Post Match Reporting

2015/2016 Match Cohort* Data

Specialty: Emergency Medicine
N= 33 (9.9% match cohort)

<table>
<thead>
<tr>
<th>Item</th>
<th>N</th>
<th>% of specialty cohort</th>
<th>Mean</th>
<th>Standard Deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Graduation year</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2015</td>
<td>17</td>
<td>51.5%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2016</td>
<td>16</td>
<td>48.5%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Three digit Step 1 score</td>
<td></td>
<td></td>
<td>230.9</td>
<td>17.7</td>
</tr>
<tr>
<td>MSPE Adjective:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Outstanding</td>
<td>6</td>
<td>18.2%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Superior</td>
<td>5</td>
<td>15.2%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Excellent</td>
<td>22</td>
<td>66.7%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Very Good</td>
<td>0</td>
<td>0.0%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Good</td>
<td>0</td>
<td>0.0%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>AOA elected</td>
<td>4</td>
<td>12.1%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Applied to preliminary or transitional programs</td>
<td></td>
<td>0.0%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other specialties applied to:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Internal Medicine</td>
<td>1</td>
<td>3.0%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pediatrics</td>
<td>1</td>
<td>3.0%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of categorical programs applied to</td>
<td></td>
<td></td>
<td>36.2</td>
<td>8.6</td>
</tr>
<tr>
<td>Honors Received:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anesthesia</td>
<td>10</td>
<td>30.3%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FCM</td>
<td>7</td>
<td>21.2%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Internal Medicine</td>
<td>7</td>
<td>21.2%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Neurology</td>
<td>13</td>
<td>39.4%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Obstetrics/Gynecology</td>
<td>9</td>
<td>27.3%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pediatrics</td>
<td>8</td>
<td>24.2%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Psychiatry</td>
<td>6</td>
<td>18.2%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Surgery</td>
<td>9</td>
<td>27.3%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Match Cohort includes applicants who matched into this specialty via the regular match process.
# Post Match Reporting

## 2015/2016 Survey Respondent Cohort Data

**Specialty: Emergency Medicine**  
N= 31 (12.1% survey respondents)

<table>
<thead>
<tr>
<th>Item</th>
<th>N</th>
<th>% of specialty cohort</th>
<th>Mean</th>
<th>Standard Deviation</th>
<th>Min</th>
<th>Max</th>
</tr>
</thead>
<tbody>
<tr>
<td>For your specialty of choice, how many programs did you rank?</td>
<td></td>
<td></td>
<td>13.1</td>
<td>3.6</td>
<td>5</td>
<td>19</td>
</tr>
<tr>
<td>How many programs invited you to interview?</td>
<td></td>
<td></td>
<td>16.6</td>
<td>4.4</td>
<td>6</td>
<td>20</td>
</tr>
<tr>
<td>How many interviews did you accept?</td>
<td></td>
<td></td>
<td>13.5</td>
<td>3.4</td>
<td>5</td>
<td>19</td>
</tr>
<tr>
<td>Where did the program you matched fall on your rank list?</td>
<td></td>
<td></td>
<td>2.4</td>
<td>1.8</td>
<td>1</td>
<td>8</td>
</tr>
<tr>
<td>Did you review your application with a career advisor before applying?</td>
<td>19</td>
<td></td>
<td>61.3%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Before ranking programs, did you review your rank list with a career advisor?</td>
<td>8</td>
<td></td>
<td>25.8%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Spent on Interviews</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$0-$500</td>
<td>0</td>
<td>0.0%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$501-$1000</td>
<td>1</td>
<td>3.2%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$1001-$2000</td>
<td>8</td>
<td>25.8%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$2001-$3000</td>
<td>9</td>
<td>29.0%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$3001-$4000</td>
<td>8</td>
<td>25.8%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>&gt;$4000</td>
<td>5</td>
<td>16.1%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Did you complete a Pathway project?</td>
<td>8</td>
<td>25.8%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Did you complete a research project in the field you matched?</td>
<td>18</td>
<td>58.1%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Did you have a publication during medical school?</td>
<td>19</td>
<td>61.3%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
The field project was in:

Prehospital Emergency Medicine

Racial/ethnic disparities

Emergency Medicine

Emergency Medicine

EM

public/population health

emergency

Ultrasound Ed

Health services research in Emergency Medicine

Toxicology

Medical education

Health policy related to charity care delivery at nonprofit and for profit hospitals

ED Operations/Triage/Quality Improvement

Toxicology

Quality Improvement

ultrasound, policy

Sternal Fractures

Imaging in trauma patients

Describe any publications:

Assessing medical student preparedness for responding to in-flight commercial airline emergencies

Assessing the validity of various self-report measures in determining ART adherence in a community-based HIV program in rural Sierra Leone

Textbook chapter co-author, co-first author on a research publication.

Evaluation of a NYC public health initiative to reduce food deserts.

First author of a manuscript published in a public health journal, and third author of a manuscript published in an HIV-related journal.
BMJ blog / Diplomatic Courier / 6 posters and speeches

3 studies, 2 essays/editorials, all in peer reviewed journals

- Case report in toxicology / -2 papers regarding in a chemical biology lab I worked in full time before medical school and some during medical school but were published during school.

Clinical research paper in OBGYN

Non EM Research

pediatrics, pregnancy-related

Orthopaedic Surgery / Gynecologic Oncology

Imaging and medical education / Mental illness, stigma and tobacco dependence / Clinical trials with vulnerable populations

Retrospective cohort study of patients with sternal fracture

Summer research btw MS1 and MS2

Clinical research unrelated to emergency medicine

Radiology study about CIN. / Imaging study in trauma patients in the ED.

Who was your most effective career advisor in field matched? (number of multiple mentions)

Michelle Lin
Kenny Banh (2)
David Duong (12)
Robert Rodriguez (3)
Eric Isaacs
Gene Hern
Chris Fee (2)
Nate Teismann
Ellen Weber
Eric Silman (6)
Esther Chen
Luz Silverio

What were your most useful career resources?

Post match data, ALiEM blog videos on the match, away rotations are sooo helpful

Doximity rankings site helped me in terms of listing all available programs (rankings themselves were less useful)

Mentors, the Emergency Medicine Residents Association, the Western Michigan School of Medicine website on Advice for Emergency Medicine Applicants
EMRA, ALIEM

EM faculty and residents at UCSF and Highland

Aliem video blog

Reaching out to other advisors for other points of view and advice - Dr. Papadakis, Michelle Lin, other PDs

Residents in EM are actually the most helpful - they are closest to the process and have a more recent experience with the network of people you will meet while applying and interviewing for programs.

Classmates who matched previously in emergency medicine

AIEM's youtube interviews with program directors in EM. Speaking with peers.

Students from the class ahead of me were my most useful resources. / Other classmates

(1) Dr. Michelle Lin's blog (http://www.aliem.com/category/non-clinical/em-match-advice/) had videos on the EM residency application process which were VERY informative and helpful on a wide range of topics from the very start of the process to the end. / (2) Doximity has a great tool to familiarize yourself with the residency programs around the country. https://www.doximity.com/residency_navigator/directories/42 / (3) Residency program websites were good for a quick overview of their self-perceived strengths.

Career advisor, talking to students from previous year and panel sessions

AIEM has a video series that describes the entire application process from perspective of a few program Directors. This was incredibly helpful / -Google Spreadsheet from prior classes detailing popular programs/programs likely to give UCSF interviews / -Having several advisors was helpful

Programs' websites.

Academic Life in Emergency Medicine

SAEM website, residents

Saem


If you had to do anything differently in the residency matching process, what would it be?

Interview at less programs.

Asked about more good community programs. We are skewed to think about academic centers.
Speak to more advisors to identify at which programs to do away rotations.

