

**SUGGESTIONS FOR APPLYING TO
AN INTERNAL MEDICINE
RESIDENCY TRAINING PROGRAM**

Department of Medicine
Milton S. Hershey Medical Center
The Pennsylvania State University College of Medicine

We hope the information provided in this packet will prove helpful if you are considering applying for residency training in internal medicine. While this information is certainly not *everything* you need to know, it is an attempt to cover the main points to get you started, as well as provide sources where additional information can be found.

Unlike the medical school application process, in which the number of applicants far exceeds the number of available positions, the parties involved in the residency match are on much more even footing. There is no ideal applicant or perfect program. Internal medicine residency directors are looking for hard-working, professional and mature individuals who will function well as part of a team and take patient care seriously. You, in return for this service, should expect an educationally valuable experience that will prepare you for your future career and support your academic, research, and patient care efforts.

If you are seriously considering applying in internal medicine or have made the decision to do so, we encourage you to set up an appointment with Dr. Masters or Dr. Glod to discuss things further.

For additional information, please contact:

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I. Timeline

Most students begin to think seriously about their career choice during the second half of their third year. This process usually involves discussions with your advisors, student colleagues, those with whom you have worked during your clinical rotations, as well as reviewing pertinent websites for additional information.

The educational staff in the Department of Medicine are available to help with your decision making process and may be of assistance in better understanding what internal medicine is like and how to navigate the application process.

In general, students start the application process in July-August of their fourth year. The Electronic Residency Application Service (ERAS) opens on July 1st for registration that allows you to formally begin working on your application (such as submitting letters of recommendation). You may start applying to residency programs through ERAS starting September 1st.

You will be meeting with the College of Medicine faculty to prepare your Medical Student Performance Evaluation (MSPE). This is the traditional 'Dean's Letter' that reviews your overall medical school experience, and is submitted on November 1st.

Most internal medicine residency programs also require a 'Chair's' or 'Departmental' letter that focuses more on your experiences within the Department of Medicine (discussed below). These letters are written by the Vice Chair for Medical Education in the Department and are also typically submitted around November 1st.

Most students interview between mid-November and mid-January. Your rank order list is submitted by mid-February in preparation for Match Day in March.

II. Planning Your Fourth Year Schedule

Internal Medicine Acting Internship:

An acting internship (AI) in medicine is an important component of your clinical training that helps residency programs assess your ability to function in the role of an intern through direct observation of your abilities. Thus, it is desirable to perform an AI relatively early in your fourth year (before November) so that your evaluation will be available for your interviews and so that you might be able to obtain a letter of recommendation from this rotation, although doing so is not absolutely critical to being considered for interviews or to the ultimate success of your application.

Unfortunately, medicine AIs are a requirement for *all* fourth year students, and those applying in medicine do not receive priority in scheduling their acting internships.

General recommendations regarding scheduling of acting internships in medicine:

- If you did not complete the inpatient portion of your basic medicine clerkship at the Hershey Medical Center, it is preferable for you to complete your AI rotation in general internal medicine (MED 722) at the Medical Center, if possible. There are three slots available each month.
- In addition to AIs on the general medicine service, other AI options include:
 - Med 749 – the Medical Intensive Care Unit (one slot per month)
 - Med 733 – the Cardiology Inpatient Service (two slots per month)
 - Med 757– the Hematology/Oncology Service (one slot per month)
- The Lebanon Veterans Administration Medical Center (LVAMC) is a good alternate location for completing your medicine AI rotation (an available location for MED 722).
- It is reasonable to take more than one AI in your fourth year. Although not necessary for a successful application, doing so may give you a chance to try an off-campus location or gain experience at a more advanced level;
- Completion of an intensive care unit AI in addition to another AI is not a necessary part of a residency application, although many students entering internal medicine find doing so to be rewarding and helpful during their intern year;
- We suggest you do not schedule a medicine AI until you are "officially" a fourth year student (this means not at the end of your third year). Although this may be possible, there are several disadvantages in doing so except in certain specific situations.

Fourth Year Electives:

Performing a large number of electives in internal medicine is not necessary to match at even the most competitive programs. After all, you will be spending three years of training focused in medical training in residency, and programs are designed to teach you what you need to know.

