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“Emergency Medicine Career Interest: Leaks in the Pipeline”

The process by which medical students initially choose and then maintain a specific career interest is of major importance in public health planning and is not well understood. Why medical students choose to enter a medical specialty has important ramifications for the physician workforce, patient care, and issues of representation in the field. Studies focused on medical career choice, including Emergency Medicine, have generally employed self-report survey approaches to identify predictors of career interest.

The most commonly reported findings of such approaches in all medical specialties are differences between medical students based on income preferences and lifestyle choices. Preferences in specialty choice are not static, however, and can change both on the individual level and across all students over time. The findings described in these articles are important, however they are missing important explanations: “why” these factors, “why” do students not persist in their career choices, does career interest actually result in practice in Emergency Medicine, and are we not recognizing a “cooling out” of interest not related to ability in Emergency Medicine by students historically under-represented in the specialty, including minority students and women.

Medical students are trained to make logical and considered decisions and this training likely generalizes to career decisions. Thus the use of a bounded rationality decisionmaking theoretical framework can help to understand the “why”s of this process. By using a decision-making frame, the change in specialty interest over a learner’s career also comes into focus. The current literature has not answered whether students change their interests based off training experiences, academic ability, personality, or through cultural issues that “cool out” medical students. Similarly, career decision-making has been studied in other disciplines and theories of self-efficacy, and social learning were developed that can be used to guide variable selection and model generation in research on medical education. I propose to move the literature forward by utilization of a theoretically-driven, national-scale educational research project designed to improve the evidentiary-basis and understanding of the interest in Emergency Medicine that better incorporates these additional considerations.