








Approaching Potential Mentors as a Medical Student

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While medical students are encouraged to build meaningful relationships with mentors, the process of approaching potential mentors often eludes students and serves as a barrier to forging these connections. Research has aimed to assist mentors in most effectively advising medical trainees, but there is a dearth of published recommendations targeted toward helping medical students initiate and develop these relationships.¹⁻⁴ The guidelines below present actionable tips—as well as avoidable pitfalls—for medical students seeking to engage newfound mentors within distinct medical school-related settings.

When You're In...	 Try This Approach	Pro Tips From the Experts	Common Pitfalls
 ... the classroom, as a preclinical student	"I was fascinated by the way you discussed [...]. I've been seeking opportunities to engage in research regarding [...]. May I follow up and arrange a time to speak with you further to hear more about your work in this area?"	Ask specific questions rather than commenting generally about the lecture. Lecturers value that you listened actively and thoughtfully.	Failing to introduce yourself in person or taking too much of the lecturer's time; be cognizant of others waiting to speak with him or her.
 ... an academic hospital setting, as a clinical student	"I am interested in learning more about pursuing a career in your field. Would it be possible for me to work with you for a few days to get a sense of the rhythm of your days and your work with patients?"	Adapt to each inpatient physician's clinical hours and be conscious of their time. Ask questions about recent advancements in the field.	Failing to acknowledge the numerous and varying kinds of clinical learners (e.g., medical students, nursing students) present in academic medical settings.
 ... a community-based outpatient setting, as a clinical student	"I know that you are busy seeing patients in the morning and afternoon. Would there be a time during lunch or at the end of the day when I could speak to you more about your specialty?"	Inquire about ways in which you might be helpful during your clinical time (e.g., offer to record the patient's vital signs or take notes during the encounter).	Assuming that outpatient physicians are as accustomed to student shadowing as those who are more directly connected to academic hospital settings.
 ... a scientific or medical conference	"My name is [...] and I am a medical student at [...]. I noticed you were here speaking on [...] and enjoyed your presentation. I am curious, what inspired your research?"	Much of the conference culture centers around mingling, so be sure to share a bit about yourself. Reconnect after the conference using the 24/7/30 Follow-up Rule.*	Acting too informally and not remaining professional in this more laid-back setting.
 ... specialty-specific career advising such as assigned specialty advisors or Match panels	"I am interested in pursuing a career in [...]. Are you able to advise me on how I can put my best foot forward to become a successful candidate in your specialty? How would you advise I approach choosing a residency program?"	Ask immediately senior learners about the potential for mentoring; students from previous years often have great recommendations.	Seeking advice only from individuals who are not directly connected to the residency selection process, as they may be unfamiliar with some of the important nuances.
 ... informal social gatherings such as medical student social events or happy hours	"I'm not sure we've met yet—my name is [...] and I'm a [...] year student. I would love to grab coffee and hear about your experience so far and any advice you have for more junior students."	Have different expectations from a peer relationship. Recognize the specific perspective they can provide as students in the early stages of their own career development.	Treating this setting too informally and forgetting that a peer relationship can ultimately serve as a professional relationship.

*The 24/7/30 Follow-up Rule describes how to most effectively connect with a new contact following a networking event: drop a note to the new contact within 24 hours of meeting, connect on social media within 7 days, and reach out within 30 days to remind them of your introduction (consider including an article or podcast link referencing something you discussed when first meeting).⁴

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References:

- Rose GL, Rukstalis MR, Schuckit MA. Informal mentoring between faculty and medical students. *Acad Med.* 2005;80:344–348.
- Chopra V, Edelson DP, Saint S. Mentorship malpractice. *JAMA.* 2016;315:1453–1454.
- Saint S, Chopra V. How doctors can be better mentors. *Harvard Business Review.* <https://hbr.org/2018/10/how-doctors-can-be-bettermentors>. Published October 4, 2018. Accessed December 14, 2022.
- Lopata A. *Connected Leadership*. St Albans, Herts, UK: Panoma Press; 2020.

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