

Preparing for the Match: The Residency Interview

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Job One: Do your homework!



Prior to the interview

1. Check your Facebook page and make sure that there is nothing embarrassing or unprofessional there – they might just look!
2. Review the information from the program on the web and whatever they have sent you; research about some of the faculty.
Know some of the clinical and research strengths of the department.
3. Know something about the surrounding community



Be sure you have all of your logistics in place prior to the interview

1. Call to confirm the appointment date, time, and location.
 - Ask about parking
 - Find out who will be meeting with you first
 - Allow at least a full day per program
2. Know directions to and from the institution
3. Check to see if there are any evening activities such as dinner that you are expected to attend



General Tips

- Be on time – or apologize and explain why if you are not
- Bring CV
- Bring notepad (if you want to take notes)
- Keep cell phone off – don't look at emails during interviews, group meetings or tours
- Smile often, but appropriately
- Don't flirt (ever!)



General Tips

- Don't make jokes or be sarcastic (too risky)
- Answer questions directly & don't ramble
- Be aware of body language
- If interviewer leans forward enthusiastically, lean forward a little to look engaged (mirror your interviewer)
- Maintain good posture
- Ask good questions



General Tips

- Use positive words (show energy, enthusiasm, a sense of teamwork)
- Express passion for your field, patient care, research, service and education
- Don't say bad things about your medical school, professors, courses, administration (tell us, not them) – it makes you sound negative
- Refer to your research (if any conducted)



General Tips

- Don't say you hate research, even if you do;
Just say you don't have much experience with it, but are willing and interested to learn
- Jewelry in moderation (one earring per ear, no facial jewelry, no anklets)
- No bare legs; wear stockings or socks!



Dress the part....



Personal Favorite Tips

- Shake hands – firmly (not cripplingly)
- Make good eye contact
- Don't chew gum
- Don't crack knuckles
- Don't play with hair or face – or do make-up
- Don't shake body parts



General Tips

- Be prepared to talk about your strengths and accomplishments; it is not bragging if stated appropriately
- If they ask weak points, this is no time to tell all. Think of something minor & state positively (e.g. my spelling is not always perfect so I use spell check)



General Tips

- If you have an issue that appears in your MSPE (such as a LOA, illness, failures, professionalism lapse, etc.) be prepared to address it honestly.
- If you want to practice response, talk with the Deans' staff.



Jewels from Jane

- Please remember that when you are out on the interview trail you represent not only yourself but the OSU COM. Do not “No show” for an interview.
- Program Directors live in a small world and they talk to one another. If you stiff a program for an interview, other programs will find out about it. Arranging these interviews entails expense and effort on the program’s part. They expect professional behavior from the medical student. If you disappoint them, they will not hesitate to let your dean and other programs know about it.



No invitation for interview should go unacknowledged.

1. If you want to accept the interview offered, go ahead and schedule.
2. If you do not wish to accept, you should notify the program immediately and politely decline the offer. You are not required to give an explanation. However, be prompt about declining so that the program can invite another applicant in your place.
3. If you have a logistical problem in accepting the invitation, notify the program and ask if you can postpone your decision for a few days until the problem is worked out. They may even be able to help you solve it.



If you need to cancel a scheduled interview:

1. Do so as far in advance as possible.
2. Phone to cancel in person.
3. Follow up in writing; include the name of the person you spoke with on the phone.
4. If this is a last-minute cancellation you need a valid and compelling reason.



After the interview:

1. Follow up with thank you or follow-up interest notes for the individuals who interviewed you. Thank them for their hospitality and reaffirm your interest in the program (if this is still the case). These notes will become part of your file.
2. Write down your impressions of the interview and how it compares to the other programs.
3. In reviewing your notes if you missed asking a question, you may call to get the answer.



There's an app for that

- Find a way to rate your programs to help you make the best ROL.
- University of Wisconsin developed an app for Family Medicine programs that is quite good according to last year's class. They removed the Fam Med program names and used the data
- There are two examples of rating sheets in Strolling through the Match on pages 47 and 48 at http://medicine.osu.edu/students/life/career_advising/toolkit/Documents/Strolling11-12Book.pdf
- On page 6 Roadmap to Residency in the 2012 Tool Kit offers a list of criteria for a student to select items for a personalized ratings sheet.
- Remember to look for happy residents!



