



The UK Medical Personal Statement Playbook

A practical, structured guide to writing a personal statement that shows admissions tutors your potential as a future doctor – built for the new UCAS three-question format.

| | Reflection frameworks

| | 3 illustrative model statements

| | 15 common mistakes

| | Evidence-bank exercise

| | 4,000-character checklist

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The three questions

Q1 — Why do you want to study this course or subject?

~20–25% of your budget · roughly 800 characters

Focus on your initial clinical motivation and professional insight. Explain how witnessing clinical decision-making under uncertainty shaped your interest — this is not the place for a dramatic personal story or a childhood anecdote.

Q2 — How have your qualifications and studies helped you prepare?

~20% of your budget · roughly 800 characters

Connect one specific Biology, Chemistry or EPQ topic directly to clinical reasoning and problem-solving under uncertainty. This is not a list of subjects or grades — those already appear elsewhere on your UCAS form.

Q3 — What else have you done to prepare, and why is it useful?

~55–60% of your budget · roughly 2,400 characters

Your heaviest section, by design. Reflect on work experience, hospital or GP shadowing, long-term care volunteering, leadership, and public-facing part-time work. This is where most of your interview questions will come from too.

OLD THINKING

“I need to write three roughly equal paragraphs of about 1,333 characters each.”

BETTER THINKING

“I will give Q3 close to 60% of my character count, because hands-on care and work experience are my strongest evidence of suitability for medicine.”

06

PITFALLS TO AVOID

15 Common Mistakes That Cost Interview Slots

These are the fifteen most common issues that cost applicants an interview slot. Check every draft against this list before you submit — most drafts trigger three or four of these on a first pass, and that is completely normal.

- 01 Opening with 'I want to help people'.** Many professions help people. Start with something specific to you and medicine.
- 02 Flowery, dramatic praise of medicine.** Admissions tutors already know it's a great career. Focus on you, not the profession.
- 03 Summarising a book like a synopsis.** Write your critical opinion of it, not the plot.
- 04 Name-dropping surgeons or hospitals.** Tutors care what you learned, not the prestige of where you learned it.
- 05 Buzzwords without evidence.** 'Empathy', 'teamwork' and 'communication' all need a specific example attached.
- 06 Passive, powerless language.** Change 'Presented me with challenges' to 'I rose to challenges by...'
- 07 Long, meandering sentences.** Break them up. Crisp, structured prose reads as more confident.
- 08 Excessive medical jargon.** Panels include non-medical readers too — unexplained jargon reads as poor communication.
- 09 Listing grades or awards.** This information already appears elsewhere on your UCAS form.
- 10 Weak, polite endings.** 'Thank you for your consideration' wastes space. End on motivation and readiness instead.
- 11 Work-experience tourism.** An expensive placement abroad earns no more credit than sustained local volunteering.
- 12 Titles without actions.** 'Head Boy/Girl' means nothing until you explain the specific responsibility you held.
- 13 Exaggerating your role.** Especially with vulnerable groups — inflating your responsibility is a safeguarding red flag.
- 14 Using AI to generate your text.** UCAS software and admissions tutors detect this reliably, and it undermines your authentic voice.
- 15 Sharing your statement online.** Plagiarism software will flag it if it appears anywhere on the internet.

MISTAKE CHECK

Review your draft for long descriptions of a disease or a patient's condition. A personal statement is not a case report. If you spend three lines describing a patient's pathology and only one line reflecting on what it taught you, you have wasted scarce character space.