medicine. Dr. Koch has made diversity and inclusion one of her main pillars in her strategic plan for the COM.
- The UF COM is committed to diversity and inclusion at all levels. This is evident by the students in each class, the faculty that teach our medical students, and the administration that oversees the curriculum.

What safe and socially-distanced bonding opportunities will be made available for students in the first few weeks of the fall semester?

- Despite Covid we've been able to have our CLG courses meet in person each week. We were able to secure large rooms so that we can follow social distancing guidelines. This has allowed the students in each small group to come together face to face each week and get to know each other.
- Based on the Provost's March 2021 email to faculty and students, we anticipate operating in a pre-COVID manner, including various bonding activities.

Can someone do more than one Discovery Track, or do MSRP and Discovery in different research tracks?

- Yes, the Discovery Tracks are there for students to find their passion and that includes identifying different professional interests.
- Yes, the Discovery tracks are planned to allow the most flexibility for the students to encourage the broadest exposure to research in all the different tracks. Students are encouraged to choose Discovery tracks in the spring in addition to an MSRP in the summer, and each student can end up with up to two separate Discovery tracks that they complete through the four years and can use that to graduate with honors in research.