Dont fly to as many interviews at programs I knew were lower on my list

Apply to less programs / Submit my application the day it opens

I would have worked on my personal statement sooner--that is the toughest part, really. / I would have shadowed during visits to programs where I only had that one shot/visit to get to know the culture of the department and the program.

I would have only interviewed at places that I would actually consider living.

Email schools to ask for interviews and email schools that they are "high on my rank list."

I would have applied to more institutions. I also would have been more active in research projects during medical school, and I would have taken more time to study to earn a higher score on the Step 1. I also would have established stronger relationships with physicians in my chosen field, so that I could have had more people advocating on my behalf.

Set a cap on the number of programs one can apply to (based on specialty, whether one is couples matching, and perhaps other parameters). Get rid of the pseudo-waitlist (when you know others have interviewed at a program but you have not heard back that program) or otherwise give more notice when you get off the waitlist (e.g if you get off the waitlist of a highly-desired program you end up paying 2-3x more for travel in order to get there in a short time frame).

I wish I could have developed a closer relationship with faculty who could give me useful advice longitudinally.

I applied to 35 programs. Looking back I would have applied to less on the East coast, a geographical region that I did not want to live in. A better number to apply to would have been 25-30.

I would have tailored the programs I applied to a little better based on the types of programs I knew I would like after doing my away rotation

I would have done away rotation in geographical area I was interested in.

Do more away rotations. Seek mentors early. Decide on specialty earlier

Do your sub-I's early to see if you like the specialty. Applying to EM, you'll need 2 EM sub-I's and their respective evals.

Applied to and interviewed at programs that I really were most interested in attending. I found that I wasted a lot of time and money traveling around to cities that I did not have much interest in moving to. At the same time, early on in the interview process it is difficult to balance between keeping costs down and interviewing at enough programs to make sure you match. In hindsight, I should have scheduled some programs at the very end of interview season to allow me to cancel once I am more comfortable with my rank-able programs. You run the risk, however, if you need to go interview making individual long flights out of California.

Apply to less programs and do less interviews

Reach out to advisors early in the process (e.g., first 4 months of clerkship year), research residency programs (e.g., websites) midway through clerkship year, only apply to programs in cities I would seriously consider living,
talk to partner/significant other throughout entire process to make sure they are included in the decision-making esp. if they are not in medicine.

Apply to fewer programs and go on fewer interviews. I couples matched (successfully) with my significant other. We were told to apply to ~40 programs and attend at least half or more of those interviews. Eventually we started getting a good number of interviews, which we should have taken as a sign of our relative competitiveness and stopped accepting all the invites that came in. By interview 12 (I went on 17 ultimately) I was exhausted and found it tough to maintain my enthusiasm.

don't interview in cities not genuinely interested in living in

Go on fewer interviews. I went on 16 after canceling 3 because I had a difficult time deciding which other ones to cancel beyond those three. If you can try to talk to people who've gone on those interviews and get opinions from advisors to try to narrow down which invites you accept, I think that would be helpful. I was so exhausted by the end of interview season and I think it showed.

Go on less interviews. / Make sure you double check everything in your ERAS. / Subis are the most important part of your application, work hard to get a great SLOE. / Research does not matter too much. / Find a faculty mentor who ca advocate for you, had some but did not utilize them to advocate for one interview I really wanted and wished I did in hindsight. / Step scores are not important. /

Is there any other information helpful to UCSF students who will apply to your specialty choice in the future?

Most students from other schools do 3 EM rotations. While I definitely don't think this is necessary, and would not have done an additional EM sub-i, it's important to know that it's not a crazy option. / / If there is a program you really want to go to, do an away rotation there.

Do not apply to more than 30 programs unless you have special circumstances / If you do not receive an interview at one of your top choices, get out there and advocate for yourself. I received four additional interview invites just by expressing my interest to programs via email.

