Class of 2018
Residency Application and Matching Process

January 18, 2017

Jason Bergschneider
Neveen El-Farra, M.D.
Lee Miller, M.D.
Agenda

1. Career Choice and Competitiveness-Support!
   a. Advising resources
   b. Data sources
   c. AAMC

2. The Application Process
   a. Main NRMP Match vs. Early Match
   b. Military Match
   c. Couples Match
   d. Which Programs to Choose?

3. The Application
   a. ERAS application
   b. Letters of Recommendation
   c. Personal Statement
   d. MSPE
   e. USMLE Transcript

4. Application Timeline and Additional Advice
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Support in MS-3 and MS-4 Years
Support in MS-3 and MS-4 Years
Choosing Your Career

1. You do not have to make this decision now!

2. There are many resources, staff and faculty available to help guide you through this process:
   a. AAMC’s Careers in Medicine
   b. DGSOM Resident Roundtable Discussions
   c. Career Advising Team
   d. College Advisors
   e. College Mentors
   f. Deans and Dean’s Office Staff
Choosing Your Career, continued:

3. Review Charting Outcomes in the Match on NRMP Web Site to assess your qualifications and competitiveness for specialties.

*Charting Outcomes in the Match*

4. Complete the *Choosing Your Specialty* exercise.
Charting Outcomes in the Match for U.S. Allopathic Seniors

Characteristics of U.S. Allopathic Seniors Who Matched to Their Preferred Specialty in the 2016 Main Residency Match

1st Edition

Prepared by: National Resident Matching Program
www.nrmp.org

September 2016

http://www.nrmp.org/

MAIN RESIDENCY MATCH DATA

Charting Outcomes in the Match, 2016
12 measures that NRMP studies each year, by specialty:

1. Step 1 score
2. Step 2 score
3. Research experience
4. Abstracts and publications
5. Work experience
6. Volunteer experience
7. AOA
8. Graduating from one of the top NIH funded medical schools (that's us!)
9. PhD's
10. Graduate Degrees
11. Mean number of programs ranked
12. Mean number of specialties ranked
Anesthesiology

Chart AN-3

USMLE Step 1 Scores
Anesthesiology

U.S. Seniors
- Matched
- Not Matched

- <= 180: 1, 3
- Between 181 and 190: 21, 14
- Between 191 and 200: 63, 23
- Between 201 and 210: 152, 17
- Between 211 and 220: 223, 17
- Between 221 and 230: 256, 11
- Between 231 and 240: 198, 3
- Between 241 and 250: 126, 1
- Between 251 and 260: 63, 2
- >260: 9, 0
- Score Unknown: 1, 0
4th Year Support Team

1. College Mentors and Advisors
   • Advisor - One of the College Chairs or Vice Chairs will serve as your advisor
   • College Mentors - You will also be matched with a faculty mentor in your specialty choice

2. Deans
   • Associate Dean for Student Affairs—Dr. Lee Miller
   • Associate Dean for Curricular Affairs – Dr. Neveen El-Farra
   • Associate Dean for Medical Student Research and Scholarship – Dr. Linda Baum
   • Associate Dean, Charles Drew College of Medicine – Dr. Daphne Calmes
   • Assistant Deans Fitzgerald, Lehman, Napolitano and Yeh
4th Year Support Team, continued

3. Student Affairs and Curricular Affairs Offices

• Director of Student Affairs – Brandon Susselman
• Director of Curricular Affairs – Azi Jalali
• Colleges Coordinator – Courtney Klipp
• Director of Career Development and Well Being - Aurora Reyes
• Residency Application Counselor – Jason Bergschneider
• Year 3 and Year 4 Counselor – Gezelle Miller
Support in MS-3 and MS-4 Years
Research and Taking Time Off

Why?
  a. Interest!
  b. If you decide to apply to a competitive specialty and have concerns that you do not have enough research…

More Info?
  a. NRMP Data and Research Reports
  b. AAMC “Roadmap to Residency”

Alternative options?
  a. You may not necessarily need to take a year off
  b. You can get involved during 3rd year and research electives in 4th year.