NRMP Match Participation Agreement for Applicants and Programs:

“One of the purposes of the Matching Program is to allow both applicants and programs to make selection decisions on a uniform schedule and without coercion or undue or unwarranted pressure. Both applicants and programs may express their interest in each other; however, they shall not solicit verbal or written statements implying a commitment. “



Postinterview Communications between Programs and Applicants

Academic Medicine Oct 2012 study re seniors from 7 schools:

- 34% told that they would be “ranked to match”
- 52.8% were told that they would be “ranked highly”
- 76.2% were told that they “fit well”



Postinterview Communications between Programs and Applicants continued...

- Almost 1/5 (18.6%) reported feeling assured by a program that they would match there but did not despite ranking that program first
- 23.4% reported altering their ROL on the basis of communications
- So, interpret any comments made by programs cautiously!



Videos to Consider

- <http://www.youtube.com/watch?v=T7m-kVzvA4s>

- Frequent interview questions:

<http://www.youtube.com/watch?v=8a1-Gii1Wq8>

- What to bring?

<http://www.youtube.com/watch?v=k7Wvz9IPwYY&feature=relmfu>



Be Confident

- OSU COM turns out a good product
- You are well prepared for residency training
- Program directors have good experiences with OSU students



The Perennial Question: What do program directors want?

- What is most important to them?
- What step 1 score do they expect?
- Do they even look at those LORs?
- Do they even read my personal statement?
- Do they care about the MSPE?

Wonder no more – read the 2012 NRMP Program Directors' Survey:

<http://www.nrmp.org/data/programresultsbyspecialty2012.pdf>



OSU Program Director Survey

- OSU Residency Program Directors were asked to answer questions about their own views of ideal candidate behavior during the interview



1. What questions do you like to hear from residency candidates that make them seem thoughtful and mature?

- Questions specific to the program, i.e. I have heard you have a strong regional anesthesiology program. Can you tell me about it; what makes it better than some of the other programs? A question that also says they have read about our program. (Anes – Roth)
- For family medicine, I like to hear questions that let me know they understand our specialty. e.g., “Since continuity of care is important to family medicine, how does your program assure that I will get to see the same patients over time?” or “How do you teach the important aspects that will help set me apart as a family physician?” Also, questions that are important for residents in general (e.g., about team work, camaraderie, etc). (FM-Miser)



What questions do you like to hear from residency candidates?

- I like questions that show the student has researched our program, e.g. questions on specific unique characteristics of our program. I also like when students ask questions that revolve around their own specific career interests - inquiring on how our program will allow them to accomplish specific experiences /goals. (IM/Peds -Holliday)
- What are the distinctive features or unique strengths of your program? What kind of changes are planned for the program in the coming year? What are the typical characteristics of a successful resident in your program?

(IM – Wininger)



What questions do you like to hear from residency candidates?

- Will your program prepare me for either an academic or practice career? What do your residents do after graduation? From where do you get your residents? Are there real opportunities to participate in research that can lead to publication? (OB/GYN – Samuels)



What questions do you like to hear from residency candidates?

- Those suggesting the applicant has good insight into both residency and their career choice and beyond. Those referring to a sense of direction in a career or at least possible ideas about their future as well as the future of the profession. Applicants showing self-awareness and able to reflect on this as it relates to patient interactions, communication and relationships with mentors. i.e. What changes have you anticipated or did not anticipate happening in the field of psychiatry? How has the profession changed since you were a resident? Reflect on experiences and interactions that solidified your interest in this profession. (Psych – Niedemier)



What questions do you like to hear from residency candidates?

- Inquiry about future goals of the program, what the program is looking for in a resident, success of previous graduates (Neuro – Hart)
- What research activities are available? How is the residency structured? I like candidates who come prepared and don't mind any question for the most part. (NS – Miller)
- Most of our faculty enjoy questions about their research, their style of teaching residents and medical students. Questions about where the faculty see the department being in the next 5 years. Are there plans for expansion of the facilities or in the number of faculty? (ENT – DeSilva)



What questions do you like to hear from residency candidates?

- Questions about program and residents, questions about camaraderie of residents, questions about future direction of program, questions of how the applicant can be a good intern, “what are you looking for in an intern?” (Ortho – Mayerson)
- Any question which references the fact that they have bothered to explore the program prior to coming for an interview. Those which start “I know your program is strong in....” as opposed to “Tell me what your program is known for?” show some investment in the process. (EM – Gorgas)



What questions do you like to hear from residency candidates?

