

SECURING A RESIDENCY IN THE USA (Internal Medicine)

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GMCH Batch 2003

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Still in Medical College (or Med School... AMERICA STYLE)

- ▶ Have fun but study regularly, not just for exams
- ▶ Read standard textbooks
 - ▶ Snell's Clinical Anatomy
 - ▶ Guyton/Ganong
 - ▶ Harper/Lippincott
 - ▶ ROBBINS
 - ▶ KATZUNG
 - ▶ HARRISON'S/CMDT
 - ▶ BAILEY



Still in Medical College (or Med School... AMERICA STYLE)

- ▶ ATTEND CLINICS, see as many patients as you can (Yes, even in 2nd Prof.)
- ▶ Internship
 - ▶ IT'S HARD, so you can complain about it
 - ▶ Working is important. For learning, becoming an actual doctor, ***interesting cases to talk about in your interviews***
 - ▶ If you want, you will find time to study



Still in Medical College (or Med School... AMERICA STYLE)

- ▶ **Step 1 in Pre final (Final Part I)?**
 - ▶ Possible, but hard because of ward leavings, etc.
 - ▶ Start reading Harrison's in pre- final (at least read 6 systems)
 - ▶ Take Step 1 and 2 within a span of 4 months after finishing med school



MOST IMPORTANT FACTORS FOR FMGs

1. USMLE SCORES
 2. USMLE SCORES
 3. USMLE SCORES
 4. USCE (Clerkships)
 5. American LORs/Phone calls
 6. Basic Research/Publications
- ▶ AIM FOR >260
 - ▶ IT IS VERY POSSIBLE
 - ▶ **Two digit scores will NOT be used to report USMLE scores starting July 1, 2011**
 - ▶ <http://www.ecfmg.org/announce.htm#usmlechanges>



STEP 1

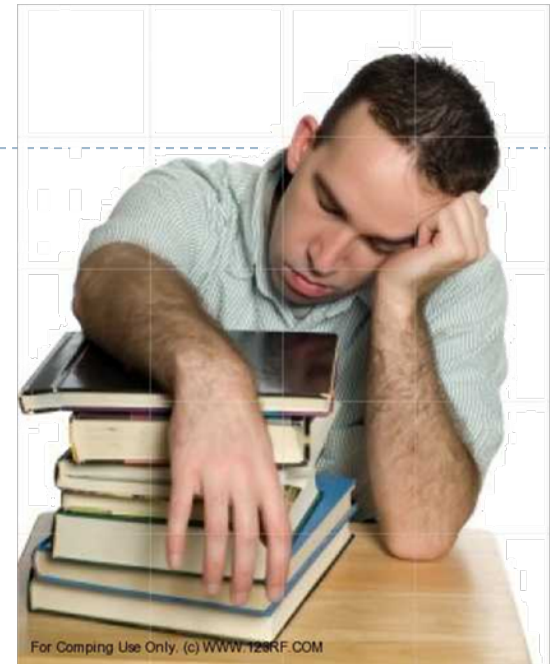
▶ BOOKS

- ▶ KAPLAN for every subject (+/-) behavioral sciences
- ▶ Behavioral Sciences:
 - BRS by Barbara Fadem
 - High Yield Biostats
 - Conrad Fischer 100 ethics questions
- ▶ FIRST AID
 - Good for revision
 - It's a love or hate book--I hated it.
 - Many people love it and have done well
 - Quick read
 - Ideal before Uworld and the actual test



STEP 1

- ▶ **OTHER BOOKS (NOT WORTH IT)**
 - ▶ **GOLJAN'S PATHOLOGY**
 - ▶ Great book
 - ▶ Not needed if you have done final year
 - ▶ It gives you good clinical vignettes
 - ▶ **TOO LONG, NOT WORTH IT.**
 - ▶ BRS Physiology
 - ▶ Kaplan Q Bank
 - ▶ Any other book (Lippincott, etc)



STEP 1

- ▶ Do we need to read Robbin's and Katzung again?
 - ▶ No
 - ▶ BUT
 - ▶ Refer to these books if you need to understand any specific concepts
- ▶ **USMLE IS ALL ABOUT CONCEPTS and CLINICAL CORRELATION**



STEP 1

- ▶ **USMLE World**

- ▶ <http://www.usmleworld.com/>
- ▶ Practice question bank
- ▶ **MUST, MUST, MUST**
- ▶ **LEARNING TOOL** (read the explanations carefully)
- ▶ Take notes
- ▶ **EDUCATIONAL OBJECTIVES ARE PEARLS**



STEP 1- MY MANTRA

- ▶ Read through Kaplan twice (6-8 months of internship, 3 months ob/gyn, 3 months medicine, 2 months comm. med)
- ▶ Unfortunate 3 month break for clerkships (Oct-Dec). PLEASE PLAN BETTER!!
- ▶ USMLE World (30-40 days)
 - ▶ Subject wise or mixed
 - ▶ Timed mode
 - ▶ ONCE
- ▶ Revise Kaplan (15-20 days)
- ▶ EXAM!!