Questions/Advice?
  a. Shamar Jones
  b. Linda Baum, MD, PhD
  c. College Chairs
  d. Deans
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4. Application Timeline and Additional Advice
Glossary and Terms

ERAS vs. NRMP
The Application Process

Main NRMP Match
1. Categorical Programs
2. Advanced Specialty Programs
3. Preliminary Programs

Early Match Specialties
1. Ophthalmology
2. Urology
National Resident Matching Program (NRMP)

The **NRMP Main Residency Match** provides an impartial venue for matching applicants' preferences for residency positions, with program directors' preferences for applicants.

Each year approximately 16,000 U.S. allopathic medical school seniors and 15,000 graduates of osteopathic, Canadian or foreign medical schools compete for approximately 24,000 residency positions.
Glossary and Terms
Categorical vs Advanced vs Preliminary Programs

There are four categories of programs in the Main Residency Match:

1. **Categorical (C)** programs begin in the PGY-1 year and provide the training required for board certification in medical specialties. Categorical programs in primary care medicine and primary care pediatrics are designated by *(M)* to distinguish them from regular medicine and pediatrics programs.

1. **Advanced (A)** programs that begin in the PGY-2 year after a year of prerequisite training.

1. **Preliminary (P)** or one-year programs beginning the PGY-1 year and provide prerequisite training for advanced programs.
4. **Physician (R)** programs are reserved for physicians who have had prior graduate medical education. Physician programs are not available to senior U.S. medical students.
NRMP vs. ERAS

The NRMP is not an application service or a job placement service. Applicants must apply directly to residency programs in addition to registering for the Match. Most programs participate in the Electronic Residency Application Service (ERAS), which transmits residency applications to program directors via the Internet. **Applicants must register with both NRMP and ERAS to participate in the services of each.**
Electronic Residency Application Service (ERAS)

ERAS is the Electronic Residency Application Service developed by the Association of American Medical Colleges to transmit electronically the residency applications, personal statements, recommendation letters, Medical School Performance Evaluations (MSPE), transcripts, and other supporting credentials from medical schools to residency program directors.
Fees for 2017

ERAS application fees are based on the number of programs applied to per specialty, and you pay online using Visa or MasterCard.

**ERAS**

- **Application Fees**
  - Up to 10 programs per specialty - $99
  - 11-20 - $12 each
  - 21-30 - $16 each
  - 31 or more - $26 each

- **USMLE Transcript Release**
  - $80 (assessed once per season)

**NRMP Main Residency Match**

- **Registration Fee**
  - $75.00 (+$50 after deadline)
  - $90.00 (couples match)

- **Ranking Fee**
  - Up to 20 programs FREE then $30 for each additional program
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Military Match

The process of matching to a residency is slightly different for military medical students than it is for civilian students. Students must apply to both the military Joint Service Graduate Medical Education Selection Board (JSGMESB) and ERAS, and they must rank their residencies by preference.

The military match takes place first and students are most likely to be matched at that time.

Additional information: Medicine and the Military
The NRMP allows couples participating in the same Match to form pairs of program choices on their rank order lists that are considered in rank order when the matching algorithm is processed.

A couple will match to the most preferred pair of programs on their rank order lists where each partner has been offered a position.
Choosing Programs

1. Start reading about programs through a comprehensive compendium of accredited programs on the AMA–FREIDA website
2. Meet with College Advisors and Mentors
3. Meet with faculty members
4. Discuss with current residents
AMA FREIDA

An online database maintained by the AMA of accredited residency and fellowship programs.

http://www.ama-assn.org/ama/pub/education-careers/graduate-medical-education/freida-online.page
Search Results
28 program(s) match your search criteria. Click on the name of the program for basic information. Programs with * have additional information.

Albany Medical Center Program
Program Id: 4403521191
Specialty: Surgery-General
City/State: Albany/New York

Lincoln Medical and Mental Health Center Program
Program Id: 4403500439 *
Specialty: Surgery-General
City/State: Bronx/New York

Montefiore Medical Center/Albert Einstein College of Medicine Program
Program Id: 4403521202 *
Specialty: Surgery-General
City/State: Bronx/New York

Bronx-Lebanon Hospital Center Program
Program Id: 4403511206 *

Add to Comparison
New York Presbyterian Hospital (Columbia Campus) Program

Identifier 440-35-21-229
Specialty Surgery-General

Basic Information  General Information  Faculty & Trainees  Work Schedule  Educational Environment  Employment Policies & Benefits