Therefore, it is reasonable to perform rotations in other areas to increase your overall knowledge base that will help you to become a better resident physician. For example, many students find rotations such as radiology, neurology, ophthalmology and dermatology to be useful training experiences in preparation for internal medicine training.

That said, elective rotations in medicine allow you to fill in ‘gaps’ you might feel you have, allow you to better understand what the different disciplines of medicine do, and may be a source of letters of recommendation. Or, you may just be very interested in that subject area.

Electives in medicine include: Infectious Diseases (MED 715), Gastroenterology (MED 723), Hematology (MED 724), Oncology (MED 725), Pulmonary (MED 727), Nephrology (MED 728), Endocrinology (MED 734), Clinical Management of Obesity (MED 736), Cardiology Consults (MED 738), Geriatrics (MED 745), Allergy & Immunology (MED 747), and Rheumatology (MED 748).

Performing electives at other institutions are possible, but are not necessary to be a competitive applicant. On the positive side, such rotations allow you to experience how medicine is practiced in another place, and may be helpful in deciding whether you might wish to apply there for residency. However, it is *not* necessary nor are you expected to perform an ‘audition’ rotation at even the most competitive institutions to be a strong candidate.

Many questions arise regarding scheduling of both electives and acting internships to allow for interviews and of your Step 2 examination in preparation for your interviews:

- Please keep in mind of the College of Medicine policies concerning time away from courses for interviews. You are allowed one day away from an acting internship and five days away from a clinical elective for interviews. This needs to be considered in your scheduling – do not plan to seek additional time away from rotations for interviews as course directors will not be able to allow this per College policy.
- It is helpful to have your Step 2 scores available for your application submission, although in medicine this doesn’t tend to be absolutely critical to either being given an interview or being a successful candidate. We suggest that you take the Step 2 examination when you are best prepared to do so, and clearly in a time frame so that your scores will be available to programs by February of your fourth year.

III. The Match Process

Virtually all internal medicine residency programs use the Electronic Residency Application System (ERAS).

The main ERAS page can be accessed at: <http://www.aamc.org/audienceceras.htm>
It is extremely important to thoroughly understand the match process and strictly adhere to the deadlines posted on the site.

The National Resident Matching Program (NRMP) <http://www.nrmp.org/> is also very helpful – be sure to review information on the match algorithm as this may help you better understand the overall process.

You should carefully review the "Schedule of Dates" section of the NRMP site.

Information on couples matching can also be found on these sites.

Remember that posted deadlines on these sites refer to *receipt* of materials, not postmark dates. If you miss a deadline, you will not be allowed to participate in the match.

IV. Choosing a Program

Choosing a training program is equally important to choosing a medical school. Fellowships, practice opportunities, etc. may be influenced by where your training is achieved. There is much information on the factors that make a "good" program. A good reference text is:

Iserson's Getting Into A Residency: A Guide for Medical Students. Seventh Edition.

Kenneth V. Iserson, M.D. Galen Press, Ltd. Tucson AZ. www.galenpress.com
ISBN-10: 1-883620-09-0

We suggest the following two websites for program listings:

American College of Physicians (ACP):

<http://www.acponline.org>

(Follow the link "More Resources for Medical Students"). The ACP is the internal medicine practice society, and this site also contains an abundance of information about internal medicine, its subspecialties, and other resources that may be helpful. Their residency program database is quite flexible, allowing you to search the different types of programs and combinations of programs by state and other variables.

Fellowship and Residency Electronic Interactive Database (FREIDA):

<http://www.ama-assn.org/ama/pub/category/2997.html>

This is a resource from the American Medical Association (AMA) and is quite extensive, including information on subspecialty fellowship programs.

