

2024 Matriculating Student Questionnaire (MSQ)

If you were accepted to medical school in 2024 and you know which U.S. medical school you will be attending, you are encouraged to participate in the Matriculating Student Questionnaire (MSQ).

Note: Please use a standard web browser capable of viewing large pages, such as Firefox. JavaScript and cookies must be enabled in order for this survey application to work properly.







2024 Matriculating Student Questionnaire (MSQ)

Please Verify Your Name and AAMC ID

AAMC ID: 2 Last Name: Litsch

If the above information is not correct, please contact msq@aamc.org.

If your last name has changed since submitting your AMCAS[®] application, and the name above reflects a former name, you may continue with this survey. Your name will be corrected later.







Important Information About the Matriculating Student Questionnaire (MSQ) *Please Read Carefully*

The Matriculating Student Questionnaire (MSQ) is administered annually by the Association of American Medical Colleges (AAMC) to all first-year medical students. The MSQ seeks information from entering medical students to improve medical education. The survey will take approximately 10 to 20 minutes to complete.

Participation Is Voluntary

Participation in the MSQ is voluntary. You have the right not to answer any question or set of questions. To help ensure participation is voluntary, the AAMC will not inform medical schools which students have started or completed the MSQ. If you believe you are being coerced into participation, contact the AAMC Office of Human Subjects Research Protection by email (humansubjects@aamc.org).

Confidentiality Statement

The data collected in this survey are classified as confidential. Confidential data may not be released with individual identification, except with permission. (Your agreement to participate in the survey is not considered to be permission to release your identified responses.) The AAMC takes extensive measures to ensure the security of the data and the confidentiality of the responses. Your responses will be securely stored by the AAMC with appropriate access controls to limit exposure of your data to the research team and support staff.

Benefits and Risks of Participation

Benefits of Participation: By participating, you will be contributing to medical education research, national benchmarking, and the improvement of medical education programs.

Risks of Participation: This data collection is considered to be minimal risk. If individually identified data were made public, it could prove embarrassing.

How Responses are Used

Medical schools receive MSQ data in reports that aggregate responses at the national, medical school, and (where applicable) campus levels. On occasion, for the purpose of conducting further studies to improve their programs, schools may request a de-identified file of individual responses. The AAMC reduces the probability of connecting responses to specific individuals by not providing information where the small number of respondents in a specific category would allow individuals to be reasonably identified. Additionally, the AAMC may provide medical schools and AAMC or other medical education researchers a file of de-identified individual responses, in which your MSQ responses may have been linked with information from other AAMC databases, without your additional informed consent. Those receiving such de-identified files will be required to agree to terms that outline how the data may be used and for how long.

This data collection activity has been reviewed according to AAMC policies and procedures and its Institutional Review Board.

Contact Information

If you have any questions about your rights as a participant, contact the AAMC Office of Human Subjects Research Protection by email (humansubjects@aamc.org). If you have any technical questions about the MSQ, contact MSQ staff by email (msq@aamc.org) or telephone (202-828-0435).







When did you definitely decide that you wanted to study medicine?

- Before high school
- During high school/before college
- During the first two years of college
- During junior year in college
- During senior year in college
- After receiving a bachelor's degree
- After receiving an advanced degree

Please indicate any experiences in which you have participated. (Select all that apply)

- Middle school premedical or science program (e.g., magnet science middle school, summer medical science program)
- Magnet science/health science high school
- Summer laboratory research apprenticeship for high school students
- Classroom-based summer, after-school, or Saturday premedical program for high school students
- Laboratory research apprenticeship for college students
- Summer academic enrichment program for college students
- MCAT[®] preparation course
- Non-degree post baccalaureate program to strengthen academic skills
- Non-degree post baccalaureate program to complete premedical requirements
- Volunteered in the health care field
- Volunteered in a non-health care field
- International volunteer experience
- Shadowed a physician or other health care professional
- None of the above



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Please indicate any experiences in which you have participated. (Select all that apply)