Location Map

Last updated: 10/13/2015  Survey received: 07/07/2015

Program Director:

Tracey D Arnell, MD
New York Presbyterian Hosp-Columbia
Milstein Hosp 7GS-313
177 Fort Washington Ave
New York, NY 10032
Tel: (212) 305-3038
Fax: (212) 305-8321
E-mail: mh487@columbia.edu

Information

Web Address
http://www.columbiasurgery.org/residency/

Accredited length of training
**USMLE Step 1 and Step 2 requirements for interview consideration**

<table>
<thead>
<tr>
<th>Step 1 required</th>
<th>Minimum score</th>
<th>Step 2 required</th>
<th>Minimum score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>236</td>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>

**Average Step 1 score (range) of current residents/fellows**

221 - 240
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The Application

1. ERAS application/Curriculum Vitae
2. Letters of Recommendation
3. Personal Statement
4. MSPE
5. USMLE Transcript
6. DGSOM Transcript
7. ERAS fee
8. Photo – Free and taken during College Foundations
Curriculum Vitae Overview

**What:** Relevant information from medical school that encompasses the following:
- Education
- Work
- Research
- Volunteer

**When:** For use throughout MS-3 and MS-4 years

**Where:** Submit to mentors/letter writers
- Use content to populate ERAS
- Submit for AOA consideration
ERAS Application Worksheet for 2018

1. A sample ERAS application is available to you now, and may be updated in the spring (a preview of actual application)

2. Helps you to organize your thoughts and content in advance

https://students-residents.aamc.org/attending-medical-school/how-apply-residency-positions/tools-residency-applicants/
Example of CV (in ERAS format)

AAMC ID:

Present Mailing Address

Preferred Phone:
Alternate Phone:
Mobile Phone:

Permanent Mailing Address

Medical Education
UCLA/Drew Medical Education Program, Los Angeles, California
06/2010
M.D., 05/2014

Education
Undergraduate - UC-Berkeley, Berkeley, CA
Rhetoric
08/2002 - 08/2006
B.A., 08/2006

Membership and Honorary/Professional Societies
AOA elections held during Senior year
American Congress of Obstetricians and Gynecologists (ACOG) Member; American Academy of Family Physicians (AFP) Member;
Charles Drew Society Member;

Medical School Honors / Awards
Albert Schweitzer Fellowship (ASF); National Medical Fellowship; Oliver Goldsmith, M.D. Kaiser Permanente Fellowship; QueensCare:
Gene & Marilyn Nuziard Scholarship; Miller-Lawrence Scholarship; Axillary to Charles Drew Society Scholarship; Charles Drew Society Scholarship; The Association of Black Women Physicians Scholarship
Example of CV (ERAS format - Continued)

Work Experience
09/2006 - 12/2010  Average Hours/Week: 40
Kaiser Permanente: Division of Research, California
Research Associate I, Assiamara Ferrera, MD, PhD
Responsibilities: 1) Assisted in a diet, exercise and breast-feeding intervention study aimed to prevent the onset of Type II Diabetes in women who have gestational diabetes 2) Organized and entered patient data using Microsoft Access 3) Involved in collection of data through individual interviews 4) Centrifuged and processed blood specimens 5) Conducted data entry and analysis using SAS Data Program

Volunteer Experience
07/2013
Charles Drew University Post-Baccalaureate, California
Mentor
Responsibilities: 1) Provide academic guidance with MCAT, study strategies and support to a pre-medical student enrolled in the Charles Drew Post-Baccalaureate program

10/2011 - 03/2013  Average Hours/Week: 7
LCME Student Sub-Committee, California
Committee Member, Joyce Fried
Responsibilities: 1) Nominated for student position on the Liaison Committee for Medical Education (LCME) student board 2) Met with LCME Committee and discussed academic learning environment and current educational climate at UCLA 3) Co-drafted a survey for UCLA’s student body to assess the education program, curriculum, student support services, and the learning environment

08/2011 - 12/2012  Average Hours/Week: 5

Research Experience
10/2012  Average Hours/Week: 10
Charles Drew University/UCLA, California
Research Investigator, Dotun Ogunyemi, MD
Title: An analysis of obstetric cholestasis and association with pre-existing medical conditions in California. A retrospective study.
Responsibilities: 1) Conducted literature review 2) Developed the initial study design and submitted IRB application 3) Review maternal and child data collected by the Office of Statewide Health Planning and Development (OSHPD) of California hospital discharges between 2005 and 2012