STEP 2 CK

- ▶ KAPLAN (twice) and Uworld (once)
- ▶ Revise Kaplan and Uworld notes
- ▶ Preparation for psych remains the same as for Step 1
- ▶ Total time 60-90 days (With no job or internship)



STEP 1 and 2CK: BOTTOM LINE

- ▶ KNOW YOUR FACTS (and syndromes...blah)
- ▶ PRACTICE
- ▶ PRACTICE
- ▶ PRACTICE
- ▶ AND PRACTICE



STEP 2CS

- ▶ Don't take it lightly
- ▶ Preparation
 - ▶ FIRST AID (this is our savior for CS)
 - ▶ www.usmletoamd.com
 - ▶ Find a partner (**PRACTICE, PRACTICE, PRACTICE AND MORE PRACTICE**)
 - ▶ **MORE PRACTICE**
- ▶ Total time: 20-30 days
- ▶ **STANDARDIZED TEST:**
 - ▶ Center for exam is not important
 - ▶ Take it wherever you have a place to stay.



USCE

- ▶ **Gaining A LOT of importance**
- ▶ It is expensive, but worth it
 - ▶ Clinical exposure in the US
 - ▶ US LOR
 - ▶ Probably, the only realistic chance to get plugged into research in the US
- ▶ **Ideal number of clerkships: 3 months (New York has a maximum 12 week clerkship limit)**



USCE

- ▶ Sub Internship (sub-I): Most hands on experience (and probably the best LOR). One works with a 1st year resident a.k.a. Intern (hence called a sub-I)
- ▶ Subspecialty consult services: Considered by some as easier to get. Not as busy, but you can do great work especially if it is the branch you are passionate about
- ▶ Getting a clerkship is easier in November/December- Might have some truth to it esp. for 4th year electives. US grads take these months off to interview



USCE

▶ Research Electives

- ▶ 3 months long
- ▶ If you are really looking to do research before residency
- ▶ If you pick your institute and lab well, it can help in finding postdoctoral positions



USCE

▶ Where to go

- ▶ Top Tier vs. Hospital where you are looking to match
- ▶ YOUR CALL
- ▶ PERSONALLY , YOU CANNOT GO WRONG WITH TOP TIER HOSPITALS
- ▶ Some exceptional programs which take FMGs consistently. e.g. UAB (?), Baylor, **Cleveland Clinic**, U of M, UConn, UTSW
- ▶ Some programs have never taken an FMG. Not the best place for your clerkship (for e.g.. U of Vermont, George Washington, OSHU), unless it has a BIG NAME
- ▶ If you want to match at a particular program for sure, it makes sense to work there



USCE

- ▶ <http://services.aamc.org/eec/students/>
- ▶ Hospitals where GMCHites have rotated for clerkships
 - ▶ Harvard Medical School
 - ▶ Very expensive
 - ▶ Very low chance of matching at these hospitals
 - ▶ Great LOR from HMS carries a lot of weight
 - ▶ OPPORTUNITY TO FIND RESEARCH POSITIONS
 - ▶ Same applies to
 - ▶ Yale
 - ▶ Cornell
 - ▶ John's Hopkins
 - ▶ Others



USCE

- ▶ Other hospitals where GMCHites have gone
 - ▶ Tufts
 - ▶ Northwestern
 - ▶ University of Alabama
 - ▶ Mt. Sinai, NY
 - ▶ University of Rochester, NY
 - ▶ The list continues to grow every year



USCE

- ▶ GREAT PLACES WHERE FMGs MATCH consistently
 - ▶ **Baylor**
 - ▶ They issue tokens during the end of January
 - ▶ It is only possible to apply if you have a token
 - ▶ **Cleveland Clinic** (Do a rotation here, get a high three digit [260+] and you have a GREAT chance to match here)
 - ▶ **UPMC ISP (AMAZING PROGRAM!!!!) Probably the best program which consistently takes FMGs.**
 - ▶ UTSW Dallas (AllMS)
 - ▶ U of Minnesota (AllMS)
 - ▶ U of Iowa (AllMS)
 - ▶ **Univ of Alabama** (AllMS; change in their program director)



USCE (Tips for clerkship)

▶ Conquering the clerkship

▶ http://www.gmccosa.org/Connections_2009_02.htm#Clerkship

▶ Some other tips:

- ▶ 1. Be on time, work super hard, respect your colleagues; especially your intern/fellow with whom you will be spending most of your time on a clerkship.
- ▶ 2. Read about your patient's disease and apply it to your patient. Uptodate (www.uptodate.com) and PubMed are excellent resources.
- ▶ 3. Following up on your patients is very important, unlike in final year where we never see the patient again after presenting the case to an attending.
- ▶ 4. Try and make special reference to the non medical problems of your patient- social support, end of life care decisions, etc.
- ▶ 5. Respect patient rights and confidentiality. Be sure you are don't breach any HIPAA guidelines.
- ▶ **6. MOST IMPORTANTLY- BE A TEAM PLAYER. No one wants a brilliant student on their team who is a pain to work with.**



Visas for Clerkships

- ▶ Most places allow a visitor visa (B1/B2)
- ▶ UAB- J1 short term scholar visa. Doesn't need to a waiver (it is best to verify though)
- ▶ Baylor- Student visa



USCE in 3rd year

- ▶ AIMS students do it regularly, if you have friends there, seek their guidance
- ▶ Students from GMCH have started doing research electives as well- ask around and get help
- ▶ **ADDS TO OVERALL EXPENSES**, you have to maintain a balance (and also a BANK balance!)



Observerships

- ▶ Better than not doing anything
 - ▶ **Preferably in a hospital where you can match**
 - ▶ It is very possible to get a call and even match into good university programs. Examples:
 - ▶ **UPMC ISP!!!!!!!**
 - ▶ Cleveland Clinic
 - ▶ UAB
 - ▶ Boston University
 - ▶ UConn
 - ▶ University of New Mexico
 - ▶ UAMS
 - ▶ University of Indianapolis
 - ▶ Visiting Clinician Programs at Mayo Clinic, Phoenix (FREE!!!!!!)
-
- ▶ ▶ Mount Sinai, Florida

What if you can't do any of this

- ▶ Work on your board scores
- ▶ “The limits you face in the US are the ones you place on yourself”
 - P.L. Westesson, Chief of Neuroradiology, URMC, Rochester
- ▶ If you are willing to spend the time and effort, you will never **NOT** find opportunities



RESEARCH



RESEARCH

▶ ADVANTAGES

- ▶ Builds your CV
 - ▶ LORs/phone calls
 - ▶ Publications
- ▶ Only possible way to get into a top tier program
- ▶ Broadens scientific horizons
- ▶ Addresses future career goals
- ▶ Cultural adaptation to the US (more imp than one would imagine!)

▶ MENTORSHIP

- ▶ **Most important factor during research**
-



RESEARCH

▶ DISADVANTAGES

- ▶ Things can go wrong if your mentor is not supportive
- ▶ Although research does give you a chance at a great residency, **it is not a guarantee**
- ▶ If you have the chance to work with a great mentor in a lab, **DON'T MISS IT**



How to get a research job

▶ Paid research position

- ▶ Talk to people during your clerkship. Preferably go in with a recommendation.
- ▶ CONNECTIONS, rarely work
- ▶ Email scientists at places which have abundant funding. Luck is involved, but if you write to 500 people, someone will respond for sure

- ▶ For more tips:
 - ▶ http://www.gmccosa.org/Connections_2011-02.pdf
 - ▶ www.gmccosa.org/Research_dummy_article.htm
 - ▶ www.gmccosa.org/careerseries_002.htm



How to get a research job

- ▶ **Unpaid research job**
 - ▶ Relatively easier to find (Relative acf paid positions)
 - ▶ If you are working for free, your goals of obtaining a residency position should be made clear at the beginning
 - ▶ Obvious financial difficulty
 - ▶ If you impress them, they might pay you a stipend after 6 months (would not recommend putting in more than 6 months of work for free)



How to get a research job

- ▶ Unpaid research positions
 - ▶ Look at places where the cost of living is cheaper or you have family to stay with
 - ▶ WashU, St.Louis, MO
 - ▶ UAB, Birmingham, AL
 - ▶ Yale, New Haven, CT
 - ▶ Mayo, Rochester, MN
 - ▶ Cleveland Clinic, Cleveland, OH
 - ▶ John's Hopkins, Baltimore, MD
 - ▶ If you decide to work for free, make sure the mentor is encouraging and watches out for you.



How to get a research job

- ▶ Can we help?
- ▶ The best way seniors can help is by helping you make the best decisions for yourself



APPLICATIONS

- ▶ Apply all over
- ▶ 100-180 programs
- ▶ Get in touch with seniors for the list of programs from last year
- ▶ Three tiers
 - ▶ Places you would LOVE (least)
 - ▶ Places you would be CONTENT (maximum)
 - ▶ Places where you MIGHT have to go



GREAT PROGRAMS (FMG FRIENDLY)

- ▶ There are many, but so are the number of candidates
- ▶ Refer to current application/ lists for details
- ▶ Also try to find lists of FMG friendly programs online or from seniors.



