

Trading Stress for Stress

by Kennedy Stoll, MS 2

As a second-year medical student, I'm constantly reminded by upperclassmen and faculty alike how lucky I am that the USMLE Step 1 exam is now pass/fail. At times, I find myself slightly more relaxed knowing if I have a bad test day, I won't receive a three-digit score reflecting what I perceived to be a poor performance. As long as I pass, with or without flying colors, I can breathe a little easier. This all sounds great on paper; at first glance, it appears a stressor has been eliminated. I too was initially under this impression but have recently become concerned the stressor has simply changed hats.

Step 1 anxiety still exists. Making the exam pass/fail might've decreased stress to some degree, but those studying can confirm the exam is still a challenge. Step 2, on the other hand, has become not only the more important standardized test, but also the only standardized quantitative metric residency programs have to compare applicants. People have always disliked the idea of residencies initially filtering applicants based on Step 1 and Step 2 scores. This is understandable as the filtration process seemingly prematurely evaluates the capacity of a resident based on two, three-digit exam scores. Without Step 1 scores, programs may begin filtering applicants based on one exam alone. Though applicants are further evaluated based on third-year clerkship grades and numerous other metrics, a lower Step 2 score could get an application thrown out prior to any comprehensive review and have a drastic impact on career trajectory. As a result, research, letters of recommendation, and extracurricular

activities are more important than ever. Unfortunately, active and meaningful participation in these activities is quite a feat, requiring time and energy that busy medical students often lack.

Timeline now also has greater emphasis. Step 1 exam scores previously provided insight by the end of second-year into medical students' future competitiveness for residency. With Step 2 now as the only scored standardized test in medical school, objective performance level and subsequent impacts on competitiveness for residency are now unknown until the end of third-year or beginning of fourth-year. This is well after fourth-year schedules have been submitted and finalized, which students build largely based off the specialty they anticipate applying to in the fall. Backup plans must now be made as one bad test day could decrease competitiveness in an intended specialty. This uncertainty unfortunately means students may need to add rotations in multiple different fields throughout their fourth-year schedule, consuming elective spots.

I think it is rather apparent that new issues have arisen as a result of Step 1 changes. Perhaps I have overestimated importance in some areas and underestimated it in others. Regardless, I believe the stress of medical school has not changed but merely shifted. While one source of stress has decreased, many others have increased to an equal or further extent. Of course, time is always needed to evaluate results after change, but I believe students will report a similar, if not greater, level of stress in the years to come. I am happy to see administration within medicine attempting to decrease stress for medical students, but my concern is that this was not the best method and other alternatives need continued pursuit. I challenge medical students, administrators, and faculty clinicians to critically evaluate the changes made to Step 1 and consider the resulting ripple effect.