Middle school premedical or science program (e.g., magnet science middle school, summer medical science program)
Magnet science/health science high school
Summer laboratory research apprenticeship for high school students
Classroom-based summer, after-school, or Saturday premedical program for high school students
Laboratory research apprenticeship for college students
Summer academic enrichment program for college students
MCAT [®] preparation course
Non-degree post baccalaureate program to strengthen academic skills
Non-degree post baccalaureate program to complete premedical requirements
Volunteered in the health care field
Volunteered in a non-health care field
International volunteer experience
Shadowed a physician or other health care professional
None of the above



You selected participating in a "Middle school premedical or science program (e.g., magnet science middle school, summer medical science program)." Was this premedical program affiliated with a medical school?

- 🔵 No
- Yes, affiliated with the medical school I am entering
- Yes, affiliated with a medical school other than the one I am entering
- Do not recall

You selected participating in a "Summer laboratory research apprenticeship for high school students." Was this premedical program affiliated with a medical school?

- 🔵 No
- Yes, affiliated with the medical school I am entering
- Yes, affiliated with a medical school other than the one I am entering
- Do not recall

You selected participating in a "Classroom-based summer, after school, or Saturday premedical program for high school students." Was this premedical program affiliated with a medical school?

- 🔵 No
- Yes, affiliated with the medical school I am entering
- Yes, affiliated with a medical school other than the one I am entering
- Do not recall

You selected participating in a "Summer academic enrichment program for college students." Was this premedical program affiliated with a medical school?

- 🔵 No
- Yes, affiliated with the medical school I am entering
- Yes, affiliated with a medical school other than the one I am entering
- Do not recall





Never Rarely Occasionally Somewhat often Often Very often

2024 MSQ Part I - Premedical Experiences

During your undergraduate experience, how often did you gain a deeper understanding of other perspectives through conversations with fellow students because:

		,	5			
Their religious beliefs were different from yours	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Their political opinions were different from yours	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Their nationality was different from yours	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Their primary language was different from yours	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Their race or ethnicity was different from yours	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Their sexual orientation was different from yours	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Their socioeconomic background was different from yours	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Their physical abilities were different from yours	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Their age was different from yours	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc





How many years have passed since you graduated from college?

- Less than 1 year
- 1-2 years
- 3-4 years
- 5 or more years



How many years have passed since you graduated from college?

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- 1-2 years
- 3-4 years
- 5 or more years

How did you spend your time between college and medical school? (Select all that apply)

- Worked at another career
- Worked to improve finances
- Continued coursework to fulfill pre-medical requirements
- Took premedical courses for the first time
- Pursued graduate studies
- Worked/volunteered internationally
- Worked/volunteered in research
- Helped fulfill family obligations
- Other (please specify):



2024 MSQ Part II - Well-being

Please select the number best reflecting your response to the following that describe your feelings during the past week, including today. How would you describe:

	As bad as it can be = 0	1	2	3	4	5	6	7	8	9	As good as it can be = 10
Your overall quality of life?	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Your overall mental (intellectual) well-being?	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Your overall physical well-being?	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Your overall emotional well-being?	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Your level of social activity?	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Your spiritual well-being?	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc





2024 MSQ Part II - Well-being

Please select the number best reflecting your response to the following that describe your feelings during the past week, including today. How would you describe:

	Constant tiredness = 0	1	2	3	4	5	6	7	8	9	No fatigue = 10
Your level of fatigue, on the average?	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

	No support = 0	1	2	3	4	5	6	7	8	9	Highest level of support = 10
Your level of social support from friends and family?	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

	Constant										No
	concerns										concerns
	= 0	1	2	3	4	5	6	7	8	9	= 10
Your financial concerns?	\bigcirc										





2024 MSQ Part II - Well-being

The following questions ask you about your feelings and thoughts during the last month. In each case, indicate how often you felt or thought a certain way.

