

**Title:** Admissions to Medical School During the COVID-19 Era Without the MCAT

**Short Title:** Admissions Without the MCAT

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## Abstract

As medical schools cope with the consequences of the COVID-19 pandemic, a new cohort of students will be admitted in the fall. Administrators are again challenged to make unprecedented enrollment decisions without standardized exams. This challenge provides unique opportunities to support holistic admissions but also abruptly bypasses a process that has been employed since 1928. This article highlights key factors that are being considered during current medical school admission cycles, including limited opportunities to take standardized exams, heightened student anxiety, and potential exam alternatives. These factors are framed and discussed within the context of the medical college admission test (MCAT) exam.

## Keywords

medical school, admissions, MCAT, COVID-19

## Pull-out points

1. "The reliance on the MCAT has substantially increased"
2. "The COVID-19 pandemic has drastically affected academia, causing the cancellation of various standardized examinations"
3. "Administrators are again challenged to make unprecedented enrollment decisions without standardized exams"
4. "A unique opportunity to address valid critiques of the MCAT and strengthen the commitment to holistic admissions"
5. "Provide admissions committees with trend data that can be used in a longitudinal evaluative approach"

## Introduction

The COVID-19 pandemic has drastically affected academia, causing the cancellation of various standardized examinations. As a result, this will be the second consecutive year that admissions committees worldwide will have no choice but to reduce or eliminate their dependence on the medical college admission test (MCAT). Medical school admission processes rely on MCAT scores in conjunction with other quantitative, and to a lesser extent, qualitative variables to identify admissible applicants<sup>1</sup>.

Since 1928, this exam has been a significant component of the application process for the majority of medical schools in North America<sup>2</sup>. With the increase in demand for US-style medical education<sup>3</sup>, the medical education market is growing<sup>4</sup>, and thus, the reliance on the MCAT has substantially increased. However, the pandemic has forced us to rethink this dependence, suggesting the use of more holistic methods of admissions to gauge an applicant's readiness to learn in medical school.

Previous studies have underscored the complexity of the medical school admission process and suggest the increased use of a holistic approach that considers the whole applicant when making admission decisions<sup>5</sup>. As a result, the COVID-19 pandemic has provided a unique opportunity to re-evaluate the importance of a single standardized score to predict future performance. This commentary highlights some major issues, including limited opportunities to take the MCAT exam, heightened student anxiety, and current need for exam alternatives, that admissions committees must address during the COVID-19 pandemic to support student entry into medical school without the MCAT.

### *Limited opportunities to take the MCAT*

At the start of the pandemic, the Association of the American Medical Colleges (AAMC) was urged to cancel MCAT exams at all US, Canada, and international testing sites in March of 2020, and began offering options to reschedule the exam for the then summer. However, students were left without opportunities to sit the exam and were unable to meet admission deadlines. As the number of infected cases rose, the initial endemic transitioned to a global pandemic, and students were left with further reduced chances to take this exam. There were requests to remove the MCAT score as a requirement for the 2019-2020 admission cycle, or at least to make this requirement optional<sup>6</sup>.

But by the end of 2020, there was hope that we would emerge from the pandemic, and administrators were optimistic that medical school applicants would be able to acquire MCAT scores for the current admission cycle. One year later, we have not overcome this predicament. Even though test offerings have increased, the majority of tests are provided in North America, and are all still subject to change or cancellation depending on current health and safety

conditions related to COVID-19. It has been argued that the AAMC could have followed the Electronic Testing Service's approach with the Graduate Records Examinations (GRE) test and started offering test takers the option to take the MCAT from home due to COVID-19-related test center closures<sup>7</sup>, or perhaps, initiate a process to revise or re-evaluate the exam as it struggled to reschedule testing dates<sup>6</sup>.

### *Heightened student anxiety*

The sudden disruption to the admissions processes left students, who had prepared for several years to get into medical school, unsure about their futures. Earlier research has outlined the negative impact of uncertainty in medical education, which has been shown to foster frustration that can, in turn, lead to self-doubt, and feelings of insecurity and inadequacy<sup>8</sup>. It is reasonable to argue herein that the impact of the COVID-19 pandemic would have had similar undesirable effects on medical school applicants who were unable to obtain an MCAT score during the past and current admission cycles. It is thus important to consider the effects of this uncertainty might have on premedical students, and ensure that medical schools remain committed to their missions and transparently communicate with premedical communities<sup>9</sup>.

Meanwhile, students who rescheduled their exams were exposed to other stressors, namely, those related to health and safety. Venturing from home during these times can induce fear of contracting the virus. One can imagine that these concerns are exacerbated for students who must travel long distances to take the MCAT exam. Furthermore, adhering to newly implemented safety measures could adversely impact performance. Wearing personal protective equipment and maintaining social distance can stress test takers<sup>10</sup> and heightened their anxiety in already tense exam conditions.

### *Current need for exam alternatives*

Before the pandemic, members of the medical education community have argued that the MCAT is weighted too heavily, leading to calls for its elimination. Such arguments have focused on ways in which the MCAT supports systemic inequities<sup>11</sup> and alienates minorities and foreigners who take it<sup>12</sup>. The turmoil that the MCAT's absence has caused may allow us to revise or re-evaluate our dependence on this single exam approach and strengthen our commitment to holistic admissions.

Recognizing the challenges that such a transition presents, we should consider the value offered by the MCAT exam, a test aimed at evaluating the skills and knowledge needed for medical school. As a result, we have examined the value of practice exams as a predictor of performance on the actual MCAT exam. We observed that these exams may be a good indicator of actual performance<sup>13</sup>, and thus, this method can provide us multiple opportunities to gauge

performance. Students can take multiple exams remotely and provide admissions committees with trend data that can be used in a longitudinal evaluative approach, while simultaneously enhancing skills needed for future standardized exams.

### **Conclusions**

Bypassing an admission process that has been employed for nearly a century introduces concern, even in a time when it is difficult to obtain an MCAT score. However, the factors outlined in this article, including limited opportunities to take standardized exams, heightened student anxiety, and current need for exam alternatives, provide a unique opportunity to address valid critiques of the MCAT and strengthen the commitment to holistic admissions in the COVID-19 era and beyond.

### **Author Contributions**

PRC was responsible for developing, drafting, and revising the manuscript.

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The author declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

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