Find someone in addition to Dr. Duong - he is very conservative and will make you nervous, which is great overall, but makes you a bundle of nerves for several months. Also I was under the impression that he would call 1-2 programs to help get interviews, but that doesn't seem to be the case, so I didn't use him much as an advisor after making my list of programs to apply to. It would be helpful to clarify whether that is the case or not at the beginning of application season, and to go over how to ask for that.

Talk to as many of the advisors/local faculty members involved in the residency programs here as you can -- one person's opinion is not enough, and may not be coming from a perspective that is aligned with yours. Take advantage of the confidential advisors, and identify one main advisor, which doesn't have to be the official one, who you feel best understands your perspective and interests.

Advocate for yourself! If you want an interview at a particular place and have not heard back or have even been rejected, write an email to the program director explaining your interest and see if they can fit you in. This worked for me on two occasions.

Find mentors who get to know you so they can actually be useful to you. Don't be afraid to reach out and try to get to know faculty, whether it is through research, shadowing, EMIG. Try to maintain this relationship so they know you.
Everyone's application is different. We have different strengths/weaknesses. I found that my SLORs from my sub-Is really boosted my application, despite my average step 1 score and average third year grades. Don't be discouraged by 'average' UCSF scores when applying to residency! It is more important to get honors on your sub-Is and get a stellar SLOR in my opinion.

I think it is very useful to do an away rotation out of the Bay Area, just to see a different practice style, meet other people in the field, learn more about yourself and what type of program you like, and demonstrate to other programs that you are willing to leave the Bay Area.

-Get as many advisors as you can. Like everything, there is a spectrum of how conservative a mentor can be. It's helpful to hear several opinions. / -Talk to recent graduates about their experiences, do's/don'ts of applying /

Definitely try to honor at least 1 of the EM subI's. This is probably the most important part of the application.

Try to find a mentor and build a relationship with him or her in your specialty before fourth year. Having a personal relationship with them will make it easier for them to give you advice that is actually specific to you instead of generalizable to every other applicant. It can be difficult to do this when mentors are PDs or APDs in programs that you are interested in matching in though.

Make sure you reach out to specialty advisors, confidential or not, early in the process. And if you find that they are not meeting your expectations or are busy with other responsibilities, don't feel bad about seeking new advisors early. This is an important time in your career and you need to get someone who is responsive and will make calls/emails for you.

Apply early

Work really hard to do well on your sub-I's in EM since these matter a ton--ask your EM advisor on how to prepare even before going into sub-I's so that you are setup for success. Review your list of programs with your EM advisor thoroughly and ask at the outset how strong of a candidate they believe you are and if the programs to which you've applied are appropriate. Try not to compare yourself to other classmates who are also applying into EM; each person has a different story and different strengths to their application, find yours and emphasize these points in your app.

I had a below average Step 1 score but showed some improvement on Step 2 CK and ultimately matched to my first choice program. The general sense I got from the programs I interviewed with was that your sub-internships grades are the most critical aspect of your application, in addition to just being a kind person.

Listen to advice from advisors on the number of programs to apply to, and make sure you have a good spread of competitive and not-so-competitive programs. It's always better to overapply and turn down interviews than to underapply since you can't really add on programs later and get additional interviews. // Feel free to reach out by email to programs that you haven't gotten an interview from by mid-October or so. I got a few interviews this way. I personally didn't ask any advisors to advocate for me by reaching out themselves. // It's totally okay to not go to a pre-interview dinner if you're too exhausted. Don't push yourself too much. // I'd recommend sharing openly with classmates and other applicants about your interviews, coordinating travel, debriefing about programs etc, if you feel comfortable with it. // Enjoy the interview process! It's fun to meet all of your future colleagues and the interviews are all laidback so try not to be too stressed.

The most important aspect of your application is your EM subI grade and SLOE. Work hard, be a team player, and an enjoyable person to work with and you'll do great on it. Ask people who matched the year before how you can succeed. Also try and find UCSF people to stay with during interviews to save on money.