Analysis



IN BRIEF

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Association of American Medical Colleges

Medical School Graduation and Attrition Rates

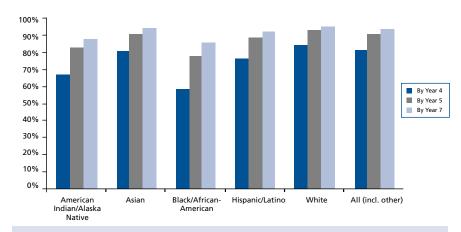
In light of the AAMC's endorsement of a 30 percent increase in medical school graduates by 2015, 1 medical schools are being challenged to admit more students. This expansion will put new pressure on medical schools to maintain high graduation rates. Assessing the effects of class size on academic progress will be important, and having snapshots of medical students' academic progress before and after expansion will be useful in making this assessment.

This Analysis in Brief offers a picture of academic progress before expansion efforts. Following three matriculating classes—1987, 1992, and 1995—for 10 years each, it presents rates of graduation and attrition due to academic reasons while also factoring in race/ethnicity.^{2,3} The AAMC's Student Record System (SRS) tracks student status throughout medical school. Maintained by medical school registrars and AAMC enrollment services staff, SRS provides comprehensive data that enable attrition and time-to-degree studies.

Finding 1: Graduation Rates Remain High

Graduation rates for medical students have been stable in the recent past. Between 80.6 percent and 82.2 percent of each of the three cohorts in the study graduated in four years. By the fifth year, the overall graduation rate for the three cohorts climbed to 91.3 percent, about the same rate that Kassebaum and Szenas (1994) calculated for the 1988 matriculating class (91.2 percent).⁴

Figure 1.Graduation Completion By Race/Ethnicity
1987, 1992, and 1995 Entering U.S Medical School Students, Combined



Within seven years, 94.2 percent had graduated. A small number, including those in combined and dual degree programs, completed their M.D.s over longer periods, resulting in a 10-year completion rate of 96 percent for all three cohorts.

The 96 percent 10-year completion rate for medical school students is high relative to other professional and academic graduates. By comparison, of all those who began a doctorate, master's, or first-professional degree program in 1993, after 10 years, only 62 percent had graduated, 15 percent were still enrolled, and 23 percent had left without a degree.² With a 10-year attrition rate at less than four percent, medical school students are thus far less likely to leave school than the average postgraduate.

Graduation Data by Race/Ethnicity

The median time to degree for medical students across all racial/ethnic groups—including American Indian/Alaska Native, Black/African-American, and Hispanic/Latino, groups historically underrepresented in medicine—was four years.

Nevertheless, our data indicate that students from different racial/ethnic groups completed their M.D.s at disparate rates (Figure 1). The disparity is most apparent for Black/African-American students at years four and five.

With each cohort, the total number of matriculating students from groups underrepresented in medicine increased, and the percentage of White matriculants decreased. American Indian/Alaska Native students increased from 58 to 139

¹ AAMC. The Physician Workforce: Position Statement (www.aamc.org/workforce/workforceposition.pdf)

 $^{^{2}}$ References and additional data available at www.aamc.org/data/aib $\,$

³ Our data show no substantive differences between male and female graduation or attrition rates.

⁴ Kassebaum, D.G., & Szenas, P.L. (1994). The longer road to medical school graduation. *Academic Medicine* 69(10), 856-860.

Figure 2.Students Leaving U.S. Medical Schools Due to Academic Reasons, 1987, 1992, and 1995 Matriculating Classes

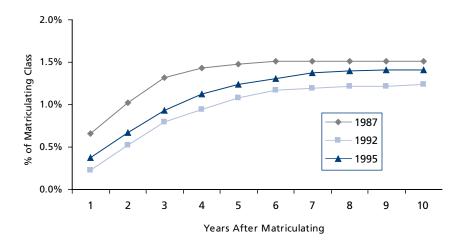


Table 1.Attrition Due to Academic Reasons, for Five Race/Ethnicity Groups, 10 Years after Entering U.S. Medical Schools

Matriculating Class	American Indian/Alaska Native	Asian	Black/African- American	Hispanic/Latino	White
1987	3.5%	1.1%	7.3%	3.5%	0.9%
(n=15,469)	(2 of 58)	(19 of 1,696)	(66 of 916)	(28 of 811)	(106 of 11,554)
1992	6.2%	0.8%	6.2%	2.3%	0.7%
(n=16,013)	(7 of 113)	(19 of 2,382)	(66 of 1,059)	(22 of 959)	(77 of 10,655)
1995	4.3%	0.9%	6.7%	3.4%	0.7%
(n=15,833)	(6 of 139)	(27 of 2,887)	(83 of 1,231)	(37 of 1,093)	(70 of 10,303)

(0.4 percent to 0.9 percent of all matriculants). This increase was matched by improved completion rates: 60.3 percent of the American Indian/Alaska Native students in the 1987 cohort graduated in four years, compared to 69.8 percent in the 1995 cohort. The 10-year completion rates for American Indian/Alaska Native students also climbed, from 87.9 percent to 92.1 percent.

Similarly, Black/African-American students rose from 5.9 percent of the 1987 cohort (916 of 15,469) to 7.8 percent of the 1995 cohort (1,231 of 15,833). Black/African-American completion rates improved across the two cohorts. The 1987 group had 4- and 10-year completion rates of 56.8 percent and 88.2 percent, respectively. The 1995

group's respective rates were 60.6 percent and 90.0 percent.

Hispanic/Latino students also saw slight increases both in numbers and completion rates. The 811 who matriculated in 1987 (5.2 percent of the cohort) had respective 4- and 10-year completion rates of 74.1 percent and 93.3 percent. The 1,093 Hispanic/Latino students (6.9 percent) of the 1995 cohort had 4- and 10-year completion rates of 76.5 percent and 94.2 percent, respectively.

Therefore, the data comparison from the 1987 and 1995 cohorts demonstrates that enrolling more students from groups underrepresented in medicine did not result in lower graduation rates, either for the students in those groups or for the entire class.

Finding 2: Academic Attrition is Low

As indicated in Figure 2, fewer than 2 percent of all medical students across the three cohorts were reported as having left school for academic reasons.² After 10 years, the three cohorts averaged just 1.4 percent academic attrition. Most of these departing students (1.0 percent) left before the fourth year.

When American Indian/Alaska Native, Black/African-American, and Hispanic/Latino students did leave medical school, the most common reason cited was "academic reasons" (Table 1). This was not the case for Asian and White students. When Asian and White students were reported as leaving medical school, the non-academic categories were most commonly cited.²

Conclusion

As medical schools begin expanding, these findings should provide a point of reference for future assessments of the effects of class growth on academic completion rates. They also positively demonstrate that medical students exhibit a relatively high rate of graduation and a low rate of attrition due to academic reasons.

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