Publications

Peer Reviewed Journal Articles/Abstracts
Types of LOR’s

1. Individual faculty member who supervised you in the clinical setting (MS-3 vs MS-4)
2. Department Chair letter (or his/her designee)
3. Research mentor
4. Mentor in significant extracurricular activity
5. Longitudinal preceptor
6. Specialty Specific
   a. Standard Letter of Evaluation (SLOE) for Emergency Medicine
   b. Universal Supplemental Medical Student Evaluation (for some Orthopedic surgery programs)
Letters of Recommendation

Overview

Who:  Faculty (MD or PhD)
      Knows you well
      Is well-known

What:  4 LORs total (Yr. 3 vs Yr. 4)
       2+ from your specialty
      Consider 1 from Medicine or Surgery

When:  Ask in MS-3 year and follow-up in MS-4 year
Obtaining a LOR
Etiquette

1. Whenever possible, ask in person and ask in advance
2. Ask if they can write a strong letter of recommendation on your behalf.
3. Please allow at least 4 weeks for them to write (let them know your deadlines/timelines)
4. Best to provide letter writer with your CV, Personal Statement (even if a rough draft), and an ERAS Letter Request Form.
LOR Logistics

1. Your letter writer will upload the LOR directly to ERAS.

2. Faculty members will have instructions on the ERAS Letter Request Form.

3. You can keep track of your LOR’s and all residency application documents through ERAS.
Chairs Letters

Who typically needs a Chair’s Letter?
- General Surgery
- Internal Medicine
- Ob/Gyn
- Orthopaedic Surgery
- Pediatrics
- Med-Peds
- Urology
- Anyone applying to preliminary medicine or transitional programs
Contacts for Chair’s Letters

**General Surgery**
Ronald Busuttil, MD
Christian deVirgilio, MD

**Internal Medicine**
Cedars-Sinai: Mark Noah, MD
Harbor: Eric Daar, MD
Olive View: Soma Wali, MD
West LA VA: Gregory Brent, MD – Please send requests to Emily Cantor, MD
UCLA: Wendy Simon, M.D.

**Orthopaedic Surgery**
Jeffrey Eckardt, MD
(co-signed by Nelson Soohoo, MD)

**Obstetrics & Gynecology**
Lisa Nicholas, MD
(co-signed by Andrea Rapkin, MD)

**Pediatrics**
Deborah Lehman, MD
(co-signed by Sherin Devaskar, MD)

**Urology**
Jennifer Singer, MD
(co-signed by Mark Litwin, MD)
Special LORS:

1. **Standardized Letter of Evaluation (SLOE)**
   For Emergency Medicine

2. **Universal Supplemental Medical Student Evaluation**
   An extra form requested by a handful of Orthopaedic Surgery programs
Personal Statement Overview

**What:** 1 page written statement articulating the reasons for choosing your specialty, your career goals, interests, etc.

**When:** Drafting and editing begins this spring and into the summer

**Where:** Submit to mentors
Submit to letter writers
Upload to ERAS
Personal Statement Example

It was nearing the end of the fall semester of my second year teaching 8th grade science in Watts, California through Teach For America, when my principal informed me that I [learned] I would be getting a new student. That Thursday, Devonte (an African American boy with generalized vitiligo) entered my classroom and was greeted by one of the赤露的 introductions one could receive, and my students looked to The laughter and more. Where every other day evaporated in my head to this day— it was one of the赤露的 introductions one could receive. Shortly before, Devonte did not appear to react to the least bit to ever the terrible comments it was no surprise when. I learned he revealed to me later that years of cruelty and rejection had created in Devonte a life simply stripped of hope. Over the remainder of the academic year, I listened quietly to the disquieting the stories tales of a boy whose skin defined his every interaction. Isolated and disbelieved, Devonte had begun

despairing his skin with the flame from a lighter to feel more black. In was the topic of every introduction he had ever had. I learned that his mother was told it was "their pregnancy and poor diet" that caused Devonte's vitiligo, that no one ever bothered to ask Devonte what he wanted to be when he grew up, and perhaps most disturbing of all, he had attempted on numerous occasions to destroy his skin by burning it with a lighter in order to feel more black and \"fit.\"

