

One of the last memories I have of my grandfather is his scrunched face bathed in sunlight, his sunglasses below his bushy gray eyebrows, as we walked the sidewalk with arms linked. Most of my mother's family lives in Liberia, and we saw them infrequently. My grandfather was legally blind, and during his visits to the United States, he sought medical treatment that wasn't accessible at home. During his visit one spring, when I was in third grade. I asked him to walk with me to Seven-Eleven to get snacks. During this trip, we reached a crosswalk, and I ran across. I stood perplexed on the other side when he didn't follow. From that day, I developed a deeper sense of compassion, learning to adapt to the needs of those around me. From that day forward, I acted as his eyes, guiding us on our walks and describing the visual information, so my grandfather could experience all the things he wished to see. I looked towards the path ahead to anticipate any obstacles in our way. This experience also caused me to reflect more deeply on the critical need for preventative medical care, knowing that if my grandfather had received medical care early, his sight might have been saved. I felt a deep calling not just to learn about the human body but to provide optimal medical care to those most in need.

Eager to begin my medical journey, I took advantage of the earliest opportunity I had. I worked as a behavioral technician for an applied behavior analysis clinic. I collaborated with a dynamic team of behavioral technicians, occupational therapists, physical therapists, and speech-language pathologists. Working one-on-one with autistic clients who were nonverbal, I learned to leverage the combined expertise of these clinicians to develop comprehensive strategies for communication. I worked with a client who used an augmentative communication (AAC) device and became frustrated when I didn't understand his requests. He began with clapping, crying, or banging on the table before using his AAC device under the guidance of the speech-language pathologist. Next, we started practicing with his AAC device to discuss his occupational therapy goals, including dressing himself. As he advanced, the AAC device was soon replaced by single-word utterances. When dressing himself, he would tap me then point to his shoe and say, "Shoe" with his face full of pride. This experience illuminated how I could potentially lead a team of clinicians with different expertise to successfully implement a developmental plan and improve the lives of patients.

Next, I obtained my Certified Nursing Assistant license to gain more hands-on medical training. During our clinical training, I worked with a patient, whom we'll call Daisy. Daisy had a boyfriend in the facility who had recently passed. Due to her Alzheimer's disease, she was unable to remember this and was resistant to participating in her care, wanting simply to wait for him. Each day was different, and I learned to adapt to her moods and be creative in implementing her treatment plans. One day, Daisy refused to participate in her manual dexterity rehabilitation, but I convinced her to go to lunch. Rather than forcing her to complete something she was against, I redirected her efforts. I supported her in practicing her manual dexterity by having her pick up her utensils and coordinate both hands to feed herself. Afterward, I accompanied her to her room to take a nap. I helped her into bed and covered her with a

blanket. Daisy taught me the importance of providing a patient-centered experience to maximize treatment outcomes and improve the quality of life for patients.

In my academic training, I took advantage of the world-class research conducted by the LSU faculty and conducted pediatric neurodevelopmental research. I developed my skills in scientific inquiry and critically evaluating health research. I worked with a team of researchers to analyze how autistic children move their bodies during activities of daily living to find potential targets for future motor interventions. I learned to analyze and digest complex data and communicate it effectively to different audiences, orally and in written form, through poster presentations and my honors thesis. We also regularly dissected primary research articles, where I learned to identify the strengths and weaknesses of the research, where the findings were supported, where they fell short, and how to articulate this in scientific discussions. With these skills, I hope to be able to translate research findings into clinical practice, if given the opportunity.

Each experience, from the ABA clinic to the emergency department, further solidified my commitment to pursuing medicine. These experiences have provided me with a foundational understanding of healthcare and a vision of the kind of physician I'd want to be. I am eager and committed to continuing my medical journey and growing personally and professionally with the knowledge provided through medical school. Although my grandfather didn't live to see the work he inspired, he'd be glad to know I'm still looking toward the future.