- We have a lot of information about our program on the website. The questions that I don't like are those that indicate the applicant has done absolutely no research into what we are. Nuanced questions about the details of the program are appropriate. Questions about what we are looking for in a resident as well as questions about the chemistry of the program and the relationships between faculty and residents as well as among the resident classes, horizontally and vertically, are good. Questions about my expectations, as a program director, are important. Because we have multiple sites, questions about the various sites and logistical issues tied to those tell me the applicant has taken us seriously and has already researched what we have to offer (Ophtho – Letson)



2. What questions do you hate to hear from resident candidates?

- Do you use electronic medical record? Obviously a question that they read to ask about in their book they have read on "How to interview".
- None really, except for those that can easily be answered by reviewing our webpage (which makes me think that they really haven't taken the time to research our program.") (FM – Miser)
- Frequently students only ask very generic, over-asked questions such as "what are the strengths/weaknesses of the program"...many times the answers (at least the strengths) can be found through appropriate vetting of the program. (IM-Peds – Holliday)



What questions do you hate to hear from resident candidates?

- Are you planning any changes? Questions that are so basic that they suggest the candidate was not listening to my opening talk. (IM – Wininger)
- How much leave do I get? How many holidays do I have to work? Are you sure there are no duty hours violations? I want to know see the individual numbers of procedures for each of your graduating chiefs. (OG – Samuels)
- "I don't have any questions...they've all been answered already." Candidates should have multiple questions prepared for any given interview. (Psych – Niedemier)
- How many surgical cases will I do? (NS – Miller)



What questions do you hate to hear from resident candidates?

- Who we are or what our fellowship training is in?---We usually talk about this but it shows the applicant has not done any research about our dept prior to the interview. We have a very comprehensive website that provides info regarding the dept. Questions about living in Columbus, social/entertainment options, where to live, whether to buy/rent. Questions about what the faculty like to do outside of medicine. These are inappropriate questions for the faculty and are best answered by the current residents (ENT – Desilva)
- Questions about duty hours, questions about how much call has to be taken (Ortho – Mayerson)



What questions do you hate to hear from resident candidates?

- Anything about benefits. It's all in the paperwork we give them ahead of time so it just implies they have not bothered to read the material. (EM – Gorgas)
- What are the strengths and weaknesses? These are easy to answer and generally OK but they should be able to figure this out before we interview them as this is on the website. (Ophtho – Letson)



3. What advice can you give on general appearance and deportment for residency candidates for interview day?

- Look and act professional. Nothing gaudy. Good eye contact, good hand shake, a good smile. (Dr. Miser)
- Don't stand out. Don't try to make a fashion statement. Appear professional, take a quick glance in the mirror and appearance should be fine. Suit and tie or business suit for females. Nothing spectacular, just appropriate (Dr. Roth)



3. What advice can you give on general appearance and deportment for residency candidates for interview day?

- Professional wear doesn't always mean your most expensive outfit. Club attire (particularly for women) may not be appropriate interview wear. Having said that, I don't believe that everyone needs to wear a dark suit. Color, in my mind, is not taboo & pants are equally appropriate for women. While facial hair on men is acceptable, it should be neat/trimmed. The best way I can think of appropriate attire is that students should ask if they would have respect and trust in a physician if she/he were dressed like this. (IM-Peds – Holliday)



3. What advice can you give on general appearance and deportment for residency candidates for interview day?

- Be polite and patient with everyone, especially program office staff. It would still be unusual for a man not to wear a suit. But if you happened to forget your tie or your coat, it would not be a problem (as long as you explained the situation to the program coordinator). Women should keep their dress conservative. (IM – Winger)
- Dress professionally. Don't chew gum while you are answering questions. Don't address anyone, not even a resident, by first name. Always Dr. X or Dr. Y. (Ob-Gyn – Samuels)



3. What advice can you give on general appearance and deportment for residency candidates for interview day?

- Business attire for men and women; be mindful of ALL interactions with the department, including phone conversations with program coordinators, interactions with residents or faculty in more relaxed settings, including dinners or lunches. (Psych – Niedemier)
- Be professional in appearance and manner, be inquisitive and with energy (Neuro – Hart)
- Be well rested. Alert. Nice clothes (but all applicants dress well. Suits and ties. Women... slacks or suit appropriate dress.) (NS – Miller)



3. What advice can you give on general appearance and deportment for residency candidates for interview day?

- The interview should be formal overall. We are looking for applicants that are confident and comfortable. Being arrogant or casual definitely hurts the applicant. An applicant should not be casual with their language or their demeanor during the interview. The entire day is an interview, even the time they spend with the residents as we gather feedback from many sources. (ENT – Desilva)
- Wear suit and tie, slacks or skirt. (Ortho – Mayerson)