PERSONAL STATEMENT

- ▶ Are they important
 - ▶ Not as much for getting you an interview
 - ▶ BUT, once you get an interview
 - ▶ Something to talk about
 - ▶ **HAS TO BE YOU, don't look at examples on the internet:
NO PLAGIARISM PLEASE**
 - ▶ SEPARATES YOU FROM OTHERS
- ▶ Junior and Senior alumni mentorship system can be of help- ask your seniors for input **AFTER** making a personal statement of your own



Letters of Recommendation (LOR)

- ▶ **VERY VERY VERY IMPORTANT**
- ▶ ESP. WHEN THE RANK LIST IS BEING MADE
- ▶ 4 LORs
 - ▶ 1 from home medical school (eg chair of medicine)
 - ▶ 3 others, preferably try for 2 American LORs.
- ▶ Be sure that you have worked with an attending long enough to get a great letter
- ▶ ASK FOR A **STRONG** LETTER OF SUPPORT
- ▶ Make sure they write it before you go back to India



Letters of Recommendation (LOR)

- ▶ **ALWAYS WAIVE YOUR RIGHT TO SEE IT**
- ▶ Weak LORs might hurt you, so specifically ask for a “strong letter of recommendation”
- ▶ So say: “I will be applying for residency in internal medicine. Would you feel comfortable/have some time to write a strong letter of recommendation for me?”



HOW TO GET INTERVIEWS

- ▶ Most FMGs get rejected without their application being reviewed.
- ▶ GMCH is still not a well known school (WE HOPE TO CHANGE THIS SOON!!), so we have to work hard to get our application reviewed.



HOW TO GET INTERVIEWS

▶ SENIORS

- ▶ We can't help everybody, but we can try for someone who we know and believe has potential
- ▶ Programs who have GMCites in their house staff or are FMG friendly
 - ▶ Write directly to the PD, and if you have a good CV they will invite you
 - ▶ You can get most email id's on the internet, GOOGLE or PUBMED IT!!
 - ▶ Call the Program Coordinator. Requires a lot of persistence
- ▶ CONTACTS. Use them, everyone else does. EVEN AMGs or American schools use contacts to get interviews!!!!



INTERVIEW

- ▶ **ATTIRE (MEN)**
 - ▶ Black or navy blue suit
 - ▶ White shirt
 - ▶ Tie
 - ▶ Polish your shoes
 - ▶ Match your socks



INTERVIEW

▶ ATTIRE (women)

▶ Black, Navy or Gray suit

- ▶ Pant or skirt suit, depending on your comfort level
- ▶ Solid collar shirt (white, blue or light pink)
- ▶ Black, Navy or Gray suit

▶ Comfortable heels

- ▶ One or two inch, be able to walk in them

▶ Conservative amount of make-up and perfume

- ▶ The interviewer should not notice either your perfume or your makeup. This is not where you should leave your lasting impression.



INTERVIEW

- ▶ No talking in Hindi / Punjabi
- ▶ I recommend not to interview with friends
- ▶ Be polite and courteous
- ▶ Be humble
- ▶ SMILE
- ▶ DON'T ASK PEOPLE THEIR SCORES
- ▶ DON'T SPEAK TOO MUCH (esp. during Morning Report. This is not a time for you to show off, it is for the residents to learn)
- ▶ DON'T SPEAK TOO LITTLE



COMMON QUESTIONS

- ▶ Tell me about yourself (worst question)
- ▶ A patient experience
 - ▶ Which you remember
 - ▶ Which was hard
 - ▶ Where you had to take a stand
 - ▶ Where you had a disagreement with your colleagues or seniors
 - ▶ Which changed you
- ▶ Also try (an excellent resource):
http://www.gmccosa.org/messageboards_USMLE_030.htm



COMMON QUESTIONS

- ▶ Where do you see yourself in 5/10 years
- ▶ Why train in the US
- ▶ Why our program
 - ▶ Clinical training
 - ▶ They like it if you have family there. I do not recommend making stuff up, but do your research about the area
- ▶ Your strengths
- ▶ Your weaknesses
 - ▶ Don't say you have none
 - ▶ Should not be too self incriminating
 - ▶ Mention how you have improved upon your weakness



QUESTIONS YOU SHOULD ASK

- ▶ Mentorship
- ▶ Opportunities for research (depending on the program)
- ▶ Patient population you will be serving
- ▶ Didactics
- ▶ Visa ??- Tricky
- ▶ Any other questions you may have
- ▶ Try and ask at least one question in response to which they can boast about their program (e.g. What do you think are the strengths of your program?)



THANK YOU NOTES

- ▶ Cards vs. Email
- ▶ Personalize the notes according to the conversation you had
- ▶ Try and pose a question as well
 - ▶ Shows you are interested
 - ▶ They will generally get back to you
- ▶ Seasons greetings card to programs you are really interested in



THANK YOU...Questions?



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