Some valuable characteristics to consider when choosing a program are:

- Reputation vs. Reality - Evaluate programs during your interviewing process.
- Contact former PSU-COM students who are currently house staff at programs where you interview. (The Department of Medicine Office and the Office of Student Affairs can assist with this information.)
- Contact current PSU-COM/HMC house staff that graduated from the programs you are considering. (Department of Medicine office can assist you with this information.)
- Assess programs for the following:
 - The teaching staff/resident ratio
 - The quality of the teaching staff
 - The quality of the house staff with whom you will be working
 - The patient population and resident relationship to them
 - Program structure, i.e. nature of all house staff activities in the program, the intensity of the program, and the level of house staff responsibilities. Such as:
 - Affiliated hospital(s)
 - Call schedule and duties (including cross cover)
 - Conferences (quality/quantity)
 - Team Composition (number of students, residents, and attendings per service)
 - Time allocation between wards, units, ER, clinics, electives
 - Ambulatory care training
 - Outcomes of the residents, i.e. number pursuing fellowships, placement into their choice of fellowship programs.
 - Types of tracks available (most programs offer three 'tracks'):

Preliminary - In general, for those who will be pursuing careers in a specialty that requires one year of medicine training outside of that field. (including, but not limited to, dermatology, radiology and anesthesiology). If you are interested in a program that does not list preliminary positions, you should contact them directly to determine their willingness in filling three-year positions with one-year trainees.

Categorical - This is the 'traditional' three-year training program in internal medicine. These programs provide comprehensive training in both inpatient and ambulatory internal medicine, prepare you for board certification in internal medicine, and form the foundation for those choosing to pursue general internal medicine or additional training in a medicine subspecialty.

Primary Care or Hospital Medicine – Some residency programs, as part of their categorical program, have ‘tracks’ that provide a focus in either/or primary care or hospital-based medicine for those intending to enter primary care or hospitalist practice. However, participation in one of these tracks results in basic board certification and does not commit you to or limit your practice or additional training opportunities after residency. Please note that some residencies list their different tracks as separate programs in ERAS, although they are part of the same medicine residency at that institution.

Information on other tracks available (such as combined programs such as medicine/pediatrics, medicine/psychiatry, etc.) is available at the ACP website: <http://www.acponline.org>

We suggest that you carefully consider these personal factors when considering programs:

- Geographic preference (spouse, family, significant others)
- Size and type of program (large vs. small, university vs. community)
- Anticipated plans following residency (private practice, fellowship, academic medicine)

A Word About Internet Sites:

Virtually all residency programs maintain websites that contain specific information about their program and the sponsoring institution. These are typically linked from both the ACP and FRIEDA databases, making the information gathering process quite easy.

There are many additional websites giving ‘first hand’ information and ratings of programs. While the information on these sites can be helpful in your decision making process, we would caution you to remember to weigh the information appropriately. Consider the reputation of the website and the accuracy of the information (i.e. check the date and number of evaluations). Be hesitant of any evaluation that seems exaggerated – these were probably written by someone, for whatever reason, trying to ‘help’ (too good), or ‘hurt’ (too bad) the program. We would recommend you use this as a tool, not as a replacement for first hand review of a program.

V. Applications

The application process has become much more streamlined since the inception of the NRMP ERAS Program.

In most in cases it is not necessary to apply to more than 15 programs. Remember that a majority of students match within their first three choices, and that matching below the fifth choice is rare. Thus, careful planning tends to eliminate the need to apply to a greater number of programs except in specific circumstances.

Students applying in medicine usually interview at around 10-12 programs and rarely more than 15. Medicine programs tend to interview a fairly high percentage of applicants, so your number of overall applications should take this into consideration as you may receive interview offers at a majority of places to which you apply.

Most students applying in internal medicine typically rank list between eight to ten programs. You should never apply to or rank a program where you are truly not interested in matching.

These are general considerations and may differ under particular circumstances. Please discuss your application with the Department educational staff if you do choose to apply in medicine.

VI. Letters of recommendation

A **Dean's Letter** is required for all programs.

In addition:

- Most programs require 2-3 letters of recommendation.
- A majority of programs require a **Chair's Letter** or **Department Letter** (they are the same thing) from the Department of Medicine. This letter is similar to your Dean's letter, although focusing only on your work within the Department of Medicine. These letters may also be helpful in conveying additional information about you to residency programs beyond what is available through ERAS. In general, these letters are completed in parallel to the Dean's letter, with a submission date of around November 1st. The Vice Chair for Medical Education in the Department of Medicine writes these letters in conjunction with the Chair of the Department of Medicine. It is important that you meet with the Vice Chair to review the Chair's Letter process and content.

To obtain a Department of Medicine Chair's Letter, you need to:

Schedule an appointment with the Vice Chair for Medical Education for the Department of Medicine in mid-August to mid-September.

