



YOUR WOKE IDIOT DOCTOR WILL SEE YOU NOW: Over 40 American medical schools have ditched objective admissions standards in favor of increasing “diversity” and “inclusion”

Description

When someone comes into the emergency room with chest pain, they are not looking for a doctor who was hired based on his/her skin color, socioeconomic background, or gender identity. When there is a medical emergency, diversity, inclusion, culture, and equity do not matter. The only thing that matters when someone’s life is on the line is that the doctor is experienced in treating the emergency in an objective manner, can accurately diagnose the situation, and perform the necessary procedures with precision, while under intense pressure.

However, the next generation of doctors are not being objectively evaluated for entrance into medical school. An increasing number of medical schools are dropping objective Medical College Admission Test (MCAT) requirements and replacing them with subjective measures that place more emphasis on race, gender, and other measures of “inclusion.”

Medical schools are dropping objective academic standards to promote “diversity”

The MCAT is developed by the Association of American Medical Colleges (AAMC), and has served as a gold standard for medical school admissions. The MCAT assesses an applicant’s academic preparedness and is a critical component of medical school admissions. By putting less emphasis on the MCAT, medical schools may be overlooking qualified applicants in favor of those with less academic preparation.

Standards continue to fall across American institutions, all for the sake of promoting “diversity.” In fact, approximately 40 medical schools in the US have dropped the MCAT requirement. Some of the top medical schools, from Columbia, Harvard, the University of Chicago, Stanford, Mount Sinai, and the University of Pennsylvania, have all dropped the MCAT.

At the City University of New York, the seven-year medical program now aims to “increase the number of physicians of African-American, Hispanic and other ethnic backgrounds who have been historically under-represented in the medical profession and whose communities have been historically underserved by primary care practitioners.” At the University of Pennsylvania’s School of Medicine, minority students are exclusively exempted from the MCAT if they take a summer program from one of the five historically black colleges and universities.

American medical system continues to sacrifice quality of healthcare to fulfill “inclusion” quotas

Prospective doctors no longer have to prove their academic merit, as they seek a lucrative career in the medical field. The gold standard that once tested a student’s ability to problem solve, think critically, and understand concepts about medicine is being scrapped for new “diversity” and “inclusion” quotas. Instead of evaluating students on their performance, medical schools are forcefully increasing “diversity” on their campuses and dropping objective standards. Lowering medical school standards will have profound consequences in the years to come, especially in a medical environment that is already overrun by corruption and malpractice.

“The MCAT has been shown to predict who has the best chance to be successful in medical school,” said Laura Morgan, program manager of Do No Harm, a watchdog group. “Eliminating it removes a proven standard for schools to consider when admitting students who demonstrate the aptitude to be good doctors.” By dropping the MCAT, medical schools negatively impact the medical profession as a whole. “It’s not adequate because it is subjective, as opposed to standardized tests which are objective metrics,” Morgan explained.

According to Dr. Stanely Goldfarb, chairman of Do No Harm: “People of every race and background are fully capable of becoming world-class physicians. Medical schools should seek out the best candidates who are most likely to provide the best care for patients, regardless of what they look like or where they come from. Anything less jeopardizes the very purpose of these institutions. The medical elite may not want to admit it, but their current approach to achieving diversity has a steep cost, and it’s wrong to ask patients to pay it.”

by: Lance D Johnson

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