Rural Experience Student Review

TEXAS A&M UNIVERSITY
College of Medicine

Bringing healthcare where it's needed the most!



Chloe's Rural Experiences
BCS Campus | Class of 2025
Specialty: Family Medicine

TEXAS A&M COLLEGE OF MEDICINE RURAL MEDICINE PROGRAM

In 2019, Texas A&M College of Medicine embarked on an initiative to focus on rural medicine disparities given our history as a Land Grant University and our Medical School Charter for Rural Medicine. The College of Medicine's goal is to bring health care where it's needed most with a keen focus on rural populations and innovative care delivery, with an outcome to eliminate health disparities in rural Texas.

Get to Know Chloe!

Howdy! My name is Chloe Todd, and I am currently a 4th year medical student on the Bryan-College Station campus. I was born and raised in Austin, Texas, though College Station has been my home for the past 8 years. Admittedly a proud member of the Aggie cult, I graduated from Texas A&M University in 2021 with a B.S. in Biology, then matriculated into the College of Medicine in that same year with the Science to Medicine Early Assurance Program. Despite constant disappointment in our mediocre school record, I still attended almost every home football game during my time here. During medical school, I discovered a passion for rural medicine and decided to pursue a career in full-spectrum family medicine, with the intent to return to rural Texas. My desire to treat the underserved also extends internationally, and I have had the privilege of participating on medical mission trips to 4 different countries. In July 2025, I will start training at Via Christi Family Medicine in Wichita, Kansas.

My Journey into Rural Medicine

First Exposure

My father is from a small town of about 200 people up in North Carolina, and I visited family there often during my childhood. Because of this, I was familiar with a rural way of life, and I always looked forward to summers of playing hide-and-seek in the cornfields, driving 4-wheelers down backroads, and roaming freely in and out of every house in a town where no one locked their doors. A few of my family members worked at the county hospital, so I learned about

the desperate situation of rural healthcare as I got older. Before medical school, I thought that a rural career might be interesting, but I never seriously considered it, having always lived in the city.

This all changed during the summer after my first year of medical school. Looking for an opportunity for clinical exposure, I signed up to complete 6 weeks of rural rotations. I figured it could at least be a nice vacation in the country before continuing my studies. My first rotation took me to Mason, Texas.



I can honestly say that my week in Mason changed the trajectory of my career. Having grown up in the city, I thought that family medicine physicians only did clinic, and they mostly referred to other specialists. This is certainly not the case in Mason. Dr. Horne, the only physician in the county, did much more than the typical high blood pressure visits, but he also managed complex patients who could only drive to the city to see specialists occasionally. Beyond that, he incorporated many procedures into his practice; in my week there, I helped him stitch up a hand, cast a broken arm, and do multiple joint injections. This experience broadened my knowledge of what family medicine could be, especially in a rural area.

A Wild Ride

After my first week in Mason, I then completed 5 more weeks of rural rotations in 6 more counties – Kimble, Menard, McCulloch, Llano, San Saba, and Bee. These counties offered a variety of clinical experiences, from hospitals with specialists to critical access hospitals and small clinics. I was not only able to learn from physicians, but also from NPs, PAs, EMTs and paramedics – everyone who came together to deliver healthcare to rural areas. I truly learned what the rural healthcare system looked like in each county, which differed depending on the needs and resources of that community.

The highlight of these weeks was the day I spent with Air Evac out of Kerrville. The flight nurses and paramedics taught me all that went into operating a flight team in a rural area, as well as how crucial it is for those needing critical care far from big cities. This was my first time in a helicopter, and hopefully won't be the last!



What stuck out the most to me about a rural physician's job wasn't the clinical care, but rather the leadership they provided for their community. As one of the few physicians in town, if not the only one, the community automatically looked to the physician for leadership within and outside the medical field. Many of these doctors also

served the community as deacons in their church, members of the schoolboard, or director of public health. During my rotations, I was able to experience a small amount of this, presenting to Lions and Rotary Clubs, leading sessions for high school students, and participating in community fundraisers and events. Being a rural doctor is more than just a job, but a commitment to serving a community during the good times and the bad. I had always felt a calling to serve people, and it wasn't until these rotations that I realized that calling was to serve rural Texas. I felt like I had finally found the specific purpose that God had for my life, and I decided to pursue a career in rural medicine.

Rural Advocacy

In April 2023, my involvement in our Rural Medicine Program took me all the way to the Texas Capitol. I, along with a 4th-year medical student and a nurse practitioner, met with State Representatives and Senators to advocate for state funding of our Rural Medicine Program. One of those people was State Representative Angelia Orr, pictured below, who represents House District 13.



We were able to explain the importance of our program to the education of future healthcare workers in rural areas. I was able to share my story of how I decided to pursue a career as a rural physician because of the rural rotations I had participated in, how I never would have considered that career without that experience. There are certainly more students from the city, like me, who would enjoy a rural career if they had the exposure, and we needed funding to continue our program. Our advocacy seemed to make a difference; the school did receive funding from the State Legislature to grow our program!

Return to Mason

My story came full circle when I had the opportunity to return to Mason as a 4th-year student. The President of Texas A&M University and his wife, Mark and Betty Welsh, were visiting with the Deans of Medicine, Veterinary Medicine, Nursing, and Health Science Center to see first-hand the impact of our Rural Medicine Program. As they toured the community clinic, two nursing students and I were able to share the impact of these rotations on our careers. It was so special to be back in the place that first inspired me to pursue rural medicine, and to share that with the leaders of our university.



One of the most impactful moments of the day was when Angie Dudney, a Mason ISD science teacher, spoke about the impact of our program on her high school students. Becoming tearful at moments, she explained how A&M supported her starting a healthcare club at her school, encouraging students to pursue careers in healthcare. Medical students also came to share

their stories into medicine and lead hands-on sessions like suture clinics. I realized that this program went beyond just medical school rotations; it was fostering the next generation of healthcare leaders. The challenges of rural healthcare are certainly great, but not impossible to address. I am grateful that Texas A&M has stepped up to the plate and committed to improve rural healthcare through our medical school rotations, K-12 education program, and partnerships with other healthcare fields.

Acknowledgements

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