Within my classroom, I guarded the Devonte's whispered scars and timid dreams the same way I had learned to do for so many of my brilliant and wounded students. It demanded a fierce loyalty, a depths of compassion, both of which were tested daily by the emotional, mental, and physical demands of what became more of my life than mere a job. Although it was not always easy to me at the time, I am confident that my experiences Teaching Devonte ignited my interest in dermatology and laid the framework which subsequently developed through years of future academia and personal growth. Developing a relationship with Devonte's teacher and mentor has helped him not to only jump but also to live in skin, because of the potential to help and support others with the health skin disease. When

I entered medical school, I did not immediately feel inspired to healing the scabs and wounds of others and to learning all that I could to do so. Although it was not obvious to me at the time, I am confident that my experience teaching Devonte ignited an interest in dermatology, the framework of which subsequently developed through years of scholarly pursuit and personal growth. As a result, I examined unusual cutaneous malignancies within the divisions of hematology/oncology and infectious diseases. I had the unparalleled opportunity to be involved in the clinical care and ultimate manuscript of an elderly man with blastoid lymphoid dendritic cell neoplasms, an exceedingly rare malignancy with dismal prognosis which often manifests initially with cutaneous involvement. The management of this complex medical and dermatologic illness necessitated deep recognition of the dermatologic manifestations of systemic diseases, prompt accurate diagnosis, and early referral to dermatology oncology to ensure appropriate staging and treatment were initiated for such an aggressive disease. It was during the care of this patient I recognized myself an insatiable desire to learn all that I could to in order to truly grasp the complex overlap of cutaneous manifestations in systemic diseases. Although my curiosity has been peaked by cutaneous oncology, I also recognize that my inquisitive nature as a former teacher lends itself well to a lifetime of learning all aspects of the skin including the management of autoimmune diseases, cutaneous vasculitides, infectious diseases, and other cutaneous manifestations of systemic diseases.

I enter the field of dermatology and the next step of training with three unique skills: the first, as a teacher who invested in engaging others with the learning process and the second, as a physician-leader who having completed the MD/MBA program at UCLA. I endeavor to apply the skills I have gained in an academic setting, notably the intricacies of organizational behavior and operational efficiency and am well-equipped to respond to the critical issues academic institutions will inevitably face in the not so distant future. I am committed to being a leader instead of a "should." I have the stamina to search tirelessly for answers to even the most complex cutaneous conditions that enter my care. I am humble and acutely aware to always remember that is is a great privilege it is to care for and examine one of the most visible and yet private organs of the human body. This recognition inspires me to approach patient care and education and to always teach my patients about their conditions in a most sincere and culturally sensitive way. I endeavor to apply the skills I have gained in an academic setting, notably the intricacies of
Personal Statement

1. Review drafts with faculty mentors, advisors and Career Advising Office
2. Review suggestions from AAMC’s Roadmap to Residency
3. Schedule a one-on-one appointment with the Graduate Student Resource Center http://gsrc.ucla.edu/gwc/
4. Have your peers and family members give input on your drafts
5. Bring draft to your meeting with the Dean
Personal Statement

Stay tuned for College Foundations!

One Hour Session on Tips for the Personal Statement scheduled for the whole class (all Colleges together)
The Medical Student Performance Evaluation (MSPE)
AAMC Rationale for Changing the MSPE Format

1. MSPE must be a true “Performance Evaluation” rather than a Recommendation
2. Eliminate bias based on the Dean’s familiarity with student
3. More fairly document performance for all students
4. Using the same format across medical schools will help to make the MSPE’s better interpretable by residency programs
AAMC Guidelines for MSPE

**Recommended Changes:**

1. Information in the MSPE should be **standardized** across schools, clear, concise, and presented in a way that allows information to be easily located.