		Almost		Fairly	Very
	Never	never	Sometimes	often	often
In the last month, how often have you felt that you were unable to control the important things in your life?	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
In the last month, how often have you felt confident about your ability to handle your personal problems?	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
In the last month, how often have you felt that things were going your way?	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
In the last month, how often have you felt difficulties were piling up so high that you could not overcome them?	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc



2024 MSQ Part III - Medical School Selection

Have you been accepted to more than one medical school?

- Yes
- No No



2024 MSQ Part III - Medical School Selection

Have you been accepted to more than one medical school?



2024 MSQ Part III - Medical School Selection

In choosing the medical school you now (or will) attend, how important were the following factors?

General Factors:

	Not applicable	Not important	Somewhat important	Important	Very important
General reputation of the school	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Research reputation of the school	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Interviews/meetings with faculty	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Interviews/meetings with administrators	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Interviews/meetings with students	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
	Not applicable	Not important	Somewhat important	Important	Very important
Geographic location of the school	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Financial considerations/cost of attending	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Amount of financial support offered	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Quality of the medical school facilities	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Personal experience with the school	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
	Not applicable	Not important	Somewhat important	Important	Very important
Programs for minority and/or disadvantaged students	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Diversity of the student body	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Diversity of the faculty	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Support for disabilities	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

School's Medical Education Program:

	Not applicable	Not important	Somewhat important	Important	Very important
School's teaching methods/curricula	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Program of elective courses	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Medical ethics/medical humanities emphasis	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Dual Degree opportunity such as PhD, MPH, MPA, JD or MBA	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Research experience/opportunity	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
	Not applicable	Not important	Somewhat important	Important	Very important
Rural medicine experience/opportunity			\bigcirc		

Community-based medicine experience/opportunity	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Family medicine experience/opportunity	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

Other Factors:

	Not applicable	Not important	Somewhat important	Important	Very important
Desire to attend school within my home state	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Sense of safety	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Influence of spouse/partner	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Faculty mentorship at the school	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Ability of the school to place students in particular residency programs	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc





In which of the following activities do you plan to participate during your career? Select all that apply.

- Patient Care
 Research
 Teaching
 Medical School Faculty
 Administration (e.g., Department Chair, Dean)
 Military Service
 Public Health
- Other (please specify):



The following question is about your future career in medicine.

What general specialty are you considering? Please select your MOST likely specialty from the list below:

Anesthesiology or subspecialty

- Child Neurology
- Dermatology or subspecialty
- Emergency Medicine or subspecialty
- Family Medicine or subspecialty
- Internal Medicine or subspecialty
- Internal Medicine/Pediatrics
- Medical Genetics and Genomics or subspecialty
- Neurological Surgery or subspecialty
- Neurology or subspecialty
- Nuclear Medicine
- Obstetrics and Gynecology or subspecialty
- Ophthalmology or subspecialty
- Orthopaedic Surgery or subspecialty
- Otolaryngology or subspecialty
- Pathology or subspecialty
- Pediatrics or subspecialty
- Physical Medicine and Rehabilitation or subspecialty
- Plastic Surgery or subspecialty
- Preventive Medicine or subspecialty
- Psychiatry or subspecialty
- Radiation Oncology
- Radiology or subspecialty
- Surgery General Surgery or subspecialty
- Thoracic Surgery or subspecialty
- Urology or subspecialty
- Vascular Surgery
- Undecided
- I do not plan to practice medicine



Where do you hope to WORK after completing your medical training? Choose from the list of U.S. states and other regions in the dropdown box below:

(Click here to choose)

Please indicate the setting in which you plan to WORK after the completion of your medical education:

- Large City (Population 500,000 or More)
- Suburb of a Large City
- City of Moderate Size (Population 50,000 to 500,000)
- Suburb of Moderate Size City
- Small City (Population 10,000 To 50,000--Other Than Suburb)
- Town (Population 2,500 to 10,000--Other Than Suburb)
- Small Town (Population Less Than 2,500)
- Rural/Unincorporated Area
- Undecided or No Preference

Do you plan to WORK primarily in an underserved area?

- Yes
- No
- Undecided



When thinking about your career path after medical school, how important are the following considerations?