3. What advice can you give on general appearance and deportment for residency candidates for interview day?

- Treat this like a business interview. I'm not as draconian as Ken Iserson in being particular about attire, but think that business dress is appropriate. Deportment should be business like as well, but we as interviewers do like to see a small slice of the candidate's personal side. (EM – Gorgas)
- Dress professionally, and conservatively, Men – sport coat and slacks or suit and tie; women: suit (dress or pant), no thighs or cleavage, be calm and secure in your person. Don't get too casual, never badmouth anybody or any program, etc. Be on notice that everything you do from the moment you arrive to the moment you leave is observed. Treat “the little people” with respect and courtesy. Don't piss-off the program coordinator. (Ophtho – Letson)



4. Can you provide any examples of residency interview behavior that really impress you?

- The interviews that are the best are the ones I can sit down and talk to the candidate and not get to any of my rehearsed questions. These are the people that when the fifteen minute knock warning occurs, it felt like they just walked in the door. They were very pleasant and presentable, and easy to talk to. (Anes - Roth)
- The candidate who comes well prepared, knows our program (from at least what can be gleaned from our webpage), knows our specialty, asks appropriate questions, but also allows time for me to talk and ask questions. (FM – Miser)



4. Can you provide any examples of residency interview behavior that really impress you?

- Interest, inquisitiveness, & great interpersonal skills are the key to the interview day. Gather baseline program information from websites, brochures, residents in the program - then verify the details with the faculty or program director. (IM-Peds – Holliday)
- Willingness to discuss problem areas on the CV in an honest straightforward and poised way. Sharing one insight about my program that lets me know you have looked seriously at the website or participated in conversation with current residents. (IM - Wininger)
- Lean forward in your chair. Engage your interviewer in the discussion. Be interested and ask questions about the city as well as the program. Use first person plural "we" when discussing program. Like when will "we" do our first c-section? It shows your interest and that you feel like part of the program. (Ob-Gyn – Samuels)



4. Can you provide any examples of residency interview behavior that really impress you?

- Candidates who have thoroughly researched the program and ask questions reflective of this (looked at website, talked with current or former graduates) (Psych – Niedemier)
- Mostly the energy of the rapport and how interested the candidate appears to be in the program. (Neuro – Hart)
- Have a list of questions to review if they are not covered in the interview. Taking occasional notes when appropriate. Aware of the specialties of the faculty and general idea of research if appropriate. (NS – Miller)



4. Can you provide any examples of residency interview behavior that really impress you?

- Applicant that is formal but comfortable. Articulate in talking about their own research. We are impressed by applicants that are well-rounded, goal-oriented, driven to succeed.
(ENT – Desilva)
- Be yourself (Ortho – Mayerson)
- Knowing about the program is key. Also be kind to the residency coordinator! They have more input into this process than most candidates give them credit for having.
(EM – Gorgas)
- A sense of “appropriate” confidence with easy going but reserved manner and excellent communication skills.
(Ophtho – Letson)



5. Do you have any personal pet peeves or negative experiences with residency applicants to share with our students as things to avoid?

- Don't text while I am talking. This was an automatic do not rank applicant. In fact leave your cell phone in your car or turn it off in your purse or pocket. Especially do not look at it while the PD is giving a lecture. (Roth)
- Wanting to please too much (accolades that really aren't necessary), talking TOO much (doesn't allow for a good conversation), not prepared at all (can easily tell he/she hasn't looked at our website). (Miser)



5. Do you have any personal pet peeves or negative experiences with residency applicants to share with our students as things to avoid?

- Don't ask the chair or the PD what the salary or call schedules are - these are details that could have been found with MINIMAL preparation by the applicant. If you're falling asleep - find a way to wake up. Always act interested. Be nice to everyone you meet. (IM – Peds – Holliday)
- Comments that suggest they don't really need to learn more about our program, because they assume all programs are the same. (IM – Wininger)
- Don't "bad mouth" other programs during an interview. The person interviewing you may be a graduate of that program or may be related to that program director. (Ob-Gyn – Samuels)



5. Do you have any personal pet peeves or negative experiences with residency applicants to share with our students as things to avoid?