1. The six **ACGME Core Competencies** should be highlighted when possible.

1. Details on **professionalism** deficiencies should be included in the MSPE.
Recommended Changes, continued:

4. Unique Characteristics page is replaced by three bulleted items (with a maximum of 2 lines per bullet)

4. Locate comparative data in the body of the MSPE

4. Include information on how final grades and comparative data are derived.
MSPE Overview

Previous Sections:

1. Identifying Information and Academic History
2. Unique Characteristics (Drafted by you!)
3. Performance in Pre-Clinical Curriculum
4. USMLE Step 1 score
5. Core Clerkship summatives
6. Senior elective summatives
7. Summary paragraph by the Dean

New Sections:

1. Identifying Information and Academic History
2. Three bulleted items highlighting your background or interests (“Noteworthy Characteristics”)
3. Performance in Pre-Clinical Curriculum
4. No mention of USMLE scores
5. Core Clerkship summatives (brief!) with graphs for grade distribution
6. No section for senior electives
7. No final punch summary paragraph (replaced by histograms of student’s overall performance)
Academic History

- Extensions, leave(s) of absence, gap(s) or break(s) in educational program
- Participation in other degree program
- Repeated coursework
- Adverse Actions (i.e., Probation based on academic or professionalism issues)
Noteworthy Characteristics (3 “bullets”)

- Present a holistic view of applicant
- Highlight most significant accomplishments, similar to AMCAS, highlighting top 3 accomplishments to provide context
- Three bullet points, each 1-2 sentences
- Your Homework: Think of 5 things you want residency programs to know about you, for you to review in Dean’s meeting
MSPE Sample 1: Leslie Lee

University of Maine
Walter Cronkite School of Medicine

October 2016

IDENTIFYING INFORMATION
Leslie Lee is a fourth-year student in the University of Maine, Walter Cronkite School of Medicine in Portland, ME.

NOTEWORTHY CHARACTERISTICS
- During her second year, Ms. Lee served as the student coordinator for the Community-Based Sanctuary Clinic and secured a $500,000 grant from the United Way of Maine to equip a new seven-room ophthalmology suite for the facility.
- Ms. Lee passed her USMLE Step 1 examination two months after the death of her mother in a motor vehicle accident.
- Ms. Lee gave birth to a son this past August. She successfully completed all her M3 clinical rotations on time, spent the month of August on a pre-arranged research rotation, and commenced her Emergency Medicine rotation in mid-September.
**Obstetrics-Gynecology (April 2016) Grade: Honors**

Overall grade based on Clinical 75% and Exam 25%

Impressive mix of outstanding medical knowledge with teamwork and strong work ethic. Residents reported he meshed with the team. He could be counted upon to provide the latest literature on controversial subjects. The L&D director wrote, "Hard working. Knowledgeable. Enjoyable to teach." His IVF attending reported, "With his research background in epigenetics, he proved an informative colleague to me and my staff. We greatly enjoyed learning of his groundbreaking findings in epigenetics related to obesity. But he was not at all snobbish. On the contrary, he remained humble and inquisitive. We hope to recruit him into our residency program."
Obstetrics-Gynecology (April 2016) Grade: High Pass Overall grade based on: Clinical: 75%, Exam: 25%

Really great teamwork. Residents reported she quickly fit into the team and made sure all the work was done whether it was on her patients or those of her colleagues. The L&D director wrote, "Absolutely delightful student with a great sense of humor and tremendous work ethic. When one of our interns called in sick, Leslie stepped up to staff the triage station and performed splendidly. She even could read rhythm strips accurately. The nurses commented they preferred her communication and teamwork to the intern who had been scheduled. We would take her into our program in a fetal heart beat." Her Gynecology Oncologist attending reported, "Very cooperative. Read a lot."
Example: Rotation performance graph and grading components

Obstetrics and Gynecology (August-October 2015)

Ob/Gyn Clerkship Comparative Performance

<table>
<thead>
<tr>
<th>Number of Students</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
</tr>
<tr>
<td>10</td>
</tr>
<tr>
<td>20</td>
</tr>
<tr>
<td>30</td>
</tr>
<tr>
<td>40</td>
</tr>
<tr>
<td>50</td>
</tr>
</tbody>
</table>

- Pass
- High Pass
- Honors

ObGyn Grading Components

<table>
<thead>
<tr>
<th>Component</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>NBME Clinical Subject Exam (30%)</td>
<td>Honors</td>
</tr>
<tr>
<td>Clinical Skills Exam (25%)</td>
<td>High Pass</td>
</tr>
<tr>
<td>Faculty/Resident Feedback (15%)</td>
<td>High Pass</td>
</tr>
<tr>
<td>Clinical Reasoning Exam (15%)</td>
<td>Pass</td>
</tr>
<tr>
<td>ACE Rounds (15%)</td>
<td>Pass</td>
</tr>
<tr>
<td>Overall ObGyn Grade</td>
<td>High Pass</td>
</tr>
</tbody>
</table>

