Personal Statement  
Pranay S. Aryal

I was raised on a hospital campus. My mother was a pediatric charge nurse and my father worked as a hospital clerk. During my childhood, I came to witness and understand firsthand how health disparities directly affect illness. I watched how families traveled long distances, some even selling their homes or possessions, in order to seek critical medical aid. I started to develop an interest in the wide spectrum of diseases and appreciated the powerful relationship between a patient and a healthcare worker.  From these initial experiences, I became enthusiastic about medicine and started my educational journey that still continues.

In medical school, I came to appreciate how interrelated the multiple physiological systems are and how the process of analytical thinking works when trying to solve medical diagnoses. I enjoyed working on challenging cases and using my creativity when some of the diagnoses were not classically “textbook.” One of the most engaging experiences during my medical school years was the dedicated bedside teaching rounds offered by my attendings.

After completion of medical school, I worked as an independent physician in north-east India (Assam) during my loan repayment medical scholarship. During this experience, I treated tropical diseases common in India such as dengue, malaria, tuberculosis, chikungunya fever, and others. I was able to enhance my academic study with actual clinical encounters. I was fascinated with cases of leprosy. Sadly, the patients I saw delayed seeking health care due to the lack of identifying acute symptoms and cumbersome travel and cost. I realized the importance of keen clinical skills at the community level and how striving for quality improvement initiatives (WHO/CDC guidelines, mHealth) helps establish health equity for marginalized citizens and how internal medicine combines both of these facets.

Thereafter, I attended my internal medicine residency at one of the top three medical institutions in India.  I spent time on rotations including Neurology, Dermatology, Pulmonology, Cardiology, Hematology, Gastroenterology, and ICU practicing evidence-based medicine. I feel comfortable managing patients with stroke, HIV/AIDS dementia/PML , encephalitis (dengue fever, typhoid fever, tuberculosis, malaria, scrub typhus), and leprosy complications I am excited to share these case experiences with fellow colleagues and learn about new clinical diagnoses as well.

During my residency, I improved on my procedures and am able to independently perform lumbar punctures, bone marrow biopsies, central line insertions, chest tubes, pleurodesis, and nerve-muscle biopsies.  I was able to put my medical knowledge to practical use and gain confidence in performing these activities with ease and level-headedness.  Furthermore, I also enjoyed doing research and served as the primary investigator on a project entitled ’Pancreatitis in Critically Ill Patients’ which investigated whether pancreatitis can be an earlier identifier in multiorgan dysfunction in septic patients and whether this indicator helps determine overall prognosis.

Furthermore, I am ECFMG certified and a permanent US resident (married to a US Pediatric Infectious Disease physician). I have completed four clinical electives in the United States including four months with Wright State University and am currently rotating at University of Louisville.  I have completed a two month gastroenterology rotation with Dr. Luis Marsano -Distinguished Chair in Hepatalogy.  I am now participating with Oncology and Hematology Division at University of Louisville. I have valued these experiences as they have given me additional clinical pearls and insight into the United States healthcare system. However, I also appreciate that the art of medicine has no global boundaries.

In conclusion, I look forward to continuing my career in internal medicine and then dermatology that will begin a new adventure in my life.