The University of Minnesota Medical School, Duluth Campus, has had a mission to train physicians to serve rural and Native American communities for more than 40 years. As part of the University of Minnesota Medical School one-school-two-campuses model, we have trained more than 2,000 physicians, almost half of whom chose family medicine as their specialty. The strong interest of our students to work as family medicine physicians has helped our University of Minnesota Medical School to be named as the Number 1 medical school in the United States for producing graduates who select family medicine as a career. We also are Number 2 in the country for training Native American physicians, another source of pride.

Two-thirds of our graduates are primary care physicians and 44 percent of our campus alumni practice in communities with populations of 25,000 or less. Nationally, only 5 percent of medical school graduates on average practice in rural areas.

How do we do it? It starts with a robust admissions process. We receive more than 2,500 applications for 65 positions each year. After an initial screen to identify individuals with the academic skills necessary to succeed in medical school, we use a secondary application process to look for those who are committed to rural practice and who are willing to consider family medicine as a career. In the secondary application, we ask for information on their hometown and experiences they’ve had in rural settings. Ultimately, we matriculate a group of individuals who are mostly from Minnesota and who come from small towns. Eighty-eight percent of our current classes come from hometowns of less than 20,000 in population and about a third from towns with populations of less than 2,500. We recruit students who deeply understand what it is like living and working in a rural community and who have the passion to return as a physician.

During the first two years of medical school on the Duluth Campus, we continue to nurture that passion. During that time, our students spend five separate weeks with a family medicine preceptor in rural communities across the state. Most of our clinical teachers are alumni who want to share their love of rural practice with our students. They open their homes and offices to our students to help them learn of the satisfaction and joy of providing care to people in their community. Three faculty members travel the state to visit preceptors and students while they are learning. In addition, I visit a number of preceptors each year to thank them for their time and effort in helping us teach our students. It is a labor of love for our preceptors and we could not have the success in creating rural physicians that we do without them.

Students from both the Duluth and the Twin Cities campuses have the chance for a summer experience between Year 1 and Year 2 to spend time in a rural Minnesota community with one or more physicians. This gives them a close look at other medical specialties in rural communities, in addition to family medicine.

Duluth Campus students can take an elective course, the Rural Academy of Leadership. Local and regional health care, government and community leaders meet with the students to share their experiences with living and serving in rural communities. Participants have the chance to hone their skills by working in the student-run HOPE clinic in downtown Duluth, in collaboration with student colleagues from the University of Minnesota College of Pharmacy regional campus. Students from the Twin Cities campus can experience rural medicine even before they start medical school; the Rural Observation Experience is a two-to-three-day shadowing experience offering a brief glimpse of the joy of family medicine practice in a rural setting. Students are eligible to participate once they are accepted to medical school.

Once students complete their first two years of medical school, they can immerse themselves in a rural setting to continue their learning by participating in the Rural Physician Associate Program (RPAP). This program, open to students from both campuses, is nationally recognized and one of the first programs in the country to provide a longitudinal integrated clinical experience during the third year of medical school. More than 1,500 of our medical
School alumni have participated in RPAP since it began in 1971. Today, 61 preceptors supervise 37 students located at 34 teaching sites across Greater Minnesota. In total, more than 110 communities in Minnesota and nearby Wisconsin have hosted our medical students in RPAP. Students must apply to be a part of the program and rank up to three sites where they might want to be placed. They spend nine months of their third year of medical school in the community, living, working and learning with their preceptors. Additional teaching to cover subspecialty topics that may not be available at a specific location is provided by University of Minnesota Medical School faculty who travel to each site monthly to hear student presentations and to provide lectures for both students and local health care providers on medical topics. This partnership with communities is our longest running rural experience.

Once students graduate from medical school, they have several opportunities to continue to train for rural practice. The University of Minnesota Medical School has a number of residency training sites located in rural settings, beyond those for family medicine. The Department of Family Medicine and Community Health has eight residency training sites across Minnesota and the Department of Surgery has a rural training track in Northern Minnesota; other rural training opportunities are currently being planned.

Creating rural physicians for Minnesota is one of the core missions of the University of Minnesota Medical School. As Minnesota’s land-grant institution, the University is mandated to help provide the health care workforce for our state. More than 70 percent of the physicians working in Minnesota have experienced some aspect of their training at the University of Minnesota, but we have more work to do and would love your help. We welcome new people who want to get involved with the education of our students. For those of you who already help us, thank you! I have seen firsthand how much our rural educators love their practices and love teaching our students. We believe it starts with finding the right people who understand rural communities and nurturing that interest along the way.

Join us as we create the next generation of rural physicians for Minnesota! MM

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