Not important	Somewhat important	Very important	Essential
$\overline{\mathbf{O}}$			\bigcirc
\bigcirc	\bigcirc	\bigcirc	
\bigcirc	\bigcirc	\bigcirc	\bigcirc
\bigcirc	\bigcirc	\bigcirc	\bigcirc
\bigcirc	\bigcirc	\bigcirc	\bigcirc
\bigcirc	\bigcirc	\bigcirc	\bigcirc
\bigcirc	\bigcirc	\bigcirc	\bigcirc
\bigcirc	\bigcirc	\bigcirc	\bigcirc
\bigcirc	\bigcirc	\bigcirc	\bigcirc
\bigcirc	\bigcirc	\bigcirc	\bigcirc
\bigcirc	\bigcirc	\bigcirc	\bigcirc
	Not important		



What is your current marital status?

- Single (never legally married)
- Legally married
- Common law or civil union
- Divorced
- Separated, but still legally married
- Widowed

How many dependents do you have (not including a spouse/partner)?



Over the years, the AAMC has explored different strategies for improving the collection of race and ethnicity data for medical students. In this ongoing effort to better understand the diversity of medical students, a modified race/ethnicity question is shown below. Responses to the question below will be used for internal analysis. These responses will not be included in the MSQ reports and will not replace any race and ethnicity responses provided in previous AAMC data collections.

How do you self-identify? Please check as many categories and subcategories as may apply:

American Indian or Alaska Native

- Tribal affiliation (please specify):
- Asian
 Bangladeshi
 Cambodian
 Chinese
 Filipino
 Indian
 Indonesian
 Japanese
 Korean
 Laotian
- Pakistani
- Taiwanese
- Vietnamese
- Some other Asian (please specify):

Black	or	African	American

- African
- African American
- Afro-Caribbean
- Ethiopian
- Haitian
- Jamaican
- Nigerian
- Somali
- Some other Black or African American (please specify):

- ArgentineanColombian
- Cuban
- Dominican
- Mexican or Mexican American
- Peruvian
- Puerto Rican
- Salvadoran
- Some other Hispanic or Latino (please specify):

Middle Eastern or North African
Arab
Egyptian
Iranian
Israeli
Lebanese
Moroccan
Palestinian
Syrian
Some other Middle Eastern or North African (please

Native	Hawaiian	or	Pacific	Islander	

- Chamorro
- Fijian
- Marshallese
- Native Hawaiian
- Samoan
- Tongan
- Some other Native Hawaiian or Pacific Islander (please specify):

White
English
French
German
Irish
Italian
Polish
Some other White (please specify):

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specify):



The individual responses provided below will not be shared with or reported to your medical school. The data will only be reported in aggregate.

Are you a person with a disability (e.g., ADHD, learning, psychological, chronic health, mobility, hearing, vision, etc.)?



The individual responses provided below will not be shared with or reported to your medical school. The data will only be reported in aggregate.

Are you a person with a disability (e.g., ADHD, learning, psychological, chronic health, mobility, hearing, vision, etc.)?

	Yes
\bigcirc	No
\bigcirc	I do not know
	ich of the following describes your disability? If you have more than one type, select all that apply. (Optional: please add rief description where provided.)
	Attention deficit/hyperactivity disorder
	Chronic health disability (please specify):
	Deaf or hard of hearing
	Learning disability (please specify):
	Mobility disability
	Psychological disability (please specify):
	Visual disability
	Another disability (please specify):
Did	you receive accommodations for your disability during your undergraduate education?
\bigcirc	Yes
\bigcirc	No
Do	you plan to request accommodations for your disability during your first year of medical school?
\bigcirc	Yes
\bigcirc	No
\bigcirc	Undecided



The individual responses provided below will not be shared with or reported to your medical school. The data will only be reported in aggregate.

What sex were you assigned at birth?

- Male
- Female

What best describes your current gender identity?

