My wife and I are downsizing—selling our comfortable suburban home of 29 years for a townhome. In the process of cleaning out nearly three decades of record keeping, files, and photos, I have uncovered some buried treasure!

The yellowed Xerox paper is fraying and the black and white photo is truly embarrassing, but I kept a complete copy of my application to the University of Rochester School of Medicine and Dentistry dated August 12, 1976. Of course this is long before the advent of the personal computer and the internet. It appears as though the form was typed on my Smith Corona typewriter, and I made carbon copies along the way. Some younger readers may need to consult a middle-aged colleague for a translation of this paragraph.

Several aspects of this archaeologic discovery stand out, and I wanted to share those relevant parts and provide some background and historical context. I attended a very large public high school on the south shore of Long Island, NY, with a graduating class of more than 650. I was fortunate to gain admission to Vassar College in the second fully co-educational class after Vassar determined not to merge with Yale in 1968.

At Vassar I was essentially a double major with a primary concentration in economics and then I fulfilled all of the typical pre-medical requirements was scant. Applying to a top tier medical school like Rochester was certainly what could be considered a “reach,” especially back then. However, the main message today is not my college academic record, but the essay that I wrote over 40 years ago this summer.

Please indulge me and join me for a look back at a moment in time. What follows, nearly in its entirety, is my “personal statement” for gaining entrance to the University of Rochester School of Medicine and Dentistry.

Personal Statement
Our healthcare delivery system will be faced with increasingly complex problems as we enter the 21st century. Today, unfortunately, the medical world is under attack on many fronts for the poor distribution of its practitioners and the inaccessibility, expense and inefficiency of the care delivered. These problems are compounded by the virtual explosion in biomedical knowledge that we have witnessed in the last two decades.

In order to effectively plan and develop our health delivery system, the medical sector, I believe, must continue to train clinicians who involve themselves in the scientific as well as the economic and community affairs of medicine. As the pace of technological change accelerates, physicians and scientists will be at the forefront, interpreting and hopefully utilizing these changes for the betterment of man. However, one must always be willing to learn about new procedures and discoveries while building upon the accomplishments of the past. Simply, physicians must be perennial students.

The strenuous discipline of a medical education requires, I believe, total dedication to its principles. The foundation of these principles is built with a lifetime of moral, educational and family values. The strengths of youthful idealism will enable me to face the exciting challenges of a medical education and its concurrent responsibilities.

My undergraduate science and economics training, together with summer work in both medical research and health care management, has strengthened the base on which I can vigorously pursue a medical education. I enjoyed my responsibilities as a Student Fellow and my tenure on important Student Government and academic committees. Summer work at widely recognized medical centers has greatly heightened my enthusiasm for medicine.

While a medical education remains my primary goal, I have been extremely interested in combining my medical training with a sound management background. As health maintenance organizations mature, and as the government’s role in financing medical care increases, the demand for specially trained physicians becomes axiomatic.

In the summer of 1974 I completed an administrative internship at the Long Island Jewish-Hillside Medical Center (now called Northwell Health), under the preceptorship of Mr. Arnold Goldstein, Deputy Director. This 10-week program, sponsored jointly by Long Island Jewish and the American University Programs in Hospital Administration (AUPHA), enabled me to view virtually all of the activities in a modern medical center. My rotation took...
me from the boiler rooms, through the operating room suites, to the executive management committee meetings. In addition, I spent part of my rotation at Long Island Jewish-Queens Hospital Center and the numerous mental health outreach programs on Long Island.

My economics advisor at Vassar encouraged me to pursue my interest in the economics of healthcare delivery. Courses in financing, accounting, labor relations, and basic economic theory are all directly related to my career goals. The academic environment at Vassar enabled me to do research for term papers in health-related topics. My independent work, as indicated on my official transcript, represents some of the political, sociological, and economic facets of healthcare delivery.

Thus, I believe that my lifetime dedication, personal drive, education, and work experiences have all combined to give me confidence in my ability to help meet the health challenges of Americans in the years ahead.

Heartfelt? Surely! Prescient? Maybe. By whatever measure, it was a thrill to uncover this buried treasure and to review my personal commitment to the issues that fully occupy my energies today more than 40 years later. How grateful I am to be at Jefferson and to have the humbling experience to help build and then lead the nation’s first College of Population Health. I feel very lucky to have had the ability to pursue my life’s passion, and hope to see the growth and improvement that is so vital to our country’s economy and the wellbeing of our citizens. Thank you for sharing in that work and joining me on a brief trip down memory lane.

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