- Texting or responding to phone calls during informal meetings with faculty/residents (Psych – Niedemier)
- Arrogance is a real turn off. I've had applicants slouch in their chair like they were at lunch with a buddy. Odd behaviors that violate conventions such as taking something off of the interviewer's desk is an automatic do not rank (Neuro – Hart)
- not really (NS – Miller)



5. Do you have any personal pet peeves or negative experiences with residency applicants to share with our students as things to avoid?

- Dressed inappropriately, weak handshake, does not answer questions, uses inappropriate language, does not make eye contact, unable to carry a conversation, does not understand the research that the applicant has been involved with, or treats the support staff poorly (secretaries/front desk attendants/etc). (ENT – Desilva)
- Applicants who act arrogant when meeting with residents. Drinking too much at before-interview socials, talking about other students on the interview trail (Ortho – Mayerson)
- Arrogance, narcissistic behavior. (Ophtho – Letson)



5. Do you have any personal pet peeves or negative experiences with residency applicants to share with our students as things to avoid?

- Use caution when mentioning ANYTHING about alcohol. I had one candidate from OSU ask me why the department didn't pay for beer at the residency candidate dinner the night before the interview. But even if home wine making is your hobby, think about whether it's a good idea to highlight that. Also, even though I like to see a personal side of a candidate, it is rather uncomfortable when they cry in my office. Usually this is invoked by recalling a mistake or regret, or an emotionally laden patient encounter or loss. Avoid subjects which will control you and set your emotions reeling. (EM – Gorgas)



6. Does your program use a certain USMLE step 1 cut-off to decide whom to interview?

- FM: Yes, we prefer a score of 80 (equivalent of 198), and that they already have passed USMLE steps 1 and 2 and the CK. If they haven't yet taken Step 2, we take pause (we may still interview, but we already have questions as to why they haven't taken it and passed it yet).
- Anes: No Step 1 cut off unless way too many applicants. We will still interview those with lower scores if they show an interest in our program.
- IM-Peds: 220 is the cutoff - but we may allow others to interview in special circumstances or with other special accomplishments.



6. Does your program use a certain USMLE step 1 cut-off to decide whom to interview?

- IM: Those below a certain cut off require more extensive application review prior to receiving an invite. Late applicants would be put at a disadvantage as we would hesitate to give our last interview slots to someone with very low or failing scores.
- Ob-Gyn: No. But I certainly hope the score is above 200
- Psych: No
- Neuro: Yes and no. High USMLE scores have an easier time getting an interview. Individuals with lower scores will typically have the application given a much more thorough evaluation to see what other indicators of academic and professional performance are in play.



6. Does your program use a certain USMLE step 1 cut-off to decide whom to interview?

- NS: Around 230 but we look at all the applicants and do interview some lower than that if they have other positives like a PhD.
- ENT: We do not have an absolute cutoff for USMLE Step 1 score, but we do use the score as a strong indicator to performance along with the other application contents.
- Ortho: Yes, 220 – 230
- EM: We generally do not interview candidates w step 1 scores less than 200
- Ophtho: It is not a hard line but we use a cutoff of 220 unless there are compelling reasons to look at the application. We get 450 +/- applications for 60 interview slots. Our average step 1 score of incoming classes is over 240 but we have had successful candidates less than 220.



7. Do you expect follow-up thank you letters/ letters of interest from students?

- Don't expect follow up or letters of interest, but certainly voice your interest during the interviews. I would recommend thank you letters to other places; however, I think we are in the minority on this one.
- It's nice to have, especially if they are interested in our program. Those that don't follow-up with either a letter or e-mail are usually thought of as not interested. (FM/Miser)
- I think some sort of communication is polite (mail or email - phone may be less comfortable). We all want people who are interested in our program to match with us - so lack of demonstrated interest may not put your best foot forward - but by no means, do not lie about your level of interest. (IM-Peds – Holliday)



7. Do you expect follow-up thank you letters/ letters of interest from students?

- We do nothing to track this, so it would not directly hurt their rank position, but it would be unusual not to hear back from someone who had any interest in our program. Email is preferable in terms of being able to provide an immediate response, but well done written letters can still impress. Neither can undo a weak application or a weak interview. (IM – Wininger)
- No. They are a waste of time and money. But many smaller, less secure programs demand them. (Ob-Gyn – Samuels)
- Letters are fine, also thoughtful emails are reasonable follow up measures to express interest (Psych – Niedemier)
- No (Neuro – Hart)