- 🔵 Man
- 🔵 Woman
- Trans man
- Trans woman
- Agender
- Genderqueer/Gender nonconforming
- Nonbinary
- Another gender identity (please specify):



The individual responses provided below will not be shared with or reported to your medical school. The data will only be reported in aggregate.

What best describes your current sexual orientation?

- Asexual
- Bisexual
- Gay or Lesbian
- Heterosexual or Straight
- Pansexual
- Queer
- Another sexual orientation (please specify):



The information requested in this section will help us better understand the rising levels of medical student indebtedness. If you cannot remember the actual figures for some of the questions below, please provide rough estimates.

Regardless of your dependency status, please indicate your parents' combined gross income for last year (a rough estimate is sufficient). Please do not use commas or periods.

Parents' gross income last year:

¢	
Φ	

If you do not know your parents' combined gross income for last year, please indicate "Unknown" below.

Unknown





Do you have any outstanding education loans for your college/premedical education?

- Yes
- No No





Do you have any outstanding education loans for your college/premedical education?



What is the total amount of outstanding education loans for your college/premedical education? (Please do not use commas or periods.)

Principal amount borrowed (do not include interest):

\$



The following questions pertain to the medical school application process during the 2024 application cycle:

How many secondary/supplemental applications did you complete?

In total, how much did you spend on secondary/supplemental applications?

\$

The following questions pertain to the medical school interview process during the 2024 application cycle:

How many medical schools offered you an interview?

How many interviews did you attend in-person?

How many interviews did you attend virtually?

How many second visits (post-interview, pre-matriculation) did you make (in-person or virtual)?

In total, how much did you spend on interviews (e.g., lodging, travel, meals, technology)?

\$



%

%

%

%

%

%

%

2024 MSQ Part VI - Financial Information

How do you plan to finance your medical school education? Please enter a percentage for each applicable category to total 100%. Enter 0 (zero) for non-applicable categories.

Scholarships or awards:

Scholarships or awards with a service commitment (NHSC, military, etc.):

Loans:

Work-study program:

Personal income and savings:

Money from parents, guardians, or other relatives:

Money earned by spouse or partner:

Other:

	%

Total (should equal 100%):

	%	



Do you have any noneducational, consumer debt that you are legally required to repay? (This includes credit card debt, car loans, home mortgages, or other consumer debt.)

Yes

No





Do you have any noneducational, consumer debt that you are legally required to repay? (This includes credit card debt, car loans, home mortgages, or other consumer debt.)

Yes			
No			

Please list the amount of your noneducational, consumer debt for each category listed below. Enter 0 (zero) for non-applicable categories.

Note: Enter the amount (not percentages) that you owe for each category. For example, if you owed eight hundred dollars on your credit cards, four thousand dollars for a car loan, and had no other consumer debt, you would enter 800, 4000, 0, and 0 on the respective lines. The total would then appear below as 4,800. Please do not use commas or periods.

Credit Cards:

\$		
Car Loans:		
\$		
Mortgage:		
\$		
Other Consumer Loans:		
\$	 	
Total Amount:		
\$		



2024 MSQ - Thank You

You have reached the end of the Matriculating Student Questionnaire (MSQ). Please share any thoughts that you have about this survey.

1500 characters left.

Clicking on "Submit Survey" below will complete the survey and direct you to a final page that displays your name. You may print that page for personal purposes, or for purposes such as raffles, prize drawings, or other incentives that your school or student organization may have offered to encourage your participation in this survey.

If you have questions you have not completed, you may use the "Previous" button to review prior responses.



Thank you for responding to the 2024 Matriculating Student Questionnaire (MSQ).

If you have any questions or need to report any errors concerning your survey, please contact MSQ staff at msq@aamc.org. If you need to change any response, MSQ staff will be happy to assist you.

You may print this page as confirmation of your participation in the MSQ.

AAMC ID: 2 Last Name: Litsch

Annual MSQ Reports are accessible at www.aamc.org/data/msq

Please be sure to close this browser window when done in order to protect your privacy.

Best wishes for your medical school career,

AAMC Student Surveys Staff Data Operations & Services Association of American Medical Colleges