You should bring your curriculum vitae, personal statement (a draft is acceptable), a list of the programs to which you are planning on applying, a copy of your College of Medicine transcript (unofficial is OK) and an ERAS cover letter with "Chair's Letter" as the designated letter writer

and your ERAS applicant ID# filled-in. You should indicate you have "waived your right to view" this letter to expedite its completion.

Your Chair's letter will be composed, dictated, transcribed and sent directly to the Office of Student Affairs for submission to ERAS following your meeting and when all necessary materials are available. This letter, while composed primarily by the Vice Chair of Education, will be signed by both the Chair and Vice Chair for Medical Education for the Department of Medicine.

After your meetings are completed, any questions concerning the progress of your letter should be directed to the Clerkship Coordinator, Deb Lutz, Department of Medicine Office (dlutz@psu.edu or phone 531-8390).

To obtain individual letters of recommendation:

- Your advisor and/or the specific requirements of each program should help you decide whom to ask for letters of recommendation.
- At least one of your letters should be from an internal medicine faculty member with whom you worked during your medicine clerkship and/or medicine acting internship.
- Do not solicit letters from residents/fellows.
- Ask the potential writer candidly if he/she feels that they can recommend you at least reasonably highly. If they cannot, ask another faculty member.
- Ask letter writers to complete their letter as soon as possible after working with them. Letters written in this time frame are much more detailed and 'personalized' than those completed months later after your evaluator has worked with a number of other students.
- Ask for a reasonable number of letters. If you work with someone you feel can comment effectively on your performance in a third year elective, core clerkship, acting internship, clinical research rotation, etc., request a letter from them at the end of the rotation. You can compile these letters and decide which letters to use when submitting your ERAS application. You do not have to use every letter, but can choose those you feel will best reflect your performance. If you wish you may have letter writers submit letters before the opening of ERAS, please contact Ms. Lutz in the Department of Medicine Office. The letters will be kept in your departmental file and you can decide which ones to send at the appropriate time.
- Do not submit more letters than requested by an individual program.

VII. Curriculum Vitae (CV)

Your advisor or a respected faculty member should be asked to review your CV and personal statement prior to submission to your chosen programs (we are happy to do this for you in the Department).

Suggested information to be included in your CV:

- Full Name
- Social Security Number
- Date of Birth
- Local address and telephone number(s)
- Permanent address and telephone number(s)
- Marital status (include spouse's name)
- Names and ages of children
- Place of birth
- Undergraduate degree (date of graduation and note honors if applicable)
- Medical school (expected date of graduation and note honors if applicable)
- Organizations
- Awards/Honors
- Research experience (with name of supervisor and title of research project(s))
- Publications
- Military Service (if applicable)
- Employment (if applicable)
- Extracurricular Activities (particularly if your involvement has been extensive or if your accomplishments in a specific area substantial.)

Suggestions for your personal statement:

This document should reflect what is unique about you, what sets you apart from other applicants, and why a program should choose you over other applicants to their program. Explain what has inspired you to choose internal medicine as a career. Many individuals want to 'take care of and help mankind'. Although this is usually true, your personal statement should reflect what has inspired *you* to enter into internal medicine to accomplish this goal. The statement should inspire the reader to know more about your decision to enter into internal medicine, more about you as an individual, and to know your 'personal' feelings about why and what you want to do with your career. They also provide interviewers with material to discuss in the context of your interview.

In terms of the 'technical' aspect of your personal statement, it is important to limit the length. Every attempt should be made to keep this to a one-page document. Being succinct yet to the point is important. Readers have hundreds of statements to read every year; lengthy and wordy documents can be detrimental to your application.

Carefully proofread your statement. Poor spelling and/or grammar will have a significantly negative impact on your application.