Comments from clerkship faculty and residents:

- “[Student Name] is an engaged student who asks appropriate questions; he has an appropriate fund of knowledge and is willing to put in the extra effort to get a task done. In the OR he demonstrated respect for patients and staff and was very helpful.”
- “Self-starter, comprehensive knowledge of what entails an H&P.”
Your Clerkship Summatives:

1. Summative paragraph that will be imported into the new MSPE template

2. Additional feedback for each student from supervising residents and faculty that will not be included in the new MSPE template

3. Additional feedback for each student that will not be included in the new MSPE template
SUMMARY

Ms. Lee’s performance places her in the 2nd quartile of her class. Class quartile is calculated based on 3rd year rotation performance that combines shelf exams (30%), clinical grades (50%) and OSCE performance (20%). In addition, we provide comparative information on Ms. Lee’s performance in the six general competencies.
SUMMARY

Mr. Rey has earned a designation of outstanding as a candidate for graduate medical education. This evaluation is based upon shelf exams (50%), clinical grades (25%), and OSCE performance (25%). In addition, we provide comparative information on Mr. Rey’s performance in the six general competencies.
For those students in the old grading system...

1. Identifying Information and Academic History
2. Three bulleted items highlighting your background or interests
3. Performance in Pre-Clinical Curriculum
4. No mention of USMLE scores
5. Core Clerkship summatives (brief!) with NO graphs for grade distribution
6. No section for senior electives
7. No histograms of student’s overall performance
Your Homework Assignment!

1. Complete an **MSPE Questionnaire** that will be emailed to you soon
2. Identify *five* topics for **Notable Characteristics**
3. The rest of the questionnaire is used for advising
4. You can save your progress and re-edit before final submission
5. All information is kept confidential and used for your Dean’s meeting
6. Complete by **March 1, 2017**
Select five items that you would like highlighted in the MSPE. They should be things unique to you or make you “stand out from the crowd.”

Please write up to two sentences about each item (very brief!)

The final three items will be selected by you and the Dean in your MSPE meeting.
USMLE Step 2 CK and CS

1. Requirements
2. Timeline (recommendations and deadlines)
3. Impact on your application
4. USMLE Transcripts
Agenda

1. Career Choice and Competitiveness-Support!
   a. Advising resources
   b. Data sources
   c. AAMC

2. The Application Process
   a. Main NRMP Match vs. Early Match
   b. Military Match
   c. Couples Match
   d. Which Programs to Choose?

3. The Application
   a. ERAS application
   b. Letters of Recommendation
   c. Personal Statement
   d. MSPE
   e. USMLE Transcript

4. Application Timeline and Additional Advice
Application Timeline

January 2017
Select your College – Done! ✓

March 2017
Wednesday, March 1
Submit MSPE Questionnaire and Notable Characteristics

Friday, March 17
Submit initial 4th year schedule requests for lottery

March through May
Apply for Away Electives
Application Timeline (continued)

May through July
Receive ERAS token – activate ERAS account
Begin working on ERAS application
Meet with Deans for MSPE
College Foundations, May 22 - 26
Begin senior electives end of May

August – September
Recommend taking USMLE Step 2 CK and Step 2 CS
Review and Sign-Off on MSPE in September
Submit ERAS application in September (starting on September 15)
Register with NRMP (starting September 15)
Application Timeline (continued)

October 1
MSPE released nationwide on October 1st

October – January
Interviews! (Note requirement to not miss ICU Final Exam!)
Register with NRMP by November 30, fees increase on Dec 1
Early Match programs submit rank lists in early January

February
Rank Lists due at NRMP

March
Match Day is Friday, March 16, 2018
MSPE Meeting with Dean

1. SAO will schedule this for you in May, June, or July

2. It doesn’t matter when you meet with the Dean, or which Dean you meet with, your MSPE will still be released on October 1.
MSPE Meeting with Dean

Materials to bring to the meeting:

1. Curriculum Vitae (CV)
2. Personal Statement (draft)
3. MS-4 electives schedule
4. List of potential/confirmed letter of recommendation writers
5. List of programs you’re considering (if known)
6. **Five suggestions for Background Bullets!**
Additional Scoop from Jason!
Accurate Data and Reliable Advising: How the SAO Helps to Advise You

1. Surveys throughout application process
2. Internal Database and NRMP Data
3. Weekly updates using ERAS for school-specific trends
### Accurate data
NRMP - Main Residency Match Data

#### Figure 1
Percentage of Programs Citing Each Factor And Mean Importance Rating for Each Factor in Selecting Applicants to Interview (N=1,793)

<table>
<thead>
<tr>
<th>Factor</th>
<th>Percent Citing Factor</th>
<th>Average Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>USMLE Step 1/COMLEX Level 1 score</td>
<td>94%</td>
<td>4.1</td>
</tr>
<tr>
<td>Letters of recommendation in the specialty</td>
<td>86%</td>
<td>4.2</td>
</tr>
<tr>
<td>Medical Student Performance Evaluation (MSPE/Dean's Letter)</td>
<td>84%</td>
<td>4.0</td>
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<tr>
<td>USMLE Step 2 CK/COMLEX Level 2 CE score</td>
<td>80%</td>
<td>4.1</td>
</tr>
<tr>
<td>Personal Statement</td>
<td>78%</td>
<td>3.6</td>
</tr>
<tr>
<td>Graduate of U.S. allopathic medical school</td>
<td>75%</td>
<td>4.1</td>
</tr>
<tr>
<td>Grades in required clerkships</td>
<td>70%</td>
<td>4.0</td>
</tr>
<tr>
<td>Gaps in medical education</td>
<td>70%</td>
<td>4.1</td>
</tr>
<tr>
<td>Honors in clinical clerkships</td>
<td>69%</td>
<td>4.0</td>
</tr>
<tr>
<td>Perceived commitment to specialty</td>
<td>69%</td>
<td>4.3</td>
</tr>
<tr>
<td>Specialty</td>
<td># of Applicants</td>
<td>Ave. # Applications Submitted</td>
</tr>
<tr>
<td>---------------------------</td>
<td>-----------------</td>
<td>-------------------------------</td>
</tr>
<tr>
<td>Anesthesiology</td>
<td>10</td>
<td>60.4</td>
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<tr>
<td>Dermatology</td>
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<td>90.1</td>
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<tr>
<td>Emergency Medicine</td>
<td>15</td>
<td>61</td>
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<tr>
<td>General Surgery</td>
<td>13</td>
<td>60.5</td>
</tr>
<tr>
<td>Internal Med/Pediatrics</td>
<td>6</td>
<td>23.5</td>
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<tr>
<td>Internal Medicine</td>
<td>33</td>
<td>23.5</td>
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<tr>
<td>Neurological Surgery</td>
<td>4</td>
<td>57.3</td>
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<tr>
<td>Obstetrics/Gynecology</td>
<td>8</td>
<td>87.9</td>
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<tr>
<td>Ophthalmology</td>
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<td>86.8</td>
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<tr>
<td>Orthopaedic Surgery</td>
<td>15</td>
<td>103</td>
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<tr>
<td>Otolaryngology</td>
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<tr>
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<tr>
<td>PM&amp;R</td>
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<tr>
<td>Radiology-Diagnostic</td>
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<td>Urology</td>
<td>5</td>
<td>77.6</td>
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<tr>
<td>Prelim/Transition Year</td>
<td>65</td>
<td>22</td>
</tr>
</tbody>
</table>
Combining Data and Advising
Knowing what works for many UCLA students

- Apply: 40+
- Interview: 10-20
- Rank: 10
- Applying: 40+
Words of Wisdom: Get the facts

- Know who/what to trust
- Utilize official data
- Ask us if you need help!

*What worked for someone else may not work for you—trust your instincts!*
Resources: Types of Matches and User Guides

1. ERAS User Guide
2. Couples Matching
3. Ophthalmology Match: Centralized Application Service (CAS)
5. NRMP: Registration, Ranking, and Results
6. Military Match
AOA

- Not run by Student Affairs or the Dean’s Office
- Run by the Delta Chapter of Alpha Omega Alpha
- Data used in the election process are de-identified and managed by the Student Affairs Office. Chapter members and student co-presidents are not provided the names of applicants under consideration.