7. Do you expect follow-up thank you letters/ letters of interest from students?

- Not necessarily, but I am always impressed when I get them and think more of the student. (NS – Miller)
- We do not expect them, however most students send follow-up thank you letters to the chair and PD at least. A letter of interest from a student is helpful if it is sincere. (ENT – Desilva)
- No!! They are never read and don't affect the outcome of the rank/match. We tell them not to send them. (Ortho – Mayerson)
- Lack of a letter does not preclude your chance of being placed high on the rank list, but I do appreciate them (EM – Gorgas)



7. Do you expect follow-up thank you letters/ letters of interest from students?

- It is nice to get them and the receipt of one, in a timely manner, indicates that least we have received a certain amount of respect. The lack of a thank you may indicate a certain lack of social interactive skill or lack of interest in our program. (Ophtho – Letson)



8. Any additional comments or advice to our students? Any special advice regarding your specialty?

- Be yourself, and be interested. These make the best interviewees. Know the program as well as you can before you interview. Look at their website and get all the information (Roth)
- Be prepared to ask and answer questions. Be relaxed and let us see who you really are as a person. Having at least one excellent letter from a family physician is critical for us. Also, we would like to have them tell us what they plan on doing after the residency (at least have thought about it – type of practice, location).
- Show me that you are committed to Med-Peds. (IM-Peds – Holliday)



8. Any additional comments or advice to our students? Any special advice regarding your specialty?

- Try to connect with OSU graduates who are currently residents or faculty at the institution to see how they compare the program to your known baseline. And Since internal medicine is less competitive than some fields, much of the interview will be an effort to attract you to the program (as much as trying to find out about you.) Internal medicine program directors want applicants who are interested in the broad spectrum of internal medicine even if they are focused on eventually doing a subspecialty fellowship. They are interested in your ability to function as an intern on arrival—so don't overlook the importance of a solid 4th year schedule for clinical experiences—not just research.



8. Any additional comments or advice to our students? Any special advice regarding your specialty?

- Never promise anyone you will rank them #1 if it is not true. They may remember! No program should ever demand to know where they are ranked, but unfortunately some, in a "round about way" do. Be cautious what you put on paper! (Ob-Gyn – Samuels)
- Couples matching can kill you, especially if your significant other is matching in another highly competitive field and that significant other is not as good an applicant as you are. Sit down with the program directors of both "home" programs at OSU and have a frank discussion. (Ob-Gyn – Samuels)



8. Any additional comments or advice to our students? Any special advice regarding your specialty?

- If you are truly highly interested in a program, share this interest and your motivation in a respectful, mature way. In psychiatry, we are highly interested in applicants' communication abilities, so be prepared to "sell yourself" as to your interests and career goals (Psych – Niedemier)
- What I look at are 1. board scores 2. Clinical performance 3. Awards 4. Research 5. Recommendations from people I know. 6. Some evidence the student knows what he/she is getting into in neurosurgery. It helps to do a Subl. If you might be on the cusp doing a subl here is helpful. Research is important but not essential.(NS – Miller)



8. Any additional comments or advice to our students? Any special advice regarding your specialty?

- Interview at as many programs as possible given time and monetary constraints. (ENT – Desilva)
- Be yourself, put your best foot forward, sell yourself, show how you would be a good fit. Grades in clinical years should be well above average, Step 1 score should be 220+, do some research and be able to talk intelligently about it during interviews, be involved in some extra-curricular activities, fit in with residents, show that you have a good work ethic. (Ortho – Mayerson)



8. Any additional comments or advice to our students? Any special advice regarding your specialty?

- Be prepared. Know the program. Maybe even know the program director. Or know the city. But give me some reason why with 150 plus program's out there you chose this one. Always a good idea to know the terminology. Emergency medicine is sensitive about verbiage. It is an emergency department not an emergency room(or ward). We are emergency physicians not ER docs. It is emergency medicine and not ER medicine, etc. (EM – Gorgas)



8. Any additional comments or advice to our students? Any special advice regarding your specialty?

- Be ready to answer detailed questions about ANYTHING that shows up on your application. Don't let a low step one score prevent you from applying. If you have questions please arrange an appointment to discuss your application with either Dr. Letson or Dr. Weber. Carefully pick your letter writers carefully and give them plenty of time to write, and follow up to make sure they have done it. One or two of the letters should be from medical school faculty from core clerkships that have worked with you and numerous other students on a regular basis and who can evaluate your skills in relation to other students (Ophtho – Letson)



Thank you for your attention!

- Questions?
- You'll be fine...., just try to be yourself (but a little more formal...😊)