VIII. The Interview Process

The following are suggested 'pearls' for the interview process:

- Course planning – As above, set up your fourth year schedule to accommodate your interview schedule. Failure to respect and adhere to the limitations on absences could result in an unsatisfactory rotation evaluation/grade.
- Travel planning - Check the weather in the areas you are planning to interview. You may want to avoid visiting areas during predicted inclement weather (i.e. northern states during January/February).
- Mode of travel - If you plan to drive, make certain your vehicle is in good working order. Plan your route carefully so you are not driving through unknown areas at odd hours.
- Hotel accommodations - Select respected hotel/motel chains for lodging.
- Attend pre or post interview dinners if you can. This is a chance for you to meet with the current residents and decide if the program would be a good fit for you. Remember that this time is still a part of your interview, however, and it is inadvisable to drink alcohol or order the most expensive item on the menu.
- Be on time - You should have to wait for them, they should not wait for you.
- Dress appropriately - Conservative is always appropriate. Extremes in dress will only attract undesired attention.
- Demeanor is important - Be attentive, honest and, as much as possible, relaxed. It will be a long process, you will get exhausted, but try your best to always be cordial and appear interested.
- Questions - You should be prepared to answer, as well as ask questions. A list of questions commonly asked by faculty interviewers is attached. When asking questions during your interviews, it is wise to ask the same question of more than one person. This can give you a better perspective of the program.
- Review your personal statement and CV prior to the interview. Interviewers may ask you to expound on or otherwise explain a portion of your application and you should be prepared to do this.

- Remember the purpose of the interview. If you have been asked to visit the program, then you are an acceptable candidate on paper. The interviewers will be paying attention to your interpersonal skills, professionalism, and how well they think you would fit into the program.
- Record the names of those you encounter as part of the interview process (both faculty and staff), and relay appropriate thanks to them following your interview for the time and effort they put in to make your visit possible.
- Be respectful and courteous to the administrative staff. Negative comments/actions can quickly sabotage an otherwise excellent application.
- If you either must or decide to cancel an interview, it is important to let them know. Programs put considerable effort into the interview process and respecting these efforts, even if you decide to not interview at a particular program, is a matter of courtesy and professionalism.

IX. Match list strategies

Applying for residency is entirely different than medical school application. The criteria used do not compare equally with those encountered in choosing a medical school. Completing your match list has the potential to become extremely confusing and frustrating.

Before submitting your match list there are several qualified individuals within the Department of Medicine willing to review and discuss your list with you and make strategic suggestions. If you would like to make an appointment to review your list, contact Ms. Lutz or Ms. Stevens in the Department of Medicine Office to be connected with one of these individuals.

We hope this information proves useful to you in your application process. As always, don't hesitate to contact us if you have specific questions, or if you encounter problems with which we can assist you during your application and interviewing process. In addition, please contact us and let us know of any information that you feel may be helpful to your fellow students, as well as the classes to follow you. We hope you will keep in touch as your residency training progresses. It is always helpful to know where our graduates are and to be able to refer future students to them for 'insider' advice on programs.

Best of luck to you in your career as well as in your personal lives!

Questions Commonly Asked at Interviews:

"Why do you want to go into internal medicine?"

"What are your ultimate career plans? Are you planning on a subspecialty? What field?"

(NOTE: It is *perfectly fine* to say 'I don't know' to this question. An interest in a subspecialty is not mandatory. Internal medicine is a broad area. This question is to get an idea of whether or not you are heading in a certain direction. Having more than one subspecialty in mind is fine, too.)

"Where do you see yourself in five years? ten years?"

"How do you feel about the practice of medicine today? What about its future?"

(i.e. malpractice, insurance, reimbursements, etc.)"

"What is your biggest fear in the realm of medicine?"

Questions concerning medicine in general.

"Why do you want to come to this program?"

"What makes this program appealing/special to you?"

"What do you hope to gain from our residency program?"

"Why should we want you to come to our program?"

"What will you/can you bring to our program?"

"Briefly describe your student research project."

"Do you plan on research as being a part of your career?"

"Tell me something about you that is *not* on your CV."

"Give me some one-word descriptors of yourself."

"What are some of your strengths/weaknesses?"

"Tell me about your hometown/college/medical school."

"Why did you choose the college/medical school that you attended?"

"Describe the best/worst incident that you encountered in your medical school career."

"Who is your role model? Why?"

"What are some of your hobbies/interest/extra-curricular activities?"

"What is the most recent book you've read? Tell me a little bit about this book."

Be prepared - they may pick something on your CV (i.e. extra-curricular activities, work experiences, research project(s), etc.), personal statement, ERAS application, etc. Remember what you wrote; review these documents prior to interviewing so you are not caught off guard by these questions.